CLASS B WATER AND/OR WASTEWATER UTILITIES

FINANCIAL, RATE AND ENGINEERING MINIMUM FILING REQUIREMENTS

OF

Pluris Wedgefield, Inc.

Exact Legal Name of Utility Docket No.: 120152-WS

VOLUME III



APA	
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PROCUMENT NUMBER-DATE

04838 JUL 192

FPSC-COMMISSION CLERK

FOR THE

Test Year Ended: December 31, 2011

Pluris Wedgefield, Inc.

Docket No.: 120152-WS

Orange County

25-30.440 (2) CHEMICALS USED

Test Year Ended December 31, 2011

	Wa	ter Treatment Pla	ınt				
chemical Chemical	Dosage Rate	Feed Rate	Ur	nit Price	Total Quantity	To	tal Cost
Chlorine - Sodium Hypochlorite	1.0 to 2.5ppm	25 to 100 GPD	\$	0.88	29,922	\$	26,331
Resin	As Needed	As Needed	\$	16.35	1,037	\$	16,960
Salt	As Needed	As Needed	\$	105.00	100	\$	10,500
Polyphosphate	1.0 to 2.5ppm	1.5 to 3.0 GPD	\$	264.38	8	\$	2,115

		astewater Treatm	ent	Plant			
Chemical	Dosage Rate	Feed Rate	Ur	nit Price	Total Quantity	То	tal Cost
Chlorine - Sodium Hypochlorite	1.5 to 3.5ppm	25 to 75 GPD	\$	0.86	21,539	\$	18,588
Polymer	As Needed	As Needed	\$	829.10	2	\$	1,658

Pluris Wedgefield, Inc.

Docket No.: 120152-WS

Orange County

25-30.440 (3) CHEMICAL ANALYSIS

Test Year Ended December 31, 2011



June 16, 2011

Shannon L. Joyce
Department of Resource Management
St. Johns River Water Management District
975 Keller Road
Altamonte Springs Fl. 32714

Subject: Consumptive Use Permit No. 3302 (Wedgefield)

Dear, Ms Joyce

Please find the enclosed Chloride sampling results for the May 2011 calendar year in accordance with condition number 36 of the above referenced permit.

If you have any questions, or require additional information, please do not hesitate to call me at 407-259-6991

Sincerely.

Pluris-Wedgefield In

Roger Holsapple

Chief Operator

3100 Bancroft Blvd.

Orlando, Fl. 32833

Office: (407) 586-2112 Cell: (407) 259-6991

rholsapple@utilitypartnerslic.com

RECEIVED

JUN 2 1 2011

ALTAMONTE

PUBLIC WATER SYSTEM INFORMATION (to be	completed by sampler - please type or print legit	oly)
System Name: Wedgefield Utilities		PW\$ I.D. #
System Type (check one): Community	Nontransient Noncommunity	Transient Noncommunity
Address:		
City:	ZIP Code:	entranoutre en
Phone #Fax #:	E-Mail Add	lress:
SAMPLE INFORMATION (to be completed by samp	eler)	
Sample Number: 11-05-116 Sample Date: 05/05	111 Sample Time: 0852 AM PM (Grote One)	
Sample Location (be specific) : Well 2	Location Code:	
Disinfectant Residual (Required when reporting results for	or trihatomethanes and haloacetic acids);mg/L	Field pH:
Sample Type (Check Only One)	Reason(s) for Sar	noie (Check all that apply)
Distribution	Routine Compliance with 62-550	Replacement (of Invalidated Sample)
Entry Point (to Distribution)	Confirmation of MCL Exceedance*	Special (not for compliance with 52-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**	Clearance (permitting)
Raw (at well or intake)	Other:	
Max Residence Time	Sampling Procedure Used or Other Comm	ents:
☐Ave Residence Time		
Near First Customer		
,	*See 62-550,500(6) for requirements and restrictions. And 62-550,512(3) for rifeste or nitrite exceedances.	**See 82-550.550(4) for requirements and aftech a results page for each site.
	SAMPLER CERTIFICATION	N
, Phil Lal	. Field Tahni	CT CA . do HEREBY CERTIFY
(Print Name)		t Title)
that the above public water system and sample collect	ion information is complete and correct.	
Signature:	Date	531-11
Certified Operator #:Phone #		_Sampler's Fax #:
Sampler's E-mail:		MI MATE IN PROPERTY OF THE PRO
Reporting Formul 62-550-730 Effective January 1995, Florided February 2010	Page 1 of 9	

LABORATORY CERTIFICATION INFORMATIO	N (to be completed by lab - p	lease type or print legibl	y)	
Lab Name: Tri-Tech Laboratories, Inc.		Florida DOH Cer	tification #: E83294	
Certification Expiration Date: June 30, 2012				
,			ENT DOH ANALYTE SHEE	T*
Address: 7240 Old Cheney Highway Orlando, Fl		-275-8463		
***************************************	o If yes, please provide Do	OH certification number	er(s):	
Trois any analysis superinters.	,, , ,			H SUBCONTRACTED LAB
	Data Camala	- \ D = = i \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
ANALYSIS INFORMATION (to be completed by lat) Date Sample(s) Received: <u>05/05/11</u>	<u>[</u>	
PWS ID (From Page 1):	Sample Numb	DEF (From Page 1):1		
Lab Assigned Report # or Job ID: 11-05-116				
Group(s) Analyzed & Results attached for compli	ance with Chapter 62-550,	F.A.C. (Check all that ap	ply):	
Inorganics All Except Asbestos All 30 Partial All Except Dioxin Nitrate Partial Nitrite Dioxin Only Asbestos	All 21 [Partial [sinfection Byproducts Trihalomethanes Haloacetic Acids Chlorite Bromate	Radionuclides Single Sample Othly Composite**	Secondaries All 14 Partial
1/ASDESIUS	LAB CERTI	FICATION		
lamara Lal	. 60	Director		do HEREBY CERTIFY
(Print Name)		(Print Titl		
that all attached analytical data are correct and unless	noted meet all requirements	of the National Environm	iental Laboratory Accredita	tion Conference (NELAC).
Signature:		Date:	S31-11	
* Failure to provide a vaild and current Florida DOH la report, possible enforcement against the public wate ** Please provide radiological sample dates & location	er system for failure to sample s for each quarter. ICATION IS REQUIRED WITH RTED AS THE MDL WITH A "V	current Analyte Sheet for and may result in notifi IN 24 HRS FOR NITRATE J" QUALIFIER. (Non-detec	the attached analysis resucation of the DOH Bureau (of Laboratory Services. DANCES
Sample Collection & Analysis Satisfactory: Yes			do on Banact Bonumbed	
Sample Collection & Analysis Satisfactory:[11es				
Person Notified:	Date Notified:	DEP/DOH	Reviewing Official:	
Reporting Format 62-550,730	Page	2 of 9		

PUBLIC WATER SYSTEM	INFORMATION (to be com	pleted by sampler - please	type or print legibly)
System Name: Wedgefie	d Utilities			_ PWS I.D. #
System Type (check one):	☐Community	Nontransient Nonco	ommunity	Transient Noncommunity
Address:				
City:			ZIP Code:	
Phone #	Fax #:		E-Mail Addre	\$\$:
SAMPLE INFORMATION (o be completed by sampler)			
Sample Number: <u>11-05-117</u>	Sample Date: 05/05/11	Sample Time: 0832 AM	PM (Circle One)	
Sample Location (he specific)	: Well 3	Location Code	a:	
Disinfectant Residual (Requi	red when reporting results for triha	ntomethanes and haloacetic acids	s):mg/L	Field pH:
Sample Type (Check Only One	<u>e)</u>		eason(s) for Samp	le (Check all that apply)
Distribution		Routine Compliance wit	h 62-550	☐Replacement (of Invalidated Sample)
Entry Point (to Distribution)		Confirmation of MCL Ex	ceedance*	Special (not for compliance with 62-550)
Plant Tap (not for compliand	pe with 62-550)	Composite of Multiple S	ides**	☐Clearance (permitting)
☑Raw (at well or intake)		Other:		
Max Residence Time		Sampling Procedure Used	or Other Commen	its:
Ave Residence Time				
Near First Customer		·		
		e 62-550.500(6) for requirement d 62-550.512(3) for retrate or nitri		"See 52-550.550(4) for requirements and sitush a results page for each site.
		SAMPLER CER	RTIFICATION	
1. Phil Lat		Fied	Tochnici	, do HEREBY CERTIFY
•	(Print Name)		(Print T	ille)
that the above public water sy	stem and sample collection in	nformation is complete and co	orrect.	
Signature:			Date:	5-31- 11
Certified Operator #:	Phone #:		s	ampler's Fax #:
Sampler's E-mail				
Reporting Format 62-550,730 Effective January 1990 Perised F	Tetaritars 2010	Page 1 of	9	

LABORATOR OUR INTO		to be completed by fac	produce type of print legiony	,	
Lab Name: Tri-Tech Labora	tories, Inc.		Florida DOH Cert	ification #: <u>E83294</u>	
Certification Expiration Date:	June 30, 2012				
			ATTACH CURRE	NT DOH ANALYTE SHEE	:T*
Address: 7240 Old Cheney I	Highway Orlando, FL 3	32807 Phone #:	<u>407-275-8463</u>		
Were any analyses subcontri	acted? Yes No	f yes, please provide	e DOH certification numbe	r(s):	•
,			ATTACH DOH AN	ALYTE SHEET FOR EAC	H SUBCONTRACTED LAB
ANALYSIS INFORMATION (to be consisted by labi	Data Sam	ple(s) Received: 05/05/11		
MINE SIGHT ORMATION (to be completed by lab)	Date Sain	pia(s) Neceivau. <u>corcori i</u>		
PWS ID (From Page 1):		Sample N	umber (From Page 1): <u>1</u>		
Lab Assigned Report # or Jo	b ID: <u>11-05-117</u>				
Group(s) Analyzed & Results	attached for complian	ce with Chapter 62-5	550, F.A.C. (Check all that appl	y):	
inorganics All Except Asbestos Partial Nitrate Institute Asbestos	Synthetic Organics All 30 All Except Dioxin Partial Dioxin Only	Volatile Organics ☐All 21 ☐Partial	<u>Disinfection</u> <u>Byproducts</u> ☐Trihalomethanes ☐Haloacetic Acids ☐Chlorite ☐Bromate	Radionuclides Single Sample Other Composite*	Secondaries All 14 Partial
		LAB CE	RTIFICATION		
1, lanora	Lal		QC Directo	···	do HEREBY CERTIFY
•	rint Name)		(Print Title	,	
that all atteched enalytical data	are correct and unless no	ted meet all requireme	nts of the National Environme	intal Laboratory Accredita	tion Conference (NELAC).
Signature:			Date:	S 31-11	
* Failure to provide a valid and report, possible enforcement a ** Please provide radiological sa CON	against the public water s imple dates & locations fo IFIRMATION & NOTIFICA IS ARE TO BE REPORTE	ystem for failure to san ir each quarter. TION IS REQUIRED W ID AS THE MDL WITH.	nple, and may result in notifica ITHIN 24 HRS FOR NITRATE A "U" QUALIFIER. (Non-defacts	ation of the DOH Bureau of OR NITRITE MCL EXCEE	of Laboratory Services. DANCES
Sample Collection & Analysis	Catinforton (TV - T	Nr.	Denincement Commit	or Donald Danies to d	
Sample Collection & Analysis	s Saustactory res	NO	керіаселіені Запрі	e or Report Requested	(circle or highlight group(s) above)
Person Notified: Repeting Fermat 62-550,720		Date Notified:	DEP/DOH I	Reviewing Official:	
- Repoteng Format 52-550.720 - Effective Japuary 1995 - ≅evend Fet	очнагу 2010	P	age 2 of 9		

Utility Partners, LLC 6608 Walton Way Tampa, FL 33610

PROJECT NAME: Wedgefield

TTA Contact: T. Lal

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT	DATE ANALYZED	DOH LAB
05/05/11	11-05-117-1	05/05/11 0832	Bicarbonate	4500	240.0 mg/L	05/10/11	E83182
			Carbonate	4500-CO2	1.4 mg/L	05/10/11	E83182
			Alkalinity	310.2	240.0 mg/L	05/10/11	E83182
			Chloride	300.0	64.0 mg/L	05/05/11	E83182
			Sulfate	300.0	24.0 mg/L	05/05/11	E83182
			Sulfide	4500-S-E	4.9 mg/L	05/08/11	E83182
			Total Iron	200.7	39.9 ug/L	05/10/11	E83182
			Total Hardness	130.2	260.0 mg/L	05/10/11	E83182
			Magnesium	200.7	11300.0 ug/L	05/10/11	E83182
		9	Sodium	200.7	41200.0 ug/L	05/10/11	E83182
		and the state of t	Potassium	200.7	1280.0 ug/L	05/10/11	E83182
			TDS	160.1	420.0 mg/L	05/08/11	E83182
		***	Calcium	200.7	83600.0 ug/L	05/10/11	E83182
		Mary Control	Well 3		_		

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

Reviewed By

: <u>Tamara Lal</u>

Title

: Quality Control Director

Date Reviewed: May 31, 2011

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

Utility Partners, LLC 6608 Walton Way Tampa, FL 33610

PROJECT NAME: Wedgefield

TTA Contact: T. Lal

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT	DATE ANALYZED	DOH LAB
05/05/11	11-05-116-1	05/05/11 0852	Bicarbonate Carbonate Alkalinity Chloride Sulfate Sulfate Sulfide Total Iron Total Hardness Magnesium Sodium Potassium TDS Calcium	4500 4500-CO2 310.2 300.0 300.0 4500-S-E 200.7 130.2 200.7 200.7 200.7 160.1 200.7	240.0 mg/L 1.9 mg/L 240.0 mg/L 68.0 mg/L 23.0 mg/L 4.4 mg/L 43.2 ug/L 270.0 mg/L 12100.0 ug/L 43900.0 ug/L 410.0 mg/L 81900.0 ug/L	05/10/11 05/10/11 05/10/11 05/05/11 05/05/11 05/08/11 05/10/11 05/10/11 05/10/11 05/10/11 05/08/11 05/10/11	E83182 E83182 E83182 E83182 E83182 E83182 E83182 E83182 E83182 E83182 E83182 E83182

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

Reviewed By

: Tamara Lal

Title

: Quality Control Director

Date Reviewed : May 31, 2011

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

INORGANIC CONTAMINANT 62-550.310(1)

Report Number / Job ID: <u>11-10-102</u>

PWS ID (From Page 1);

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification #
1040	Nitrate (se N)	10	mg/L	0.10	U	353.2	0.10	10/06/11	1015	E83294
1041	Nitrite (as N)	1	mg/L	0.10	U	353.2	0.10	10/06/11	0900	E83294
1005	Arsenic	0.010	mg/L	NA						
1010	Barium	2	mg/L	NA						
1015	Cadmium	0.005	mg/L	NA						
1020	Chromium	0.1	mg/L	NA						
1024	Cyanide	0.2	mg/L	NA						
1025	Fluoride	4.0	mg/L	NA						
1030	Lead	0.015	mg/L	NA						
1035	Mercury	0.002	mg/L	NA						
1036	Nickel	0.1	mg/L	NA						
1045	Selenium	0.05	mg/L	NA						
1052	Sodium	160	mg/L	NA						
1074	Antimony	0.006	mg/L	NA						
1075	Beryllium	0.004	mg/L	NA						
1085	Thallium	0.002	mg/L	NA						
1094	Asbestos	7 MFL	MFL	NA						

Freporting Format 62-550.730 Effective January 1995, Revised February 2010

Page 3 of 9

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

INORGANIC CONTAMINANTS 62-550.310(1) Report Number / Job ID: 149649DW1 PWS ID (From Page 1): 3480148

Contam	1			Anelyels		Analytical	Lab	Analysia	Analysis	DOH Lab
ID	Contam Name	MCL	Units	Result	Qualifier	Method	MDL	Date	Time	Cert #
1040	Nitrate (as N)	10	mg/L	0.183		EPA300.0	0.0500	06/11/11	01:30 PM	E83018
1041	Nitrite (as N)	1	mg/L	0.0500	ប	EPA300.0	0.0500	05/11/11	01:30 PM	E83018
1005	Areenic	0,010	mg/L	0.00100	U	EPA200.8	0.00100	08/11/11		E83018
1010	Barium	2	mg/L	0.0165		EPA200.8	0.00200	05/11/11		E83018
1015	Cadmium	0.005	mg/L	0.00100	υ	EPA200.8	0.00100	05/11/11		E83018
1020	Chromium	0.1	mg/L	0.0111		EPA200.8	0.00100	05/11/11		E83018
1024	Cvanide	0.2	mg/L	0.00500	υ	SM4600CN-E	0.00500	05/12/11		E83018
1025	Fluorida	4.0	mg/L	0.434		EPA300.0	0.200	05/11/11		E83018
1030	Lend	0.016	mg/L	0.00100	บ	EPA200.8	0.00100	05/11/11		E83018
1035	Mergury	0.002	mg/L	0.0000200	U	EPA245.1	0.0000200	08/11/11		E83018
1036	Nickel	0,1	mg/L	0.00295		EPA200.8	0.00100	05/11/11		E83018
1045	Selenium	0.05	mg/L	0.00678		EPA200.8	0.00200	05/11/11		E83018
1052	Sodium	160	mg/L	73.7		EPA200.7	0.600	06/11/11		E83018
1074	Antimohy	0.006	mg/L	0.00100	บ	EPA200.8	0.00100	05/11/11		E83018
1075	Beryllium	0.004	mg/L	0.00100	ป	EPA200.8	0.00100	05/11/11		E83018
1085	Thallium	0.002	mg/L	0.00100	U	EPA200,8	0.00100	05/11/11		E83018

SECONDARY CONTAMINANTS 62-550.320

Report Number / Job ID: 149649DW1 PWS ID (From Page 1): 3480149

Contam	l .			Analysis		Ansiytical	Leb	Analysis	Analyşis	DOH Lab
ID .	Contam Name	MCL	Units	Result	Qualifier	Method	MDL	Date	Time	Cert #
1002	Aluminum	0.2	mg/L	0.0200	U	EPA200.8	0.0200	05/11/11		E83018
1017	Chloride	250	mg/L	116		EPA300.0	4.00	05/18/11		E83018
1022	Copper	1	mg/L	0.0144		EPA200.8	0.00100	05/11/11		E83018
1025	Fluoride	4.0	mg/L	0.434		EPA300.0	0.200	05/11/11		E83018
1028	Iron	0.3	mg/L	0.0185		EPA200.7	0.0100	05/11/11		E83018
1032	Manganese	0.05	mg/L	0.0100	U	EPA200.7	0.0100	05/11/11		E83018
1050	Silver	0.1	mg/L	0.00318		EPA200.8	0.000500	05/11/11		E83018
1055	Sulfate	250	mg/L	27.5		EPA300.0	1.00	05/11/11		E83018
1095	Zinc	5	mg/L	0.0100	U	EPA200.8	0.0100	05/11/11		E83018
1905	Color	15	CU	5.00	U	SM2120 B	5.00	05/11/11	09:00 AM	E83018
1920	Odor	3	TON	1.00	U	SM2150 B	1.00	05/10/11	03:15 PM	E83018
1925	pН	6.5 -8.5	ρH	7.60		SM4500-H B	0.0100	05/10/11	03:15 PM	E83016
1930	Total Dissolved Solids	500	mg/L	48B		SM2540 C	2.50	05/14/11		E83018
2905	Foaming Agents	0.5	mg/L	0.200	ឋ	SM5540 C	0.200	05/11/11	11:30 AM	E83018

SYNTHETIC ORGANICS 62-550.310(2)(c)

Report Number / Job ID: 148062DW1 PWS ID (From Page 1): 3480149

Conta	I			Analysis		Analytical	Lab		Extraction	Analysis	Analysis	DOH Lat
ID	Contam Name	MCL	Units	Result	Qualifier	Method	MDL.	RDL	Date	Date	Time	Cert#
2005	Endrin	2	ug/L	0.0100	u	EPAS05	0.0100	0.01	04/25/11	04/26/11		E83018
2010	Lindane	0.2	ug/L	0.0100	U	EPA505	0.0100	0.02	04/25/11	04/26/11		E63018
2015	Methoxychior	40	ug/L	0.0500	U	EPA505	0.0500	0.1	04/25/11	04/26/11		E83018
2020	Toxaphene	3	ug/L	0.500	U	EPA505	0.500	1	04/25/11	04/26/11		E83018
2031	Dalapon	200	ug/L	0.100	U	EPA515.4	D.100	1	04/21/11	04/25/11		E83018
2032	Diquat	20	ug/L	0.400	U	EPA549.2	0.400	0.4	04/25/11	04/29/11		E83018
2033	Endothall	100	ug/L	9.00	U	EPA548.1	9.00	9	04/25/11	04/20/11		E83018
2034	Glyphosate	700	ug/L	6.00	Ų	EPAS47	6.00	6		04/20/11		E83018
2035	Di(2-ethylhexyl) adipate	400	ug/L	0.600	U	EPA525.2	0.600	0.6	04/26/11	05/02/11		E83018
2036	Oxamyl (Vydate)	200	ug/L	2.00	u	EPA531.1	2.00	2.0		04/26/11		E83018
2037	Simazine	4	ug/L	0.0700	U	EPA507	0.0700	0.07	04/18/11	04/27/11		E83018
2039	Di(2-ethylhexyl)phthalate	6	ug/L	0.600	U	EPA525.2	0.600	0.6	04/26/11	05/02/11		E83016
2040	Picloram	500	ug/L	0.100	U	EPA515.4	0.100	0.1	04/21/11	04/25/11		E83018
2041	Dinoseb	7	ug/L	0.200	Ü	EPA515.4	0.200	0.2	04/21/11	04/25/11		E83018
2042	Hexachiorocyclopentadiene	50	ug/L	0.100	u	EPA505	0.100	0.1	04/25/11	04/26/11		E83018
2046	Carbofuran	40	ug/L	0.900	U	EPA531.1	0.900	0.9		04/26/11		E83018
2050	Atrazine	3	ug/L	0.100	U	EPA507	0.100	0.1	04/18/11	04/27/11		E83018
2051	Alachlor	2	ug/L	0.200	Ü	EPA507	0.200	0.2	04/18/11	04/27/11		E83018
2065	Heptachlor	0.4	ug/L	0.0100	U	EPA505	0.0100	0.04	04/25/11	04/26/11		E83018
2067	Heptachtor epoxide	0.2	ug/L	0.0100	U	EPA505	0.0100	0.02	04/25/11	04/26/11		E83018
2105	2,4-D	70	ug/L	0.100	U	EPA515.4	0.100	0.1	04/21/11	04/25/11		E83018
2110	2,4,5-TP	50	ug/L	0.200	U	EPA515.4	0.200	0.2	04/21/11	04/25/11		E83018
2274	Hexachlorobenzene	1	ug/L	0.100	U	EPA505	0.100	0.1	04/25/11	04/26/11		E83018
2306	Benzo(a)pyrene	0.2	ug/L	0.0200	U	EPA525.2	0.0200	0.02	04/26/11	05/02/11		E83018
2326	Pentachlorophenol	1	ug/L	0.0400	U	EPA515.4	0.0400	0.04	04/21/11	04/25/11		E83018
2383	PolychlorinstedbiphenylsPC8	0.5	ug/L	0.100	U	EPA505	0,100	0.1	04/25/11	04/26/11		E83018
2931	Dibromochloropropene	0.2	ug/L	0.0200	U	EPA504.1	0.0200	0.02	04/25/11	04/27/11		E83018
2946	Ethylene Dibromide	0.02	ug/L	0.0100	U	EPA504.1	0.0100	0.01	04/25/11	04/27/11		E83018
2959	Chlordane	2	ug/L	0.0100	U	EPA505	0.0100	0.2	04/25/11	04/26/11		E83018

VOLATILE ORGANICS 62-550.310(2)(b) Report Number / Job ID: 148062DW1 PWS ID (From Page 1): 3480149

Contan	-			Analysis		Analytical	Lab		Analysis	Analysis	DOH Lab
ID	Contam Name	MCL	Units	Result	Qualifier	Method	MDL	RDL	Date	Time	Cert #
2378	1,2,4,-trichlorobenzene	70	ug/L	0.500	Ū	EPA502.2	0.500	0.5	04/19/11		E83018
2380	cis-1,2-Dichtoroethylene	70	ug/L	0.200	U	EPA502.2	0.200	0.5	04/19/11		E83018
2955	Xylenes	10000	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018
2964	Dichloromethane	5	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018
2968	o-dichlorobenzene	600	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018
2969	Para-dichlorobenzene	75	ug/L	0.500	υ	EPA502.2	0.500	0.5	04/19/11		E83018
2976	Vinyl Chloride	1	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018
2977	1,1-Dichloroethylene	7	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018
2979	trans-1,2-Dichloroethylene	100	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018
2980	1,2-Dichloroethane	3	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018
2981	1,1,1-trichloroethane	200	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018
2982	Carbon tetrachloride	3	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018
2983	1,2-dichloropropane	5	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018
2984	Trichloroethylene	3	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018
2985	1,1,2-trichloroethane	5	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018
2987	Tetrachloroethylene	3	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018
2989	Monochlorobenzene	100	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018
2990	Benzene	1	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018
2991	Toluene	1000	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018
2992	Ethylbenzene	700	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018
2996	Styrene	100	ug/L	0.500	U	EPA502.2	0.500	0.5	04/19/11		E83018



July 19, 2011

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

Subject: 2011 Asbestos Report

Dear, Barbra Browning

Please find the attached asbestos results for 2011

Sincerely,

Roger Holsapple

Roger Holsapple Chief Operator 3100 Bancroft Blvd. Orlando, Fl. 32833

Orlando, Fl. 32833 Office: (407) 586-2112 Cell: (407) 259-6991

rholsapple@utilitypartnerslc.com



ASBESTOS-FREE CERTIFICATION OR ASBESTOS SAMPLING PLAN FOR PWSs

See page 2 for instructions.

1. General Information
Public Water System (PWS) Name: Woode Field 1/Tilifies Water Treatment Plant PWS Identification Number: 3420143 PWS Type: Community Non-Transient Non-Community
PWS Owner: Plus 15 - Westge field
Contact Person: Roger Holiapple Contact Person's Title: Lead Operator
Contact Person's Mailing Address: 3160 BAUGIOTI Buld
City: Orlando State: F/ Zip Code: 32233
Contact Person's Telephone Number: 467-568-2//2 Contact Person's Fax Number: 467-568-7869
Contact Person's E-Mail Address: RHOLSACHIE & UTILITY FARTURES LLC & COM
II. Asbestos-Free Certification
I am duly authorized to sign this form on behalf of the PWS identified in Part I of this form. I certify that, to the best of my
knowledge and belief, there are no asbestos-cement pipes or other asbestos containing components in said PWS. This certification is
for the
scheduled monitoring year of 2011.
Signature and Date 7-19-11 Kogen Holsapple Lead Operator
Signature and Date Printed or Typed Name Title
III. Ashestos Sampling Plan
A. Scheduled Monitoring Year: 20/1 B. Asbestos Sampling Location*: 2609 Regenty Oak
B. Asbestos Sampling Location*: 2609 Kegenly Oak
* The appearance in the location whall be a transmood by appearance are a CPU. I have a subject to the state of the state
* The asbestos sampling location shall be a tap served by asbestos-cement pipe. (This does not mean that the asbestos sampling location must be a consumer's tap. The asbestos sampling location may be any convenient place in a portion of the distribution
more recovered by each and an entered with a
C. Reason Why Above Asbestos Sampling Location Was Chosen: This Address IMAS Previously Used
C. Neason why Above Assessos Samphing Location was Chosen. 17:75 NOOTE MASS PREVIOUSLY USED
D. Conditions Under Which Asbestos Sample Will Be Taken*: This Sample 1225 Collected at the
customers Tap Located AT 2609 Keggscy Opk
Service of the servic
* Asbestos samples shall be taken under conditions where asbestos contamination is most likely to occur. (Waters with low pH
[less than approximately 7.5 or 8, unless the waters contain high calcium, alkalinity, and silicate levels], very high sulfate
concentrations, and polyphosphates are particularly destructive to ashestos-cement nine



FLOWERS CHEMICAL LABORATORIES INC.

P.O. Box 150597, Altamonte Springs Fl. 32715-0597 571 NW Mercantile Pl. Suite 111, Port St. Lucke Fl. 34986 P.O. Box 1200, Madison Fl. 32341 3980 Overseas Hwy Suite 103, Marathon Fl. 33050

Phone: 772-343-8006 / Fax: 772-343-8089 Phone: 850-973-6878 / Fax: 850-973-6878 Phone: 305-743-8598 / Fax: 305-743-8598 E83018 (Main Lab) E86562 (South Lab) E82405 (North Lab) E35834 (Keys Lab)

Pluris-Wedgefield Attn: Ron Kramer 6608 Walton Way Tampa,Ft. 33610 PO #: Wedgefield Client Project #: n/a Date Sampled: Jun 14, 2011 Jul 18, 2011; Invoice: 152052

Report Summary

Date Received: Jun 14, 2011

FCL Project Manager: Christina C. Peterson

Laboratory # 152052DW1

Sample Description 2609 Regency Oak Analysis TEM Chemist MMG Location Main Lab SampleMatrix Drinking Water

Certificate of Results

Sample integrity was certified prior to analysis. Test results meet all requirements of the NELAC Standards except as noted in the Quality Control Report. Uncertainties for these data are available on request. This report may not be reproduced in part; results relate only to items tested.



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



FLOWERS CHEMICAL LABORATORIES INC.

P.O. Rox 150597, Altermonte Springs FL 32715-0597 571 NW Mercantile PL Suite E11, Port St Lucie FL 34866 P.O. Box 1200, Madison FL 323A1 3980 Cherses Findy Suite 103, Marathon FL 33050

Phone: 407-339-5984 / Fax: 407-260-6110 Phone: 772-343-6006 / Fax: 772-343-6089 Phone: 850-973-6878 / Fax: 850-973-6878 Phone: 305-743-8598 / Fax: 305-743-8598

Pluris-Wedgefield Attn: Ron Kramer

8608 Walton Way Tampe,FL 33610

PO#: Wedgefield Client Project #: n/s Date Sampled: Jun 14, 2011 Jul 18, 2011; Invoice: 152052

Analysis Report

 Lab #: 152052DW1
 Sampled: 06/14/11 10:00 AM Personal Personal

PQL 1.00

QC Batch Method 10173614 TEM

CAS#

Analyzed 06/14/11



FLOWERS CHEMICAL LABORATORIES INC.

RO, Box 150597, Alramonte Springs FL 32715-0397 571 NW Mercantille PL Sulter 111, Port St, Lucie FL 349 RO, Box 1200, Marilson FL 32341 1665 Charmond Mari Sulte 162 Maryshop EL 32825 Phone: 407-339-3461 / Fau: 407-260-01 to Phone: 772-343-8006 / Fax: 772-343-4085 Phone: 850-973-6878 / Fax: 850-973-6876 Phone: 305-743-8598 / Fax: 305-743-8598 E85018 (Main (ab) E86562 (South Lab) E82403 (North Lab) E35834 (Kaya Lab)

Pluris-Wedgefield Attn; Ron Kramer 6808 Walton Way Tampa,FL 33810 PO #: Wedgefield Client Project #: n/a Date Sampled: Jun 14, 2011 Jul 18, 2011; Invoice: 152052

Quality Report

Quality Control Batch: 10173514

Blank Asbestos Analyst: MMG Result Units 1.00U MF/L

FLDOH; E83018 (Main Lab) FLDOH; E88562 (South Lab) FLDOH; E82405 (North Lab) NJDEP; FL015

Page 3 of 4



CHEMICAL LABORATORIES INC.

onte Sorings FL 32715-0597 571 NW Mercantile PL Suite 111, Port St. Lucie FL 34986 P.O. Box 1200, Madison FL 32341 3980 Oversnas Hwy Suite 103, Marathon FL 33050

Phone: 407-339-5984 / Fax: 407-260-6110 Phone: 772-343-8006 / Fax: 772-343-8089 Phone: 850-973-6878 / Fax: 850-973-6878 Phone: 305-743-8598 / Fax: 305-743-8598 F83018 (Main (nh) EB6562 (South Lab) E82405 (North Lab) E35834 (Keys Lab)

Pluris-Wedgefield Attn: Ron Kramer 6608 Walton Way Tampa,FL 33610

PO#: Wedgefield Client Project #: r/a Date Sampled: Jun 14, 2011 Jul 18, 2011; Invoice: 152052

Narrative Report

Sample Handling

Sample handling and holding time criteria were met for all samples. Samples collected by submitter. No unusual events occurred during analysis. Results are reported on a wet weight basis for aqueous matrices and on a dry weight basis for sludge and soil matrices unless otherwise noted. Sample results reported as dissolved were field filtered.

Quality Control

Enclosed analyses met method or FCL criteria, unless otherwise denoted on the sample results. Applied data qualifiers are defined below.

Attachments

Chain of Custody

Qualifier	Meaning
U	Compound was analyzed for but not detected.
J	One or more QC samples associated with this data value exceeded QC limits.
J1	Surrogate recovery limits have been exceeded.
J2	No known quality control criteria exist for the component.
J3	Reported value failed to meet established quality control criteria for either precision or accuracy.
J4	Sample matrix interfered with the ability to make an accurate determination on the spiked sample.
Q	Sample held beyond the accepted holding time.
L	Off-scale high; reported concentration exceeds the highest standard.
V	Analyte was detected in both the sample and the associated method blank.
ZTNTC	Too numerous to count. Numeric value represents filtration volume.
Α	Absent
P	Present
T	Value reported is less than the statistical method detection limit. Reported for informational purposes only.
М	Value reported is greater than the statistical method detection limit, but less than the reported MDI.
G	The greatest of the dilutions performed did not yield sufficient oxygen depletion for valid data.
S	The least of the dilutions performed did not yield sufficient oxygen residual for valid data.
0	Result is greater than (over) the specified value.
1	Reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.
В	Results based upon colony plate count outside ideal range.
Y	The laboratory analysis was from an improperly preserved sample. The data may not be accurate

DRINKING WATER MICROBIAL SAMPLE COLLECTION

In Tec 4463 V Oplands DOH# Report N	ING WATER MICROBIAL SAMPLE & LABORATORY REPORTING FOR (62-550.730 Reporting Formet Effective 01/1995, Ravised 02/2 The Amaiy ficial Laboratories, and invalence Rd Soute 18-12 or Florida 02/811 E63204 umber///2-(25 Sub-Contract Laboratories) Sub-Contract Laboratories (check all that apply)	RMAT 2010)	18.	• · · · · · · · · · · · · · · · · · · ·	Lab Anal Sam Sam Disir This	Rec ysis iple ple l infect sam	Acceptani Preservation ant Check aple does r	Time: ne: ce Criter on: Don Not D ot meet t			°C mg/L		
	Coliform/E. coli			iphage []HPC			I.D. 348	04.40				
	Nater System (PWS) Name: Pluris – W dress: 20449 Mansfield St	eagenera			-	— Tibe							
	PWS Owner's Phone #: 813-626-1030	,		City: Orlando Florida 32833 Fax #: 407-568-7869									
Collect	or: John B Coffee Jr					ne #: 407-	568-2112	<u> </u>					
Type of X Comm □Limite Reason X Distrib	Supply: (check only one) unity Water System	ommunity V Vell	wimming d or asse	Pool []	Other: ⊟Raw	(tric	gered or a	ssessme	int) additional	Well Su	vey		
	Collection Date: 12/ 06 /2011							ssomstore/#11#4542/47			········		
	To be completed by collecto	r of sample		I			Analysis N			y lab			
Sample	Sample Point	Sample Collection	Sample	Disin- fectant	Ηα		nilalysis i	iati iod(s)	97226,	nF			
#	(Location or Specific Address)	Time	Type'	Residual (mg/L)			Non- Coliform	Totat Coliform	Fecal, E. coli, Enterococci, or Coliphage ³	Data Qualifier ⁴	Lab Sample #		
	20449 Mansfield St Well #2	0748	R					A			/		
	20449 Mansfield St Well #3	0745	R					A			2		
	2314 Bancroft Blvd	0800	a	1.1				A_			3		
	20413 Melville St	0810	D	0.9				A			7		
						100,11							
sample	of disinfectant residuals for distribution ros. Free chlorine or Total chlorine (circle one).	utine & rep	peat	1.0		s ot	herwise no		ests are performe				
X DPI Person X A co □Su □Em	ctant Residual Analysis Method: O Colorimetric			e):	Date a Date F	nd tin nd tin Repo Sign	ne PWS notif	ied by lab o	of positive results:_ lab of positive resul	ts:			
	Roger Holsappia Plaris — Wedgebeld 3100 Bancraft Biyd Orlando FR32893	A COLUMN TO THE PROPERTY OF THE PERSON OF TH	☐Incor	DEP/DOH USE ONLY Satisfactory ncomplete Collection Information Repeat Samples Required Replacement Samples Required te Reviewed by DEP/DOH: P/DOH Reviewing Official:						ONLY			

For Sample Types we instructions item 1 to
For Analysis Methods we Instructions nem 1 to
For Analysis Methods we Instructions nem 1 to
Finese circle appropriate estection.
Defined in Plond Administratory Code Rule 62-160. Table 1.
Complete for Community & con-transient non-community systems serving populations up to and sucleding 4,900. Do not include naw or plant samples in the merage.

Page 1 of 1

DRINK	ING WATER MICROBIAL SAMPL & LABORATORY REPORTING I		Lab Receipt Date & Time: 12-7-11 1005 Analysis Date & Time: 1100								
	(62-550.730 Reporting Format Effective 01/1995, Revised	10335010)	2		Lab	Rec	eipt Date Date & T	& Time: _ ime:	10-1-11	100	3-1
4403 V Opend	fi Analysina Laberator as inc metend 90 Suite 6-10 c. Floruse 32611 ESSIS4 Jumber: <u>11-12-147</u> Sub-Contra	147			San Disi	nple nfec	Preservati tant Checi	ion: ☐Or	ria: Lice □Not On to Detected □ □ the following NE	æ 🔲 _	°C mg/L
Analysi	is Requested: (check all that apply) Coliform/E. coli			li anedoil		_	10thar				
	Water System (PWS) Name: Pluris -			iipiiage (Juro	_		I.D. 348			
	dress: 20449 Mansfield St		'			 Citv:	Oriando				
	PWS Owner's Phone #: 813-626-1030	\mathcal{D}		F	ax #: 4	07-5	68-7869				
Collect	or: John B Coffee Jr			Col	ector's	Pho	one #: 407	-568-211	2		
X Comm Limite	Supply: (check only one) unity Water System	te Well S	wirnming	Pool [Other:		on-commu	······································			
X Distrib ☐Clears	ution Routine Distribution Repeat Distribution Distr	Raw (triggere smple being re	ed or asse eplaced)	essment) Boil W	□Raw /ater No	r (trig otice	gered or Othe	assessme	ent) additional	☐Well Su	vey
-	Collection Date: 12/ 07 /2011	0.4.52.50.54.52	ii aan aan aan aa		Manager see	150-11-10-1					
	To be completed by colle Sample Point	Sample	Sample	Disin-			Analysis I	Vethod(s)	o be completed		
	(Location or Specific Address)	Collection Time	Type ¹	Residual (mg/L)	ρΗ		Non- Coliform	Total Coliform	Fecal, E. coll, Enterococci, or Coliphage ³	Data Qualifier*	Lab Sample #
	2724 Ardon Ave	0735	D	1.2				A			1
	19520 Glen Elm Way	€800	D	0.9				A			7
	219119 Timber Pine Ln	0750	D	1.0				A			3
	20200 Netteton Stt	<u>0805</u>	D	1.0				A			4
	of disinfectant residuals for distribution .* Free chlorine or Total chlorine (circle one		peat	1.0	Ilalaa			l all to	ests are performe		
X DPC	tant Residual Analysis Method: Colorimetric Other:	41			Ni Date a	ELA	C standar ne PWS noti	ds, and th ted by lab o	e results relate of positive results:	only to the s	amples.
	performing disinfectant analysis is (see i rtified operator (# C6614	nstructions o	n reversa	e):			t (ssued:	notified by سر	lab of positive result	us:	
□Sup	ervised by certified operator (#					•	nature				
	norized representative of supplier of water	·			Title:		< 0				P*************************************
	Friger Holsoppic Parris – Wedgefisid 1986 Bascroft Buc Chargo F1 52875			☐Repe ☐Repl	nplete (at Sam acemer	Colle ples it Sa I by	ection Information	quired I:	DEP/	DOH USE	ONLY

DISINFECTION BYPRODUCTS 62-550.310(3)

Report Number / Job ID: 158652DW1 Disintectant Residual (mg/L): PWS ID (From Page 1): 3480149

Contam				Analysis		Analytica)	Lab	Regulatory	Analysia	Analysis	DOH Lab
ID	Contam Name	MCL	Units	Result	Qualifler*	Method	MDL	MRL"	Date	Time	Cert#
2941	Chloroform	N/A	ug/L	14.4		EPA502.2	0.500	1.0	09/15/11		E83018
2942	Bromoform	N/A	ug/L	4.60		EPA502.2	0.500	1.0	09/15/11		E83018
2943	Bromodichipromethane	N/A	ug/L	17,5		EPA502.2	0.500	1.0	09/15/11		E83018
2944	Dibromochioromethane	N/A	nByr",	18.7		EPA502.2	0.500	1.0	09/15/11		E63018
2950	Total Trihalomethanes (TTHM)	80	ug/L	55.2		EPA502.2	0.500		09/15/11		F83018

NOTE; Do not round values. Report results to the accuracy, precision, and sensitivity of the analytical method used.

DISINFECTION BYPRODUCTS 62-550.310(3)

Report Number / Job ID: 158653DW1 Disintectant Residual (mg/L): PWS ID (From Page 1): 3480149

Contact				Analysis		Analytical	Lab	Regulatory	Analysis	Analysia	DOH Lab
ID	Contam Name	MCL	Units	Result	Quelifier*	Method	MDL	MRL**	Date	Time	Cert #
2450	Monochloroscetic Acid	N/A	ug/L	16.2		EPA552.2	2.00	2.0	09/21/11		E83018
2451	Dichicroscetic Acid	N/A	ug/L	13.6		EPA552.2	1.00	1.0	09/21/11		E83018
2452	Trichloroacetic Acid	N/A	ug/L	4.51		EPA552.2	0.500	1.0	09/21/11		E83018
2453	Monobromoscetic Add	N/A	ug/L	1.00	U	EPA552.2	1.00	1.0	09/21/11		E89018
2454	Dibromoscatic Acid	N/A	ug/L	3.88		EPA552.2	0.500	1.0	09/21/11		E83018
2456	Total Haioscetic Acids (HAAS)	60	ug/L	38.2		EPA552.2	0.500	-	09/21/11		E83018

^{**} Laboratories are required to adhere to the minimum reporting level (MRL) requirements of 40 CFR 141.131(b)(2)(b)
*** Applicable to monitoring as prescribed in 40 CFR 141.132(b)(2)(i)(B) and (b)(2)(ii)
**** Laboratories that use EPA methods 317.0 Revision 2.0, 326.0 or 321.8 must meet a 1.0 ug/L MRL for bromate.

NOTE: Do not round values. Report results to the accuracy, precision, and sensitivity of the analytical method used.

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

Utility Partners, LLC 6608 Walton Way Tampa, FL 33610

PROJECT NAME: Wedgefield

TTA Contact: T. Lal

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT	DATE ANALYZED	DOH LAB
11/02/11	11-11-032-1	11/02/11 1002	Bicarbonate Carbonate Alkalinity Chloride Sulfate Sulfide Total Iron Total Hardness Magnesium Sodium Potassium TDS Calcium Well 2	4500 4500-CO2 310.2 300.0 300.0 4500-S-E 200.7 130.2 200.7 200.7 200.7 160.1 200.7	240.0 mg/L 1.2 mg/L 240.0 mg/L 69.0 mg/L 25.0 mg/L 4.5 mg/L 41.8 ug/L 260.0 mg/L 12100.0 ug/L 44000.0 ug/L 410.0 mg/L 410.0 mg/L 85200.0 ug/L	11/09/11 11/09/11 11/08/11 11/03/11 11/03/11 11/03/11 11/09/11 11/09/11 11/09/11 11/09/11 11/06/11	E83182 E83182 E83182 E83182 E83182 E83182 E83182 E83182 E83182 E83182 E83182

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

Reviewed By

: Jamera Zal

Title

: Quality Control Director

Date Reviewed : December 19, 2011

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

YA

Tri-Tech Laboratories, Inc. P.O. Box P.O. Box 140966 Orlando, Florida 32814-0966 (407)275-8463 Fax (407)281-9187

"HELP SAFEGUARD YOUR FUTURE AND YOUR REALITE" CALL TTA TODAY! Page_____Of_

Work Order #://- 1-032 CHAIN OF CUSTODY RECORD (877)275-8463 Malling Address 6608 Walton Way Client Name Involutus Address: Tampa, FL 33610 Utility Partners, LLC. Same Same Phone Number: Fax Number: Combet Person: et er address of sample title: 352-617-2231 813-621-8840 Ros Kramer Wedgefield Sampler's Signature: (REQUEST ANALYSIS WRITE DOWN BELOW) BANKE IN 11-07-11 well 2 1002 7. 8. 9. 10. 11. 12 13. Relinquided Sample KD Date/These Mostle di KJ Accepted to bits: 11-2-11 1145

Wedgerield

Tri- Tech Laboratories, Inc Field Instrumentation Calibration Records

Date: 11-02-11

				w Std		h Std	l	
			Assigned		Assigned			
Time	Instrument	Parameter	Value	Reading	Value	Reading	Units	Tech
0905					_			P.
	TTA F02	cond	100	NIA	1000	969	µohms	Ĺ
	TTA F02	ph	4.00	400	7.02	7.00		
	TTA F02	temp	NA		NA NA	gardina.	°C	
	TTA F02	DO*	100%	100	and the second s		mg/L 1/0	
	TTA F04	turbidity	2015	(5	100	NA	NTU	<u> </u>
				e <u>talaké s</u>	us elles little to		\$ 44 T	PC
	,				-			1
	TTA F02	cond	100	NIA	1000	966	µohms	
	TTA F02	ph	4.00	4.01	7.02	7.00		1.
	TTA F02	temp	NA		NA		°C	
	TTA F02	DO*	100%	100	***************************************		mg/L	
	TTA F04	turbidity	2615	1.5	100		NTU	4
						<u> </u>	e galasta beta	5.8. 11 - 1
	TTA F02	cond	100		1000	Commission of the Commission o	µohms	
	TTA F02	ph	4.00		7.02			
	TTA F02	temp	NA		NA		°C	
	TTA F02	DO*					mg/L	
	TTA F04	turbidity	20		100		NTU	

Units STDS:

μοhms NTU
S: pH4.0 PW 169 Con 100 Turb20 PW101
pH7.0 PW154 Con 1000 Turb100 PW101

*DO based on temperature at 760 mm Hg

DEP-SOP-001/01 Form FD 9000-24

GROUNDWATER SAMPLING LOG

SITE NAME:	n) edo	se Filde	l - P	Lunis	SITE	ION: DIS	Triot	GAS	191	20
WELL NO:	7	+2		SAMPLE ID:					1-02-	11
L				Р	URGINO	DATA		·····		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
DIAMETER		TUBING DIAMETER (eet to	feet TOW	C DEPTH 37. ATER (feet): ER) X WELL C	OR BAILER:	TYPE	
only fill out	if applicable)		=(74	casing foot-	· N	IA 1	leet) X 🕌	O j gallons/foo		> gallons
	T VOLUME PU if applicable)	IRGE: 1 EQUI	PMENT VOL. ≈	PUMP VOLUME gallons	-	APACITY gallons/foot		NGTH) + FLOW CE	gallons =	gallons
	MP OR TUBING	3	FINAL PUMP DEPTH IN WI		P	URGING	PURC DENDE	SING ED AT: 0959	TOTAL VOLUM PURGED (galic	
TIME	VOLUME PURGED (gallons)	CUMUL. VOLUME PURGED (gallons)	PURGE RATE (gpm)	DEPTH TO (star	H TE	CON MP. (μπήο C) m o μS/o	D. DISSOLV ss/c OXYGE circle/mg/	ED TURBIDITY		ODOR (describe)
0953	1800	18.00	600	N/A 7.	07 23	.35 71	0 2.9	1 0.51	rlear	المان
0956	1800	3600	1/	1 7.		87 71			<u> </u>	
0959	1800	5400	()	+ 7	12 23.	37 71	1 2.4	3 6.46	· 	<u> </u>
						·				
	······································					-				
				***						**************************************
WELL CAP TUBING IN	ACITY (Galinia SIDE DIA, "IAP	s Per Foot): 0. ACITY (Gal./Ft	76" = 0.02; i.): 1/8" = 0.00	l" = 0,04;	' = 0.06; 2 014; 1/4"	" = 0.16; 3" = 0.0026; 5	= 0.37; 4" = 0, /16" = 0.004; 3			' = 5.88 ' = 0.016
CAMPLED	BY (PRINT) / A	EEN IATION:	1 646	S/ MPLER(S) SIGNAL	MPLIN	G DATA			7	
SAMPLED	3. (FKII)	LAC	SA	APLER(S) SIGNA	2		SAMPLING INITIATED	AT: 1006	SAMPLING ENDED AT:	1002
PUMP OR T DEPTH IN V		11		MPLE PUMP W RATE (mt. per	minute):	NIA	TUBING MATERIAL	CODE:	PE	
1	OITAMINATIO		FIE	D-FILTERED: \\ ation Equipment T	' N	FILTER SIZI		DUPLICATE:	Y N	
		CONTAINER			£.1	RESERVATIO	N	INTENDED		MPLING
SAMPLE II CODE		MATER	VOLUME	PRESERVATIV USED		FAL VOL N FIELD (mL)	FINAL pH	ANALYCIS ANI METHOD	DIOR EQ	UIPMENT CODE
										
										· · · · · · · · · · · · · · · · · · ·
				March March March	-		· · · · · · · · · · · · · · · · · · ·			- w
	-									
REMARKS:			1							Mark Mark Mark Mark Mark Mark Mark Mark
MATERIAL	CODES:	AG = Amber	Glass; CG =	Clear Glass; P	E = Polyethy	ene. PP = :	Polypropylene:	S = Silicone; T = T	offen O = C**	n. (C
SAMPLING/ EQUIPMEN	TCODES: F	APP = After Per RPPP = Reverse		B = Bailer; c Pump; SM	BP = Biad	ider Pump; nod (Tubing Gr	ESP = Electric S	S – Silicone; — r = r Submersible Pump; VT ≈ Vacuum Trap;	eflon: O = Oth PP = Peristal O = Other (

1. The above do not constitute all of the information required by Chapter 62-160, F.A.C.
2. STABILIZATION CRITERIA FOR RANGE OF VARIATION OF LAST THREE CONSECUTIVE READINGS (SEE FS 2212, SECTION 3)
pH: ± 0.2 units Temperature: ± 0.2 °C Specific Conductance: ± 5% Dissolved Oxygen: all readings ≤ 20% saturation (see Table FS 2200-2); optionally, ± 0.2 mg/L or ± 10% (whichever is greater) Turbidity: all readings ≤ 20 NTU; optionally ± 5 NTU or ± 10% (whichever is greater)

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

Utility Partners, LLC 6608 Walton Way Tampa, FL 33610

PROJECT NAME: Wedgefield

TTA Contact: T. Lal

DATE REC	WORK ORDER	DATE/TIME SAMPLED	PARAMETER SAMPLE ID	METHOD	RESULT	DATE ANALYZED	DOH LAB
11/02/11	11-11-033-1			4500 4500-CO2 310,2 300.0 300.0 4500-S-E 200.7 130.2 200.7 200.7 200.7 160.1 200.7	240.0 mg/L 1.2 mg/L 240.0 mg/L 63.0 mg/L 23.0 mg/L 4.6 mg/L 61.5 ug/L 260.0 mg/L 11300.0 ug/L 39700.0 ug/L 400.0 mg/L 400.0 mg/L	11/09/11 11/09/11 11/08/11 11/03/11 11/03/11 11/03/11 11/09/11 11/09/11 11/09/11 11/09/11 11/09/11	E83182 E83182 E83182 E83182 E83182 E83182 E83182 E83182 E83182 E83182

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

Reviewed By

: Tomero Zul

Title

: Quality Control Director

Date Reviewed : December 19, 2011

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

Tri-Tech Laboratories, Inc. P.O. Box P.O. Box 140966 Orlando, Florida 32814-0966 (407)275-8463 Fax (407)281-9187

"HELP SAFEGUARD YOUR FUTURE AND YOUR HEALTH"

CALL TTA TODAY! Page_

Work Order #:

1/-11-033 (877)275-8463 CHAIN OF CUSTODY RECORD Malting Address: 6608 Walton Way involcing Address: Attention: Utility Partners, LLC. Tampa, FL 33610 Same Same Phone Number: Fax Number: Contact Person: Project or address of sample site; 352-617-2231 813-621-8840 Ron Kramer Wedgefield Sampler's Signature: (REQUEST ANALYSIS WRITE DOWN BELOW) Sample ed DATE/TEME Sample Description REMARKS 11-02-11 1022 11 11--033 . - 🖖-19, 11. 13. 33. 1130 Relinquished Sample Kit Dute/Ilme. Delivered Sample Kit to Joh Dite/Time: Accepted in lab: 1-7-11 Dape/Time:

Wedgerill

Tri- Tech Laboratories, Inc Field Instrumentation Calibration Records

Date: (1-02-11

			Low Std		High Std		1	
Time	Instrument	Parameter	Assigned Value	Reading	Assigned Value	Reading	Units	Tech
				NA				PC
20105	TTA F02	cond	100	HOTA.	1000	969	µohms	
	1TA F02	ph	4.00	4.00	7.02	7.00		
	TTA F02	temp	NA		NA		°C	
	TTA F02	DO*	100%	100			mg/L /o	
	TTA F04	turbidity	الاعتداد	15	100	NIA	NTU	4
(025		1 1188.57						P(
	TTA F02	cond	100	NIA	1000	766	µohms	(
	TTA F02	ph	4.00	4.01	7.02	7.00		1.
	TTA F02	temp	NA	Approximate a space of	NA		°C	
	TTA F02	DO*	00%	160	· p. hallanderstein der		mg/L	
	TTA F04	turbidity	20 15	is	100	NIA	NTU	_
					** **	****		Flori Michigan Control (Control (Contro
	TTA F02	cond	100		1000		µohms	
	TTA F02	ph	4.00		7.02			
	TTA F02	temp	NA		NA		°C	
	TTA F02	DO*					mg/L	
	TTA F04	turbidity	20		100		NTU	

Units STDS:

		µonms	NTU				
pH4.0	PW 169	Con 100	Turb20	PW101			
pH7.0	PW154	Con 1000	Turb100	PW101			

^{*}DO based on temperature at 760 mm Hg

DEP-SOP-001/01 Form FD 9000-24

GROUNDWATER SAMPLING LOG

SITE NAME:	Welc	للنفء يه	((Lun		OCATION:					
WELL NO:	7	#3		SAMPLE	ID:				DATE:	1-02-	1 (
<u> </u>			.,,,,,		PURC	SING DA	TA				
	(inches): 🖇	TUBING DIAMETER (i	nches):	DEPTH:	REEN INTER feet to	feet	STATIC DE	R (feet)	PURGE PUMP ' OR BAILER:	TYPE	
	UME PURGE: if applicable)	1 WELL VOLU		Cas	ma		O WATER)	X WELL CAP		1	
		IRGE: 1 EQUIF	=(24	8	feet -	NORMA	feet)		gallons/foo TH) + FLOW CE		S gallons
	if applicable)	IRGE: 1 EWUR			,			TOBRIS LEIK	•		
					illons + (ons/foot X		feet) +	galions ≖	gallons
DEPTH IN WELL (feet): 17 FINAL PUMP OR TUBING DEPTH IN WELL (feet): 17 PURGING INITIATED AT: 0 0 PURGING ENDED AT: 0 0 PURGED (gallons) \$ 70											
TIME	VOLUME PURGED (gallons)	CUMUL. VOLUME PURGED (gallone)	PURGE RATE (gpm)	DEPTH TO WATER (feet)	pH (standard units)	TEMP. (°C)	COND. (µmhos/c m or µS/cm)	DISSOLVED OXYGEN (circle mg/L o % saturation)	TURBIDITY (NTUs)	COLOR (describe)	ODOR (describe)
1013	1790	1290	430	MIA	7-11	2258	687	2.03	0-41	Clear	None
1016	1290	2580	//	1	7.08	23.56	687	1.65	1.40	1,	11
1019	1290	3870	11		7.07	23.56	687	1.52	0.40	. ,	11

		<u> </u>									
	na par es sind distribution and makes described and account.										
				ana, pak pana							
-	······		1	.,,		4		The Valley and Section (Section 1997)			
			-								
WELL CAR	ACITY (Collane	s Per Foot): 0.7	78" = 0.02:	1" = 0.04;	1.25" = 0.0	B; 2" = 0,1	e 15 - 0) 37: 4" = 0.65	5" = 1.02;	6" = 1,47; 12	1 - 6 00
TUBING IN	SIDE DÍA. CAP	ACITY (Gal./Ft): 1/8" = 0.00		= 0.0014;	1/4" = 0.002	26: 5/16"				" = 5.88 " = 0.016
SAMPLED	Y (PRINT) / AI	FFILIATION:	SA	MPLER(S) S	SAMP	LING DA	ATA	Y'		1	
	1. 6	al		` .	17-1			SAMPLING INITIATED AT	1020	SAMPLING ENDED AT:	lozz
PUMP OR T DEPTH IN V				MPLE PUMÉ	L per minute	.)·		TUBING MATERIAL CO)OE:	<u></u>	
	ONTAMINATIO	N: Y N	FIE	LO-FILTERS	D: Y		ER SIZE _	µm	DUPLICATE:	Y N	
-	SAMPLE (CONTAINER	Fitt	ration Equipm		DI F DOESCI	ONTION .	×		14	
SAMPLE	, #	CATION MATERI		SAMPLE PRESERVATION PRESERVATIVE TOTAL VOL			71-75-7- u tombu u totkoti ta . u parazzo .	INTENDED		SAMPLING EQUIPMENT	
CODE	CONTAIN			USE	D AC	TOTAL VOL DED IN FIELD (ML)		FINAL pH	METHOD		CODE
										Mr. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
The second second											

REMARKS				L		Marie and a standard arrange of the standard arrange and the standard arrange are standard arrange and the standard arrange are standar					
raumming.											
MATERIAL	CODES:	AG ≃ Amber (3lass; CG =	Clear Glass,	PE = Po	lyethylene:	PP = Polyp	ropylene: S =	Silicone; T = Ti	elion: O = O#	ner (Specify)
SAMPLING/ EQUIPMENT	CODES: A		Flow Peristall	B = Sai ic Pump;		= Bladder Pu w Method (Tu	mp; ES	P = Electric Sub	mersible Pump;	PP = Peristal	ltic Pump
EQUIPMENT CODES: RFPP = Reverse Flow Peristalitic Pump; SM = Straw Method (Tubing Gravity Drein); VT = Vacuum Trap; 0 = Other (Specify)											

1. The above do not constitute all of the information required by Chapter 62-160, F.A.C.
2. STABILIZATION CRITERIA FOR RANGE OF VARIATION OF LAST THREE CONSECUTIVE READINGS (SEE FS 2212, SECTION 3)
pH: ± 0.2 units Temperature: ± 0.2 °C Specific Conductance: ± 5% Dissolved Oxygen: all readings ≤ 20% saturation (see Table FS 2200-2); optionally, ± 0.2 mg/L or ± 10% (whichever is greater) Turbidity: all readings ≤ 20 NTU; optionally ± 5 NTU or ± 10% (whichever is greater)

Pluris Wedgefield, Inc.

Docket No.: 120152-WS

Orange County

25-30.440 (4) OPERATIONS REPORTS

Test Year Ended December 31, 2011

2010 MORs



See page 4 for instructions. General Information for the Month/Year of: January 2010
 Public Water System (PWS) Information PWS Name: Wedgefield-Pluris Water Treatment Plant PWS Identification Number: 34B0149 ○ Community Non-Transient Non-Community Transient Non-Community Consecutive PWS Type: Number of Service Connections at End of Month: 1,608 Total Population Served at End of Month: 5,628 PWS Owner: Wedgefield- Pluris Contact Person's Title: Lead operator Contact Person: Roger Holsapple Contact Person's Mailing Address: 3100 Bancroft Blvd City: Orlando State: Fi Zip Code: 32833 Contact Person's Tolephone Number: 407-568-2112 Contact Person's Fax Number: 407-568-7869 Contact Person's E-Mail Address: rholsapple@utilitypartnersllc.com B. Water Treatment Plant Information Plant Name: Wedgefield-Pluris Water Treatment Plant Plant Telephone Number: 407-568-6787 City: Orlando Plant Address: 20449 Mansfield St. Zip Code: 32833 Raw Ground Water Type of Water Treated by Plant: Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1.037 MGD Plant Category (per subsection 62-699.310(4), F.A.C.): III Plant Class (per subsection 62-699.310(4), F.A.C.): C License Class License Number Licensed Operators Name Day(s)/Shift(s) Worked Lead/Chief Operator: Roger Holsupple 7436 Tuesday-Saueder John Coffee 6614 Other Operators: Monday-Friday Paul Tzareff 17612 Sunday-Thursday II. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. 1 also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plant site for at least ten years and to make them available for peview upon request. 101 Roger Holsapple 7436-C Printed or Typed Name Signature and Date License Number

DEP Form 62-585 SCD(3) Effective August 28, 2003

Page I

	PWSI	dentifica	tion Number	: 3480149		Pia	ant Name:	Erro	r: Referen	cc source	not fou	nd.		
Means of Achieving Four-Log Virus Institution/Removal: * X Free Chlorine Chlorine Dioxide Ozone Cambined Chlorine (Chloramines)				41.02	ē.] tanum. 201	^								
Ultraviolet Radiation	111. D	illy Date	tor the Mic	ntn/Year o	i: January 201	<u>, , , , , , , , , , , , , , , , , , , </u>	(2)							
Type of Disinfectant Residual Maintained in Distribution System: X Free Chlorine Combined Chlorine (Chloramines)	Means	of Achie	ving Four-L	og Virus In	activation/Remo	VBI: T	X JEree C	niorin	ė Chio	rine Dio	ide	Ozone	: Cor	nbined Chlorine (Chloramines)
CT Calculations, pt VD Does to Demonstrate Four-Log Virus Insectivation, if Applicable* UV Does UV D	<u> </u>	raviolet i	Radiation			<u>.</u>								
Part Hours	Type o	f Disinfe	ectant Residu	<u>ual Maintain</u>	ed in Distribution	n System:				Combin	ed Chlor	ne (Chlo	ramines)	Chlorine Dioxide
Net Quantity Peak Flow P				<u></u>	T Calculations, or U			ur-Log	Virus Inactiv	etion, if Ap				
Net Quantity Net Quantity Net Quantity Net Quantity Power of First Section Produced, and Power of Produced,	1				,	CT Calcula					UV	Dose		
Day of Hours Net Quantity Day of Hours Day of Day o	1				ļ	Di								
Disinforciant Concentration Concentratio	i			1	Louis Besides			i '	İ)]		
Next Causarity Concentration (C) Measurement Causamer											Lawret	N.dimino		
Day of Hours Finished Water Month Operation Produced, gal Water Water Month Operation Produced, gal Water Water Month Operation Produced, gal Water Wate	1 1		Net Opentity	ĺ				Terms		Minimum				
The Plant in Water Water Water Water Water Peak Flow Peak Flow Peak Flow mg-min/l 1 24 250,000 2 2 24 250,000 3 24 250,000 4 24 222,000 5 250,000 4 24 222,000 5 250,000 7 24 233,000 7 25 233,000 7 234 233,000 7 233,000 7 234 233,000 7 233,000 7 234 233,	Day of	Hours							pHof					Emergency of Ahmernal Operating Conditions: Renait
Month Operation Produced_gal 1				Peak Flow	Customer During	Peak Flow,		Wate						
1		Operation	Produced, gal	Rute, god	Peak Flow, mg/l.	minutes	mg-min/L	τ, °C ∶	Applicable	mg-min/l.	sec/cm ³	sec/cm²	System, mg/L	
3 24 390,000 0.6 0.5		24											0.5	
1	2	24			\		ļ			Ĺ			0.8	
5 24 255,000	3			L					ļ					
6 24 251,000														
7 24 232,000				<u> </u>		ļ	<u> </u>		_		<u> </u>			
S 24 312,000				L			 _			 			0.8	6 Bac't samples flushed 14,400 gai
9 24 294,000 10 24 384,000 14 12 24 335,000 14 14 12 24 335,000 15 14 15 14 15 15 15 15					ļ	ļ	<u> </u>			 -		ļ		
10				Ļ	 		ļ							
11				 	}				}					
12 24 304,000				 	 		 							
13 24 239,000				 		 	 			 				
14 24 276,000				 	 	 	 							1 Best reviserates and
15 24 263,000				 	 			i				·		1 tale 1 repair enem sumple
16				 -	 		 							
17 24 344,000 1.2					 	† <u>-</u> -								
18 24 388,000				 	1									
20 24 273,000 0.9 Flushed 75,000 gal 21 24 228,000 0.9 Bac't sample flushed 21,500 gal 22 24 226,000 1.1 Bac't sample flushed 14,400 gal 23 24 269,000 0.7 24 24 318,000 1.2 25 24 320,000 0.5 26 24 235,000 0.6 27 24 235,000 0.7 28 24 257,000 0.6 29 24 233,000 0.6 29 24 233,000 0.6 20 24 233,000 0.6 21 24 334,000 0.9 30 24 251,000 0.9 31 24 334,000 0.9 32 334,000 0.9 33 30 30 34 251,000 0.9 31 24 334,000 0.9						i .								
21 24 288,000 0.9 1 Bac't sample flushed 21,600 gal 22 24 226,000 1.1 1 Bac't sample flushed 14,400 gal 23 24 269,000 0.7 24 24 318,000 1.2 25 24 329,000 0.5 26 24 235,000 0.6 27 24 257,000 0.7 28 24 237,000 0.6 29 24 233,000 1.1 30 24 251,000 0.9 31 24 334,000 0.9 Total 8,900,000	19	24	297,000										1.3	
22 24 226,000		24											0.9	Flushed 75,000 gal
23 24 269,000 0,7 24 24 318,000 1.2 25 24 323,000 0.5 26 24 235,000 0.6 27 24 257,000 0.7 28 24 257,000 0.6 29 24 233,000 0.1 30 24 251,000 0.9 31 24 251,000 0.9 31 24 334,000 0.9 Total 8,900,000		24		I										
24 24 318,000 1.2 25 24 329,000 0.5 26 24 235,000 0.6 27 24 235,000 0.7 28 24 257,000 0.6 29 24 233,000 0.1 30 24 251,000 0.9 31 24 334,000 0.9 Total 8,900,000						ļ	<u> </u>							1 Bac't sample flushed 14,400 gal
25 24 320,000 0.5 26 24 235,000 0.6 27 24 257,000 0.7 28 24 257,000 0.6 29 24 233,000 0.6 29 24 233,000 0.11 30 24 251,000 0.9 31 24 343,000 0.9 31 24 35,000 0.9 31 24 35,000 0.9 31 24 35,000 0.9				1		ļ								
26 24 235,000 0.6 27 24 257,000 0.7 28 24 257,000 0.6 29 24 233,000 1.1 30 24 251,000 0.9 31 24 334,000 0.9 Total 8,900,000				1				1						
27 24 257,000 0.7						ļ								
28 24 257,000 0.6				 		ļ			 					
29 24 233,000 11				 		ļ	 	-	ļ	 	<u> </u>			
30 24 251,000 0.9				+		 	}		-					<u> </u>
31 24 334,000 09 09 Total 8,900,000				+	 			┼	 					
Total 8,900,000				 		 	 							
		24		-	<u> </u>	<u> </u>	ــــــــــــــــــــــــــــــــــــــ	·		<u> </u>	·		UY	
Average 287,096			287,096	╡										



DEP Form 82-855 900(3) Effective August 26, 2003

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

	page 4 for instructions.					
I.	General Information f	or the Month/Year of: February 2010				
A. !	Public Water System (P	WS) Information				
- [PWS Name: Pluris-We	dgefield Water Treatment Plant			PWS Identification	Number: 3480149
	PWS Type: X C	community Non-Transient Non-Commu	nity Transier	t Non-Community	Consecutive	
	Number of Service Con	nnections at End of Month: 1,608		Total Population Se	rved at End of Month: 5,628	
	PWS Owner: Pluris-W	/edgefield				
	Contact Person: Roger	Holsapple		Contact Person's Tit		
	Contact Person's Maili	ng Address: 3100 Bancroft Blvd		City: Orlando	State: F)	Zip Code: 32833
	Contact Person's Telep	hone Number: 407-568-2112	_	Contact Person's Far	Number: 407-568-7869	
	Contact Person's E-Ma	il Address: rhoisapple@utilitypartnerslic.com			 	
B.	Water Treatment Plant	Information			The second second	
	Plant Name: Pluris-Wi	dgefield Water Treatment Plant		Cia Onlanda		imber: 407-568-6787
	Plant Address: 20449	Mansfield St.	urchased Finished V	City: Orlando	State: Fl	Zip Code: 32833
	Type of Water Treated			Yater		
	Permitted Maximum I	Day Operating Capacity of Plant, gallons per day	/; 1.03 / MGD	Diana Class (non sub	(2 (00)10(1) 5 . 0	
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): III	License Class		section 62-699.310(4), F.A.C.	
	Licensed Operators	Name	C C	7436		ift(s) Worked
	Lead/Chief Operator:	Roger Holsapple	$\frac{c}{c}$	6614		y-Saturday
	Other Operators:	John Coffee		17612		ay-Friday
	1	Paul Tzareff	- 	17012	Zunday	-Thursday
						
						
	}		 	····		
				 		
	ì					
						
	<u> </u>			<u> </u>		
Γī	I. Certification by Lea	d/Chief Operator				
	she wedges laned water to	restment plant operator licensed in Florida, am ti	he lead/chief operato	or of the water treatme	ent plant identified in Part I of	this report. I certify that the
in	formation provided in the	his report is true and accurate to the best of my k	nowledge and belief	. I certify that all dri	iking water treatment chemics	ils used at this plant conform to
N	SF International Standar	d 60 or other applicable standards referenced in	subsection 62-353.3	20(J), F.A.C. I also	certify that the following addit	ional operations records for this
pi	ant were prepared each	day that a licensed operator staffed or visited this	s plant during the me	onth indicated above:	(1) records of amounts of the	micals used and chemical feed
re	ites; and (2) if applicable	, appropriate treatment process performance rec	oros. rumbermore,	i agree to retain mese	additional operations records	at the plant site for at least ten
y.	ears and to make them a	vailable for review upon request.				
		Roger	Holsapple		7436-C	
5	ignature and Date		d or Typed Name		License 1	Number
3	Ristar and Dare		•.			

III. D	aily Dat	n for the Mo	nth/Year o	f: February 20 activation/Remo	ovali.*	XIFree Cl	nlorin	e Chio	rine Diox	ide	Uzon	e Con	nbined Chlorine (Chloramines)
Πu	myiolet	Radiation	Other	(Describe):	•	•							······································
				ed in Distribution	n System:	Free	Chlor	ine	IXICom	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
1712	77 17151111	Ctant Acada		T Calculations, or I								1	The Davide
- 1		ŀ			C Calcula						Duse	•	
				Lowest Residual Disinfectant	(l'estC	at Lirst						l owest Residual Disinfectant Concentration	
		Net Quantity		(Concentiation (C)					CT	Operating	UV Dose	at Remote	
Day of	Hours	of Finished		Before or at First		During			Required,				Emergency or Ahnormal Operating Conditions: Repa
the	Plant in	Water	Peak Flow	Customer During Peak Flow ingit	Peak Flow, minutes	Peak How,		Wuter, if Applicable	nig-		mW-	Distribution	or Muntenance Work that Involves Taking Water
Month	Operation	Produced, gal	Kaw, քրմ	reak flow ingri	minutes	his-ithici.	L. L	Аррисавие	min L	sec emi	sec.cm²	System, mg/L	System Components Out of Operation
	24 24	274 000 244,000										4.5	
2	24	209,000		i									2 Bac't samples
-4-	24	275 (NK)		·								03	2 Has C Samples
‡	24	265 000		 							,	0.5	
	24	203,000			· · · · · · · · ·	·	····				·	06	
<u>6</u>	24	344,000									 	9.6	
- <u>'</u>	24	315,000			· — —								4 Bac't samples stagell -TTIM's and HAAS's
		244,000			!		-				 	11.5	4 rate contines 3 state to -1 1 line 3 and 115/57. 8
	24 24	194,000		 -								i k	
-11-	24	26-4,000		 	 			——————			·	04	
12	24	336,800			 -							03	
$-\frac{12}{13}$	24	179,000			+							06	
14	24	35K.000							i			0.5	
15	24	264,000	,	 								0.3	
16	24	327,000		 	 				i			1.0	
7	24	276,000			 							0.2	
-18	24	288,000		-}	 						 	0.1	
19	24	298,000			 						,	0.7	
20	24	240,000			 			- -			-	07	
21	2-1	373.000		 -	† 						-	0.8	and the second s
22	21-	335,000		1								0.7	
23	24	299.000									:	0.7	
24		264,090		-	†			·				0.7	
25	24	279,000		 	†		-			 		0.7	
26	7 24	276,000		†							1	0.3	
27	24	263,000			T			_				0.6	
28	24	355,000		1								0.5	
												,	
					Ļ		• ······						
	1	-		<u> </u>	L						•	L	
Total		7,841,006 280,035	}										
Avera													

DEP Form 62-57 1 accc3; Effective August 25, 2003



See page 4 for instructions.

1	General Information 1	for the Month/Year of: March 2010				
A.	Public Water System (P	WS) Information				
	PWS Name: Pluris-We	dgefield Water Treatment Plant			PWS Identification N	umber: 3480149
	PWS Type:	Community Non-Transient Non-	Community Transier	nt Non-Community	Consecutive	
	Number of Service Cor	nuections at End of Month: 1,608		Total Population Serve	ed at End of Month: 5,628	
	PWS Owner: Pluris-W	/edgefield				
	Contact Person: Roger	r Holsapple		Contact Person's Title:	Lead operator	
	Contact Person's Maili	ng Address: 3100 Bancroft Blvd		City: Orlando	State: FI	Zip Code: 32833
	Contact Person's Telep	hone Number: 407-568-2112		Contact Person's Fax N	Number: 407-568-7869	
	Contact Person's E-Ma	il Address: rholsapple@utilitypartnersil	c.com			
В.	Water Treatment Plant	Information				· · · · · · · · · · · · · · · · · · ·
	Plant Name: Pluris-We	edgefield Water Treatment Plant			Plant Telephone Num	ber: 407-568-6787
	Plant Address: 20449			City: Orlando	State: FI	Zip Code: 32833
	Type of Water Treated	by Plant: Raw Ground Water	Purchased Finished V	Valer		
	Permitted Maximum D	Day Operating Capacity of Plant, gallons	per day: 1.037 MGD			
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): III		Plant Class (per subsec	ction 62-699.310(4), F.A.C.):	C
	Licensed Operators	Name	License Class	License Number	Day(s)/Shift(
	Lead/Chief Operator:	Roger Holsappie	С	7436	Tuesday-S	Seturday
	Other Operators:	John Coffee	C	6614	Monday-	Friday
		Paul Tzaroff	С	17612	Sunday-T	hursday
					···	
	Į.					
-	I. Certification by Lea	d/Chief Community				
		eatment plant operator licensed in Florid	la con the land objet anneate	f th	-land (dama) G - d 1 - 12 - d - Call	
4,	formation provided in th	is report is true and accurate to the best	of my knowledge and belief	I on the water treatment	plant identified in Part 1 of the	is report. I certify that the
10	in in Danverd Romannoi.	d 60 or other applicable standards refere	or my knowledge and belief.	20(3) E A C Jalan armki	ng water treatment enemicals	used at this plant conform to
- 1	or intelligerouse presider	day that a licensed operator staffed or vis	tited this plant during the me	20(3), F.M.C. 1 8150 CEI	ruly that the following addition	nai operations records for this
P	ram were property each of	and the incensed operator stated of visit, appropriate treatment process performa	nce records. Furthermore	James to retain these of	records of amounts of chemi	cais used and chemical feed
13	nes, and (2) is applicable	railable for review upon request.	BICE TECOIOS. POLITICATINOTE,	agree to retain these ac	ditional operations records at	the plant site for at least ten
У	sats and to make intelligi	Anabie to texten upon request.				
	1/11/11/1	April 07,2010	Roger Holsapple		7437.0	
=		April 01,2010	Printed or Typed Name			
S	ignature and Date		rrinteo or Typed Name		License Nu	mber

DEF Form 82-555-900(3) Effective August 26, 2003

Means	of Achie	of for the Mo eving Four-U Radiation	og Virus Inc	f: March 26 sctivation/Remo (Describe):		X]Free C	hlorin	e Chio	rine Diox	ide	Ozone	c Cor	nbined Chlorine (Chloramines)
Type	f Disinfe	ectant Residu	al Maintain	ed in Distribution	n System:	[X] Free	Chlor	ine	Combin	ed Chlor	ine (Chlo	ramines)	Chlorine Dioxide
.,,,,,,	1 13 13 11 1		C	T Calculations, or L	JV Dose, to Der	nonstrate Fo	ur-Log	Virus Inactiv					
ŀ					CT Calcula						Dose		
Day of	Hours	Net Quantity		Lowest Residual Disinfectant Concentration (C) Before or at First	Dismfectant Contact Time (T) at C Messurement Point During	Lowest CT Provided Before or at First Customer During	lemp . ol	pH of		Operating	Minimum UV Dose Required,	Lowest Residual Desinfectant Concentration at Remote Point in	Emergency or Abnormal Operating Conditions: Rev
the	Plant in	Water	Peak Flow	Customer During	Peak Flow	Peak Flow,	Wate	Water, if	Required	mW-	mW-	Distribution	or Maintenance Work that Involves Taking Water
	Operation		Rate, and	Peak Flow, mg/L	minutes	mg-min/l.	r, c	Applicable				System, mg/L	System Components Out of Operation
	24	309,000					, ,		1			0.7	-22-rom components car to operation
2	24	260,000		1					1			0.7	Collected 2 Bac't samples
3	24	277,000										0.5	Collected 4 Bac't samples
4	24	263,000											TTHM/HAAS-changed PRV -hydro tank inspection
5	24	297,000										0.8	
6	24	279,000										0.5	
7	24	394,000										0.6	
- 8	24	308,000			I				l			0.6	
9	24	294,000		I					l			0.6	
10	24	265,000		l	I .'							0.7	
_11	24	311,000										0.6	Installed a new meter for Well #2
12	24	211,000		<u></u>		L					L	1.0	
13	24	248,000		1	<u> </u>			ļ				0.5	
14	24	343,000				<u> </u>			<u> </u>	ļ		0.7	
15	24	289,000				└		 					Flushed hydrants 122,000 asi
16	24	272,000					<u> </u>				ļ	0.6	
17	24	296,000					_	ļ <u> </u>				0.7	
18	24	277,000		ļ	<u> </u>	├──		 	 	ļ		0.6	
19	14	253,000				 	_	 		_		0.6	
20	24	231,000	 			 						1.2	
21	24	405,000	ļ		 							1.1	
22	24	266,000		 	 	 	 					0.8	
23	24	269,000	 		 	 	├					0.9	Fluxhed hydrants144,400 gai
24	24	266,000	ļ				 			ļ	 	0.8 D.7	Flushed hydrants \$20,000 gal
25	24	259,000	1	 		 -	1					0.7	
26 27	24	262,000 263,000	 			 	+				 	0.7	
28	24	393,000	 	·		 	+	 	}	-	ļ	0.8	
29	24	233,000	 	+		 	-	 		ļ		0.8	
30	24	268,000	 	1								0.7	Flushed hydranta 216,000 gal
31	21	272,000	 				 						Flushed hydrants 216,000 gal
	49	4/4,000	l	1		1	<u> </u>	ì	1	1		10.44	r remieu nyuranis zie, con gai



DEP Forms 62-555 900(3) Erective August 26, 2003

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

See page 4 for instructions. 1. General Information for the Month/Year of: April 2010 Public Water System (PWS) Information PWS Name: Wedgefield Utilities Water Treatment Plant
PWS Type: Community Non-Transient Non-Community PWS Identification Number: 3480149 Consecutive PWS Type: Transient Non-Community Number of Service Connections at End of Month: 1,608 Total Population Served at End of Month: 5,628 PWS Owner: Wedgefield Pluris-Wedgefield Contact Person's Title: Lead Operator Contact Person: Roger Hoisapple Contact Person's Mailing Address: 3100 Bancroft Blvd. City: Orlando State: Fi Zip Code: 32833 Contact Person's Telephone Number: 407-259-6991 Contact Person's Fax Number: 407-568-7869 Contact Person's E-Mail Address: rholsapple@utilitypartnersllc.com B. Water Treatment Plant Information Plant Name: Wedgefield Utilities Water Treatment Plant Plant Telephone Number: 407-568-6787 City: Orlando State: FI Zip Code: 32833 Plant Address: 20449 Mansfield St. Type of Water Treated by Plant: Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1.037 MGD
Plant Category (per subsection 62-699.310(4), F.A.C.): III Plant Class (per subsection 62-699.310(4), F.A.C.): C License Class Day(s)/Shift(s) Worked License Number Licensed Operators Name Lead/Chief Operator: Roger Holsapple C 7436 Tuesday-Saturday John Coffee Monday-Friday Other Operators: Paul Tzereff 17612 Sunday-Thursday II. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plant site for at least ten years and to make them available for review upon request. Roger Holsapple 7436-C Signature and Date Printed or Typed Name License Number

III. D	aily Dat	a for the Me	onth/Yenr	of: April 2010				gefield Uti					
				activation/Remo	vai. #	X Free C	hlonin	m Chi	rine Dio				
		Radiation	Other	(Describe):	, va.	A FIGE C	morm	e Chic	orine Dio	kide	Ozon	e Co	mbined Chlorine (Chloramines)
			al Maintair	ed in Distribution	- F	V F	011	 					
Type (ווויפוע זכ	ectanii Kesidi	IN MAINTED	T Calculations and	on System:	X Free	Chlo	rine	Combin	ed Chlor	ine (Chlo	ramines)	Chlorine Dioxide
			<u> </u>	T Calculations, or 1	CT Calcul	monstrute Fo	Mr-Liv	Virus inactiv	ntion, if Ap	plicable			
				T	C r Calcul	Lowest CT	-			UV	Dose]	
1		i		1	DisInfectant	Provided	1	l			1	Lowest	ì
		!		Lowest Residual	Contact Time	Before or			ĺ	1	ŀ	Residual	
				Disinfectant	(T) at C	at First				Linvoei	NA 1-1	Disinfectant	
		Net Quantity		Concentration (C)	Measurement	Customer	Temp		Minimum		Minimum UV Dose	Concentration at Remote	1
Day of	Hours	of Finished		Before or at First	Point During	During	. of	pli of		UV Dose			Parameter About 10
the	Plant in	Water	Penk Flow	Customer During	Peak Flow,	Peak Flow,	Wate	Water, if	Required.	mW-	mW-	Distribution	Emergency or Abnormal Operating Conditions, Rep or Maintenance Work that Involves Taking Water
Month	Operation 24	Produced, gal 322,000	Rate, and	Peak Flow, mg/L	minutes	mg·mm/L.	r, °C	Applicable	mg-min/L	sec/om²		System, mg/L	System Components Out of Operation
1	24	237,000										0.4	573000 Components Out of Operation
	24	318,000				<u> </u>						0.3	
4	24	390,000		·								0.5	
5	24	311,000		 								1.6	
6	24	364,000	- 11				_				-	1.0	
7	24	331,000										1,2	2 Bac't samples
8	24	310,000											4 Bac't samples
9	24	310,000										0.8	
10	24	325,000										0.7	
11	24	458,000										0.8	
12	24	382,000											1000 10 -1 1
13	24	257,000											5,000 gal flushed(polishers) 5,000 gal flushed(polishers)
14	24	356,000										0.6	TTHM/HAA5 samples 8,000 gal flushed (polishers)
16	24	363,000 360,000										0.6	4,000 gal flushed(polishers)
10	24	308,000					_1					0.8	5,000 gal flushed(polishers)
18	24	482,000					_					1.1	The state of the s
19	24	336,000										0.9	
20	24	261,000					-	-				1.3	
21	24	285,000					-					1.0	
22	24	341,000										0.8	
23	24	300,000								\longrightarrow		1.1	
24	24	301,000							+			1,6	
25	24	454,000					\rightarrow					1.4	
26	24	289,000							+			1.2	
27	24	263,000										0.8	
28	24	310,000											D. S.
29	24	363,000											Bac't sample
30	24	352,000										0.6	Bac't sample flushed 95,000 gal(broken pipe)
		10.020.000											·
Total Average		10,039,000 323,039											
		343,037											

Maximum 482,000

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

DEP Form 62-656 900(3) Effective August 26, 2003



DEP Form 62-555-900(3) Effective August 78 - 2003

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

Sec	page 4 for instructions.					
ī.	General Information f	or the Month/Year of: May 2010				
Α.	Public Water System (P	WS) Information				
- [PWS Name: Wedgefie	ld Utilities Water Treatment Plant			PWS Identification No	ımber: 3480149
- 1	PWS Type:	Community Non-Transient Non-Commu	nity 🔲 Transie	nt Non-Community	Consecutive	
	Number of Service Con	nnections at End of Month: 1,608		Total Population Set	ved at End of Month: 5,628	
	PWS Owner: Wedgefor	eld Pluris-Wedgefield				
	Contact Person: Roger			Contact Person's Tit	le: Lead Operator	
	Contact Person's Maili	ng Address: 3100 Bancroft Blvd		City: Orlando	State: Fl	Zip Code: 32833
	Contact Person's Telep	hone Number: 407-568-2112		Contact Person's Far	Number: 407-568-7869	
	Contact Person's E-Ma	il Address: rholsapple@utilitypartnerslic.com				
B.	Water Treatment Plant					
		ld Utilities Water Treatment Plant			Plant Telephone Num	ber: 407-568-6787
	Plant Address: 20449			City: Orlando	State: Fl	Zip Code: 32833
	Type of Water Treated		urchased Finished \	Water		
	Permitted Maximum D	Day Operating Capacity of Plant, gallons per day	v: 1.037 MGD			
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): III			section 62-699.3 [0(4), F.A.C.): (
	Licensed Operators	Name		License Number	Day(s)/Shift(s) Worked
	Lead/Chief Operator:	Ruger Holsapple	C	7436	Tuesday-S	murday
	Other Operators:	John Coffee		6614	Monday-	Friday
		Paul Tzareff	C	17612	Sunday-T)	nursday
				<u>'</u>		
	1	 				
				ļ		
		<u> </u>				
	l. Certification by Lea	d/Chief Onerator				
	the undersigned water to	eatment plant operator licensed in Florida, am t	ne lead/chief operate	or of the water treatme	ent plant identified in Part I of th	is report. I certify that the
in	formation provided in th	is report is true and accurate to the best of my k	nowledge and belief	f. I certify that all drin	king water treatment chemicals	used at this plant conform to
N	SF International Standar	d 60 or other applicable standards referenced in	subsection 62-555.3	320(3), F.A.C. 1 also	certify that the following addition	nal operations records for this
		iny that a licensed operator staffed or visited thi				
		, appropriate treatment process performance rec	ords. Furthermore,	I agree to retain these	additional operations records at	the plant site for at least ten
3.4	ears and to make them as	nilable for review upon request.				
_			Holsapple		7436-C	
Si	ignature and Date	Printe	d or Typed Name		License Nu	nber

III, Di	aily Dau	for the Mo	nth/Year o	f: May 2010									
deans	of Achie	ving Four-L	og Virus Iru	activation/Remo	val: *	X Free C	hlorin	e Chlo	rine Diox	ide	Ozone	Cor	mbined Chlorine (Chloramines)
		Radiation		(Describe):	_								
Type C	f Disinfe	ctant Residu		ed in Distribution		X Free					ne (Chlor	ramines)	Chlorine Dioxide
-			C	T Calculations, or t	V Dose, to Der	nonstrate Fo	ur-l.og	Virus Inactis	ation, if Ap	pheable*			
	ļ	[CT Calcula					(IV	Dose		
	}					Lowest CT	İ					Lowest.	
					Disinfectant Contact Time	Provided Before or					1	Residual	
ì	1	1		Lowest Residual Disinfectant	(T) at C	at First) [M.n.m.m	Lamont		Distrifectant Concentration	
		Net Quantity		Concentration (C)	Measurement	Customer	1emp				UV Dosc	at Remote	
Day of	Hours	of Finished		Before or at First	Point During	During	of	pH of		LV Dosc.	Required		Emergency or Abnormal Operating Conditions; Rep
the	Plant in	Water	Pesk Flow	Customer During	Penk Flow,	Peak Flow.	Wate	Water, if	mg-	mW-	mW-	Distribution	or Maintenance Work that Involves Taking Water
Month]	Operation	Produced, gal	Rate, gpd	Peak How, mg/L	minutes	mg-min/L	r, ℃	Applicable	min/L	sec/cm ³	see/cm ²	System, mg/l.	System Components Out of Operation
	24	328,000		<u></u>			أبسا					0.9	
2	24	371,000										0.8	
3	24	468,000			<u></u>							0.6	
4	24	352,000		· · · · · · · · · · · · · · · · · · ·					L			0.3	
-5	24	341,000	· · · · · · · · · · · · · · · ·				<u> </u>					0.8	2 Bac't samples
_6	24	386,000		 									4 Bac't samples Chlorides sample flushed 15,00
. 7	24	281,000											Flushed 15,000 gal.
-	24	317,000 462,000							 			1.3	
9	24	390,000		 			-		├			1.1	22. 3 . 15 666 .
10	24 24	316,000		· -	·				 				Flushed 12,000 gal. Flushed 8,000 gal.
12	24	325,000		 			-						Flushed 20,000 gal.
13	24	447,000					-						Flushed 4,000 gal
14	24	400,000							 				Flushed 5,000 gal.
15	24	346,000	····						 			0.8	T TORRED STORE BUT.
16	24	752,000		1								0.7	
17	24	363,000					1		1				Nitrate and Nitrite samples Flushed 5,000 gal.
18	24	275,000											Flushed 5,000 gal
19	24	325,000											Flushed 10,000 gal
20	24	373,000											Flushed 10,000 gai
_21	24	340,000											Flushed 5,000 gal.
22	24	338,000										1.6	
23	24	510,000										1.2	
24	24	497,000										0.9	Flushed 10,000 gal
25	24	438,000											Flushed 5,000 gat
26	24	312,000			L		\Box		1				Flushed 5,000 gal.
27	24	399,000							ļ				Flushed 10,000 gal
28	24	387,000					<u> </u>						Flushed 15,000 gal
29	24	374,000		ļ			ļ					0.7	
30	24	444,000 460,000					<u> </u>				L	0.8	
31												1.3	

DEP Form 62-555 900(3) Effective August 28, 2013



See page 4 for instructions.

	16.						
1.	General Information	for the Month/Year of: June 2010					
Ā.	Public Water System (F	WS) Information					
	PWS Name: Wedgefie	eld Utilities Water Treatment Plant				PWS Identification N	Jumber: 3480149
	PWS Type:	Community Non-Transient Non-	-Communic	y Transie	nt Non-Community	Consecutive	
		nnections at End of Month: 1,619				rved at End of Month: 5,666	
	PWS Owner: Wedgefi	eld Pluris-Wedgefield					
	Contact Person: Roger				Contact Person's Til	tle: Lead Operator	
		ing Address: 3100 Bancroft Blvd			City: Orlando	State: Fl	Zip Code: 32833
	Contact Person's Telep	phone Number: 407-568-2112			Contact Person's Fa	x Number: 407-568-7869	
	Contact Person's E-Ma	ail Address: rhoisapple@utilitypartnersl	lc.com				
В.	Water Treatment Plant	Information					
		eld Utilities Water Treatment Plant				Plant Telephone Num	ber: 407-568-6787
	Plant Address: 20449				City: Orlando	State: Fl	Zip Code: 32833
	Type of Water Treated	by Plant: 🔀 Raw Ground Water	☐ Purc	hased Finished \	Water		
		Day Operating Capacity of Plant, gallons	s per day: 1.	.037 MGD			
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): III			Plant Class (per sub	section 62-699.310(4), F.A.C.):	C
•	Licensed Operators	Name		License Class	License Number	Day(s)/Shift	
	Lead/Chief Operator:	Roger Holsapple		C	7436	Tuesday-5	Saturday
	Other Operators:	John Coffee		С	6614	Monday-	Friday
		Paul TzarcfT		С	17612	Sunday-T	hursday
				<u> </u>			
				<u> </u>			
		L					
	· L			<u> </u>			
		<u> </u>		<u> </u>	<u> </u>		
7	I. Certification by Lea	d/Chief Operator			 _		
		entment plant operator licensed in Florid	da am the k	ad/chief operate	of the water treatme	ent plant identified in Dort Lofth	is report. I specific that the
ı, in	formation provided in th	is report is true and accurate to the best	of my know	ledge and belief	. I certify that all driv	iking water treatment chemicals	used at this plant conform to
N	SF International Standar	rd 60 or other applicable standards refere	enced in sub	section 62-555.3	20(3), F.A.C. also	certify that the following addition	nal operations records for this
pl	ant were prepared each	day that a licensed operator staffed or vi-	sited this pla	ant during the me	onth indicated above:	(1) records of amounts of chemi	cals used and chemical feed
18	tes: and (2) if applicable	appropriate treatment process performa	ance records	s. Furthermore,	I agree to retain these	additional operations records at	the plant site for at least ten
VI	ears and to make them as	vailable for review upon request.		·	ū		, , , , , , , , , , , , , , , , , , ,
•	1 11 1	· /					
	the Maleton	3016 <u>7-7-10</u>	Roger Hol	lsapple		7436-C	
š	ignature and Date		Printed or	Typed Name		License Nu	mber

DEP Form 62-666 900(3) Effective August 26 2003

vicans	of Achie	eving Four-L Radiation	og Virus In	of: June 2010 activation/Remo (Describe):)va); *	X Free C	hlorir	e Chlo	rine Dio	ide	Ozoni	e Cor	mbined Chlorine (Chloramines)
Vare o	f Disinfe	ctant Residu		ed in Distributio	n System:	X Free	Chlo	ine	Combin	ed Chlor	ine (Chlo	ramines)	Chlorine Dioxide
7,7~	77 (51,52			T Calculations, or L	IV Dosc, to De				ation. f An	plicable"		1	Citiotitie Diuxide
- 1		- 1			CT Calculi	itions					Dosc	İ	1
Day of the Month	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, god	Lowest Residual Distinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Wate 1, °C	pH of Water, if Applicable	Minimum CT Required, mg- min/L	Operatina	Minimum UV Dose Required, mW- sec/cm ²	at Remote	Emergency or Abnormal Operating Conditions; Rep or Maintenance Work that involves Taking Water System Components Out of Operation
1	24	353,000										1.1	Physhed
2	24	364,000		ļ								0.8	3,000 Flushed Fire Hydran:
3	24	341,000										1.6	
4	24	369,000										1.0	
5	24	352,000		ļ									8,000 Flushed Fire Hydrant
6	24	488,000		 								1.2	
7	24	327,000		 								2.7	
8	24	327,000		·									2 Bac't samples
9	24	332,000		ļ									4 Bac't samples
10	24	391,000		 								2.1	
11	24	409,000										2.1	
12	24	363,000		 									17,700 Flushed Fire Hydrant
13	24	650,000										0.8	
14	24	427,000										1.3	
15	24	385,000										1.4	
16	24	327,000										1.5	
[7	24	366,000										1.7	
18	34	349,000									<u> </u>	1.7	
19	24	272,000										1.6	
20	24	464,000										1.3	
21	24	282,000		·								1,7	
22	24	296,000										1.6	
23	24	332,000										1.2	
24	24	342,000											12,000 Flushed Hydrants
25	24_	383,000											12,000 Flushed Hydrants
26	24	433,000										0.9	
27	24	456,000											5,900 Flushed Fire Hydrant
21	24	314,000		-								1.3	
29	24	329,000											5,900 Plushed Fire Hydrant
30	24	313,000		1 .		i	- {					1.0	

Maximum 650,000

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

DEP Form 62-565 900(3) Effective August 26, 2003



DEP Form 82-655 900(3) Effective August 26, 2003

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

See page 4 for instructions. I. General Information for the Month/Year of: July 2010 A. Public Water System (PWS) Information PWS Name: Pluris- Wedgefield Water Treatment Plant PWS Identification Number: 3480149 ☐ Transient Non-Community Consecutive Number of Service Connections at End of Month: 1,632 Total Population Served at End of Month: 5,712 PWS Owner: Pluris-Wedgefield Contact Person's Title: Lead Operator Contact Person: Roger Holsapple Contact Person's Mailing Address: 3100 Bancroft Blvd City: Orlando State: Fl Zip Code: 32833 Contact Person's Telephone Number: 407-568-2112 Contact Person's Fax Number: 407-568-7869 Contact Person's E-Mail Address: rholsapple@utilitypartnerslic.com Water Treatment Plant Information Plant Name: Pluris-Wedgefield Water Treatment Plant Plant Telephone Number: 407-568-6787 Plant Address: 20449 Mansfield St. City: Orlando Zip Code: 32833 Type of Water Treated by Plant: Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1.037 MGD Plant Category (per subsection 62-699.310(4), F.A.C.): III Plant Class (per subsection 62-699.310(4), F.A.C.): C License Class Name Licensed Operators License Number Day(s)/Shift(s) Worked Lead/Chief Operator: Roger Holsapple 7436 Tuesday-Saturday John Caffee 6614 Other Operators: Monday-Friday Paul TzarefT c 17612 Sunday-Thursday II. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plant site for at least ten years and to make them available for review upon request. John Coffee C-6614 Signature and Date Printed or Typed Name License Number

Page I

111. 17	ally Dat	n for the Mo	nth/Year o	f: July 2010									
🗆 UN	raviolet	Radiation	Other (activation/Remo (Describe):		X Free C	hlorin	e Chlo	rine Diox	tide	Ozone	e Cor	mbined Chlorine (Chloramines)
Гуре	of Disinfe	ectant Residu	ıal Maintain	ed in Distribution	on System:	X Free			Combine	ed Chlor	ine (Chlo	ramines)	Chlorine Dioxide
			C	T Calculations, or U			ur-Log	Virus Inactiv	ution, if Ap	plicable*			
- 1		1			CT Calcul				,	UV	Dosc	1	
Day of	Hours	Net Quantity of Finished		Lowest Residual Disinfectant Concentration (C) Before or at First	Disinfectant Contact Time (T) at C Measurement Point During	Lowest CT Provided Before or at First Customer During	Temp	pH of	Minimum CT Regulacd	Lowest Operating UV Dose,	UV Dose	Lowest Residual Disinfectant Concentration at Remote Point in	Emergency or Abnormal Operating Conditions; Rep
the	Plent in	Water	Peak Flow	Customer During	Posk Flow,	Peak Flow	Wete	Water, If	mg-	mW-	mW-	Distribution	or Maintenance Work that Involves Taking Water
Month	Operation		Rate, god	Peak Flow, mg/l.	minutes	mg-min/L	ı, C	Applicable	mm/l_	sec/cm ²	sec/cm³	System, mg/L,	System Components Out of Operation
)	24	340,000					L		<u> </u>			.8	
2	24	321,000										.7	
_3	24	283,000										1.7	
4	24	417,000							ļ			1.5	
5	24	236,000					\vdash						2 Bac,1
6	24	279,000		ļ									4 Bac,t
7_	24	327,000										1.7	
8	24	321,000 341,000						-	├──			1,3	
9	24	353,000		 			-						1,500 Flushed
10	24	490,000		 								.9 1.1	
- 12	2	285,000		 								1.4	
13	24	280,000		 							—		TTHMs & HAA5 Sample
14	24	306,000	-									1.0	1 171 MS & PACKS Sumple
15	24	319,000					\rightarrow					0	
16	24	306,000										<u></u>	
17	24	388,000										1.3	
18	24	416,000							-			1.2	
19	24	383,000										1.8	Bac,t Taken for Plant Outage
20	24	342,000											Bac,t Taken for Plant Outage
21	24	406,000										1.1	
22	24	418,000										1.2	
23	24	349,000										1.0	· · · · · · · · · · · · · · · · · · ·
24	24	313,000										1.0	
25	24	502,000										1.3	
26	24	334,000										1.9	
27	24	350,000		ļ						·		1.5	
28	24	423,000		ļ								1.0	500 Brush Fire Orange Co F&R
_ 29	24	433,000										.9	
30	24	411,000										1.1	
31	24	457,000 11,129,000		<u> </u>								1.9	
Total													

Maximum 502,000

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

DEP Form 62-556-900(3) Effective August 26, 2003



069 Form (\$7-555-90003) Effective August 28 - 2003

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

ec	page 4 for instructions.					
ī. (General Information (for the Month/Year of: August 2016	ð			
F	Public Water System (P	WS) Information				
	PWS Name: Wedgefie	ld Utilities Water Treatment Plant			PWS Identification N	lumber: 3480149
Ī	PWS Type: X C	Community Non-Transient Non-	-Community Transier	nt Non-Community	Consecutive	
ſ	Number of Service Co.	nnections at End of Month: 1,620		Total Population Serv	ed at End of Month: 5,670	
ſ	PWS Owner: Wedgefie	eld Pluris-Wedgefield				
Ī	Contact Person: Roger	Holsapple		Contact Person's Title		
ſ	Contact Person's Maili	ng Address: 3100 Bancroft Blvd		City: Orlando	State: FI	Zip Code: 32833
Ī	Contact Person's Telep	phone Number: 407-568-2112		Contact Person's Fax	umber: 407-568-7869	
		il Address: rholsapple@utilitypartnersl	ic.com			
	Water Treatment Plant					
[Plant Name: Wedgefie	ld Utilities Water Treatment Plant			Plant Telephone Num	
[Plant Address: 20449			City: Orlando	, State: Fl	Zip Code: 32833
Į	Type of Water Treated		Purchased Finished V	Vater		
- {	Permitted Maximum I	Day Operating Capacity of Plant, gallon	s per day: 1.037 MGD			
- [Plant Category (per su	bsection 62-699.310(4), F.A.C.): III			ction 62-699.310(4), F.A.C.):	C
. [Licensed Operators	Name	License Class	License Number	Day(s)/Shift	(s) Worked
	Lead/Chief Operator:	Roger Holsappic	. с	7436	Tuesday-	Saturday
- [Other Operators:	John Coffee	C	6614	Monday	-Friday
	.,	Paul Trareff	C	17612	Sunday-1	hursday
				<u></u>		
ł						
ļ						
				L		
-	Certification by Lea	J/Ch is CO services				
	Certification by Lea	reatment plant operator licensed in Flori	dy any the lead chief approve	rest the seuter treatmen	t plant identified in Part Lof th	is report. I cortify that the
		his report is true and accurate to the best				
		d 60 or other applicable standards refer				
		day that a licensed operator staffed or vi				
		appropriate treatment process perform				
Ven	rs and to make them a	vailable for review upon request.				
	<i>(</i> :	<i>U</i>				
	1 1.1 11/2	Sant 9. Erica	Roger Holsapple		7436-C	
Sin	nature and Date		Printed or Typed Name		License Nu	unber
.,.	b pilot krait					

PWS	dentifica	tion Number	3480149		Pl	ant Name:	Weds	gefield Util	ities Wat	er Treatn	nent Plan	<u> </u>	
III. D	aily Date	for the Mu	nth/Year o	f: August 20	10				., 10,				
Means	of Achie	ving Four-1.	og Virus In	activation/Remo	oval: *	X Free C	hlorin	e Chlo	rine Diox	ide	Ozon	Cor	mbined Chlorine (Chloramines)
⊒υı	raviolet	Radiation	Other ((Describe):									,
				ed in Distribution	on System:	X Free	Chlor	ine	Combine	ed Chlori	ne (Chlo	ramines)	Chlorine Dioxide
pv .	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			T Calculations, or 1							110 (01)10		Ciliornic Dioxide
- 1					C T Calcul						Dose		
- 1		:		Ţ	·	Lowest CT			1		1	Lowest	
					Disinfectant	Provided					1	Residual	
i					Contact Time	Hefore or	1	i			į.	Disinfectant	
İ		· [Disinfectant	(T) at C	at First						Concentration	
		Net Quantity		Concentration (C)			lenip		, CT		UV Dose	at Keineste	
)as of the	Hours Plant in	of hinished Water	Peak Flow	Before or at First Customer During	Peak Flow,	Peak Flow.	Wate	pttof Water, if	Required. mg-	mW	n.W.	Distribution	Emergency or Abnormal Operating Conditions, Repr or Maintenance Work that Involves Taking Water
Month.		Produced, gal	Rate, spd	Peak Flow, mg/l.	piniutes	ing-min/L		Applicable	muvit.	sec/cm²	1	System, mg/L	System Components Out of Operation
1	24	555,000	KING, MAI	Tak I io w, mg/t.	,,,,,,,,,,,		' '	- proceedit	Trille L.	TEC:CIII	Sec.cui	I I	System Companions can or esperation
2	24	254,000				ļ			-			2.0	
3	24	303,000		 								14	2 line's samples
4	24	350,000					r—	j	T			1.2	4 Bac't samples
5	24	383,000										1.2	Bleach delivers
6	24	378,000		T								1.7	Service line break 75,000 gal
7	24	457,000										0.8	
8	24	341.000										1.0	
9	24	289,000			L							0.9	Blench delivery
10	24	313,000				I						1.1	2 Buc't samples service line outage
11	24	321,000										2.0	2 Bac't samples service line outage
12	24	341,000			<u>i </u>		<u> </u>	, 				1.5	Bleach delivery
13	24	351,000			<u> </u>	<u> </u>		·	L			1.2	
14	24	312,000				ļ <u></u>		<u> </u>	<u> </u>			1.3	
15	24	555,000		<u> </u>	<u> </u>	<u> </u>		i	<u>. </u>		· · · · · · · · · · · · · · · · · · ·	1.2	[
16	24	301,000		 	<u> </u>	<u> </u>			 	· · · · · · · · · · · · · · · · · · ·		1.3	
17	24	308,000		 		 	<u> </u>		-			1.7	
18	24	331,000				 						1.3	
19	24	415,000											Bleach delivery
20	24	303,000		·		 				 _		14	
21	24	121,000			ļ	 	-	 -				09	Switched flow to aeration due to lightening strike
23	24	578.000 249.000	 		 -	 						0.0	
23	24	279,000					-					10	
25	24	293,000			 	 -						0.9	<u></u>
26	24	318,000		 	 						 	11	Bleach delivery MIEX back on line
27	24	278.000		+	 	 	-		-			1.8	integral fictively willest filter on the
28	24	294,000	 		 	t ———	! -				 	1.6	
29	24	486,000	 	-1	 		 					1.7	
30	24	197,0(K)	 		 	†	:		+			17	
31	1 24	284,000	 		 		•					2.1	
iotal	<u> </u>	10.538.000	+					L			I.,		
AVETR	zc	339,935	1										
Maxin		578 mm	1										

[|] Maximum | \$78,000 |
| Refer to the instructions for this report to determine which plants must provide this information.

DEP Force 62-556 900(3) Effective August 2F 2003



.,,,,	page - in mandetona.					
i.	General Information	for the Month/Year of: September	2010			
۸.	Public Water System (F	WS) Information		_		
		dgefield Water Treatment Plant			PWS Identification Nur	nber: 3480149
	PWS Type: 🔯 (ommunity Non-Transient Non-	-Community Transie	nt Non-Community	Consecutive	
	Number of Service Co	nnections at End of Month: 1,620		Intal Population Server	d at End of Month: 5,670	
	PWS Owner: Pluris-V	edgefield				
	Contact Person: Roge	r Holsapple		Contact Person's Title:	Lead operator	
	Contact Person's Maili	ng Address: 3100 Bancroft Blvd		City: Orlando	State: Ff	Zip Code: 32833
	Contact Person's Teler	shone Number: 407-568-2112		Contact Person's Fax N	umber: 407-568-7869	
	Contact Person's E-Ma	iil Address: rholsapple@utilitypartners	lle.com			
В.	Water Treatment Plant					
	Plant Name: Pluris-We	edgefield Water Treatment Plant			Plant Telephone Number	r: 407-568-6787
	Plant Address: 20449			City: Orlando	State: Fl	Zip Code: 32833
	Type of Water Treater	I by Plant: X Raw Ground Water	Purchased Finished	\(\lambda\) ater		
	Permitted Maximum [Day Operating Capacity of Plant, gallon	s per day: 1.037 MGD			
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): III		Plant Class (per subsect	ion 62-699.110(4), F.A.C.); C	
	Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s)	Worked
	Lead/Chief Operator:	Roper Holsupple	(7436	Lucsday-Sag	the state of the s
	Other Operators	John Coffee	C	0614	Monday-Fri	idey
		Paul Tzareff	C	17612	Sunday-Thu	sdav
					 :: - 	
	ŧ.			·		· · · · · · · · · · · · · · · · · · ·
						rante salama i i i i i i i i i i i i i i i i i i
						
r::						
111	. Certification by Les	d/Chief Operator			or the state of th	
1.1	the undersigned water tr	catment plant operator licensed in Flori	da, am the lead chief operato	rot the water treatment p	dant identified in Part Lof this r	eport. I certify that the
ini	formation provided in the	is report is true and accurate to the best	of my knowledge and benef.	I certify that all dranking	g water treatment chemicals use	ed at this plant conform to
N:	SF International Standar	d 60 or other applicable standards refer	enced in subsection 62-555.3	20(3), F.A.C. Talso certi	ly that the following additional	operations records for this
P	an were prepared each	day that a licensed operator staffed or vi	isned this plant during the me	inth indicated above: (1)	records of amounts of chemical	is used and chemical feed
		appropriate treatment process perform	ance records. Furthermore, I	agree to retain these add	litional operations records at the	plant site for at least ten
yc	ars and to make them?	vailable for review upon request.				
_	12011	6.16				
_	Just all	- Cet 6, 2010_	John B Coffee. Jr		6614-C	
*	spature and Dalu		Printed or Typed Name		License Numb	er
	4		D			
	P. Form 60-551-900(3) Miles August 26-2003		Page 1			

<u>Pws</u>	Identific	tion Numbe	r. 3480149			ant Name: Wer
TIL.	Daily Dat	a for the Ma	onth/Vous o	of: Septemb		
Mean	of Achi	evine laural	os View In	activation/Renx	2010	IXIFree Chloric
(10	drawinler	Radiation	T / Whom	activation/relia: (Describe):	rviti:	A Price Chiom
			Conici	(17escribe).		
1. AIC	ni ryisitii	Cuant Kesici	191 Minural	ed in Distribute	ni System:	[X] Free Chlc
1			} <u></u>	T Calculations, or I		
1				T	CT Calcul	Lowest CT
Ì				ł	Disinfectant	Provided
1				Lowest Residual	Contact Lane	
}				Disintectant	(T) at C	at Fust
}	}	Not Quantity		Concentration (C)	Measurement	Customer Fem
Day of	Hours	of Emished		Before or at larst	Point Daring	During of
the	Plant m	Water	Peak Flow	Customer During	Penk Flow,	Peak Flow, Wate
•	Operation		Rate, gpd_	Peak How, mg/l	minutes _	mg-min/L t. "L
	24	145,000		 	ļ _	
	24	381,000		<u> </u>		
1	77	347,000				-
5	2.4	571.000				
6	24	217,000				···
7	24	344,000				
K	24	284 000				· ·
9	24	351,000		†		
10	24	264,000		i- -		
	24	293,000				-
<u>□</u> [2].	34	434,000				
	24	314,000				
<u> </u>	24	286,000				
13	24	134,000				
16	24	178,000				
17	24	348,000	<u> </u>	ļ. — — -		
18	24	312,000				
20	24	506.000 365.000		 	i	
21-	24	303,000		{		
22	21	358,000				
23	24	449,000				
24	74	318,000				—— —
25	24	281,000				
26	24	461,000				
27	24	287,000				
_2x _	24	302,000				
24	24	296,000		ļ		
30	24	300,000		ļ. ———		
	L			J		
Averag		10,427,000				
Maxim		347,566 571,(H)O				
Arterium		3 (17/4/4)				

Musimum 571,000 !
• Refer to the instructions for this report to determine which plants must provide the

IICP Fum 62 555 900(3) Ffluctive Argust 29, 2003



See page 4 for instructions. I. General Information for the Month/Year of: October 2010 A. Public Water System (PWS) Information PWS Name: Pluris-Wedgefield Water Treatment Plant PWS Identification Number: 3480149 Community Non-Transient Non-Community PWS Type: Consecutive Transient Non-Community Number of Service Connections at End of Month: 1,620 Total Population Served at End of Month: 5,670 PWS Owner: Pluris-Wedgefield Contact Person's Title: Lead operator Contact Person: Roger Holsapple Contact Person's Mailing Address: 3100 Bancroft Blvd City: Orlando Zip Code: 32833 State: F1 Contact Person's Telephone Number: 407-568-2112 Contact Person's Fax Number: 407-568-7869 Contact Person's E-Mail Address: rholsapple@utilitypartnersllc.com Water Treatment Plant Information Plant Telephone Number: 407-568-2112 Plant Name: Pluris-Wedgefield Water Treatment Plant Plant Address: 20449 Mansfield St. City: Orlando State: F1 | Zip Code: 32833 Raw Ground Water Purchased Finished Water Type of Water Treated by Plant: Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1.037 MGD Plant Category (per subsection 62-699.310(4), F.A.C.): III Plant Class (per subsection 62-699.310(4), F.A.C.): C Day(s)/Shift(s) Worked License Class License Number Licensed Operators Name 7436 Lead/Chief Operator: Roger Holsapple C Tuesday-Saturday John Coffee 4136 Monday-Friday Other Operators: 17612 Paul Traces Sunday-Phursday 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 retain these additional operations records at the plant site for at least ten years and to make them available for review upon request. John B Coffee, Jr. 6614-C Printed or Typed Name ignature and Date License Number

Page I

		m lot me wid	mib/Year (of: October 20	10								
Un	raviolet	Radiation	Other	activation/Remo (Describe):		[X]Free C	hlorir	e Chlo	rine Dio	kide	Ozun	e JCe	ombined Chlorine (Chloramines)
ype o	of Disinfe	ectant Residu	al Maintain	ed in Distributio	n System:	Free	Chlo	rine	IXICom	hined C	dorine (C	hloramines)	
				"I Calculations, or I	JV Dosc, to De	monstrate l-c	ur-Log	Virus Inactiv	ation if Ar	niscanie*	not ne (c	inoramines)	Chlorine Dioxide
	i	1 .			CT Calcul	tions					Dose	†	
ay of the	Hours Plant in	Net Quantity of Finished Water	Peak Flow	Lowest Residual Dissolectant Concentration (C) Before or at First Customer During	Disinfectant Contact Tune (1) at C Measurement Point During Peak Flow,	Lowest CT Provided Before or at First Customer During Peak Flow,	Temp of Wate	pH of Water, if	Minimuni CT Required,	Lowest	Minimum UV Dose	Lowest Residual Distribution at Remote Point in Distribution	Emergency or Abnormal Operating Conditions, Repa
<u>10</u> nth	24	Produced, gat	Rate, gpd	Peak Flow, mg/L	MUNAL ES	mg-muvi.	1. °C	Applicable	mg-mnn/l	sec/cm²	10C/Cm	System, mg/l	or Maintenance Work that involves Taking Water System Components Out of Operation
2	24	269,000										9 -	System Companients Out or Caperation
-	24	372,000 338,000									[12	
4	24	366,000		<u> </u>		- 1					[]	q	
5	24	312,000]	16	
6	24	283,000					_						Bact's
7	24	398,000											liect's
8	24	442,000										1.	Bleach Deliver TTHM&HAAS Sample
9	24	391,000											Chloride Sample
10	24	451,000											
11	24	479,000					-					1.2	
12	24	397,000					-		—	—		2.9	
13 T	24	418,000										1.2	
14	24	478,000										13	
15	24	469,000										. 17	Hiesch Deliver
\$6	24	287,000								····		. !	
17	24	489,000											10,000 Flushed
18	24	481,000					†	۱ ا	· · · •	·		13	
19	24	363,000										1.5	
20	24	436,000										17	
21	24	424,000								+			March Dall
22	24	457,000										1.6	ileach Deliver
23	24	497,000			1							16	
24	24	495,000					-					1.2	
25	24	512,000										1.5	
26	24	388,000										13 +	
27	24	459,000]									1.7	
28	_24	391,000									-		Black Deliver
29	24	480,000									-1-		0,000 Flushed
30	24	455,000 611,000					I					1.6	***************************************
31 T													

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

DEP Form 62-565 900(3) Effective August 28, 2003



DEP Form 82-555 990(3) Effective August 28, 2003

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

_	page 4 for instructions.							
1	General Information	for the Month/Year of: November 20	010					
Á.	Public Water System (F	WS) Information						
Ī	PWS Name: Pluris-We	edgefield Water Treatment Plant				PWS_Id	entification N	umber: 3480149
	PWS Type:	Community Non-Transient Non-	Community	Transie	nt Non-Community	Consecutive		
	Number of Service Co	nnections at End of Month: 1,620			Total Population S	erved at End of Mo	nth: 5,628	
	PWS Owner: Pluris-V							
į	Contact Person: Roge	r Hoisapple			Contact Person's T	itle: Lead operator		
	Contact Person's Mail	ng Address: 3100 Bancroft Bivd			City: Orlando		State: Fl	Zip Code: 32833
	Contact Person's Telet	phone Number: 407-568-2112			Contact Person's F	ax Number: 407-56	8-7869	
	Contact Person's E-Mi	ail Address: rhoisapple@utilitypartnersl	lc.com					
В.	Water Treatment Plant	Information						
-	Plant Name: Pluris-W	edgefield Water Treatment Plant				Plant Te	lephone Num	ber: 407-568-6787
	Plant Address: 20449	Mansfield St.			City: Orlando	State: F		Zip Code: 32833
	Type of Water Treated	by Plant: Raw Ground Water		nased Finished V	Vater			
	Permitted Maximum I	Day Operating Capacity of Plant, gallons	s per day: 1.	037 MGD				
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): III			Plant Class (per su	bsection 62-699.310	0(4), F.A.C.): (C
	Licensed Operators	Name		License Class	License Number		Day(s)/Shift(s) Worked
	Lead/Chief Operator:	Roger Hoisapple		С	7436		Tuesday-S	aturday
	Other Operators:	John Coffee		С	5614		Monday-	Friday
	Olife, Operators.	Paul Tzareff		С	17612		Sunday-Ti	hursday
	1							
				<u> </u>				
	1							
-		J.C.L. O						
11	l. Certification by Les	reatment plant operator licensed in Florid	da am tha la	ad/objet operate	or of the water treatm	nest plant identified	in Dam I of th	is annual Longition that the
I,	the undersigned water to	reasment plant operator hoensed in Florid	of my know	ledge and belief	l certific that all de	iicht piestt jochtisieu inking weier treetm	ent chemicale	is report. I certify that the
in	tormation provided in u	rd 60 or other applicable standards refere	enced in sub-	section 62-555 3	20(3) F.A.C. Lalso	certify that the foil	om enemicais owine additio	nal operations records for this
N	21. Tuteturitioner summer	day that a licensed operator staffed or vis	sited this nla	int during the mu	onth indicated shove	· (1) records of amo	unts of chemi	cals used and chamical feed
b:	ant were prepared each	e, appropriate treatment process perform	ance records	. Furthermore.	l agree to retain thes	e additional operation	ons records at	the plant site for at least ten
111	res; and (x) is abbrezon	vailable for review upon request.						are practication for all loads test
	gnature and Date	12/8/300	John B Co	effee,Jr			6614-C	
<u>ور</u>	Concessor and Date	12/8/2000	Printed or	Typed Name			License Nu	mber
31	Rustale and Date	,		2				

PWS I	dentifica	tion Number	r: 3480149		P	ant Name:	Pluri	s-Wedgefi	eld				
II D	ally Dat	for the Mo	nth/Year o	f: November 2	2010								
deene	of Achie	wine Four-I	oe Vinus In	activation/Remo	oval: *	[X]Free C	hlorin	e Chic	rine Diox	ride	Ozon	- Car	mbined Chloring (Clt
Time	enviolet	Radiation	Other	(Describe):		[]			25,01	1.00	OZOIF	c Coi	mbined Chlorine (Chloramines)
				ed in Distribution	on Combons	Erro	Chlor		(V)C	his a d Oil		31	
ype (M Dining	CUARIC INCISION	SEL MENTILE	T Calculations, or l	IV Desa so Da				AJCON	ioinea Ci	ntorme (c	hloramines)	Chlorine Dioxide
				- Calcarators, or (CT Calcul	ations	ui - Luig	Alter media	attion, if Ap		Dose	4	
			~~~	<del> </del>	l Cromon	Lowest CT		Τ	7		DOSE	Lowest	
1				,	Disinfectant	Provided		ł	ŀ	1		Residual	
				Lowest Residual	Contact Time	Before or	1	F		İ	1	Disinfectant	
- 1				Distrifectant	(T) N.C	ut Pirst			Minimum	Lowest	Minimum		
		Net Quantity		Concentration (C)	Measurement		Temp		CT	Operating	UV Dose	at Remote	
Day of	Hours	of Finished	0-4.5-	Before or at First	Point During	During	of	pH of			Required,	Point in	Emergency or Abnormal Operating Conditions; Rep
the	Plant in	Water	Peak Flow	Customer During Peak Flow, mg/L	Peak Flow, minutes	Peak Flow, mg-mus/L	Wate r, °C	Water, if Applicable	mg-	mW-	mW-	Distribution	or Maintenance Work that Involves Taking Water
Moath	Operation	Produced, gal	Rate, apd	FWAK FROW, HMg/L	SKIMPIER	miR-tunAT	"."	Applicable	min/L	sec/cm²	sec/cm ²	System, mg/L	System Components Out of Operation
2	24	389,000		<del> </del>		† · · · · ·	<u> </u>		† · — —			1.2	
	24	340,000		<u> </u>					<del>                                     </del>			.9	2 Bact's Taken
-3-	24	364,000		<u> </u>									4 Bact's Taken Bloach Delivered
	21	311,000										1	2 Deer 1 1 seet interest TritlActed
6	24	359,000										1,3	
Ť	24	425,000										1.4	<del></del>
<u> </u>	24	330,000							T			1.3	
<del>-</del>	24	292,000										1.2	25,000 Flushed
ÍO	24	340,000										1.4	
11	24	399,000		Ĭ								1.3	Bleach Delivered
12	24	370,000											
13	24	349,000		<u> </u>								1.4	
14	24	458,000		<u> </u>								1.6	
15	24	398,000		<u> </u>								2.8	
16	24	345,000		<b> </b>					<b></b>			2.4	
17	24	357,000							<del>  </del>				25,000 Flushed
18	24	388,000	<b>├</b> -	<del> </del>	<del>                                     </del>				<del>  </del>				Bleach Delivered
19	24	300,000	<u> </u>		<del> </del>		<del></del>		<del>  </del>			1.2	
20	24	497,000		<del> </del>	<del> </del>				<del> </del>			1.1	
21	24	326,000 373,000	<del>-</del>	<del> </del>	<del> </del>				-			1.2	
22	1 24 -	333,000	<del></del>	<u> </u>								2.5	
24	1 24	362,000		<del>                                     </del>									Bleach Delivered
- <del>25</del>	1 24	379,000		† · · · · ·								1.4	Diemit Carringto
26	24	369,000	<del></del>									1.8	
27	24	328,000		1								2.2	
28	24	357,000		T								2.2	
29	24	434,000	T	1	1	I							35,000 Flushed
30	24	214,000	1	T								1.4	
<u> </u>	1												
Total		11,008,000											
Aven	et c	355,097	]										
Maxi		502,000											

Maximum 502,000

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

DEP Form 82-855 900(3) Effective August 26, 2003



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

See page 4 for instructions. 1. General Information for the Month/Year of: December 2010 A. Public Water System (PWS) Information PWS Name: Pluris-Wedgefield Water Treatment Plant PWS Identification Number: 3480149 Community Non-Transient Non-Community Transient Non-Community PWS Type: Consecutive Number of Service Connections at End of Month: 1,620 Total Population Served at End of Month: 5,628 PWS Owner: Pluris-Wedgefield Contact Person's Title: Lead operator Contact Person: Roger Holsapple Contact Person's Mailing Address: 3100 Buncroft Blvd City: Orlando State: Fl Zip Code: 32833 Contact Person's Telephone Number: 407-568-2112 Contact Person's Fax Number: 407-568-7869 Contact Person's E-Mail Address: rholsapple@utilitypartnersile.com Water Treatment Plant Information Plant Name: Pluris-Wedgefield Water Treatment Plant Plant Telephone Number: 407-568-6787 Plant Address: 20449 Mansfield St. City: Orlando State: FI Zip Code: 32833 Raw Ground Water Type of Water Treated by Plant: Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1.037 MGD Plant Category (per subsection 62-699.310(4), F.A.C.): III 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: Roger Holsapple 7436 Tuesday-Saturday John Coffee C. 6614 Monday-Friday Other Operators: Greg Hooper 8178 Sunday-Thursday II. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead-chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plant site for at least ten years and to make them available for review upon request. John B Coffee,Jr 6614-C Printed or Typed Name Signature and Date License Number

PWS.	dentifica	ation Numbe	r: 3480149		P	ant Name	Plur	is-Wedge ii	eld				
111. 0	aily Dat	a for the Me	onth/Venr	of: December 2	2010								
				nactivation/Remo		X Free C	11						
	muialet	Radiation	Og Viius II	(Describe):	yai.	X Jusce C	HOLI	se Chic	rine Dio	xide	Ozon	e Co	mbined Chlorine (Chloramines)
<u></u>	Taviolei	Radiation	Oiner	(1)escribe):									
Type (	of Disinf	ectant Residu	ial Muintair	ned in Distribution	on System:	Free	Chlo	rine	[X]Com	ibined Cl	hlorine (C	hloramines)	Chlorine Dioxide
				T Calculations, or l	V Dase, to De	monstrate Fe	ur-L.og	Virus Inactiv	ation, if ∆p	plicable*		T	I Dioxide
1					CT Calcul	ections.				υν	Dose	1	
										[		Ī	
		ĺ		į.		Lowest CT	!	i	1				•
					Dismfectant	Provided	t	l	(	l	[	Lowest	[
				Lowest Residual	Contact Lime	Helore or		1		ļ		Residual	Í
				Disinfectant	(T) at C	pt First			Minununt	Lowest	Minimum	Disinfectant Concentration	
		Net Quantity		Concentration (C)	Measurement	Customer	1 cmp	1	CT		UV Dose	at Kennute	
Day of l	Hours	of l'inished		Hefore or at First	Point During	()mmg	. 01	pl 1 64°	Required.	UV Dosc.		Point in	Linergency or Abnormal Operating Conditions; Re
Month	Plant in	Water Produced, gal	Peak Flow Ruic, gnd	Customer During Peak Flow, mg/f.	Peak Flow,	Peak How.	₩ mtc	Water, il	mg-	mW-	mW-	Distribution	or Maintenance Work that involves Taking Water
1	24	277,000	KING, KING	Peak Flow, mg/1.	mmules	ing-min/l	r, "(`	Applicable	min/l	sec/cm	sec/cm ²	System, mg/i.	System Components Out of Operation
2	24	324,000		<del></del>		<del> </del>	<del> </del>	<del></del>	<del> </del> -		<del> </del>		
3	24	290,000		<del>}</del>					<del> </del>		<del></del>	12	Bleach Deliver
4	24	340,000										.7	
	24	411,000		<del></del> _					<del> </del>		<del></del>	1.1	
6	24	322,000		†- <del></del>					<del> </del>		<del></del> i	1.5	
7	24	316,000							·		<del> </del>	2.5	2 Death 7-1-s
8	24	285,000									<del>  </del>		2 Bact's Taken 4 Bact's Taken
9	24	336,000											Hieror Deliver
10	24	299,000							·		·	1.2	Milesti Meliati
11	24	368,000										1.3	
12	24	411,000										18	
13	24	315,000										) 8	
14	24	306,000										1.7	
16	24	300,000										7	
17	24	294,000 280,000											Heach Deliver
18	24	304,000		<del> </del>								t t	
19	24	321,000		<del></del>								1.3	
20	24	275,000										13	
21	24	244,000		<del></del>								1.3	
22	24	278,000										1.6	
23	24	301,000										-	Bleach Deliver
24	24	265,000										- 12	SIGNETI ENCHAGE
25	24	320,000									<del></del>		
26	24	350,000										1.9	
27	24	297,000										2	
28	24	260,000										2	
29	24	307,000										1.7	hanged Sterner Tubing
30	24	303,000											Bleach Deliver
_الـ	24	289,000		l								i	
Otal		9,588.000											
Average		309,290											
Maxum	ım :	411,000											

DEP Form 62 555 800(3) Effective August 28, 2003

PWS Identification Number: 3480149	Plant Name Pluris - Wedge Field Water The Specific Plant
IV. Summary of Use of Folymer Confuturing V	ctylamide, Polymer Containing Enjehlorohydrin, and troa or Manganeye Souggete ast by the N
Is any polymer containing the monomer <u>acrylan</u> follows:	nide used at the water treatment plant? 🔀 No 🗌 Yes, and the polymer dose and the acrylamide level in the polymer are as
Polymer Dose, ppm =	Acrylamide Level, % =
<ol> <li>Is any polymer containing the monomer <u>epichlo</u> polymer are as follows:</li> </ol>	prohydrin used at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the
Polymer Dose, ppm =	Epichlorohydrin Level, % =
. Is any iron or manganese sequestrant used at the	e water treatment plant? No Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:
Type of Sequestrant (polyphosphate or sodium	silicate): 13/ ended Ortho Polyphosophere
Sequestrant Dose, rng/L of phosphate as PO4 or	
If sodium silicate is used, the amount of added	plus naturally occurring silicate, in mg/L as SiO ₂ =
- acrylamide, polymer containing epichlorohydrin,	with the monthly operation report for December of each year and only for water treatment plants using polymer containing , and/or an iron and manganese sequestrant. ased on the polymer manufacturer's certification or on third-party certification.

## 2011 MORs



See page 4 for instructions. J. General Information for the Month/Year of: January 2011 A. Public Water System (PWS) Information PWS Name: Wedgefield Utilities Water Treatment Plant
PWS Type: Community Non-Transient PWS Identification Number: 3480149 Non-Transient Non-Community Consecutive Transient Non-Community Number of Service Connections at End of Month: 1,621 Total Population Served at End of Month: 5,674 PWS Owner: Wedgefield Pluris-Wedgefield Contact Person's Title: Lead Operator Contact Person: Roger Holsapple State: F1 Contact Person's Mailing Address: 3100 Bancroft Blvd City: Orlando Zip Code: 32833 Contact Person's Telephone Number: 407-568-2112 Contact Person's Fax Number: 407-568-7869 Contact Person's E-Mail Address: rhoisapple@utilitypartnerslic.com B. Water Treatment Plant Information Plant Name: Wedgefield Utilities Water Treatment Plant Plant Telephone Number: 407-568-6787 Plant Address: 20449 Mansfield St. City: Orlando State: Fl Zip Code: 32833 Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1.037 MGD Plant Category (per subsection 62-699.310(4), F.A.C.): III Plant Class (per subsection 62-699.310(4), F.A.C.): C License Class License Number Day(s)/Shift(s) Worked Licensed Operators 7436 Lead/Chief Operator: Roger Holsapple C Tuesday-Saturday John Coffee • 4414 Monday-Friday Other Operators: C B178 Sunday-Thursday Gregory Hooper IL Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. 1 also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates, and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plant site for at least ten years and to make them available for review upon request. Roger Holsapple 7436-C Printed or Typed Name License Number Signature and Date

Page I

DEF Form 62-555.900(3) Efective August 28, 2003

7 11	OI ACDIE	rving Four-L.	og Virus In	f: January 26 activation/Remo	val: *	X Free C	hlorin	e Chlo	rine Diox	ide	Ozone	e Cot	mbined Chlorine (Chloramines)
1 1 1 1 1 1 1 1	aviolet !	Radiation	Other	(Describe):									Chiorana (Chiorananica)
vne o	F Disinfe	ctant Residu	al Maintain	ed in Distributio	n System:	X Free			Combin	d Chlori	ine (Chlor	ramines)	Chlorine Dioxide
7P. T			C	T Calculations, or L	IV Dose, to Det		ur-Log	Virus Inactiv	ition, if Ap	plicable*			
1					CT Calcula					ŪV	Dose	}	
						Lowest CT	ĺ				[	Lowest	
1				l	Disinfectant	Provided Before or						Residuel	
				Lowest Residual Disinfectant	Contact Time (T) at C	at First				Lowest	Minimum	Disinfecture Concentration	
i		Net Owntity		Concentration (C)	Measurement.	Customer	Temp		Minimum			at Remote	
Day of	Hours	of Finished		Before or at First	Point During	During	. of	pH of	CT		Required,	Point in	Emergency or Abnormal Operating Conditions, Res
	Plent in	Water	Peak Flow	Customer During	Peak Flow,	Peak Flow,	Wate	Water, if	Required,	mW-	mW-	Distribution	or Maintenance Work that Involves Taking Water
	Operation		Rate, gpd	Peak Flow, mg/L	minutes	mg-min/L	r, °C	Applicable	mg-min/L	sec/cm ²	sec/cm ²	System, mg/L	System Components Out of Operation
1	24	378,000		L	<u> </u>						<u> </u>	1,1	
2	24	366,000										2.1	
3	24	309,000									L	2.2	
4	24	259,000						ļ				2.6	
5	24	285,000		<b></b>				ļ			ļ		2 Bac't Samples
6	24	298,000		<del></del>	ļ			<del> </del>					4 Bac't Samples
7	24	265,000					<b>—</b>	-			<del> </del>	1.0	· · · · · · · · · · · · · · · · · · ·
3	24	279,000		ļ			_				<del>                                     </del>	1.0	
9	24	368,000		<del> </del>			_					1.8	
10	24	327,000 253,000									<del>  </del>	1.7	-
11	24 24	275,000		<del> </del>				·				1.9	
12	24	291,000		· · · · · · · · · · · · · · · · · · ·			i —	<del> </del>			l	1.8	
13	24	269,000		<del>                                     </del>							i		24,800 gallons flushed
15	24	277,000			<del>                                     </del>							1.2	
16	24	399,000									Ĭ	1.8	
17	24	284,000										2.2	
18	24	306,000											15,000 galions finshed
19	24	262,000					1					1.7	
20	24	288,000				ļ <u>.</u>	<u> </u>				ļ		15,000 galkons flushed
21	24	251,000		<u> </u>			ļ	ļ				1.0	
22	24	284,000			<u> </u>	<b> </b>	<del> </del>	ļ ————			<b></b>	1.0	
23	24	323,000	<b> </b>	<del> </del>	ļ	<del> </del>	├	<del> </del>				1.4	15 000
24	24	301,000	ļ <u> </u>	·	<del>                                     </del>	<del></del>					$\vdash$ $\dashv$	1.6 2.0	15,000 galions flushed
25_	24	304,000	ļ	<del></del>	<del></del>			<del></del>			<del> </del>	1.9	<del></del>
26	24	282,000	<del></del>		<del>                                     </del>	<del> </del>	-				<del>                                     </del>	1.4	
27_	24	259,000	<del> </del>	<del> </del>	<del> </del>	<del> </del>	<del>                                     </del>				<del>                                     </del>	1,2	
28	24	241,000 399,000	<b>-</b>	+			1				<del>-</del>	1.4	
29		224,000	<del>                                     </del>		<del></del>	<b></b>	$\vdash$					1.5	
30	24	309,000	<del> </del>	<del> </del>								2.0	
31													

[|] Maximum | 399,000 | * Refer to the instructions for this report to determine which plants must provide this information.

DEP Form 62-665.900(3) Effective August 25, 2003



DEP Form 82-855,800(3) Effective August 26, 2003

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

See page 4 for instructions. I. General Information for the Month/Year of: February 2011 Public Water System (PWS) Information PWS Identification Number: 3480149 PWS Name: Wedgefield Utilities Water Treatment Plant Non-Transient Non-Community Transient Non-Community Consecutive ✓ Community Total Population Served at End of Month: 5,621 Number of Service Connections at End of Month: 1,621 PWS Owner: Wedgefield Pluris-Wedgefield Contact Person's Title: Load Operator Contact Person: Roger Holsapple State: FI Zip Code: 32833 City: Orlando Contact Person's Malling Address: 3100 Bancroft Blvd Contact Person's Fax Number: 407-568-7869 Contact Person's Telephone Number: 407-568-2112 Contact Person's E-Mail Address: rholsapple@utilitypartnersitc.com B. Water Treatment Plant Information Plant Telephone Number: 407-568-6787 Plant Name: Wedgefield Utilities Water Treatment Plant City: Orlando State: FI Zip Code: 32833 Plant Address: 20449 Mansfield St. Type of Water Treated by Plant: Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1.037 MGD Plant Class (per subsection 62-699.310(4), F.A.C.): C Plant Category (per subsection 62-699.310(4), F.A.C.): III Day(s)/Shift(s) Worked License Class License Number Licensed Operators 7436 Tuesday-Saturday Lead/Chief Operator: Roger Holsupple Monday-Friday 6614 John Coffee C Other Operators: C 217R Sunday-Thursday Greg Hooper II. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. 1 also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plant site for at least ten years and to make them available for review upon request. 1 11.1 Roger Holsapple 7436-C License Number Printed or Typed Name Signature and Date

PWS	dentifica	tion Number	: 3480149		Pi	ant Name:	Wed	gefield Uti	lities Wat	er Treatm	nent Plan	I	
110	- Un Dat	n fam Alica Ma	-Ab/W	of: February 2	011					<del></del> -			
Manny	Of Achi	a jor the Mg	ou Virus In	activation/Remu	011 vul: •	X Free C	blorin	e Chie	rine Diox	ide	Ozon	Car	mbined Chlorine (Chloramines)
1 th	raviolet	Radiation	Other	(Describe):	war.	A TILE C	11107 111	c cinc	A IIIC 1210X	iuc	(72,01)	c Coi	nomed Chlorine (Chloramines)
				red in Distribution	m Svetam:	X Free	Chlor	rine	Combine	ed Chlor	ine (Chlo	rominer)	Chlorine Dioxide
Type	21 12131111	cciam Reside		"I Calculations, or I							ne (Cino	amiles/	Chlorine Dioxide
		•		. I C MCCIMITORIS, VIII	CT Calcul		<u></u>	VIII.	, 11 · cp		Dose	i	
				Lawest Residual Disinfectant	Disinfectant Contact Time (T) at C	at First					Minimum		
1		Net Quantity		Concentration (C)				-11-4	Minimum			at Remote	
Day of the	Hours Plant in	of Finished Water	Peak Flow	Before or at hirst Customer During	Point During Peak Flow	During Feat Flow.	. a! W∎tc	pHot Water if	CT Required.	mW-	Required,	Point in Distribution	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water
		Produced, gal	Rate, and	Peak Flow, mg/L	minutes	ing min.l.		Applicable			sec/cm2	System, mg/L	System Components Out of Operation
1	24	291,000				!		, ,			1	1.3	Salari Congestion States Coperation
2	24	276,000										1.3	Collected 2 Bac't samples
3	24	257,000										1.5	Collected 4 Bac't samples
4	24	253,000				ļ <u>.</u>						1.2	
_5_	24	277,000			ļ	<b></b> -					<del></del>	1.4	
6	24	350,000				<del> </del>	L		<del>                                     </del>		<del> </del>	2.0	
7 B	24	304,000 269,000			ļ		<u> </u>		<del> </del> -	<b></b>	<del>!</del>	1.6	
9-	24	282.000		<del>                                     </del>	<del></del>				<u> </u>	<u> </u>	<del>}</del> -	1.6	
10	24	253,000		<del>                                     </del>	<del> </del>	<del>                                     </del>					<del> </del> -	2.1	
<del></del>	24	259,000		·   ·		$\vdash$			<del> </del> -		<del> </del>	20	
12	24	289,000		<del> </del>							ļ	1.7	
, 13	24	327,000				<u> </u>		\				2.2	
14	24	320,000										2.5	
15	24	281,000										1,9	Flushed 7,500 gal.
16	24	284,000		<u> </u>			<u> </u>		ļ			1.6	
17	24	300,000		<del>                                     </del>	ļ			·				1.1	
18	24	273.000 291.000		·	<del></del>		<u> </u>				<del>                                     </del>	1.7	
20	24	416,000			<del></del>						<del> </del>	1.2	
21	24	290,000		<del>                                     </del>	t	<del></del>			· · · · · · ·	-	<del> </del>	2.5	
22	24	335,000		+		<del> </del>	1	<u> </u>	† <del></del>	<del></del>	<del> </del>	2.3	<del></del>
23	24	323,000				<u> </u>							Flushed 200,000 gal.
24	24	381,000										1.0	Flushed 172,800 gal
25	24	318,000										2.8	
26	24	368,000									1	1,0	
27	24	392,000	ļ			<u> </u>						0.8	
28	24	421,000			ļ						ļ	0.9	Flushed 31,800 gat.
	<del> </del>		-		<b></b>	<del> </del>							
	<del> </del>				<del> </del>		<del>                                     </del>				<del></del> -		
Total	1	8,680,000		J.,	l. <del></del>		L	L		I———	1		
Averus		310,000	1										

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

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



See page 4 for instructions. i. General information for the Month/Year of: | March 2011 Public Water System (PWS) Information PWS Name: Wedgefield Utilities Water Treatment Plant
PWS Type: Community Non-Transient Non-Community PWS Identification Number: 3480149 Consecutive Transient Non-Community Number of Service Connections at End of Month: 1,621 Total Population Served at End of Month: 5,621 PWS Owner: Wedgefield Pluris-Wedgefield Contact Person: Roger Holsapple Contact Person's Title: Lead Operator State: FI Zip Code: 32833 Contact Person's Mailing Address: 3100 Bancroft Blvd City: Orlando Contact Person's Telephone Number: 407-568-2112 Contact Person's Fax Number: 407-568-7869 Contact Person's E-Mail Address: rholsapple@utilitypartnerslic.com B. Water Treatment Plant Information Plant Name: Wedgefield Utilities Water Treatment Plant Plant Telephone Number: 407-568-6787 Plant Address: 20449 Mansfield St. City: Orlando State: FI Zip Code: 32833 Type of Water Treated by Plant: Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1.037 MGD Plant Category (per subsection 62-699.310(4), F.A.C.): III Plant Class (per subsection 62-699.310(4), F.A.C.): C Licensed Operators Day(s)/Shift(s) Worked License Class License Number Name Lead/Chief Operator: Roger Holsepple 7436 Tuesday-Saturday C Other Operators: John Coffee 6614 Monday-Friday 8178 Sunday-Thursday Greg Hooper IL Certification by Lend/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 1 of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plant site for at least ten years and to make them available for review upon request. 7436-C Roger Hoisapple

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Page 1

License Number

Printed or Typed Name

Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycle   Cycl	] Ulu	raviolet F	Radiation	Uj Other (	activation/Remo Describe):		X Free C			rine Diox		Ozon		nbined Chlorine (Chloramines)
Net Questity   Pound in Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak   Peak	уре о	f Disinfe	ctant Residu	al Maintain	ed in Distributio	n System:				Combine	d Chlori	ne (Chlo	remines)	Chlorine Dioxide
Note   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composition   Composi				C	T Calculations, or U			ur-Log	Virus Inactiv	etion, if Ap				
Net Quantity   Peach Flow   Post of Finished   Peach Flow   Peach Flow   Post of Quantity   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Peach Flow   Pe			L			CT Calcule					UV	Dose	ļ	
2 24 314,000	the	Plant in	of Finished Water Produced, gal		Disinfectant Concentration (C) Before or at First Customer During	Contact Time (T) at C Measurement Point During Peak Flow,	Provided Before or at First Customer During Peak Flow,	. of Wate	Water, if	CT Required,	Operating UV Dose, mW-	UV Dose Required, mW-	Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repu or Maintenance Work that Involves Taking Water System Components Out of Operation
3 24 345,000														
4   24   284,000	. 2	24			L									
3	3	24			l					L				
6 24 339,000 9 9 8 8 24 303,000 9 11.1 9 9 14 305,000 9 5 4 905,000 9 9 8 9 8 9 9 9 9 9 9 9 9 9 9 9 9 9	4	24												Flushed 3000 gallons
7 24 371,000 9 9 1 1.1 1 1.1 9 9 1 1.1 1 9 9 1 1.1 1 9 9 1 1.1 1 9 9 1 1.1 1 9 1 1.1 1 9 1 1.1 1 9 1 1.1 1 9 1 1.1 1 9 1 1.1 1 9 1 1.1 1 9 1 1.1 1 9 1 1.1 1 9 1 1.1 1 9 1 1.1 1 9 1 1.1 1 9 1 1.1 1 9 1 1 1.1 1 9 1 1 1.1 1 9 1 1 1 1	5	24												
B   24   303,000	6	24	339,000										.t	
9 24 305,000	7	24	371,000				I						.9	
9 24 395,000	R	24	303,000					I					1,1	
10	- 0				Ĭ								.5	
1									i	· · · · · ·			.6	
12				· · · · · · · · · · · · · · · · · · ·	1		ŀ						.4	Replaced Motor #3 Well
13   24   275,000					· · · · · · · · · · · · · · · · · · ·					i				
14					1							1	4	
15					1									<del></del>
16					-									
17   24   369,000					·	1	i e							
18						1								Bleach Deliver New cl2 nump on Post cl2
19   24   369,000				<del></del>	<del> </del>									Create Deliver tress did pump cui i coi cia
20 24 433,000				<del>                                     </del>		†				<del></del>				<del></del>
21   24   428,000				· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>	1	<del></del>		·			-	<u> </u>	······································
22     24     335,000     .5       23     24     407,000     .9       24     24     388,000     .6     Bleach Deliver Flushed 11,300 gallons       25     24     367,000     .5     .5       26     24     423,000     .5     .5       27     24     493,000     .5     .5       28     24     422,000     .8     .8       29     24     271,000     .5     Changed PRV Flushed 12,000 Hydro Tank       30     24     328,000     .6       31     24     269,000     .7					<del></del>	1	· · · · · ·						7	
23   24   407,000   9   9     24   24   388,000   6   8isach Deliver Flushed 11,300 gallons     25   24   367,000   5     26   24   423,000   5     27   24   493,000   5     28   24   422,000   5     29   24   271,000   5     30   24   328,000   5     31   24   269,000   7				<del> </del>		<del></del>				<del>   </del>				
24     24     388,000     .6     Bleach Deliver Flushed 11,300 gallons       25     24     367,000     .5       26     24     423,000     .5       27     24     493,000     .5       28     24     422,000     .8       29     24     271,000     .5       30     24     228,000     .5       31     24     269,000     .7				<del> </del>	<del> </del>		<del> </del>							
25 24 367,000				<del> </del>	+	<del> </del>		†						Steach Deliver Flushed LL 300 callune
26     24     423,000     .5       27     24     493,000     .5       28     24     422,000     .8       29     24     271,000     .5       30     24     328,000     .6       31     24     269,000     .7				<del> </del>	+	<del> </del>		<b>-</b>	<del></del>					Owners Treated Liested 11'200 Resorts
27 24 493,000 .5 28 24 422,000 .8 29 24 271,000 .5 Changed PR ∨ Flushed 12,000 Hydro Tank 30 24 328,000 .6 31 24 269,000 .7				$\vdash$	+	<del> </del>	<del></del>	1		<del> </del>	-	<del> </del>		
28     24     422,000     .8       29     24     271,000     .5     Changed PR V Flushed 12,000 Hydro Tank       30     24     328,000     .6       31     24     269,000     .7	_			<del> </del>		<del> </del>		+-						
29     24     271,000     .5     Changed PR V Flushed 12,000 Hydro Tank       30     24     328,000     .6       31     24     269,000     .7				<del></del>	<del></del>	<del> </del>	-		<b></b>	· · · ·				
30 24 328,000 .6 31 24 269,000 .7				<del> </del>	<del></del>	<del> </del>	<del> </del> -	<del> </del>		ļ		<del> </del>		(7
31 24 269,000				ļ	<b>_</b>	<del> </del>	<del> </del>			<b></b>				Changed PRV Flusined 12,000 Hydro Tank
31 27 20,000		34	1 328.008	1				1					.6	
				<del></del>	<del> </del>	<del></del>								<del></del>

[|] Average | 351,323 |
| Maximum | 563,000 |
| Refer to the instructions for this report to determine which plants must provide this information.

DEP Form 62-555 900(3) Effective August 26, 2003



DEP Form 62-555 900(3) Effective August 26, 2000

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

See page 4 for instructions. I. General information for the Month/Year of: April 2011
A. Public Water System (PWS) Information PWS Identification Number: 3480149 PWS Name: Wedgefield Utilities Water Treatment Plant Community Non-Transient Non-Community Transient Non-Community Consecutive PWS Type: Number of Service Connections at End of Month: 1,621 Total Population Served at End of Month: 5,674 PWS Owner: Wedgefield Pluris-Wedgefield Contact Person: Roger Holsapple Contact Person's Title: Lead Operator Contact Person's Mailing Address: 3100 Bancroft Blvd City: Orlando State: Fl Zip Code: 32833 Contact Person's Telephone Number: 407-568-2112 Contact Person's Fax Number: 407-568-7869 Contact Person's E-Mail Address: rholsapple@utilitypartnersllc.com B. Water Treatment Plant Information Plant Name: Wedgefield Utilities Water Treatment Plant Plant Address: 20449 Mansfield St. Plant Telephone Number: 407-568-6787 City: Orlando State: Fl Zip Code: 32833 Type of Water Treated by Plant: ☑ Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1.037 MQD Plant Category (per subsection 62-699.310(4), F.A.C.): Ill Plant Class (per subsection 62-699.310(4), F.A.C.): C License Class License Number Day(s)/Shift(s) Worked Licensed Operators Name Lead/Chief Operator: Roger Hoisappic 7436 Tuesday-Saturday 6614 John Coffee Monday-Friday Other Operators: B178 Greg Hooper Sunday-Thursday II. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plant site for at least ten years and to make them available for review upon request. Roger Holsapple 7436-C Printed or Typed Name License Number Signature and Date

Means	of Achie	eving Four-L	og Virus In	of: April 2011 activation/Remo	val: *	X Free C	hlorin	e Chlo	rine Diox	ide	Ozon	e Cor	nbined Chlorine (Chloramines)
ַ טו	raviolet	Radiation		(Describe):		· · · · · · · · · · · · · · · · · · ·							
Гуре	of Disinfo	ectant Residu	al Maintain	ed in Distributio	n System:	X Free			Combin	ed Chlori	ne (Chlo	ramines)	Chlorine Dioxide
				T Calculations, or I			at-Jos	Virus Inactiv	stion, IFAp				
					CT Colculu					ŲV	Dose	!	
		1			Disinfectant	Lowest CT Provided	į	l				Lowest	
				Lowest Residual	Contact Time	liefore or		ŀ		ĺ	1	Residual	
				Disinfectant	(T) of C	at First				Lowest	Minimum	Disinfectant	
		Net Quantity		Concentration (C)	Measurement	Customer	Temp		Minimon		UV Dose	Concentration at Remote	
Day of	Hours	of Finished		Before or at First	Point During	During	. of	pHo			Required,	Point in	Emergency or Abnormal Operating Conditions; Rep
the	Plant in	Water	Peak Flow	Customer During	Peak Flow,	Peak Flow,	Wate		Required,	m₩-	mW-	Distribution	or Maintenance Work that Involves Taking Water
Month	Operation		Rate, gpd	Peak Flow, mg/L	minutes	mg-min/L	r, *C	Applicable		sec/cm²	scc/cm ²	System, mg/L	System Components Out of Operation
1	24	275,000				L	l :	l ''	] -			0.7	Dysteri Components On or Operation
2	24	306,000										0.8	
3	24	356,000										0.8	·
4	24	386,000			[		L					0.8	
5	24	286,000										0.7	
6	24	274,000				<u></u>						0.6	Collected 4 Bec't samples
7	24	338,000											Collected 2 Bac't samples
1	24	300,000										0,7	
9	24	338,000					<b></b>					0.7	
10	24	446,000										1.0	
11	24	377,000		ļ								0.9	
12	24	364,000		ļ	ļ							0.7	
13	24	356,000		ļ	<u> </u>						L	0.5	
14	24	373,000					Ь	· · · · · · · · · · · · · · · · · · ·				0.6	
15	24	375,000				<u> </u>						0.6	
16	24	332,000			ļ	<u> </u>						0.5	
17	24	456,000	ļ									0.8	
1B	24	468,000 357,000		<del> </del>			<b></b>						Collected VOC & SOC samples
19 20	24	385,000	<del>                                     </del>	-		<del></del>	-					0.8	
20	24	436,000	<del> </del>								<del></del>	0.6	<del></del> _
22	24	439,000	-	<del>                                     </del>			1					0.5	
23	1 24	499,000										0.5	
24	1 24	463,000					_					0.7	
25	24	481,000	<del> </del>	-	† <del></del>		<b>—</b> —					0.5	
26	24	379,000										0.5	<del></del>
27	24	368,000										1.0	
28	24	491,000	1			I						1.4	
29	24	422,000	1	· · · · · · · · · · · · · · · · · · ·			Ī					0.7	· · · · · · · · · · · · · · · · · · ·
30	24	453,000	T									0.5	
	<del></del>	1								-			· · · · · · · · · · · · · · · · · · ·
Total		11,579,000											
Avers	R¢.	373,516	1										
		400 000	1										

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See page 4 for instructions.

1,	General Information	for the Month/Year of:   May 2011	<del></del>								
A.	Public Water System (F	ublic Water System (PWS) Information									
	PWS Name: Wedgefield Utilities Water Treatment Plant PWS Identification Number: 3480149										
	PWS Type:										
	Number of Service Co	rved at End of Month: 5,684									
	PWS Owner: Wedgefi										
	Contact Person: Roger	tle: Lead Operator									
	Contact Person's Maili	ng Address: 3100 Bancroft Blvd	City: Orlando	Zip Code: 32833							
	Contact Person's Telep	phone Number: 407-568-2112	Contact Person's Fax Number: 407-568-7869								
	Contact Person's E-Mail Address: rholsapple@utilitypartnersllc.com										
В.	3. Water Treatment Plant Information										
	Plant Name: Wedgefield Utilities Water Treatment Plant Plant Plant Telephone Number: 407-568-6787										
	Plant Address: 20449		City: Orlando	State: FI	Zip Code: 32833						
Type of Water Treated by Plant: Kaw Ground Water Purchased Finished Water											
		Day Operating Capacity of Plant, gallons per day: 1	.037 MGD	······································		<del></del>					
	Plant Category (per su	section 62-699.310(4), F.A.C.): (									
•	Licensed Operators	Name	License Class	License Number		Day(s)/Shift(s) Worked					
	Lend/Chief Operator:	Roger Holsapple	C	7436	Tuesday-Sa						
	Other Operators:	John Coffee	С	(6)14							
	•	Greg Hooper	C	N17#		Sunday-Thursday					
			T								
						···					
	!		1								
			T								
T		UCL: 40		-							
Щ	. Certification by Lead	I/C niei Operator	<del></del>								
I, the undersigned water treatment plant operator licensed in Florida, am the lead chief operator of the water treatment plant identified in Part I of this report. I certify that the											
information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to											
NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this											
plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed											
rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plan; site for at least ten years and to make them available for review upon request.											
16 / stand 6-2-20/ Roger Holsapple 7436.0											
C#	gnature and Date		Typed Name	7436-C							
31	Elburate and Date 1	Printed of	typea Name	License Number							
DE	P Form 62-555 900(3)		Page 1								
E#	ective August 28, 2003										

PWS Identification Number: 3480149 Plant Name: Wedgefield Utilities Water Treatment Plant													
III. Daily Data for the Month/Year of: May 2011  Means of Achieving Four-Log Virus Inactivation/Removal: * X Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chlorine)													
Means of Achieving Four-Log Virus Inactivation/Removal: * X Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloranines)													
Type of Disinfectant Residual Maintained in Distribution System: X Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide  CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*													
l i			CT Calculations								V Dose		
		}		· · ·	1	Lowest CT		T - T -		100	LOSC	Lowest	
i I		[			Disinfectant	Provided	i	ŀ		1		Residual	
				Luwest Residual	Contact Time	Hefore or				1		Disinfectant	
				Disinfectant	(T) at C	at First	ĺ			Lanvest	Minimum	Concentration	
		Net Quantity		Concentration (C)	Measurement	Customer	Temp				UV Dane	at Remote	
Day of	Hours	of Finished	D -1 P3	Before or at l irst	Point During	During	of	pH of	CT.	UV Dose		Point in	Emergency or Abnormal Operating Conditions, Repair
the	Plant in	Water Development and	Peak Flow	Customer During	Peak Flow, minutes	Peak Flow,	Wate	Water, if	Required	mW-	mW-	Distribution	or Maintenance Work that Involves Taking Water
Month	Operation 24	Produced, gal	Rate, gpd	Peak Flow, mg/L	initiones	mg-mm/l.	l" "	Applicable	nig-must.	sec/cm²	sec/eni ²	5) stem, mg/L	System Components Out of Operation
1-2-	24	567,000			<del></del>	ļ	<del></del> -					0.5	
1	24	407,000		<del> </del>	<del> </del>	····	-	<del></del>				0.4	
-	24	412,000		<del> </del>					-	<del></del>	-	0.5	Collected 2 Bac't samples
5	24	439,000		1			<b></b>		<del></del>	<del></del>			Collected 4 Bac't samples
b	24	326,000		1						<del></del> -	<del>!</del>		Bi-Annual Well testing of both wells Chlorides
7	24	425,000		<u> </u>		· · · · · ·			<u> </u>		<del></del>	06	The Children Ash Lesting of Both Wellie Childrings
*	24	497,000		<del></del>					†			07	
9	24	425,000										0.5	
10	24	385,000							1			0.4	Printary/Secondary Samples taken
- 11	24	442,000			i							0.5	
12	24	532,000		]								0.5	
13	24	160,000										0.5	Flushed 6000 gallon Orange County Fire Dept
]4	24	431.000				Ĺ						0.5	
15	24	381,000			<b></b>		<u> </u>					0.5	
16	24	392,000	ļ <u></u>	<u> </u>	Ļ	<u> </u>	ļ	<u> </u>				0.6	
17	24	336,000		<u> </u>	ļ		<u> </u>						FRWA tested both well meters
18	24	391,000	<del></del>	1	<del>                                     </del>	ļ	-					0 \$	*
19	24	468,000		ļ			<u> </u>	<b></b>	<b></b>		ļ	0.6	
20	24 24	420,000 452,000	<u> </u>	<del> </del>					-			0.5	
21	24	533,000	<b></b>	<del> </del>					-			U.5	
23	24	556,000		<del> </del>		<del> </del>						0.5	
24	24	392,000		<del> </del>	<del></del>	<u> </u>	·	<del>-</del>				0.2	
25	24	430,000	<del> </del>	· · · · · · · · · · · · · · · · · · ·	<del></del>		$\vdash$		<del> </del>		<del>                                     </del>	D.2	
26	24	520,000		1	1	·					<del></del>		Service line leak 10,000 gallons
27	24	431,000				·						0.3	The Tree time teak Tryboo garteris
28	24	349,000	1	<del> </del>	1		! -		1			0.4	
29	24	422,000			]							0.6	
30	24	436,000			L							0.4	
31	74	445,000										0.3	
Total		13,748,000			~~~~~~								
Average		443,484											

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



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

See page 4 for instructions. 1. General Information for the Month/Year of: June 2011 A. Public Water System (PWS) Information PWS Name: Wedgefield Utilities Water Treatment Plant
PWS Type: Community Non-Transient PWS Identification Number: 3480149 Non-Transient Non-Community Transient Non-Community Consecutive Number of Service Connections at End of Month: 1,626 Total Population Served at End of Month: 5,691 PWS Owner: Wedgefield Pluris-Wedgefield Contact Person: Roger Holsapple Contact Person's Title: Lead Operator Contact Person's Mailing Address: 3100 Bancroft Blvd City: Orlando State: FI Zip Code: 32833 Contact Person's Telephone Number: 407-568-2112 Contact Person's Fax Number: 407-568-7869 Contact Person's E-Mail Address: rholsapple@utilitypartnersllc.com B. Water Treatment Plant Information Plant Name: Wedgefield Utilities Water Treatment Plant Plant Telephone Number: 407-568-6787 Plant Address: 20449 Mansfield St. City: Orlando State: FI Zip Code: 32833 Type of Water Treated by Plant: X Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1.037 MGD Plant Category (per subsection 62-699.310(4), F.A.C.): III Plant Class (per subsection 62-699.310(4), F.A.C.): C Name License Class License Number Licensed Operators Day(s)/Shift(s) Worked Lend/Chief Operator: Roger Holsapple 7436 Tuesday-Saturday John Coffee 6614 Monday-Friday Other Operators: Greg Hooper r 8178 Sunday-Thursday 11. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead'chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555,320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) If applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plant site for at least ten years and to make them available for review upon request. 7-5-70 // Roger Holsapple 7436-C

Signature and Date

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Page 1

License Number

Printed or Typed Name

PWSI	dentifica	tion Number	: 3480149		, Pi	ant Name.	Wed	gefield Uti	ities Wat	er Tream	nent Plan	!	
111 1	olly Dat	a for the Mo	outh/Year o	f: June 2011									
Manne	of Achie	ving Four-l	ge Virus In:	activation/Remo	val: *	X Free C	hlorii	e Chir	rine Dio	cide	Ozon	Co	nbined Chlorine (Chlorunines)
I I I I I I	Of Wells	Radiation	Other	(Describe):					· · · · · · · · · · · · · · · · · · ·		02011	e Coi	nomea Chiorine (Chiorinines)
7	Chiame	exact Patid		ed in Distribution	n System:	X Free	Chlo	rine	Combin	nd Chlor	ine (Chlo		Chl. i. Di ii
1 ype c	אנונוצוען זכ	etanii Kesini	tai lasautratu	T Calculations, or l	IV Dose to Do				COMBIN	ou Cinor	ine (Cnio	ramines)	Chlorine Dioxide
l i	i			I CARCOTERIORS, OF C	CT Calcul		107-1-04	A II M2 SITUETIA	atton, it Ap		Ixec		
1				T		Lowest CT	;	:			17.00	Lowest	
				ļ	Disinfectant	Provided	1	i	1	r t		Residual	
1				Lowest Residual	Contact Time	Before or	,	ì	1	İ	}	Disinfectant	
		İ		Disinfectant	(T) at C	at First	)	ļ	•			Concentration	
į '		Net Quantity		Concentration (C)			Temp		Minimum			at Remote	] 
Day of	Hours	of Finished	F1	Before or at First Customer During		During Ponk Flow.	. of Wate	pli of			Required,		Imergency or Abnormal Operating Conditions; Repair
the	Plant in	Water	Peak Flow Rate, and	Peak ! low, mg/L	Peak F.ow minutes	mg-min/l	r, "C	Applicable	Required.		mW-	Distribution	or Maintenance Work that Involves Taking Water
Month		Produced, gal : 390,000	Asic, gpc	reaction, marc	l limates	IIIR-tumber	1	Alabarance	i mig-mm/(.	Men cm	sec/cm	System, mg/l.	System Components Out of Operation
1 2	24	423,000		<del> </del>	<del></del>		<del>i -</del>	<del> </del>			<del></del>	0.2	
- 3	24	373,000		·	<del>                                     </del>		+		<del>†</del>	<u> </u>	, · · · · ·	0.2	
4	24	406,000			<u> </u>		<b></b>	· · · · · · ·	1	ļ		0.3	
5	24	491,000		<del> </del>			<del></del>				<del></del>	0.6	
-6-	24	510,000							· · · · · · · · · · · · · · · · · · ·		<del></del>	D.3	
1 7	24	411,000					1		,		;		4 Bac't samples taken
8	24	407,000										0.5	2 Bac't samples taken
9	24	447,000									1	0.7	
10	24	395,000		l			L					0.2	
11	24	433,000					<u> </u>	<u> </u>				0.4	
12	24	472.000		<u> </u>	<u> </u>		↓	r	<b>.</b>			0.6	
13	24	478,000						<u></u>	<del></del>			0.4	
14	24	447,000		ļ			<u> </u>	<del></del>	!			0.4	
13	24	403,000	<u> </u>	<u> </u>	<u> </u>		Ļ	ļ	ļ,			0.5	
16	24	386,000	ļ	<del> </del>	<del>                                     </del>		<del>!</del>	<del></del>	<u> </u>				Flushed 12,900 gallons
17	24	445,000					<del></del>		<b>├</b> ···			1.5	
18	24	343,000 316,000	<del> </del>	<del></del>	<u> </u>	-		<del></del>	<del> </del>			0.8 0.2	
19	24	398,000	<del> </del>		T	<del></del>	<del> </del>	<del> </del>			<del></del>	1.2	
20	24	322,000	<del> </del>	- <del> </del>		i	<u> </u>	<del>                                     </del>				0.7	
22	24	358,000	† · · · · ·		†		<del> </del>		†			0,2	
23	24	428,000	<del> </del>	<u> </u>				1	1			1.0	
24	24	411,000	<del> </del>		<u> </u>		1					0.6	
25	24	286,000	<del>                                     </del>	1	1							0.6	
26	24	334,000	T									0.3	
27	24	372,000			I							0.2	
28	24	307.000											Flushed 40,000 gallons
29	24	353,000			4				ļ				Flushed 30,000 gallons
10	24	285,000			<u> </u>	<u>'                                    </u>	<b></b>					0.2	
					1		ــــــــــــــــــــــــــــــــــــــ	<u>l</u>			1		
Total		11,830,000	_										
Avera	ne	381,613											

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

See page 4 for instructions. I. General Information for the Month/Year of: July 2011 Public Water System (PWS) Information PWS Name: Wedgefield Utilities Water Treatment Plant
PWS Type: Community Non-Transient PWS Identification Number: 3480149 Consecutive Non-Transient Non-Community Transient Non-Community PWS Type: Number of Service Connections at End of Month: 1,626 Total Population Served at End of Month: 5,691 PWS Owner: Wedgefield Pluris-Wedgefield Contact Person's Title Lead Operator Contact Person: Roger Holsapple Contact Person's Mailing Address: 3100 Bancroft Blvd City: Orlando State: FI Zip Code: 32833 Contact Person's Telephone Number: 407-568-2112 Contact Person's Fax Number: 407-568-7869 Contact Person's E-Mail Address: rholsapple@utilitypartnersllc.com B. Water Treatment Plant Information Plant Name: Wedgefield Utilities Water Treatment Plant Plant Telephone Number: 407-568-6787 Plant Address: 20449 Mansfield St. City: Orlando State: Fl Zip Code: 32833 Purchased Finished Water Type of Water Treated by Plant: Raw Ground Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1.037 MGD Plant Category (per subsection 62-699.310(4), F.A.C.): III Plant Class (per subsection 62-699.310(4), F.A.C.): C License Class License Number Day(s)/Shift(s) Worked Licensed Operators 7436 Lead/Chief Operator: Roger Holsepple Tuesday-Saturday 6614 John Coffee Monday-Friday Other Operators: 8178 Sunday-Thursday Grag Hooper II. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plant site for at least ten years and to make them available for review upon request. Roger Holsappie 7436-C Printed or Typed Name License Number Signature and Date

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PWS I	WS Identification Number: 3480149 Plant Name: Wedgefield Utilities Water Treatment Plant    Daily Data for the Month/Year of:   July 2011													
				6 July 2011										
111. D	BIIA DAII	IDL THE MIN	on View le	di July 2011	and: A	X Free C	hla-i-	- Chi	P.	.1.3				
Means	of Achie	ving Four-Li	og virus ini	activation/Remo	vai:	X rise C	morm	ie Chio	rine Dio	(IGe	Ozon	e Coi	mbined Chlori	ne (Chloramines)
U Ult	raviolet	Radiation		Describe):				<del></del>						
Type o	f Disinfe	ctant Residu	al Maintein	ed in Distributio	n System:	X Free			Combin	ed Chlor	ine (Chlo	ramines)	Chlorine ]	Dioxide
		Į.	<u>C</u>	T Calculations, or U	V Dose, to De	monstrate Fo	ur-Log	Virus Inactiv	etion, if Ap					
	1	ļ.			CT Calcula		_			UV	Dose		1	
		Ì		]	Disinfectant	Lowest CT Provided			]	ľ		Lowest		
l			'	Lowest Residual	Contact Time	Before or			1		1	Residual Disinfectant	ļ	
1				Disinfectant	(T) mt C	at First		ļ		Lowest	Minimum			
l i		Net Quantity		Concentration (C)		Customer	Temp		Minimum			et Remote		
Day of	Hours	of Finished		Before or at First	Point During	During	of	pH of	CT	UV Dose,	Required,	Point in	Emergency or A	bnormal Operating Conditions; Repair
the	Plant in	Water	Peak Flow	Customer During	Peak Flow,	Posk Flow,	Wate	Water, if	Required,	mW-	mW-	Distribution	or Maintenane	e Work that Involves Taking Water
Month	Operation	Produced, gal	Rate, gpd	Posk Flow, nig/L	minutes	mg-min/L	r, *C	Applicable	mg-min/L	sec/em ²	scc/cm²	System, mg/L	System	Components Out of Operation
	24	276,000										0.2		
2	24	261,000										0.2		
3	24	383,000										0.2		
1.4	24	326,000							<del>                                     </del>			0.2	5	
5	24	355,000 377,000									<u> </u>	0,2	Second set SOC a	amples taken / 63,000 gal flushed
-6	24	391,000		_							<del></del>		2 Buc't samples	
- 7   B	24	277,000		<del> </del>					<u> </u>		<del> </del>	0.3	4 Bac't samples	63,000 gal flushed
- 5	24	266,000		-			-1	-	<del>                                     </del>		·	0.4		
10	24	365,000									<del>                                     </del>	0.2	······	
11	24	337,000		·					· · · · · · · · · · · · · · · · · · ·				42,000 gal flusher	
12	24	311000										0.2	12,000 200 100000	
13	24	314,000										0.2		
14	24	371,000										0.3	<del></del>	<del></del>
15	24	340,000										0.3		
16	24	283,000		<u></u>								0.7		
17	24	335,000		<b>1</b>								1,1		
18	24	370,000									<u> </u>	0.8		
19	24	309,000	<b></b>									0.6		
20	24	392,000	ļ. ———	<del> </del>									76,350 gal flushed	
21	24	382,000											40,000 gals Broke	
22	24	447,000 281,000		<del>                                     </del>					<del></del>			0.4	46,350 gal flushed	
23	24	307,000		<del>                                     </del>				· · · · · · · · · · · · · · · · · · ·				0.3		
24	24	343,000		<del> </del>								0.2		· · · · · · · · · · · · · · · · · · ·
25	24	327,000											28,000 gal flushed	-
27	1 24	348,000	1	T	1							0.2	-0,000 Est trittalice	
28	24	289,000		1								0.4	···	
29	24	299,000										0.2		
30	24	327,000		<u> </u>								0.3		
31	24	440,000	1	L								0.3		
Total		10,429,000												
Avera	RE.	336,419												

[|] New 1975 | 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | New 1975 | Ne

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

See page 4 for instructions.

TE.	Concret Information	for the Month/Year of: August 201	11										
	Public Water System (1												
^. i		eld Utilities Water Treatment Plant	-										
					PWS Identification	Number: 3480149							
		Community Non-Transient Nor	-Community Transic	ent Non-Community	Consecutive								
		nnections at End of Month: 1,626		Total Population S	erved at End of Month: 5,691								
	PWS Owner: Wedgefi		·	<del></del>									
	Contact Person: Roger			Contact Person's T	itle: Lead Operator								
		ing Address: 3100 Bancroft Bivd		City: Orlando	State: Fl	Zip Code: 32833							
		phone Number: 407-568-2112		Contact Person's Fa	x Number: 407-568-7869								
		ail Address: rholsapple@utilitypartners	llc.com										
B.	Water Treatment Plant												
	Plant Name: Wedgefie	eld Utilities Water Treatment Plant			Plant Telephone Nu	mber: 407-568-6787							
	Plant Address: 20449	Mansfield St.		City: Orlando	State: Fl	Zip Code: 32833							
	Type of Water Treater	d by Plant: 🔀 Raw Ground Water	Purchased Finished	Water		12.5 0000.02000							
	Permitted Maximum I	Day Operating Capacity of Plant, gallon	s per day: 1.037 MGD		· ·	<del></del>							
	Plant Category (per su	bsection 62-699.310(4), F.A.C.); III		Plant Class (per spi	osection 62-699.310(4), F.A.C.)	· C							
	Licensed Operators	Name	License Class	License Number									
	Lead/Chief Operator:	ad/Chief Operator: Roger Holsapple C 7436 Tuesday-Saturday											
		r Operators: John Coffee C 5614 Monday-Friday											
	Outer Operators.	Greg Hooper C \$178 Sunday-Triday											
				1		Thursday							
	ļ			<del></del>									
	ļ			<u> </u>									
		1	<del></del>										
				<del>                                     </del>	······································								
		<b>-</b>	<del></del>	<del> </del>	<del></del>								
				<del></del>	<del></del>								
	<u> </u>		<del></del>	l		· · · · · · · · · · · · · · · · · · ·							
fit	. Certification by Lea	d/Chief Operator											
		eatment plant operator licensed in Flori	da, am the lead/chief operato	r of the water treatm	ent plant identified in Part I of	his report I carrify that the							
inf	ormation provided in th	nis report is true and accurate to the best	of my knowledge and belief.	I certify that all dri	nking water treatment chemical	t used at this wheat conform to							
NS	F International Standar	rd 60 or other applicable standards refer	enced in subsection 62-555.3	20(3), F.A.C.   1 also	certify that the following additi	Anal aperations records for this							
nlı	int were prepared each	day that a licensed operator staffed or vi	isited this plant during the mo	onth indicated above	(1) records of amounts of chen	ricals used and chemical feed							
TRI	es: and (2) if applicable	appropriate treatment process perform	ance records. Furthermore, I	agree to retain they	edditional operations records	t the plant site for as least ton							
ve	ers and to make them as	vailable for review upon request.	,	-B-44 40 :012111 12231	- additional operations records t	to the plant sac for at least len							
,-	11/1/												
	The Wellows	2 9-6-11	Roger Holsapple		7436-C								
91	grature and Date		Printed or Typed Name										
31	CHARLE BUG LINEAR		Finaco or Typea Name		License N	umber							

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Means Uh	of Achie	ving Four-L Radiation	og Virus In:	of: August 20 activation/Remo (Describe):	val: *	X Free C			rine Diox		Ozon		mbined Chlorine (Chloramines)
Type o	f Disinfe	ctant Residu	al Maintain	ed in Distributio	n System:	X Free			Combine	ed Chlori	ne (Chlo	numines)	Chlorine Dioxide
ı	1	, ,		T Calculations, or t	JV Dose, to De CT Calcule	nonstrate Fo	ur-Log	Virus Inactiv	ntion, if Ap				
		Net Quantity		Lowest Residual Disinfectant Concentration (C)	Disinfectant Contact Time (T) at C	Lowest CT Provided Before or at First Customer	Temp		Minaria	Lowest	Minimum UV Dose	Lowest Residual Disinfectant Concentration at Remote	
Day of the Month	Hours Plant in Operation	of Finished Water Produced, gal	Peak Flow Rate, god	Before or at First Customer During Peak Flow, mg/L	Point During Peak Flow, minutes	During Peak Flow, mg-min/L	. of Wate	pH of Weter, if Applicable	CT Required,		Required, mW-		Emorgency or Abnormal Operating Conditions; Report Maintenance Work that Involves Taking West System Composents Out of Operation
1	24	389,000	· <del>-</del>					••	L			0.3	Dynami Composents Out of Operation
2	24	348,000										0.4	
3	24	402,000										0.4	2 Bac't semples
4	24	269,000										0.4	Flushed 4,5000 gals
5	24	343,000										0.3	
6	24	400,000										0.2	
7	24	398,000										0.3	
8	24	365,000		ļ					<b></b>			0.3	
9	24	281,000		<del></del>					ļ				4 Bac't samples
10	24	317,000							<u> </u>			0.4	
11	24	314,000										0.3	
12	24	255,000		<del> </del>	<del></del>						<u> </u>	0.4	
13		241,000 441,000	ļ	<del>                                     </del>	····							0.6	
14	24	349,000	<del></del>	<del> </del>					<b>-</b>			0.3	
15	24	318,000			<del> </del>							0.4	
16 17	24	312,000		<del></del>					-				Flush -4 10 000 - 1
18	24	293,000		<del>                                     </del>	<del></del>		-		<del> </del>			0.9	Flushed 10,000 gd
19	24	317,000		<del> </del>			_		ļ —			0.6	
20	24	299,000	<del></del>						<del></del>			0.6	
21	24	414,000	$\vdash$	<del> </del>								0.0	
22	24	342,000		<del> </del>	<del> </del>					<del></del>		0.3	<del></del>
23	24	260,000			<u> </u>				l				Flushed 25,000 gal
24	24	267,000		<del>                                     </del>					<u> </u>			8.3	- 10.000 0.7 (VVV I.E.
25	24	270,000		1	· · · · · · · · · · · · · · · · · · ·		-		<del></del>		h	0.2	
26	24	276,000		1					<u> </u>		<del></del>	0.3	<del></del>
27	24	313,000	<u> </u>	1								03	
28	24	495,000	1	1	ļ							03	
20	24	268,000	1						1			0.4	
30	24	298,000	1	<del>                                     </del>								0.2	
	24	302,000	·	1	·							0.3	

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



0EP Form 62-555.900(3) Effective August 26, 2003

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

See page 4 for instructions. I. General Information for the Month/Year of: | September 2011 A. Public Water System (PWS) Information PWS Name: Wedgefield Utilities Water Treatment Plant PWS Identification Number: 3480149 Community Non-Transient Non-Community Transient Non-Community PWS Type: Consecutive Number of Service Connections at End of Month: 1,626 Total Population Served at End of Month: 5,691 PWS Owner: Wedgefield Pluris-Wedgefield Contact Person's Title: Lead Operator Contact Person: Roger Holsapple Contact Person's Mailing Address: 3100 Bancroft Blvd City: Orlando State: Fl Zip Code: 32833 Contact Person's Telephone Number: 407-568-2112 Contact Person's Fax Number: 407-568-7869 Contact Person's E-Mail Address: rholsapple@utilitypartnerslic.com B. Water Treatment Plant Information Plant Name: Wedgefield Utilities Water Treatment Plant Plant Telephone Number: 407-568-6787 City: Orlando Plant Address: 20449 Mansfield St. Zip Code: 32833 Raw Ground Water Purchased Finished Water Type of Water Treated by Plant: Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1.037 MGD Plant Category (per subsection 62-699.310(4), F.A.C.): Ill Plant Class (per subsection 62-699.310(4), F.A.C.): C License Class License Number Licensed Operators Name Day(s)/Shift(s) Worked Lead/Chief Operator: Roger Holsapple C 7436 Tuesday-Saturday John Coffee 6614 Monday-Friday Other Operators: Il. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plant site for at least ten years and to make them available for review upon request. Roger Holsapple 7436-C Signature and Date Printed or Typed Name License Number

Page 1

PWS I	PWS Identification Number: 3480149 Plant Name: Wedgefield Utilities Water Treatment Plant  11. Daily Data for the Month/Year of: September 2011													
711 ~	-11 50- 4	n fan dha F# -	_41./V	6 Cantamba	2011						-			
HL D	any Dat	a jor the Mo	mto/Tenf o	i:   September	val: #	X Free C	hlori-	a Chia	rine Diox	ida	0===		abiand Chinain (City	
Means	of Achie	eving Four-L	og virus ini	ctivation/Remo	Val: *	Y LIEC C	morn	e Chic	אטוע פוזויו	luc	Ozon	e Cos	mbined Chlorine (Chloramines)	
ווט עַ	raviolet	Rediation		Describe):		76 E	<u> </u>	-	~	1.563				
Туре с	f Disinfo	ctant Residu	al Maintain	ed in Distributio	n System:	X Free			Combine		ine (Chlo	ramines)	Chlorine Dioxide	
			<u>_</u>	T Calculations, or L	IV Does, to Det		ur-Log	Virus inactiv	etion, If Ap		Dosc	i	·	
				1	C) Calcus	Lowest CT	Ε	ſ	1	- 00	Dosc	Lowest		
				]	Disinfectant	Provided	Ì		1		Ì	Residual		
				Lowest Residual	Contact Time	Before or	ł					Disinfectant		
				Disinfectant	(T) aLC	at First			i	Lowest	Minimum	Concentration		
		Net Quantity		Concentration (C)		Customer	Temp		Minimum	Operating	UV Dose	at Remote		
Day of	Hours	of Finished		Before or at First	Point During	During	. of	pH of			Required,	Point in	Emergency or Abnormal Operating Conditions; Repair	
the	Plant in	Water	Peak Flow	Customer During	Peak Flow,	Peak Flow,	Wate	Water, If	Required,	mW-	mW-	Distribution	or Maintenance Work that Involves Taking Water	
Month	Operation	Produced, gal	Rate, gpd	Peak Flow, mg/L	minutes	mg-min/L	1. ℃	Applicable	mg-min/L	sec/cm²	sec/cm²	System, mg/L	System Components Out of Operation	
1	24	255,000					ļ				——	0.2		
2	24	284,000							<del> </del>		<del></del>	0.2		
3	24	302,000						<del></del>	<del> </del>		<del> </del>	0.4		
4	24	380,000					-		<del> </del>		<del> </del> -	0.3	<del></del>	
3	24	288,000 373,000		<del></del>								1.0	Collected 2 Bec't samples	
7	24 24								<del> </del>		-		Collected 4 Bac't samples	
	24	320,000 284,000		<del> </del>			$\vdash$					0.3	Collection + pac ( samples	
9	24	257,000			<u> </u>				<del> </del>			0.3		
10	24	306,000		<del> </del>	——————————————————————————————————————				<del>                                     </del>			0.3		
11	24	345,000		<del></del>						_		0.3		
12	24	359,000							<u> </u>			0.2	<del></del>	
13	24	344,000	-									1.5		
14	24	366,000	†									1.4		
15	24	389,000	1									1.8	Collected THHM/HAAS samples	
16	24	325,000										1.3		
17	24	368,000										0.9		
18	24	477,000										1.4		
19	24	362,000		ļ								1.6		
20	24	341,000					<b>—</b>					1,2	· · · · · · · · · · · · · · · · · · ·	
21	24	352,000		ļ				ļ	1			1.3		
22	24	360,000			<del></del>				ļ			0.9		
23	24	283,000	ļ	<del> </del>	<del> </del>	-			<del>  </del>			0.8		
24	24	322,000	<del> </del>	<del> </del>	<del> </del>		<del> </del>		-			1.1	<del></del>	
25	24	327,000	<del></del>	<del></del>	<del> </del>		$\vdash$	-	<del>                                     </del>			1.7		
26	24	346,000 286,000	<del> </del>	<del> </del>	<del> </del>				<del>                                     </del>			1.4		
27	24	372,000	<del> </del>	+	<del> </del>				<del>                                     </del>			1.5		
29	24	354,000	<del>                                     </del>	<del>                                     </del>	†							1.0	······································	
30	24	264,000	<b>—</b>	<del>                                     </del>			1					1.0	<del></del>	
30	<del> </del>	1 20-,030	<del>                                     </del>						1				<del></del>	
Total	*******	9,991,000	1								·····			
Avera		322,290	1											
******	Г		-1											

Maximum 477,000

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

DEP Form 62-685.900(3) Effective August 26, 2003



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

See page 4 for instructions.

		or the Month/Year of: October 2011				
۱.	Public Water System (P'					
		dgefield Water Treatment Plant		·	PWS Identification Num	ber: 3480149
		Community Non-Transient Non-Community	Transie	nt Non-Community	Consecutive	
		nnections at End of Month: 1,626		Total Population Serve	d at End of Month: 5,691	
	PWS Owner: Pluris-W					
,	Contact Person: Roger			Contact Person's Title:		
	Contact Person's Mailin	ng Address: 3100 Bancroft Blvd		City: Orlando	State: Fl	Zip Code: 32833
	Contact Person's Telep	hone Number: 407-568-2112		Contact Person's Fax N	lumber: 407-568-7869	
		il Address: rholsapple@utilitypartnersllc.com				
3.	Water Treatment Plant I		,-,			
		dgefield Water Treatment Plant		T =	Plant Telephone Number	
	Plant Address: 20449 N			City: Orlando	State: Fl	Zip Code: 32833
	Type of Water Treated		hased Finished \	Water		
		ay Operating Capacity of Plant, gallons per day: 1.0	37 MGD	· · · · · · · · · · · · · · · · · · ·		
		baection 62-699.310(4), F.A.C.): III			tion 62-699.310(4), F.A.C.): C	
	Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s)	
	Lead/Chief Operator:	Roger Holsapple	С	7436	Tuesday-Satur	
	Other Operators:	John Coffee	c	6614	Monday-Frid	le v
				·		
					· · · · · · · · · · · · · · · · · · ·	
					·	
	1			<del> </del>		
				<del> </del>		
	1					
	L	<u> </u>	<u> </u>	<del></del>		
ſί	I. Certification by Leas	d/Chief Operator				
ī.	the undersigned water tre	eatment plant operator licensed in Florida, am the les	ad/chief operato	r of the water treatment	plant identified in Part I of this re	port. I certify that the
in	formation provided in the	is report is true and accurate to the best of my knowl	ledge and belief.	I certify that all drinking	ig water treatment chemicals used	d at this plant conform to
N	SF International Standar	d 60 or other applicable standards referenced in subs	section 62-555.3	20(3), F.A.C. I also cert	tify that the following additional	operations records for this
ρĺ	ant were prepared each d	day that a licensed operator staffed or visited this pla	int during the mo	onth indicated above: (1)	records of amounts of chemicals	used and chemical feed
TB	tes; and (2) If applicable	appropriate treatment process performance records	. Furthermore,	I agree to retain these add	ditional operations records at the	plant site for at least ten
y	ars and to make them av	vailable for review upon request.				
	11 11 1	2/1/ /// Roger Hol				
	11/1/1/11/11	2 1/2 // Roger Hol	sapple		7436-C	
S	ignature and Date	Printed or	Typed Name		License Numbe	er
	•		Page 1			
	EP Form 62-555 900(3) Sective August 26, 2003		1 age 1			

10. 10.	of Achie	ving Four I	na Vinu la	f: October 20 activation/Remo	val· *	[X]Free C	hlorin	e Chie	rine Diox	ride	Ozone	10-	abited Oblesia (Oblesia
		Radiation	Other	(Describe):	<b>74.</b>	[A]I ICC C	IIIOI MI	e care	I INC LAIDY	ride	Ozoni	: ,C0	mbined Chlorine (Chloramines)
				ed in Distributio	n System:	Free	Chlor	ine	[XICom	bined Ch	lorine (C	hloramines)	Chlorine Dioxide
<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	7 22 15 11 11		C	T Calculations, or l	V Dosc, to De	nonstrate Fo	er-Log	Virus Inectiv	ation, if Ap	plicable*	norme (C	(IIO WILLIAM)	Cinorine Choxide
					CT Calcula						Done		
Day of the Month	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Wate r, *C	plt of Water, if Applicable	Required,	Lowest Operating	Minimum UV Dose Required, mW-	Lowest Residuel Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repa or Maintenance Work that Involves Taking Water System Components Out of Operation
	24	317,000										1.1	
2	24	434,000					L.,					1	
3	24	395,000					lacksquare					1.7	
4	24	381,000											2 Bact's Taken
5	24	375,000					$\vdash$						4 Bact's Taken and Nitrate and Nitrite Sample
6	24	426,000		ļ							ļ		Bleach Deliver
7	24	290,000		<u> </u>								1	
8_	24	296,000		<u> </u>								1	
9	24	347,000					$\vdash$					1	
10	24	388,000					$\vdash$				<b></b>	1.4	
11	24	265,000		<del> </del>	<u></u>	ļ			<b></b>			1.3	
12	24	266,000		<b></b>	<del> </del>					·		1.3	In
13	24	308,000 237,000	_	+								1.2	Blesch Deliver
14	24	341,000					$\vdash$	· · · · · · · · · · · · · · · · · · ·					
15	24	380,000					$\vdash$	· · · · · · · · · · · · · · · · · ·		-		1.1	<del></del>
16	24	274,000			· · · · · · · · · · · · · · · · · · ·	<del></del>			-			<del>- ii</del> -	······································
18	24	294,000		<del>                                     </del>								1.4	
19	24	301,000			•						<del></del>	1.7	
20	24	290,000		<del>                                       </del>	-				1				Bleach Deliver
21	24	267,000	<del></del>	<del>                                     </del>	t				<del> </del>			0,3	Dicasili Dellivei
21 22	24	331,000		<del></del>								0.6	
23	24	340,000		1								0.4	
24	24	372,000	<del></del>	1									15,000 Flushed
25	24	231,000	<del>                                     </del>	1	1								15.000 Flesh
26	24	406,000	<u> </u>	1								1.4	
27	24	342,000									-		Bleach Deliver
28	24	308,000	· ·		1						<b></b>	0.2	
19	24	305,000		1	T							0.4	
30	24	310,000			1	-						0.4	
31	24	334,000										0.6	
Total		10,151,000	T										

Meximum 434,000

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

DEF Form 82-656.900(3) Effective August 26, 2003



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

See page 4 for instructions.

6	General Information	for the Month/V	ear of: November	2011					
	Public Water System (1								
•••	PWS Name: Pluris-W							PWS Identification N	Jumber: 3480149
	PWS Type:	Community	Non-Transient Non-	-Community	Transie	nt Non-Community	_ [] C₀	nsecutive	
	Number of Service Co	nnections at End	of Month: 1,626			Total Population	Served at E	nd of Month: 5,691	
	PWS Owner: Pluris-V	Vedgefield							
	Contact Person: Roge					Contact Person's	Title: Lead	operator	
	Contact Person's Mail	ng Address: 3100	Bancroft Blvd			City: Orlando		State: Fi	Zip Code: 32833
	Contact Person's Teler	phone Number: 40	07-568-2112			Contact Person's I	ax Number	: 407-568-7869	
	Contact Person's E-Ma	il Address: rhols	apple@utilitypartners1	ic.com					
Ð.	Water Treatment Plant								
	Plant Name: Pluris-W	edgefield Water ?	reatment Plant					Plant Telephone Nurr	iber: 407-568-6787
	Plant Address: 20449					City: Orlando		State: Fl	Zip Code: 32833
	Type of Water Treated		Raw Ground Water		sed Finished	Water			
	Permitted Maximum I			s per day: 1.03	7 MGD				
	Plant Category (per su	bsection 62-699.					bsection 6.	2-699.310(4), F.A.C.):	
	Licensed Operators		Name	1	License Class	License Number		Day(s)/Shift	(s) Worked
	Lead/Chief Operator:	Roger Holsapple			c	7436		Toesday-	
	Other Operators:	John Collins			с	6614		Monday	-Friday
						ļ			
	!								
				<u> </u> .		ļ		······································	
	1							<del></del>	
								<del></del>	
		<u>l</u>				<u> </u>	<u> </u>		
T T	. Certification by Lea	d/Chief Operato							
				la am the lead	/chief operate	r of the water treatm	nent plant i	dentified in Part I of th	is report. I certify that the
									used at this plant conform to
									mal operations records for this
									icals used and chemical feed
									the plant site for at least ten
	ars and to make them a								president to a real ton
,	1111	1.	•						
	Il Chilon	1.6	12-6-11	Roger Holse	ppie			7436-C	
Sí	gnature and Date			Printed or T	yped Name	<del></del>		License Nu	mber
					Page 1				
	P Form 52-665.900(3) Inchire August 28, 2003				s age 1				

PWS I	dentifica	tion Number	: 3480149		Pl	ant Name:	Erro	r! Referen	ce source	e not fou	od.		
				e Inc.	3011								
111. D	ally Date	a for the Mo	nth/Year o	f: November	2011	XIFree C	-1	- Chi-	de Die		-		12 10 1 2 1 2
Means	ot Acmo	eving Four-L Radiation		sctivation/Remo (Describe):	ARI: -	(A)Prec C	חנזסונו	е спю	rine Diox	ciae	Ozon	e jCo	mbined Chlorine (Chloramines)
				ed in Distribution	n System:	Free	Chlor	ine	[X]Com	bined Ch	olorine (C	hloramines)	Chlorine Dioxide
7000	123,000	Joseph Accorde		T Calculations, or U							inor my Te	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	Chief the Dioxide
- 1		i t			CT Calcut						Dose	1	
Day of the	Hours Pinn in	Not Quantity of Finished Water	Peak Flow	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During	Disinfectant Contact Time (T) at C Massurement Point During Peak Flow.	Lowest CT Provided Before or at First Customer During Peak Flow,	Temp . of West	pH of Water, if	Minimum CT Required.	Operating UV Dose, mW-	Required, mW-	Lowest Residual Disinfectant Concentration et Remote Point in Distribution	Emergency or Abnormal Operating Conditions; Repa or Maintenance Work that Involves Taking Water
Month		Produced, gal	Rate, gpd	Peak Plow, mg/L	minutes	mg-min/L	r, °C	Applicable	m8-wm∧r	sec/cm²	sec/cm ²	System, mg/L	System Components Out of Operation
ᅷᆔ	24	275,000 311,000								-	<del> </del>	0.B	DEP on Site
_2	24	313,000		<del></del>				<del></del>					Bleach Deliver 2 Bact's
-3	24	288,000										1.2	Bicaca Delives & Dact 8
4 5	24	307,000										0.6	
	24	351,000		<del>                                     </del>	-						<del></del>	0.7	
7	24	327.000		<del></del>									4 Bact's
-	24	297,000		-							<del></del>	1.4	706.13
•	24	314,000		<del> </del>	<del> </del>						<del>                                     </del>	1.6	
10	24	298,000		<del>                                     </del>				i					Bleach Deliver
11	24	316,000					·					0.9	Diesell Deliver
12	24	362,000		!								0.6	
13	24	320,000								-		0.6	
14	24	363,000										LJ	<del></del>
15	24	328,000										0.9	
16	24	304,000		<del> </del>								0.7	
17	24	316,000		1								1.5	Bleach Deliver
16	24	297,000		1				·				12	
19	24	325,000		†				l			<u> </u>	0.8	· · · · · · · · · · · · · · · · · · ·
20	24	357,000		1	1				1			0.8	
21	24	379,000			1							1,4	
22	24	283,000										1.3	
23	24	332,000		1	1							0.6	
24	24	371,000										0.9	
25	24	348,000		I								1.4	Bleach Deliver
26	24	326,000										D.8	
27	24	353,000		L	l							0.8	
28	24	372,000	1		1							1.3	
29	24	310,000			l							1.3	
30	24	336,000										1.3	Replace Board in Generator
31	24	]				L							
Total		9,779,000											
Averag		325,967											

Maximum 3179,000

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

DEP Form 62-865-900(3) Effective August 29, 2003



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

See page 4 for instructions.

			A44											
		for the Month/Year of: December 2	1011											
A.	Public Water System (F			·			Water 21							
		edgefield Water Treatment Plant	C	<u> </u>			PWS Identification Nu	imber: 3480149						
		Community Non-Transient Non-	Community	l ransie	nt Non-Community		nsecutive							
		nnections at End of Month: 1,626			Total Population	Served at Er	nd of Month: 5,691							
	PWS Owner: Pluris-V				1									
	Contact Person: Roge				Contact Person's	itte: Lead								
		ing Address: 3100 Bancroft Blvd			City: Orlando	<del></del>	State: F!	Zip Code: 32833						
		phone Number: 407-568-2112			Contact Person's I	ax Number	<del>. 407-568-7869</del>							
_		il Address: rholsapple@utilitypartnersli	ic.com											
В.	Water Treatment Plant						<b>N</b>							
		edgefield Water Treatment Plant			10 m 0 1 m 1		Plant Telephone Numb							
	Plant Address: 20449				City: Orlando		State: Fl	Zip Code: 32833						
	Type of Water Treated	by Plant: Raw Ground Water		ed Finished \	Water			<u> </u>						
	Permitted Maximum I	Day Operating Capacity of Plant, gallons	per day: 1.03	MUD	(S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S									
		bsection 62-699.310(4), F.A.C.); III	1.			idsection of	-699.310(4), F.A.C.): C							
_	Licensed Operators	Name	<del></del>	icense Class	License Number		Dey(s)/Shift(s							
	Lead/Chief Operator: Roger Holsapple C 7436 Tuesday-Saturday													
	Other Operators:	John Coffee		<u>C</u>	6614	<b></b>	Monday-F	riday						
			<del></del>											
			<del></del>											
					<u> </u>									
					<b></b>									
			———— <del> </del>					·						
		<u> </u>			<u> </u>	·		<u></u>						
Ti	Certification by Lea	d/Chief Operator												
11	the undersigned water tr	eatment plant operator licensed in Florid	la, am the lead/	chief operate	r of the water treats	nent plant is	dentified in Part I of this	report. I certify that the						
int	formation provided in th	is report is true and accurate to the best (	of my knowled	ge and belief	. I certify that all di	rinking wate	r treatment chemicals u	sed at this plant conform to						
N:	SF International Standar	d 60 or other applicable standards refere	nced in subsect	tion 62-555.3	20(3), F.A.C. I als	o contify that	t the following addition	al operations records for this						
ple	ent were prepared each	iay that a licensed operator staffed or vis	ited this plant	during the mo	onth indicated above	e: (1) record	ls of amounts of chemic	als used and chemical feed						
rai	es; and (2) if applicable	, appropriate treatment process performs	nce records. F	urthermore,	agree to retain the:	se additiona	operations records at the	ne plant site for at least ten						
ye	ars and to make them av	ailable for review upon request.												
		į.												
	19/1/100	de 1-4-12	Roger Holsap	ple			7436-C							
St	gnature and Date		Printed or Ty	ped Name			License Num	ber						

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

CT Calculations, or IV Does, to Demonstrate Four-Log, Virus Inactivation, if Applicable*   UV Does   Calculations   UV Does   Calculations   UV Does   Calculations   UV Does   Calculations   UV Does   Calculations   UV Does   Calculations   UV Does   UV Does   Calculations   UV Does   Calculations   UV Does   Calculations   UV Does   Calculations   UV Does   Calculations   UV Does   Calculations   UV Does   Calculations   UV Does   Calculations   UV Does   Calculations   Calculations   UV Does   Calculations   Calculations   UV Does   Calculations   Calculations   UV Does   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculations   Calculat	CT Calculations, or UV Does, to Demonstrate Four-Log Virsa Inactivation, if Applicable*   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV Does   UV D	Ultraviolet R	ving Four-L Ladiation	Og Virus in	of: December : nactivation/Remo (Describe):	oval:	(X)Free C			rise Dios		Ozon		mbined Chlorine (Chloramines)
C   C   C   C   C   C   C   C   C   C	Net Quantity   Net Quantity   Peak Flow   Net Plant in   Net Quantity   Peak Flow   Plant in   Distinctorate   Concentration (C)   Before or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration (C)   Series or a First Temp   During   Concentration   Concentration (C)   Series or a First Temp   During   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   C	ype of Disinfe	ctant Residu	al Maintair	ned in Distribution	n System:	[X] Free	Chlo	ine	Combin	ed Chlor	ine (Chlo	ramines)	Chlorine Dioxide
Net Quantity   Peak Flow   Peak Flow   Peak Flow   Rase, gold	Net Quantity   Net Quantity   Plant   Distinctions   Distinctions   Distinctions   Distinctions   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentration   Concentrat				T Calculations, or I			ur Lo	Virus Inactiv	ution, If Ap				
Net Quantity   Net Quantity   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Peak Flow	Net Quantity   Net Quantity   Net Quantity   Net Quantity   Net Plans it   Peak Flow Rate, god   New Peak Flow Rate, god   New Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Peak Flow Rate, god   Pea		1		<del>,                                      </del>	CT Calcul				,	<u>uv</u>	Dosc		
2   24   277,000	1.0	ay of Hours the Plant in lonth Operation	of Finished Water Produced, gal		Disinfectant Concentration (C) Before or at First Customer During	Contact Time (T) at C Measurement Point During Peak Flow,	Provided Before or at First Customer During Peak Flow,	of Wate	Water, if	CT Required, mg-	Operating UV Dose, rsW-	UV Dose Required, mW-	Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Report Maintenance Work that Involves Taking Water System Components Out of Operation
24   323,000	3			<del></del>	<del> </del>						<del></del>			Bleach Deliver
1	1				<del>                                     </del>					<del></del>		<del></del>		
5   24   401,000	S				<del> </del>	-								
6 24 311,000	6 24 311,000				-			_		<del> </del>		<del>                                     </del>		<del></del>
7 24 359,000	7 24 359,000				<del> </del>									Danii.
S	8       24       349,000       0.8       Bleach Deliver         9       24       290,000       1.4       1.0         10       24       364,000       1.0       1.1         11       24       379,000       1.1       1.3       Cleaned CL-17         13       24       298,000       1.3       1.3       1.3       1.1         14       24       277,000       1.3       Bleach Deliver       1.1       1.1       1.2       2.2       2.2       2.0       1.1       1.1       1.1       1.1       1.2       1.3       Bleach Deliver       1.1       1.1       1.2       1.2       1.2       1.3       Bleach Deliver       1.1       1.1       1.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2       2.2				-			_				<del></del>		
9 24 299,000   1.4   1.0   1.0   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.1   1.0   1.0   1.1   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0   1.0	9   24   290,000				<del> </del>	*				<del></del>		-		
10   24   364,000   1,0   1,0   1,1   24   379,000   1,1   24   331,000   1,3   24   298,000   1,3   24   298,000   1,3   3   3   3   3   3   3   3   3   3	10				<del></del>									Diesco (Scilde)
1	11				ļ <del></del>	-				_		<u> </u>		
12   24   331,000	12				<del> </del>							<del></del>		<del></del>
13	13   24   298,000				<del>                                     </del>	-						-		Classed CL 12
14	14   24   277,000							-						Cication CD/17
15   24   304,000	15   24   304,000						_							
16   24   289,000	16   24   289,000													Bleach Deliver
17   24   353,000	17 24 333,000 0.9  18 24 348,000 1.1.1  20 24 316,000 1.5 Replaced Packing on High Service Pump  21 24 327,000 0.7  22 24 360,000 0.5 Bleach Deliver  23 24 265,000 0.6 0.6  24 24 401,000 0.5 0.6  25 24 396,000 0.5 0.5  26 24 314,000 0.5 0.5  27 24 314,000 0.5 0.5  28 24 314,000 0.5 0.5  29 24 344,000 0.5 0.9  29 24 344,000 0.5 0.9  29 24 344,000 0.5 0.9  29 24 344,000 0.5 0.9  20 24 327,000 0.5 0.9  20 24 327,000 0.5 0.9  20 24 327,000 0.5 0.9  20 24 327,000 0.5 0.9  20 24 327,000 0.5 0.9  20 24 337,000 0.0 0.8  20 24 337,000 0.0 0.8  20 24 337,000 0.0 0.8													DANIAL DAIVE
18	18				<del>                                     </del>									~
19   24   316,000	1.5				<del></del>									<del></del>
20   24   313,000	20   24   313,000				<del>                                     </del>									
21       24       327,000       0.7         22       24       360,000       0.5         23       24       265,000       0.6         24       24       401,000       0.6         25       24       396,000       0.5         26       24       317,000       1.3         27       24       314,000       1.0         28       24       306,000       0.9         29       24       344,000       1.3         30       24       327,000       1.0         31       24       382,000       0.8         otal       10,291,000       0.8	21 24 327,000 0.7 0.3 Bleach Deliver 23 24 360,000 0.5 0.6 0.6 0.6 0.6 0.6 0.6 0.6 0.6 0.6 0.6				<del> </del>									Reniscori Pachine on Link Service D
22   24   360,000   0.5   Bleach Deliver	22 24 360,000 0.5 Bleach Deliver 23 24 265,000 0.6 0.6 24 24 401,000 0.6 0.6 25 24 396,000 0.5 0.5 26 24 317,000 0.1 0.1 0.0 27 24 314,000 0.1 0.0 28 24 306,000 0.1 0.0 29 24 344,000 0.1 1.3 Bleach Deliver 30 24 327,000 0.1 0.8 Total 10,291,000 Average 331,968				<del> </del>									replience t acreate out trills pervice Laub as
23 24 265,000 0.6 0.6 24 24 401,000 0.6 0.6 25 24 396,000 0.5 26 24 317,000 1.3 27 24 314,000 0.1.0 0.9 28 24 306,000 0.9 0.9 29 24 344,000 0.1.3 Bleach Deliver 30 24 327,000 3.1 24 327,000 0.8 26 24 327,000 0.8 26 24 306,000 0.9 29 24 344,000 0.9 29 24 344,000 0.9 29 24 344,000 0.9 29 24 344,000 0.9 29 24 327,000 0.9 29 24 327,000 0.9 29 24 327,000 0.8 20 24 327,000 0.8 20 25 25 25 25 25 25 25 25 25 25 25 25 25	23 24 265,000 0.5 0.6 24 24 401,000 0.6 0.6 25 24 396,000 0.5 0.5 25 24 317,000 0.5 1.3 27 24 314,000 0.5 1.0 0.5 27 24 314,000 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5													Riesch Online
24     24     401,000     0.6       25     24     396,000     0.5       26     24     317,000     1.3       27     24     314,000     1.0       28     24     306,000     0.9       29     24     344,000     1.3       30     24     327,000     1.0       31     24     382,000     0.8       otal     10,291,000	24 24 401,000 0.6 25 24 396,000 0.5 26 24 317,000 0.5 27 24 314,000 1.0 28 24 306,000 0.9 29 24 344,000 0.9 30 24 327,000 0.1.0 31 24 382,000 0.1.0 31 24 382,000 0.8 31 24 382,000 0.8 31 24 382,000 0.8				1						-			
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27     24     314,000     1.0       28     24     306,000     0.9       29     24     344,000     1.3     Bleach Deliver       30     24     327,000     1.0       31     24     382,000     0.8       otal     10,291,000	27 24 314,000 1.0 28 24 306,000 0.9 0.9 29 24 344,000 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0													
28 24 306,000 0.9 29 24 344,000 1.3 Bleach Deliver 30 24 327,000 1.0 31 24 382,000 0.8  total 10,291,000	28 24 306,000 0.9 29 24 344,000 1.13 Bleach Deliver 30 24 327,000 1.0 31 24 382,000 0.8    Otal								-					
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Otal 10,291,000	Cotal 10,291,000 Average 331,968													
	Average 331,968													

Maximum 401,000

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

DEP Form 62-685.900(3) Effective August 26, 2003

# 2010 DMRs

#### DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

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

COUNTY:

PERMITTEE NAME: Wedgefield Utilities. Inc. MAILING ADDRESS: 200 Weathersfield Avenue

Alternome Springs, FL 32714

FACILITY: LOCATION:

Wedgefield WWTF 3100 Bancroft Boulevard Orlando, FL

Orange

PERMIT NUMBER

FLA010900

LIMIT: CLASS SIZE:

Final N/A

REPORT: GROUP:

Monthly Domestic

MONITORING GROUP NUMBER: R-001 MONITORING GROUP DESC: Public Public Access Reuse, including Influent

NO DISCHARGE FROM SITE: MONITORING PERIOD From: Jan 01,2010

To: Jan 31,2010

Parameter		Quantity o	r Loading	Units	Qua	lity or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Moasurement	0.225		MGD					9	5 Days/Week	Flow meters and
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Requirement	0.368 (An.Avg.)		MGD						5 Days/Week	Flow meters and totalizers
Flow	Sample Measurement	0.182		MGD					G	5 Days/Week	Flow meters and totalisers
PARM Code 50050 1 Mon.Site No. FLW-1	Pormit Roquirement	Report (Mo.Avg.)		MGD						5 Days/Wook	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement				8.3				0	Every Two Weeks	8-bour FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement				20.0 (An Avg.)			cag/L		Every Two Weeks	8-how FPC
BOD, Carboneccous 5 day, 20C	Sample Measurement				7.0	8.0		mg/l	0	Every Two Weeks	8-hour FPC
PARM Code 80082 A Mon.Site No. EFA-1	Permit Requirement				30,0 (Mo,Avg.)	60.0 (Max.)		<b>=</b> €/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Semple Measurement				2.0			mg/l	0	4 Days/Week	Grab
PARM Code 00530 B Mon. Site No. EPB-1	Permit Requirement				5.0 (Max.)			ing/L		4 Days/Week	Grab
pH	Sample Measurement				7.1	7.6		\$U	0	5 Days/Week	Grab
PARM Code 00400 A Mon.Site No. EFA-I	Permit Requirement				6.0 (Min.)	8.5 (Max.)		SU		5 Days/Week	Grab

I cortify 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 knowling violations.

NAME/TITLE OF PRINCIPAL EXECUT	IVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICES OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YYMM/DD)
Roger Hoistpple	Lead Operator	12 Molade	407-869-1919	2010-02-16

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) NO Flow on January 6th,7th, and 8th, is due to the flow going to the reject pond

The high TSS on Jan. 8th is possible Lab / sampler error, NTU- 2.2 CL2- 3.7

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

#### DISCHARGE MONITORING REPORT - PART A (Continued)

PACILITY:

Wedgefield WWIF

R-001

PERMIT NUMBER: FLA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: Jan 01,2010

To Jan 31,2010

Parameter		Quantity	or Loading	Units	Qu	ality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal, % less than detection	Sample Measurement				100%		PER- CENT	0	4 Days/Week	Grab
PARM Code \$1005 A Mon.Site No. EFA-1	Permit Requirement				75 (Min.)		PER- CENT		4 Days/Week	Grab
Coliform, Feoal	Sample Measurement		<u> </u>		0.5		#/100ML	0	4 Days/Week	Grab
PARM Code 74055 A Mon.Site No. EFA-I	Permit Requirement				25 (Max.)		#/100ML		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement	<del></del>			1.0		<b>≠g/1.</b>	0	Continuous	Meter
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement		<u> </u>	<u>                                     </u>	1.0 (Min.)		mg/L		Continuous	Meter
Turbidity	Sample Messurement		<u> </u>		2.9		NTU	0	Centianous	Meier
PARM Code 00070 B Mon.Site No. EFB-1	Permit Requirement				Report (Max.)		NTU		Continuous	Meter
Nitrogen, Nitrate, Total (as N)	Sample Measurement		<u> </u>		6.45		mg/L	0	Monthly	8-hour FPC
PARM Code 00620 A Man.Site No. EFA-1	Permit Requirement	·····			12.0 (Max.)		mp/L		Monthly	8-hour PPC
low (from groundwater well)	Sample Measurement	0,907		MGD				0	Continuous	Flow meters su- totalizers
PARM Code 50050 P Mon.Site No. FLW-6	Permit Requirement	Report (An.Avg.)		MQD					Continuous	Flow meters and totalizers
Flow (from groundwater well)	Sample Mossurement	0.00.	0.000	МĢD				0	Continuous	Flow meters and totalizers
PARM Code 50050 Q Mon.Site No. FLW-6	Pennit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MOD					Custinuous	Plow meters and totalizers
Flow (total to zone 3)	Sample Measurement	0.800		MGD				O	Continuous	Flow meters an
PARM Code 50050 R Mon. Site No. FLW-5	Permit Requirement	0 0232 (An Avg.)		MOD					Continuous	Flow meters and totalizers
Flow (total to zone 3)	Sample Measurement	0.000	0.000	MGD				Đ	Continuous	Flow meters and totalizers
PARM Code 50050 S Mon. Site No. FLW-5	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MCD					Continuous	Flow meters and
Flow (total to zone 2)	Sample Measurement	0.000		MGD				0	Continuous	Flow meters and totalizers
PARM Code 50050 T Mon. Site No. FLW-4	Permit Requirement	0.0634 (An.Avg.)		MGD					Continuous	Flow meters and totalizers
Flow (total to zone 2)	Sample Measurement	0.000	0.000	MGD				0	Continuous	Flow meters and totalizers
ARM Code 50050 U Mon. Site No. FLW-4	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo Avg.)	MGD					Continuous	Flow meters and totalizers

#### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

MONITORING GROUP NUMBER R-001 MONITORING PERIOD From: Jan 81,2010 To: Jan

To: Jan 31,2010

PERMIT NUMBER: FLA010900

Parameter		Quantity	or Loading	Units	Qu	ality or Concents	ation	Units	No. Ex.	Frequency Of Analysis	Sumple Type
Flow (total to zone 1)	Sample Measurement	0.000		MGD					0	Continuens	Flow meters and
PARM Code 50050 V Mon.Site No. FLW-3	Permit Requirement	0.0114 (An.Avg.)		MOD						Continuous	Flow meters and totalizers
Flow (total to zone 1)	Sample Measurement	9.000	8.000	MGD					0	Continuests	Flow meters and totalizers
PARM Code 50050 W Mon.Site No. FLW-3	Permit Requirement	Report (Mo Avg.)	Report (3-Mo.Avg.)	MGD						Continuous	Flow meters and totalizers
Flow (total to golf course)	Sample Measurement	0.203		MGD		<u> </u>			0	Continuous	Flow meters and
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	0.270 (An.Avg.)		MGD						Continuous	Flow meters and totalizers
Flow (total to golf course)	Semple Measurement	0.242	0.206	MGD		ļ			0	Continuesa	Flow meters and totalizers
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD		<u> </u>	<u> </u>			Continuous	Flow meters and totalizers
BOD, Carboneceous 5 day, 20C	Semple Measurement				199.5	ļ		<b>=e</b> /L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-L	Pormit Requirement				Report (Mo.Avg.)			mg/L		Every Two Weaks	8-hour FPC
plids, Total Suspended	Sample Measurement				1,14	ļ		ng/L	•	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement			]	Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement				54.6			Percent	0	Mouthly	Calculated
PARM Code 00180 I Mon.Site No. FLW-I	Permit Requirement				Report			Percent		Monthly	Calculated
	Sample Mesparament						<u> </u>				
<u></u>	Permit Requirement									<del></del>	
	Sample Measurement										
	Permit Requirement				<del> </del>	ļ					
	Semple Measurement										
	Permit Requirement										

¹ Initially, flow is limited to 0.270 MGD AADF. However, the flow may be increased after completion of the second treatment plant and pending the results the required load test. DEP Form 62-620.910(10), Effective November 29, 1994

# DAILY SAMPLE RESULTS - PART B Facility: Wedgefield WWTF

Permit Number: Monitoring Period

FLA010900

From: Jan.01,2010 To Jan.31,2010

;   	CBOD5 (mg/l.)	Fecal Coliform Bacteria (#/100ML)	рН (Мах)	pH (Min)	TRC (For Disinfect) (mg/L)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Total (as N) (mg/L)
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
Mon. Site	EFA-I	EFA-1	EFA-I	EFA-1	EFA-1	EFB-I	EFB-I	FLW-1	EFA-!
1			7.2	7.2	3.7		2.9	0.202	
2			7.3	7.3	5.0		2.9	0.013	
3			7.4	7.4	5.0		2.9	0.208	
4		<1	7.2	7.2	5.0	1.0	2.0	0.249	
5		<1	7.1	7,1	3.1	1.0	1.8	0.204	
6	6.0	ব	7.5	7.5	3,0	2.0	2.5	0.190	6.45
7		<1	7.2	7.2	5.0	1.0	2.5	0.194	
8			7.3	7.3	3.7		0.9	0.197	
9			7.3	7.3	3.7		1.0	0.197	
10			7.3	7.3	4.3		1.6	0.268	
11		<1	7.3	7.3	4.2	1.0	1.0	0.249	
12		<1	7.3	7.3	3.4	1.0	1.0	0.184	
13		<1	7,3	7.3	2.5	1.0	1.2	0.183	
14		<1	7.5	7.5	2.0	1.0	1.0	0.188	
15			7.3	7.3	2.0		1.5	0.190	
16			7.3	7.3	1.0		2.3	0.188	
17			7.4	7.4	2.5		2.5	0.221	
18		<1	7,2	7.2	5.0	1.4	2.5	0.217	<del>-</del>
19		<1	7.3	7.3	5.0	1.0	2.3	0.211	
20	8.0	<1	7.6	7.6	3.3	1.3	1.3	0.158	
21		<1	7.4	7.4	2.0	1.6	0.8	6.171	
22			7.4	7,4	1.5		2.9	0.163	
23			7.3	7.3	1.8		1.4	0.093	
24			7.3	7.3	2,2		0.7	0.125	
25		<1	7.3	7.3	3.1	1.0	1,2	0.091	
26		<]	7.3	7.3	3.8	1.0	2.5	0.144	
27		<1	7.2	7.2	2.5	1.0	2.4	0.156	
28		<1	7.5	7.5	2.0	1.0	2.5	0.199	
29			7.6	7.6	2.0		2.5	0.183	
30			7.4	7.4	1.8		2.9	0.195	
31			7.2	72	1.5		2.2	0.212	
Total	14.0	8.0	227.2	227.2	96.6	18.3	59.6	5.643	6.45
Mo. Avg.	7.0	0.5	7.3	7.3	3.1	1.1	1.9	0.182	6.45

PLANT STAFFING:						
Day Shift Operator	Class:	Certificate No:		Name:		
Day Shift Operator	Class; C	Certificate No:	16046	Name:	Paul Tzareff	
Night Shift Operator	Class:	Certificate No:		Name:		
.ead Operator	Class: C	Certificate No:	8863	Name:	Roger Holsappie	

#### DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period FLA010900

From: Jan.01,2010 To Jan.31,2010

Facility: Wedgefield WWTF

Ŧ	Flow (MGD)	Flow (MGD)	Flow (MGD)	Flow (MGD)	Flow (MGD)	CBOD5	TSS (mg/L)		1	T
	golf course	Zone 1	Zone 2	Zone 3	GW makeup	(mg/L)			1	
					well		i i			
		_								
Code	50050	50050	50050 FLW-4	50050 FLW-5	50050	80082	00530		<del></del>	<del> </del>
Mon. Site	FLW-2	FLW-3 0.00	0.00	0.00	FLW-6	INF-1	INF-L		<del> </del>	<u> </u>
2	0.021	0.00	0.00	0.00	0.000	<del></del>	<del> </del>		-	-
	0.000		ļ		0.000	<del></del>	<del> </del>		<del> </del>	
3	0.000	0.00	0.00	0.00	0.000		<del> </del>	- =	<u> </u>	
4	0.000	0.00	0.00	0.00	0.000					<u> </u>
5	0.000	0.00	0.00	0.00	0.000	<del></del>	<u> </u>		1	<u> </u>
6	0.000	0.00	0.00	0.00	0.000	207.0	246.0			
7	0.000	0.00	0.00	0.00	0.000		1			
8	0.066	0.00	0.00	0.00	0.000					
9	0.071	0.00	0.00	0.00	0.000					
10	0.000	0.00	0.00	0.00	0.000	-			1	1
11	0.000	0.00	0.00	0.00	0.000		1 1			
12	0.000	0.00	0.00	0.00	0.000				†	1
13	0.579	0.00	0.00	0.00	0.000				<del>                                     </del>	1
14	0.077	0.00	0.00	0.00	0.000				<del> </del>	1
15	0.026	0.00	0.00	0.00	0.000		<del>                                     </del>		<del> </del>	+
16	0.062	0.00	0.00	0.00	0.000	<del></del> -	<del>                                     </del>		<del>                                      </del>	<del></del>
17	0.000	0.00	0.00	0.00	0.000		<del>                                     </del>		<del>                                     </del>	+
18	0.116	0.00	0.00	0.00			<del> </del>			-
19	0.107	0.00	0.00	0.00	0.000		<del>                                     </del>		╅	+
20	•	0.00	0.00	0.00	0.000	192.0	262.0		<del> </del>	
21	0.710	0.00	0.00	0.00	0.000		<del> </del>		<del> </del>	
22	0.677	0.00	0.00	0.00	0.000		<del> </del>	<del></del>	<del> </del>	<del> </del>
23	0.748	0.00	0.00	0.00	0.000					<del></del>
24	0.754	0.00	0.00	0.00	0.000					
25	0.671			<b>└</b> ──	0.000	· ·	1			
	0.811	0.00	0.00	0.00	0.000				<u> </u>	
26	0.711	0.00	0.00	0.00	0.303		<u> </u>			
27	0.643	0.00	0.00	0.00	0.328					
28	0.122	0.00	0.00	0.00	0.332					
29	0.527	0.00	0.00	0.00	0.331					
30	0.016	0.00	0.00	0.00	0.365					1
31	0.000	0.00	0.00	0.00	0.365					1
Total	7.515	0.00	0.00	0.00	2.023	399.0	508.0		†	<del> </del>
Mo. Avg.	0.242	0.00	0.00	0.00	0.065	199.5	254.0		<del>†                                      </del>	+
			<u>'</u>		0.000		1			

- 0.242				0.065	.,,,,,	2.54.0		 I .
PLANT STAFFING: Day Shift Operator	Class:		Certificate No:		Name			
Evening Shift Operator	Class:	С	Certificate No:	16046	Name:	Paul 1	Tzareff	
Night Shift Operator	Class:		Certificate No:	· · · · · ·	Name	:		
Lead Operator	Class:	_c	Certificate No:	8863	Name	Roge	r Holsapple	

#### 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

FACILITY:

COUNTY:

LOCATION:

PERMITTEE NAME: Wedgefield Utilities, Inc MAILING ADDRESS: 200 Weathersfield Avenue Altamunte Springs, FL 32714

Wedgefield WWTF 3100 Bancroft Boulevard Orlando, FL

Orange

PERMIT NUMBER

CLASS SIZE:

LIMIT:

FLA010900

Final N/A

REPORT: GROUP:

Monthly Domestic

MONITORING GROUP NUMBER R-801 MONITORING GROUP DESC: Public

Public Access Reuse, including influent

NO DISCHARGE FROM SITE: MONITORING PERIOD From: Feb. 01, 2019

To: Feb. 28. ,2010

Parameter		Quantity or Loading		Units	Qua	lity or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0.227		MQD					0	5 Days/Week	Flow meters an
PARM Code 50050 Y Mon.Site No FLW-1	Permit Requirement	0,368 (An.Avg.)		МОДО						5 Days/Week	Flow motors and totalizers
Flow	Sample Measurement	0.187		MGD					0	5 Days/Week	Flow meters and totaliners
PARM Code 50050 1 Mon.Sire No. FLW-1	Permit Requirement	Report (Mo.Avg.)		MOD						5 Deys/Week	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1	<b>I.3</b>				0	Every Two Weels	8-hour FPC
PARM Code 80082 Y sion.Site No. EFA-1	Permit Requirement		h -		20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
BOD, Carboneccous 5 day, 20C	Sample Measurement				B.0	9.0		mg/l	•	Every Two Weels	9-hour FPC
PARM Code 80082 A Mon.Site No. EPA-1	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)		mg-1.		Every Two Weeks	8-hour FPC
Solids. Total Suspended	Sample Measurement				2.3			34g/1	•	4 Days/Week	Grab
PARM Code 00530 B Mon.Site No. EPB-I	Permit Requirement				50 (Max.)			mg/L		4 Days/Week	Grab
pH	Sample Measurement				7.2	7.9		\$t'	0	5 Days/Week	Grab
PARM Code 00400 A Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)	8.5 (Max.)		ŠU		5 Days/Week	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 laformation 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 posalities for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YYMMOD)
Roger Holisapple Lead Operator	My Margale	407-864-1919	2010/03/18

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

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

#### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

R-001

PERMIT NUMBER: FLA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: Feb. 01, 2010

To: Feb. 28, 2010

Parameter		Quantity	or Loading	Units	Qu	ality or Concentration	Units	No. Ex.	Frequency of Analysia	Sample Type
Coliform, Fecal, % less than detection	Sample Measurement				100%		PER- CENT	•	4 Days/Week	Grab
PARM Code 51005 A Mon.Site No. EFA-1	Permit Requirement				75 (Min.)		PER- CENT		4 Days/Wook	Grab
Coliform, Feoel	Semple Measurement				0.5		4/300PfL	0	4 Days/Week	Grab
PARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement			<u> </u>	25 (Max.)		#v1001MLL		4 Days/Wook	Grab
Total Residual Chlorine (For Distribution)	Sample Measurement				1.0	:	mg/L	•	Continuous	Meter
PARM Code 50060 A Mon, Site No. EPA-1	Permit Requirement				1.0 (Min.)		tag/L		Continuous	Meter
Furbidity	Sample Measurement			<u> </u>	2.9		שזא	•	Continues	Meter
PARM Code 00070 B Mon.Site No. EPB-1	Permit Regulrement				Report (Max.)		Ntu		Continuous	Mescr
Nitrogen, Nitrate, Total (as N)	Sample Measurement				7.2		we/L	•	Monthly	8-bour FPC
PARM Code 00620 A Vion,Site No. EFA-1	Permit Requirement				12.0 (Max.)		mg/L		Monthly	8-hour FPC
/low (from groundwater well)	Sample Measurement	0.00		MGD				O	Continuous	Flow meters a: totaliners
PARM Code 50030 P Mon, Site No. FLW-6	Permit Requirement	Report (An.Avg.)		MOD					Continuous	Flow meters as
Flow (from groundwater well)	Sample Messurement	9,00	0,00	MGD				۰	Continuous	Flow meters a
PARM Code 50050 Q Mon.Site No. FLW-6	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD	· · -				Continuous	Flow meters as totalizers
Flow (total to zone 3)	Sample Measurement	0.900		MGD	-			0	Continuous	Flow meters at
PARM Code 50050 R Mon.Site No. FLW-5	Permit Requirement	0.0232 (An.Ava.)		MGD					Continuous	Flow meters az totelizers
Flow (total to zone 3)	Sample Measurement	0.000	9,909	MGD				•	Continuous	Flow meters no totalisers
PARM Code 50050 5 Mon.Site No. FLW-5	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow meters an totalizers
Flow (total to zone 2)	Sample Misseurement	0.000		MGD				٥	Continuous	Flow meters as totalizers
PARM Code 50050 T Mon.Site No FLW-4	Permit Requirement	0.0634 (An.Avg.)		MGD					Continuous	Flow meters an
Flow (total to zone 2)	Sample Maspurement	0.900	4.005	MGD				0	Continuous	Flow meters as
PARM Code 50050 U Mon.Site No. FLW-4	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow meters an

COMMENTS: Flow was going to reuse on the 12th of February when NO3 result was 12.12

#### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

MONITORING GROUP NUMBER: R-001 MONITORING PERIOD From: Feb. 01, 2010 To: Fet

To: Feb. 28, 2010

PERMIT NUMBER: FLA010900

Parameter	Quantity or Loading		Units	Qu	ality or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sample Type	
Flow (total to zone 1)	Sample Measurement	9.000		MGD					0	Continuous	Flow meters as
PARM Code 50050 V Mon.Sise No. FLW-3	Permit Requirement	0.01]4 (An.Avg.)		MGD						Continuous	Flow snoture as
Flow (total to zone 1)	Sample Measurement	0.000	0.000	MOD					0	Coulings	Flow meters at
PARM Code 50050 W Mon.Site No. FLW-3	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD						Continueus	Flow measts ar
Flow (total to golf course)	Sample Measurement	0.195		MGD					•	Continuous	Flow meters as totalizers
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	0.270 (An.Avg.)		MGD						Continuous	Plow meters an
Flow (total to golf course)	Sample Measurement	0.199	0.201	MGD					•	Continuous	Flow meters as sotalizers
PARM Code 50050 Mon.Site No. PLW-2	Pormit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD						Continuous	Flow maters an totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement				165.0			mg/l.	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon Site No. INF-1	Permit Requirement				Report (Mo.Avg.)			eng/L		Every Two Weeks	8-hour FPC
osids, Total Suspended	Sample Measurement				165.0		<u> </u>	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. [NF-]	Permit Requirement				Report (Mo.Avs.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement				\$2,7			Porceut	°	Monthly	Calculated
PARM Code 00180 1 Mon.Sign No. FLW-1	Permit Requirement	<u> </u>			Report		<u> </u>	Percent		Monthly	Calculated
	Sample Mossurement										
	Perzekt Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement					1					}

Initially, flow is limited to 0.270 MGD AADF. However, the flow may be increased after completion of the second treatment plan: and pending the results the required load test. DEP Form 62-620.910(10). Effective November 29, 1994.

#### DAILY SAMPLE RESULTS - PART B

Permit Number: **Monitoring Period**  FLA010900

From: Feb. 01, 2010 To Feb. 28, 2010

Facility: Wodgefield WWTF

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ML)	рН (Мах)	pH (Min)	TRC (For Disinfect.) (mg/L.)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Total (as N) (mg/L)
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
Mon. Site	EFA-1	EFA-I	EFA-I	EFA-I	EFA-I	EFB-1	EFB-1	FLW-I	EFA-1
ì		<1	7.3	7.3	2	1.0	2.5	0.243	
2		<1	7.4	7.4	2	14.0	1.8	0.226	
3		<1	7.9	7.9	2.5	1.0	1.5	0.247	
4	7.0	<1	7.6	7.6	2	1.0	1.5	0.120	7.20
5			7.7	7.7	2.2		2.4	0.092	
6		<u> </u>	7,5	7.5	<u> </u>	<u> </u>	2.1	0.131	
7	·		7,4	7.4	1.8	<u> </u>	1.8	0.172	
8		<1	7.2	7.2	2.5	1.0	1.6	0.140	
9		<1	7.9	7.9	1.5	1.0	2.5	0.094	
10		<1	7.6	7.6	1.5	1.3	2.8	0.154	
11 12		<1	7.8	7.8	1.5	2.3	2.5	0.201	
13		<del> </del>	7.7	7,7	1.5	<del>                                     </del>	2.5	0.174	<u> </u>
14		<del> </del>	7.3	7.3	1	-	2.5	0.301	
15	<u> </u>	<)	7.7	7.7	3.5	1.0	2.9	0.316	
		<b></b>	7.7	7.7	3.7	<u> </u>	2.5	0.209	<b></b>
16	- 00	<1	7.4	7.4	1.5	1.0	2.8	0.042	<u> </u>
17	9.0	<1	7.5	7.5	5	1.0	2.3	0.075	
18	<del></del> _	<1	7.5	7.5	4.8	1.0	2.9	0.100	·,
19		<b>↓</b>	7.5	7.5	3.3	<u> </u>	2.0	0.103	
20 21		<del> </del>	7.5	7.5	13	<u> </u>	1.6	0.208	
22	ļ	<1	7.4	7.4	2.6	<del> </del>	2.5	0.254	
23	<u> </u>	<del> </del>	7.4	7,4	2.8	1.0	2.0	0.232	
24		<1	7.7	7.7	1.5	1.0	1.8	0.253	
25		<1	7.6	7.6	3.5	1.6	1.8	0.247	
26		<1	7.5	7.5	2.5	1.1	1.6	0.137	
27			7.3	7.3	3	<del> </del>	2.0	0.247	<u> </u>
28		<u> </u>	7.4	7.4	2.7	<del> </del>	1.6	0.230	
		<b></b>	7,4	7.4	2.4		2.6	0.303	
Total	16.0	8.0	210,8	210.8	67.1	18.3	60.9	5.251	7.20
Mo. Avg.	8.0	0.5	7.5	7.5	2.3	1.1	2.1	0.1875	7.20
PLANT ST		Class.	c	Certificate No:	16046	Na	me: Paul	Tzarcff	

DIP Form	62-620.910(10),	effective Nov	<del>carbu</del> 29,	1994

Class:

Class:

Class:

C

Day Shift Operator

Night Shift Operator

Load Operator

8863

Certificate No:

Certificate No:

Certificate No:

Name:

Name:

Name:

Roger Holsapple

#### DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010900 Monitoring Period From: Feb

From: Feb. 01, 2010 To Feb. 28, 2010

Facility: Wedgefield WWTF

	Flow (MGD) golf course	Flow (MGD) Zone 1	Flow (MGD) Zone 2	Flow (MGD) Zone 3	Flow (MGD) GW makeup well	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	50050	50050	50050	50050	80082	00530		<u> </u>	<u> </u>
Mon. Site	FLW-2	F1.W-3	FLW-4	FLW-5	FLW-6	INF-1	INF-1			
1	0.000	0.00	0.00	0.00	0.235		<b>\</b> \			
2	0.032	0,00	0.00	0.00	0.270					
3	0.000	0.00	0.00	0.00	0.228	···				
4	0.472	0.00	0.00	0.00	0.000	172.0	194.0			<u> </u>
5	0.690	0.00	0.00	0.00	0.000					
6	0.014	0.00	0.00	0.00	0.000					
7	0.000	0.00	0.00	0.00	0.000					
8	0.076	0.00	0.00	0.00	0.000					
9	0.037	0.00	0.00	0.00	0.000				1	
10	0.000	0.00	0.00	0.00	0.000					
H	0.412	0.00	0.00	0.00	0.000					
12	0.052	0.00	0.00	0.00	0.000		1			1
13	0.000	0.00	0.00	0.00	0.000		<u> </u>			
14	0.000	0.00	0.00	0.00	0.000				<del>                                     </del>	<del>                                     </del>
15	0.000	0.00	0.00	0.00	0.000					
16	0.000	0.00	0.00	0.00	9.000				<del> </del>	<del>                                     </del>
17	0.093	0.00	0.00	0.00	0.000	158.0	136.0			
18	0.067	0.00	0.00	0.00	0.000		1		<del>-</del>	<del>- </del>
19	0.570	0.00	0.00	0.00	0.000				_	
20	0.065	0.00	0.00	0.00	0.000				<del></del>	
21	0.000	0.00	0.00	0.00	0.000				+	<del> </del>
22	0.000	0.00	0.00	0.00	0.000		1			<del> </del>
23	0.010	0.00	0.00	0.00	0.000				<del> </del>	
24	0.093	0.00	0.00	0.00	0.000		<del> </del>		+	+
25	0.288	0.00	0.00	0.00	0.000		†			
26	0.047	0.00	0.00	0.00			-	<del></del> -	<del>-</del>	<del> </del>
27	0.000	0.00	0.00	0.00	0.000		<del>                                     </del>		<del> </del>	<del> </del>
28	0.000	0.00	0,00	0.00	0.000				<del> </del>	
	0.000				0.000	·				
Total	3.018	0.00	0.00	0.00	0.733	330.0	330.0		<del></del>	<del></del>
Mo. Avg		0.00	0.00	0.00	0.026	165.0	165.0		<del> </del>	+

#### PLANT STAFFING:

Day Shift Operator	Class:	C	Certificate No:	16046	Name:	Paul Tzareff
Day Shift Operator	Class:		Certificate No:		Name:	
Night Shift Operator	Class:	<del></del>	Certificate No:		Name:	
Lead Operator	Class:	<u>c</u>	Certificate No:	8863	Name:	Roger Holsappie

#### DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

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

PERMITT	FE NAME:
MAILING	ADDRESS:

Wedgefield-Pluris 6608 Walton Way Tampa Plorida 33610

FACILITY: LOCATION:

COUNTY:

Wedgefield WWTF 3100 Bancroft Boulevard

Orlando, FL

Orange

PERMIT NUMBER

FLA010900

LIMIT: CLASS SIZE:

Final

REPORT: GROUP:

Monthly Domestic

MONITORING GROUP NUMBER: R-001

MONITORING GROUP DESC:

Public Access Reuse, including Influent FILE

NO DISCHARGE FROM SITE: MONTTORING PERIOD

From: March 01,2010 To: March 31,2010

Parameter		Quantity or Loading		Units	Qua	lity or Concentr	ation	Units	No. Ex	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0.227		MOD				MOD	0	5 Days/Week	Flow meters and totalizers
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Requirement	0.368 (An.Avg.)		MGD						5 Days/Week	Flow mesers and totalizers
Flow	Sample Measurement	0.223		MGD				MGD	0	5 Days/Week	Flow meters and totalizers
PARM Code 50050 1 Mon.Site No. FLW-I	Permit Requirement	Report (Mo.Avg.)		MGD						5 Days/Wook	Plow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement				8.2			MG/L	•	Every Two Weeks	8-hour FPC
VRM Code 80082 Y	Pormit Requirement				20,0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement		-		0,0	8.0		MG/I.	0	Every Two Weeks	8-hour FPC
PARM Code 80082 A Mon,Site No. BFA-1	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
Solida, Total Suspended	Sample Measurement				2.3			MG/L	•	4 Days/Week	Grab
PARM Code 00530 B Mon.Site No. EFB-1	Permit Requirement				5.0 (Max.)			mg/L		4 Days/Week	Grab
pH	Sample Measurement				7.2	7.9		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	Cirab

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OF	ICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Roger Holsspple	Lead Operator	M. Melmels	407-259- <del>69</del> 91	2010-04-28

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

#### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

MONITORING GROUP NUMBER: MONITORING PERIOD From: March 01,2010 To: March 31,2010

R-001

PERMIT NUMBER: FLA010900

Parameter		Quantity o	r Loading	Units	Qui	ality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
oliform, Fecal, % less than	Sample Measurement				78%		PER- CENT	0	4 Days/Week	Grab
PARM Code 51005 A Mon.Site No. EFA-1	Permit Requirement				75 (Min.)		PER- CBNT		4 Days/Week	Grab
Coliform, Fecal	Sample Measurement				2		#/100M].	0	4 Days/Week	Grab
PARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement				25 (Max.)		#/100ML		4 Days/Week	Orab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.0		ng/l.	0	Continuous	Meter
PARM Code 50060 A Mon.Sise No. EFA-1	Permit Requirement				),0 (Min.)		mg/L		Continuous	Meter
Turbidity	Sample Measurement				2.9		พาบ	•	Continuous	Meter
PARM Code 00070 B Mon,Site No. EFB-1	Permit Requirement				Report (Max.)		טזא		Continuous	Meter
Nitrogen, Nitrate, Total (as N)	Sample Measurement				4.56		mg/L	0	Monthly	8-hour FPC
ARM Code 90620 A Mon.Site No. EFA-1	Permit Requirement				12,0 (Mast.)		Heg/L		Monthly	8-hour FPC
Flow (from groundwater well)	Sample Measurement	0.90		MGD			MGD	0	Continuous	Flow meters an totalizers
PARM Code 50050 P Mon.Site No. FLW-6	Permit Requirement	Report (An.Avg.)		MOD					Continuous	Flow meters an totalizers
Flow (from groundwater well)	Sample Measurement	0.00	0.00	MGD			MGD	0	Continuous	Piow meters an totalizers
PARM Code 50050 Q Mon.Site No. FLW-6	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow motors an totalizers
Flow (total to zone 3)	Sample Measurement	00.0		MGD			MGD	0	Continuous	Flow meters an totalizers
PARM Code 50050 R Mon.Site No. FLW-5	Permit Requirement	0.0232 (An.Avg.)		MGD					Continuous	Flow meters an totalizers
Flow (total to zone 3)	Sample Measurement	0.00	9.00	MGD			MGD	0	Continuous	Flow meters an totalizers
PARM Code 50050 S Mon.Site No. FLW-5	Permit Requirement	Report (Ma.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow meters an totalizers
Flow (total to zone 2)	Sample Measurement	0.00		MGD			MGD	0	Continuous	Flow meters an totalizers
PARM Code 50050 T Mon.Site No. FLW-4	Permit Requirement	0.0634 (An.Avg.)		MOD					Continuous	Flow meters an
Flow (total to zone 2)	Sample Measurement	0.00	0.00	MGD			MGD	0	Continuous	Flow meters an totalizers
PARM Code \$0050 U Mon.Site No. FLW-4	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MOD		}			Continuous	Flow meters en-

#### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgetield WWTF

MONITORING GROUP NUMBER: R-001 MONITORING PERIOD From: March 01,2010 To: March 31,2010

PERMIT NUMBER: FLA010900

Parameter		Quantity or Loading			Qu	ality or Concentra	tion	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (total to zone 1)	Sample Measurement	0.00		MGD				MGD	0	Continuous	Flow meters and totalizers
PARM Code 50050 V Mon.Site No. FLW-3	Permit Requirement	0.0114 (An.Avg.)		MGD						Continuous	Flow meters and totalizers
Flow (total to zone 1)	Sample Measurement	0.00	9.0(1	MGD				MGD	0	Continuous	Flow meters and totalizers
PARM Code 50050 W Mon.Site No. FLW-3	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo Avg.)	MQD						Continuous	Flow moters and totalizers
Flow (total to golf course)	Sample Measurement	0.219		MGD				MGD	0	Cantinuous	Flow moters and totalizers
PARM Code 50050 Mon Site No. FLW-2	Permit Requirement	0.270 (An.Avg.)		MOD						Continuous	Flow moters and totalizers
Flow (total to golf course)	Sample Measurament	0.434	0.261	MGD				MGD	0	Continuous	Flow meters and
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD						Continuous	Flow meters and totalizors
BOD, Carbonaceous 5 day, 20C	Sample Measurement				191.0			mg/L	0	livery Two Weeks	8-hour FPC
ARM Code 80082 0	Permit Requirement				Report (Mo.Avg.)			<b>n</b> ⊕1.		Every Two Weeks	8-hour PPC
Solids, Total Suspended	Sample Measurement				1,43			ecus/L.	G	Every Two Weeks	8-hour FPC
PARM Code 00530 O Mon.Site No. INF-1	Permit Requirement				Report (Mo.Avg.)			Mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement				53.5			Percent	0	Monthly	Calculated
PARM Code 00180 ! Mon.Site No. FLW-1	Permit Requirement				Report			Percent		Monthly	Calculated
!	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

Initially, flow is limited to 0.270 MGD AADF. However, the flow may be increased after completion of the second treatment plant and pending the results the required load test. DEP Form 62-620.910(10), Effective November 29, 1994

## DAILY SAMPLE RESULTS - PART B | Wedgefield WWTF

Permit Number: Monitoring Period FLA010900

From: March 01,2010 To: March 31,2010

	CBOD5 (mg/l.)	Fecal Coliform Bacteria (#/100ML)	pH (Max)	pH (Min)	TRC (For Disinfect.) (mg/L)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrate, Total (as N) (mg/L)
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
ion. Site	EFA-1	EFA-1	EFA-I	EFA-1	EFA-1	EFB-1	EFB-1	FLW-1	EFA-I
1		<1	7.4	7.4	2,6	1.0	2.2	0.262	
2		<1	7.5	7.5	2.8	1.6	1.3	0.232	
3		<1	7.5	7.5	1.5	1.0	1.6	0.233	
4	8.0	<1	7.5	7.5	2.5	1.0	1.6	0.252	4.56
5			7.6	7.6	4.2		1.3	0.238	
6			7.5	7.5			2.9	0.218	
7			7.4	7.4	2.5		2.9	0.245	ļ
8		<1	7.3	7.3	2.5	2.3	2.9	0.121	<u> </u>
9		<1	7.6	7.6	2.6	1.4	2.8	0.213	<u> </u>
10		<}	7.5	7.5	2.5	1.3	2.8	0.214	
H		<1	7.6	7.6	2.4	2.2	2.5	0.222	
12			7.9	7.9	2.5		2.0	0.184	
13			7.6	7.6	3		1.2	0.282	
14			7.3	7.3	3.8		2.0	0.285	ļ
15		<i< td=""><td>7.5</td><td>7.5</td><td>3.9</td><td>1.0</td><td>1.8_</td><td>0.289</td><td></td></i<>	7.5	7.5	3.9	1.0	1.8_	0.289	
16		<1	7.2	7.2	2.5	1.0	1.4	0.244	
17	8.0	<1	7.5	7.5	2.4	1.0	1.3	0.247	
18		1	7.4	7.4	3.2	2.0	1.4	0.253	
19			7.4	7,4	3.1		2.6	0.240	
20			7.6	7.6	3.2		2.5	0.185	
21			7.5	7.5	2.3		2.9	0.168	
22		<1	7.4	7.4	2.9	1.9	2.9	0.231	
23		2	7.5	7.5	4	1.0	2.9	0.259	
24		<	7.4	7.4	4	1.0	2.9	0.114	
25		<1	7.6	7.6	3	1.8	2.3	0.132	
26			7.5	7.5	3.4		2.9	0.184	
27	1		7.6	7.6	1		2.9	0.254	
28			7.4	7.4	2		2.9	0.319	
29		Ī	7.6	7.6	2	1.6	2.9	0.354	
30		2	7.6	7.6	3.2	1.8	1.7	0.041	
31			7.5	7.5	3.2		2.2	0.188	
Total	16.0	13	232.4	232.4	86	25.9	69.7	6.903	4.56
Mo. Avg	8.0	0.7	7.49	7.49	2.8	1.43	2.2	0.223	4.56

PLANT STAFFING: Day Shift Operator	Class:	c	Certificate No:	16046	Name:	Paul Tzareff
Day Shift Operator	Class:		Certificate No:		Name:	
Night Shift Operator	Class:	-	Certificate No:		Name:	
Lead Operator	Class:	<u>c</u>	Certificate No:	8863	Name:	Roger Holsapple

#### DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period

FLA010900

From: March 01,2010 To: March 31,2010

Facility: Wedgefield WWTF

ļ	Flow (MGD) golf course	Flow (MGD) Zone 1	Flow (MGD) Zone 2	Flow (MGD) Zone 3	Flow (MGD) GW makeup well	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	50050	50050	50050	50050	80082	00530			<del>- </del>
Mon. Site	FLW-2	FLW-3	FLW-4	FLW-5	FLW-6	JNF-1	INF-I			<del> </del>
1	0.000	0.00	0.00	0.00	0.00					
2	0.000	0.00	0,00	0.00	0.00					
3	0.017	0.00	0.00	0.00	0.00				<u> </u>	
4	0.605	0.00	0.00	0.00	0.00	184.0	140.0			
5	0.295	0.00	0.00	0.00	0.00					†
6	0.046	0.00	0.00	0.00	0.00					+
7	0.000	0.00	0.00	0.00	0.00		1		<u> </u>	+
B	0.069	0.00	0.00	0.00	0.00					<del>                                     </del>
9	0.050	0.00	0.00	0.00	0.00		<del>                                     </del>			<del> </del>
10	0.365	0.00	0.00	0.00	0.00		<del> </del>		<del></del>	<del></del>
11	0.694	0.00	0.00	0.00	0.00	·				+
12	0.732	0.00	0.00	0.00	0.00		<del>                                     </del>			-
13	0 784	0.00	0.00	0.00	0.00		<del>                                     </del>			<del>-</del>
14	0.736	0.00	0.00	0.00	0.00		<del></del>			<del> </del>
15	0.699	0.00	0.00	0.00	0.00		<del>   </del>			
16	0.726	0.00	0.00	0.00	0.00		<del>                                     </del>			<del>                                     </del>
17	0.728	0.00	0.00	0.00	0.00	198.0	132.0		·	<del> </del>
18	0.053	0.00	0.00	0.00	0.00	<del></del>				
19	0.729	0.00	0.00	0.00	0.00	<del></del> -				<del>                                     </del>
20	0.120	0.00	0.00	0.00	0.00		<del></del>		<del></del>	
21	0.000	0.00	0.00	0.00	0.00					
22	0.016	0.00	0.00	0.00	0.00				- <u>-</u> -	
23	0.195	0.00	0.00	0.00	0.00				<del></del> -	<del> </del>
24	0.745	0.00	0.00	0.00	0.00					<u> </u>
25	0.755	0.00	0.00	0.00	0.00		<del></del>			
26	0.731	0.00	0.00	0.00	0.00					<del> </del>
27	0.736	0.00	0.00	0.00	0.00					<b> </b>
28	0.736	0.00	0.00	0.00	0.00	<del></del>				
29	0.854	0.00	0.00	0.00	0.00					
30		0.00	0.00	0.00	0.00				·	
31	0.517 0.724	0.00	0.00	0.00	0.00					
Total	13.542	0.00	0.00	0.00	0.00	383.0	2/2.5			
Mo. Avg.		0.00	0.00	0.00		382.0	263.0			
	0.437		0.00	0.00	0.00	191.0	131.5	<u> </u>		

PLANT STAFFING:						
Day Shift Operator	Class:	C	Certificate No:	16046	Name;	Paul Tzareff
D. CUDA			-	<del></del>		
Day Shift Operator	Class:		Certificate No:		Name:	· · · · · · · · · · · · · · · · · · ·
Night Shift Operator						<del></del>
vigit Sint Operator	Class:		Certificate No:		Name:	
land O		-	=			
Lead Operator	Class:	C	Certificate No:	8863	Name:	Roger Holsapple

### Florida Department of Environmental Protection

Twin Towers Office Bidg. 2600 Blair Stone Road. Tallahansee, Florida. 32399-2400

## **GROUND WATER MONITORING REPORT**

Rule 62-522.600(11)

PART ! GENERAL INFORMATION	
(1) Facility Name Wedgefield WWTF	
Address 3100 Bancroft Blvd.	
City Orlando Florida	Zip 32833
Telephone Number <u>(407) 259-6991</u>	
(2) The GMS Identification Number 3048P03712	
(3) DEP Permit Number FLA010900	
(4) Authorized Representative Name Roger Holsapple	
Address 6608 Walton Way	
City Tampa Florida	Zip 33610
Telephone Number (813) 359-8327	
(5) Type of Discharge Domestic Waste	
(6) Method of Discharge Golf Course / Sprayfield Irriga	ation
attachments and that, based on my inquiry of those individ	ned and am familiar with the information submitted in this document and all duals immediately responsible for obtaining the information, I believe that the nat there are significant penalties for submitting false information, including the
Date:	
	Signature of Owner or Authorized Representative
PART II QUALITY ASSURANCE REQUIREMENTS	
Sample Organization Advanced Envi	ironmental Laboratories
Analytical Lab NELAC Certification #	E84589
NELAC Certification #	
Lab Name Advanced Environmental Laboratories	
Address 528 S. North Lake Blvd. Suite 1016 Attamont	te Springs Florida 32701
Phone Number (407) 937-1594	
Printed 4/15/2004	

County: Facility Name: Permit Number. Orange County Wedgefield WWTF

FLA010900

GMS# 3048P03712

Pennit Builder MW ID

Well Type

MWB-I

Description

Background Well Name MW-1 Golf Course

WAFR # 6006 GMS# 3048A13413 02/15/2010 11:46

Monitoring Period
Was the well purged before sampling?

From: January 2010 To: March 2010 X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Aunitysis Results)	liaite	Permit Requirement	Detection Limits	Anniysis Method	Sampling Equipment Used	Samples Filtered (L/F/N
Water Level Relative to Feet, NGVD	B2545			Foot	Report	N/A	Field	pump	N
Nitrate, (as N)	00620		0.24	mg/l	Report	0.047	SM4500NO3-F	ритр	N N
Solids, Total Dissolved(TDS)	70295	70296	300	mg/l	Report	8	E160,1	իսութ	N
Chloride (as Cl)	00940		100	mg/l	<b>Report</b>	3.6	E325.2	ևայր	N
Coliform, Fecal	74055		1.0U	#/100/ml	Report	1.0	SM9222D	punta	N
ρН	00400		5.27	SU	Report	N/A	Field	pump	N
Turbidity, Lab - Nepholometric	82079	-	5.3	NTU	Report	0.13	EIRO.I	bhwb	N.
					-				
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				<del> </del>	<del></del>				
	<b></b>	<del>                                     </del>			<del>  </del>				<del> </del>

COMMENTS AND EXPLANATION:

4/15/2004

County: Facility Name: Orange County Wedgefield WWTF FLA010900

Permit Number:

GMS# 3048P03712

Pennit Builder MW ID:

Well Type: Description:

MWB-2 Background Well Name MW-2 Golf Course

WAFR # 6005

GMS# 3048A13414 02/15/2010 12:18

Monitoring Period Was the well purged before sampling?

From: January 2010 To: March 2010 X. Yes ____ No

Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Builder PARM Code	Other Illstoric PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Auslysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545		65.21	Feet	Report	N/A	Field	pump	N
Nitrate, (as N)	00620		0.078U	mg/l	Report	0.047	SM4500NO3-F	pump	N
Solids, Total Dissolved(TDS)	70295	70296	76	nig/l	Report	8	E160.1	bimb	N .
Chloride (as C1)	00940		13	mg/l	Report	3.6	E325.2	pump	N
oliform, Fecal	74055		1.0U	#/100/mi	Report	1.0	SM9222D	pump	N
рН	00400		4.89	SU	Report	N/A	Field	pump	N
Turbidity, Lab - Nepholometric	B2079		0.70	NTU	Report	0 13	E180 †	рипър	N

COMMENTS AND EXPLANATION:

4/15/2004

DEP Form 62-620 910 10), effective hovember 29, 1904

8

County Facility Name: Permit Number: Orange County Wedgefield WWTF

FLA010900 GMS# 3048P03712 Permit Builder MW ID. Well Type:

Description:

MWB-3 Background Well Name MW-3

Golf Course WAFR # 6004 GMS# 3048A13415 02/15/2010 13:09

Monitoring Period
Was the well purged before sampling?

From, January 2010 To, March 2010 X Yes ____ No

Date Sample Obtained Time Sample Obtained.

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Amalysis Results)	Units	Permii Requirement	Detection Limits	Anniysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545	•	64.30	1-cet	Report	N/A	Field	րսուր	N
Nitrme, (as N)	00620		0.23	ing/i	Report	0.047	SM4500NO3-F	թաոր	N
Solids, Total Dissolved(TDS)	70295	70296	1400	mg/l	Report	8	E160.1	punip	N
Chloride (# Cl)	00940		70	mg/t	Report	3.6	E325.2	ритр	N
Caliform, Fecal	74055		1. <b>0</b> U	#/100/ml	Report	1.0	5M9222D	bansb	N
pHH	00400		6.65	SU	Report	N/A	Field	punip	N N
Turbidity, Lab - Nepholometric	82079		50	NIL	Report	0.13	E180.1	pump	N
			<u> </u>				<u>-</u>		
	ļ								
	<del> </del>			<del>                                     </del>					

COMMENTS AND EXPLANATION

4/15/2004

T2EP Form 02-020 910(10), effective November 20, 1964

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW IO: Well Type:

Description:

MWI-4 Intermediate Well Name MW-4

Golf Course WAFR # 6003 GMS# 3048A13416 02/15/2010

Monitoring Period Was the well purged before sampling?

From: January 2010 To: March 2010 X Yes ____ No

Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	linlp	Permit Requirement	Detection Limits	Analysia Method	Sampling Equipment Used	Samples Filtered (L/F/N
Water Level Relative to Feet, NGVD	R2545		63.46	Feet	Report	N/A	Field	рипр	N
Nitrate, (as N)	00620		0.07 <b>8</b> U	ing/l	Report	0.047	SM4500NO3-F	риппр	N _
Solids, Total Dissolved(TDS)	70295	70296	310	mg/l	Report	8	E160,1	punp	N
Chloride (as Cl)	00940		100	mg/l	Report	3,6	E325,2	brimb	Ņ
oliform, Fecal	74055		2.0U	≥/100/ml	Report	1.0	SM9222D	hunt	N
pH	00400		5.83	su_	Report	N/A	Field	pontp	N
Turbidity, Lab - Nepholometric	82079		28	NTL!	Report	0 13	E180.1	рижир	N
				<u> </u>				<u> </u>	
				<u> </u>					
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COMMENTS AND EXPLANATION:

4/15/2004

DEP Form 62-620-9 (N/18), effective November 29, 1994

10

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID.

Well Type: Description MWC-6 Compliance

Well Name MW-6 Golf Course WAFR # 6001 GMS# 3048A13418

Monitoring Period
Was the well purged before sampling?

From: January 2010 To: March 2016 X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

02/16/2010 08:58

Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Units	Permii Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	bamples Filtered (L/F/N
R2545		60.18	Feet	Report	N/A	Field	punip	N
00620		2.2	reg/l	10	0.047	SM4500NO3-F	bnut	N
70295	70296	190	mg/l	500	В	E160.1	pump	N
00940		37	mg/l	250	3.6	E325.2	pump	N
74055		1.0U	#/100/ml	4	1.0	SM9222D	pump	N
00400	-	5.90	su	6.5-8.5	N/A	Field	pump	N
82079		12	NTU	Report	0.13	E180.1	pump	N
1								
	Bullder PARNT Code R2545 00620 70294 00940 74055 00400	Builder   PARM Code   PARM Code   R2545	Builder   PARM Code   (Analysis Results)	Builder   PARM ("odc   (Analysis Results)	Builder   PARM ("odc   (Anniyais Results)     Requirement	Builder   PARM (odc   (Analysis Results)	Builder   PARM ('odc   (Analysis Results)     Requirement	Builder   PARM Code   (Analysis Results)   Requirement   Equipment Used

COMMENTS AND EXPLANATION:

4/15/2004

11

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID.

Well Type: Description: MWI-7 Intermediate

Well Name MW-7 Golf Course

WAFR # 6000 GMS# 3048A13419 02/16/2010

Monitoring Period
Was the well purged before sampling?

From: January 2010 To. March 2010 X Yes ____ No

Date Sample Obtained: Firne Sample Obtained:

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Uolts	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Fiftered (L/F/N)
Water Level Relative to Feet, NGVI)	82545		64.13	Foct	Report	N/A	Field	pump	N
Nitrate, (as N)	00620	_	2.5	ing/l	Report	0.047	SM4500NO3-F	pump	N
Sulids, Total Dissolved(TDS)	70295	70296	1100	mg/i	Report	8	E160.1	pemp	N
Chloride (as Cl)	00940		510	mg/l	Report	3.6	E325.2	ритр	N
oliform, Fecal	74055	-	1.00	#/100/ml	<b>Report</b>	1.0	SM9222D	bump	N
pił	00400		5.83	SU	Report	N/A	Field	pump	N
Turbidity, Lab - Nepholometric	82079		28	NTU	Report	0.13	E180.1	pump	И
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COMMENTS AND EXPLANATION:

4/15/2004

ESEP Form 62-620-916 (49), effective November 29, 1995

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW tD:

Well Type: Description. MWC-1

Compliance
Well Name MW-1 On-Site Irrigation WAFR # 32995

GM5# --

Monitoring Period
Was the well purged before sampling?

From: January 2010 To: March 2010 X Yes ____ No

2/15/2010 09:19

Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Bullder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	l'nite	Permii Requirement	Defection Limits	Analysis Method	Sampling Equipment lised	Samples Filtered (L/F/N
Water Level Relative to Feet, NGVD	B2545	-	62.95	Feet	Report	N/A	Pield	Pemp	N
Water Level Relative to Feet, NGVD	82545			Feet	Report	N/A	Field	Pump	N
ater Level Relative to Feet, NGVD	82545	-		Feet	Кероп	N/A	Field	Риптр	N
3 rd Month of Quarter Nitrate, (us N)	00620		0.60	mg/l	10	0.047	Field	Pump	N
Solids, Total Dissolved(TDS)	70295	70296	52	mg/l	500	8	Field	Pump	N
Chloride (as Cl)	00940	•	13	mg/l	250	3.6	Field	Ритр	N
Coliform. Fecal	74055		1. <b>0</b> U	4/100/m1	4	1.0	Field	Pump	N
рН	00400		5.55	SU	6.5-8.5	N/A	Field	Pump	N
Turbidity, Lab - Nepholometric	82079		19	NTU	Report	0.13	Field	Ритр	Ň
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COMMENTS AND EXPLANATION:

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID. Well Type: Description

MWC-2 Compliance

Well Name MW-2 On-Site Irrigation WAFR # 32996

GMS# -

Monitoring Period

Was the well purged before sampling?

From: January 2010 - To: March 2010 - X. Yes ____ No

Date Sample Obtained: Time Sample Obtained:

2/15/2010 09:58

Parameter	Permit Builder PARM Code	Other Hintoric PARM Code	Sample Measurement (Anulysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (1/F/N
Water Level Relative to Feet, NGVD	82545		63.74	Feet	Report	N/A	Field	Pump	N
Water Level Relative to Feet, NGVD	82545	.,	-	Feet	Report	N/A	Field	Pump	N
Inter Level Relative to Feet, NGVI)  3rd Month of Quarter	82545			l'eet	Report	N/A	Field	Pump	N
Nitrate, (as N)	00620		0.07 <b>8</b> U	mg/l	10	0.047	Field	Pump	N N
Solids, Total Dissolved(TDS)	70295	70296	120	mg/l	500	8	Field	Pump	N
Chloride (as Cl)	00940	-	9,2	my/t	250	3.6	Field	Pump	N
Coliform, Fecal	74055		1.0U	#/100/ml	4	1.0	Field	Pump	N
pli	00400	-	6.74	SŲ.	6.5-8.5	N/A	Field	Pump	N N
Turbidity, Lab - Nepholometric	82079		17	NTU	Report	0.13	Field	Pump	N
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COMMENTS AND EXPLANATION			<u> </u>	<u> </u>					

COMMENTS AND EXPLANATION:

4/15/2004

DEP Form 62-420 98R(10), efficiency him control 29, 1994.

County:

Facility Name. Permit Number: Orange County Wedgefield WWTF

FLA010900

GMS# 3048P03712

Permit Builder MW ID. Well Type: Description:

MWC-3

Compliance Well Name MW-3 On-Site Irrigation WAFR # 32997

GMS# --

Date Sample Obtained: Time Sample Obtained:

2/15/2010 10:47

Monitoring Period
Was the well purged before sampling?

From: January 2010 To: March 2010 X Yes ___ No

Parameter	Permit Builder PARM Code	Other Alktoric PARM Code	Sample Mensurement (Aughysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (1777)
Water Level Relative to Feet, NGVD  1" Month of Quarter	82545		67.21	l cet	Report	N/A	Field	Pump	N
Water Level Relative to Feet, NGVD  2 nd Month of Quarter	82545			Feet	Report	N/A	Field	Pump	N
fater Level Relative to Feet, NGVD	82545			Foct	Report	N/A	Field	Ритар	N
Nitrate, (as N)	00620		0.078	mg/l	10	0.047	Field	Pump	N
Solids, Total Dissolved(TDS)	70295	70296	530	ng/l	500		Field	Pump	N
Chloride (as Cl)	00940	1	220	mg/l	250	3.6	Field	Pump	N
Coliform, Fecal	74055_		1. <b>0</b> U	√/100/ml	4	Lo	Field	Pump	×
рН	00400		6.17	SU	6.5-8.5	N'A	l'ield	Pump	N
Turbidity, Lab - Nepholometric	12079		6.1	NTU	Кероп	0.13	Field	Pump	N
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COMMENTS AND EXPLANATION:

4/15/2004

DEP Form n2-620 910(10) efficienc benember 20-1006

County: Facility Name. Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWP-1 Piczometer

Well Name MWP-1* On-Site Irrigation WAFR # 55881

GMS# --

Monitoring Period
Was the well purged before sampling?

From: January 2010 To: March 2010
____ Yes X No

Date Sample Obtained: Time Sample Obtained:

1/5/2010-217/2010-3/16/2010

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Limits	Permit Requirement	Detection Limits	Analysis Method	Sempling Equipment Used	Samples Filtered (IJF/N
Water Level Relative to Feet, NGVD	82545	-	66.42	Feet	Report	N/A		Solinst	
I" Month of Quarter  Water Level Relative to Feet, NGVD  2 nd Month of Quarter	82545		67.37	Feet	Report	N/A		Water Level Meter Solinst Water Level Meter	<u></u>
mer Level Relative to Feet, NGVD	82545		67.36	Feet	Kepart	N/A		Solinst Water Level Meter	
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DEP Form 62-620 910(FF) affective November 29, 1494

COMMENTS AND EXPLANATION:
* MWP-1 is the well labeled "Well #1" as shown on Sheet C-12 dated 12/1/98 4/20/2004

County: Facility Name: **Orange County** Wedgefield WWTF

Permit Number. FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWP-2 Piczometer

Well Name MWP-2 **On-Site Irrigation** WAFR # 55883

GMS# --

Montoring Period
Was the well purged before sampling?

From: January 2010 To: March 2010 ____ Yes X No

Date Sample Obtained: Time Sample Obtained:

1/5/2010-2/17/2010-3/16/2010

Other Historic Sample Measurement Units Permit Detection Limits Permit Analysis Method Sampling Equipment lised Samples Filtered (L/F/N) Parameter PARM Code (Auniysis Results) PARM Code 66.34 Feet B2545 Кероп N/A Water Level Relative to Feet, NGVD Solinst 1" Month of Quarter Water Level Meter 66.40 Feet Water Level Relative to Foet, NGVD 82545 Report N/A Solinst 2nd Month of Quarter Water Level Meter 66.41 ster Level Relative to Feet, NGVD 82545 Feet Report N/A Water Lovel Meter Month of Quarter

17

DEP Form 62-630-910 (D), effective November 29, 1994

COMMENTS AND EXPLANATION:

* MWP-2 is the well labeled "Well #2" as shown on Sheet C-12 dated 12/1/98
4/20/2004

#### 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 completing the DMR. Hard copies and/or electron 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 shall be mailed to the address printed in the DMR by the 28th of 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 or reclaimed water data. All domestic wastewater The DMR consists of inter-part—N. D. and 12-an of which they of may have been presented by the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of

CODE	DESCRIPTION/INSTRUCTIONS
ANC	Analysis not conducted.
DRY	Dry Well
FLD	Flood diseater.
IFS	Insufficient flow for sampling.
LS	Lost sample
MND	Monitoring not required this period.

CODE	DESCRIPTION/INSTRUCTIONS
NOD	No discharge from/to site.
OPS	Operations were shutdown so no sample could be taken.
OTH	Other. Please enter an explanation of why monitoring data were not available.
SEF	Sampling equipment failure.

When reporting analytical results that fall below a laboratory's reported method detection limits or practical quantification limits, the following instructions should be used:

- Results greater than or equal to the PQL shall be reported as the measured quantity.
- Results less than the POL and greater than or equal to the MDL shall be reported as the laboratory's MDL value. These values shall be decined equal to the MDL when necessary to calculate an average for that parameter
- 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 the effluent limit, whichever is lower, shall be used for that sample when necessary to calculate an average for that parameter. Values less than the MDL are considered to demonstrate compliance with an effluent limit stoon.

#### PART A DISCHARGE MONITORING REPORT (DMR)

quirements are interim or final, and the required submittal frequency (e.g. monthly, annually, quarterly, etc.). Submit Part A based on the required reporting frequency in the header and the instructions shown in the pennit.

The following should be completed by the permittee or authorized representative: at A of the DMR is comprised of one or more sections, each having its own header information. Facility information is preprinted in the header as well as the monitoring group number, whether the limits and monitoring

No Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data or codes to be entered for all of the parameters on the DMR for the entire monitoring group number; however, if the monitoring

No Discharge From Site: Uncert this box is no discharge occurs and, as a result, order are no double or control to an other parameters for the parameters for which there was no discharge.

Munitoring 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 date on this report were collected and analyzed.

Sample Measurement: Before filling in sample measurements in the table, check to see that the data collected correspond to the limit indicated on the DMR (i.e. interim or final) and that the data correspond to the monitoring group number in the header. Enter the data or calculated results for each parameter on this row in the non-shaded area above the limit. Be sure the result being entered corresponds to the appropriate statistical base code (e.g. annual 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 number of times the measurement was made in the space above the shaded area.

Shapple Type: The shaded areas in this column contain the type of sample (e.g. grab, composite, continuous) required by the permit. Enter the actual sample type that was taken in the space above the shaded area.

Signature: This report must be signed in accordance with Rule 62-620 305, F.A.C. Type or print the name and title of the signing official. Include the relephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

Comment and Explanation of Any Violations: Use this area to explain any exceedances, any upset or by-pass events, or other items which require explanation. If more space is needed, reference all attachments in this area

#### PART B - DAILY SAMPLE RESULTS

Munitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected at d analyzed Monitoring Fermion that in the control of a many control laboratory or a contract laboratory of a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or a contract laboratory or qualifier codes should be used and an explanation provided where appropriate

CUDE	DESCRIPTION/INSTRUCTIONS
<u> </u>	The compound was analyzed for him not detected.
A	Value reported is the mean (average) of two or more determinations
	Estimated value, value not accurate
0	Sample held heyond the actual holding time.
V	I absentory 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

Mostoring Period: Enter the month, day, and year for the first and last day of the monutoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

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

Time Sample Obtained: Emer the time the sample was taken

Samule Measurement: Report 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, I. A.C., or from other sources

Sampling Equipment Used: Indicate the procedure used to collect the sample (e.g. airlift, bucket/builer, centrifugal pump. etc.)

Samples Filtered: Indicate whether the sample obtained was filtered by laboratory (L.), filtered in field (F), or unflittered (N).

Signature: This report must be signed in accordance with Rule 62-620 305. F.A.C. Type or prim the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Erner 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 area.

#### PECIAL INSTRUCTIONS FOR LIMITED WET WEATHER DISCHARGES

Flow (Limited Wet Weather Discharge): Einter the measured average flow rate during the period of discharge or divide gallons discharged by duration of discharge (converted into days). Record in million gallons per day (MGD)

Flow (Upstresss): Enter the average flow rate in the receiving stream upstress the point of discharge for the period of discharge. The average flow rate can be calculated based on two measurements; one made at the stan

Flow (Opstream): Links the steam in the latent in the case of the discharge period. Measurements are to be made at the and of the discharge period. Measurements are to be made at the mode 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 Dilution Ratio accurate to the nearest 0.1.

Actual Stream Dilutin Ratio: For each day of discharge, compare the minimum Stream Dilutin Factor (SDF) from the permit to the calculated Stream Dilutin Ratio: For each day of discharge, compare the minimum Stream Dilutin Factor (SDF) from the permit to the calculated Stream Dilutin Ratio: On Part B of the DMR, enter an assertisk (*) if the SDF is greater than the Stream Dilutin Ratio on any day of discharge. On Part B of the DMR, add up the days with an """ and record the total number of days the Stream Dilutin Ratio on any day of discharge. Stream Dilution Ratio.

CBOD,: Enter the average CBOD, of the reclaimed water discharged during the period shown in duration of discharge

CBODS: First he average TKN of the reclaimed water discharged during the period shown in diration of discharge.

TKN: Enter the average TKN of the reclaimed water discharged during the period shown in diration of discharge.

Actual Rainfall: Enter the actual minfall for each day on Part B. Enter the actual cumulative minfall to date for this calendar year and the actual total monthly rainfall on Part A. The complainer rainfall to date for this calendar year is the total amount of rain, in inches, that has been recorded since January. I of the current year through the month for which this DMR contains data.

Rainfall Guring Average Rainfall Year: On Part A, enter the total monthly minfall during the everage rainfall year and the cumulative rainfall for the average rainfall year from January through the month for which this DMR contains data.

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

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail (	ibis report	to: Department	of Environmental F	rotection, Central	Detrict, 3319	Maguire Houlevard	Swite 232, Orlando	, FI . 32803-3767				
PERMITTEE NAME: MAILING ADDRESS:					PERMIT N	IUMBER	FLA01090	0				
		orida, 33610			LIMIT:		Final		REPORT	r:	Month	h
FACILITY.	Wedgefie	d wwif			CLASS SE	ZE.	N/A		GROUP:		Donier	tie
LOCATION:		croft Boulevard	!			RING GROUP	R-001					
	Orlando,	FL			NUMBER MONITOR	RING GROUP DES	C: Public Acco	ess Rouse, includin	ų influent 🗾		FII	F
COUNTY:	Orange				SITE:	IARGE FROM RING PERIOD W 01.2010	To: April 3			_		- Fac
Parameter			Quantity	or Loading	Units	Que	lity or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow		Sample Measurement	0.230		MGD				<u> </u>	0	5 Days/Week	Flow meters and totalizers
Man.Site No. FLW-1	Υ	Permit Requirement	0.368 (An.Avg.)		MOD			]			5 Days/Week	Flow meters and totalizers
Flow		Sample Measurement	0.238		MGD					0	5 Days/Week	Figur meters an totalizers
PARM Code 50050 Mon.Site No. FLW-I	1	Permit Requirement	Report (Mo.Avg.)		MGD						5 Days/Work	Flow meters and totalizers
3D, Carbonaceous 5 d	•	Sumple Measurement				6.8				0	Every Two Weeks	8-hour FPC
Mon.Site No. EFA-1	Υ	Permit Requirement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
DOD C-4		0										

(An.Avg.) 6.5

30.0

(Mo.Avg.)

7.9

5.0

(Max.) 7,0

6.0

(Min.)

8.0

60.0 (Max.)

7.7

8.5

(Mac)

me/L

91.

SU

8-hour FPC

8-hour FPC

Grab

Grab

Grab

Grab

Every Two

Weeks Every Two Weeks

4 Days/Week

4 Days/Week

5 Days/Week

5 Days/Week

PARM Code 00400 Mon.Site No. EFA-I l 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 property gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Roger Holsapple Lead Operator	My Malzaphi	407-869-1919	2010/05/20

1

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here). The TSS results of 79 mg/l on May 27,2010 is due to sampler error

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

PARM Code 80082 A Mon.Site No. EFA-1 Solids, Total Suspended

PARM Code 00530 B Mon.Site No EFB-1 pH

BOD, Carbonaceous 5 day, 20C

A

Sample Measurer

Permit Requiren

Sample

Permit

Measurement

Measurement

#### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

MONITORING GROUP NUMBER: <u>MONITORING PERIOD</u> From: April 01,2010

R-001

To: April 30,2010

PERMIT NUMBER, FLA010900

Frequency of Analysis

4 Days/Week

4 Days/Week

Sample Type

Grab

Grab

Parameter		Quantity or Loading	Units	Quality or	Concentration	Units	No.	
Coliform, Fecal, % less than detection	Sample Measurement			87%		PER- CENT	Ex.	ĺ
PARM Code 51005 A Mon. Site No. EFA-1	Permit Requirement			75 (Min.)		PER- CENT		I
Coliform, Fecal	Sample Measurement			5		#/100ML	0	l
PARM Code 74055 A Mon.Site No. EFA-1	Permut Requirement			25 (Max.)		#/100ML		İ
Total Residual Chlorine (For Disinfection)	Sample Measurement			1.0		my/L	0	Ī

MUS.310 NO. BEAT	- Acceptationals				(2011)			Cent	1	į.	1
Coliform, Fecal	Sample				5			#/100ML	O	4 Davs/Week	Grab
	Measurement		<u> </u>	<del> </del>		<del> </del>					]
PARM Code 74055 A	Permut		1		25			#/100ML	İ	4 Days/Week	Grab
Mon.Site No. EFA-1	Requirement				(Max.)		<b></b>	.1 .	L	<u> </u>	
Ioui Residual Chlorine (For	Sample				1.0			mg/L	0	Continuous	Meter
Disinfection)	Measurement						<del></del>				
PARM Code 50060 A	Permit		1	1 1	1.0		1	mg/L		Continuous	Meter
Mon,Site No. EFA-1	Requirement		ļ . <b></b>		(Min.)					<u></u>	
Turbidity	Sample			]	1.9			NTU	0	Continuous	Meter
	Measurement			<b>↓</b>				1		İ	
PARM Code 00070 B	Permit			1	Report	]		NTU "		Continuous	Moter
Mon.Site No. EFB-1	Requirement				(Max.)					1	1
Nitrogen, Nitrate, Total (as N)	Sample				7.82			mg/L	0	Monthly	8-hour FPC
	Measurement							1 .			
PARM Code 00620 A	Permit			1	12.0			mg/L		Monthly	8-hour FPC
lon.Site No. EFA-1	Requirement				(Max.)	l		1 -		""""	a mountie
low (from groundwater well)	Sample	0.00		MGD					0	Continuous	Flow meters and
	Measurement					Ĭ		1 .	•		10talizera
PARM Code 50050 P	Permit	Report		MGD			1	<del></del>	_	Continuous	Flow motors and
Mon,Site No. FLW-6	Requirement	(An,Avg.)					1		i	COMMISSOR	totalizers
Flow (from groundwater well)	Sample	0.00	9.00	MGD		· · · · ·		<del></del>	0	Continuous	Flow meters and
	Mensurement		ļ			j	1	1	•	Contragost	
PARM Code 50050 O	Permit	Report	Report	MGD			<del>†</del> -	<b>†</b>	_	Continuous	Flow meters and
Mon.Site No. FLW-6	Requirement	(Mo.Avil.)	(3-Mo.Avg.)			[			1	Continuous	totalizera
Flow (sotal to zone 3)	Sample	0.000	1 1 - 1 -	MGD			<del></del>	·	ō	Continuous	
	Measurement			i - I		i		1	•	CONTRACTS	Flow meters and
PARM Code 50050 R	Permit	0.0232		MGD			<del></del>	_	-	Continuous	totalizers
Mon.Site No. FLW-5	Requirement	(An.Avg.)				i	1			Continuous	Flow maters and
Flow (total to zone 3)	Sample	9.000	0.000	MCD	· · · · · · · · · · · · · · · · · · ·		<del></del>	<del>   </del>		6	totalizers
The (was to true of	Measurement	******	0.000			1			0	Continuous	Flow meters and
PARM Code 50050 S	Permit	Report	Report	MGD		<del>                                     </del>	<del> </del>				totelizera
Mon.Site No. FLW-5	Requirement	(Mo.Avg.)	(3-Mo.Avg.)	! """			Į.			Continuous	Flow meters and
			(3-MO-ME)	MGD		ļ	<del> </del>				totelizers
Flow (total to zone 2)	Sample	0.000		MGD					0	Contingous	Flow meters and
DADLED 4 80050 W	Measurement Permit	0.0634		MGD				I	]		totalizera
PARM Code 50050 T				L THUR				1 1		Continuous	Flow meters and
Mon.Site No. FLW-4	Requirement	(An.Avg.)		1.05			<del> </del>				totalizers
Flow (total to zone 2)	Sample	9,000	0.000	MGD					0	Continuous	Flow meters and
	Measurement						4	i			totalizers
PARM Code 50050 U	Permit	Report	Report	MGD				I T	$\neg \lnot$	Continuous	Flow meters and
Mon,Site No. FLW-4	Requirement	(Mo.Avg.)	(3-Mo Avg )				I	1			totalizers

COMMUNTS: Flow was going to reuse on the 12th of February when NO3 result was 12.12.

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgelield WWTF

R-DO

PLRMIT NUMBER: FLA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: April 01,2010

Fo: April 30,2010

Parameter	Quantity or Loading		or Loading	Units Quality or Concentration		entration	Units	No. Ex.	Frequency of Analysis	Sample Type	
Flow (total to zone 1)	Sample Measurement	0.000		MGP					0	Continuous	Flow meters as
PARM Code 50050 V Mon.Site No. FLW-3	Permit Requirement	0.0114 (An.Avg.)		MGD		}				Сопилионе	Flow meters an
Flow (total to zone 1)	Sample Measurement	0,000	0.900	MGD					0	Continuous	Fion meters an
PARM Code 50050 W Mon.Site No. FLW-3	Permil Requirement	Repon (Mo.Avg.)	Report (3-Mo.Avg.)	MGD						Continuous	Flow meters and total mers
Flow (total to golf course)	Sample Measurement	0.227		MGD					•	Continuous	Flow meters an
PARM Code 50050 Moo.Site No. FLW-2	Permit Requirement	0.270 (An Avg.)		MGD						Continuous	Flow maters and totalizers
Flow (total to golf course)	Sample Measurement	0.212	0.251	MCD					0	Continuous	Flow meters an
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD						Continuous	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement				174,0			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G 'on.Site No. INF-!	Permit Requirement				Report (Mo.Avg.)			mp'i.		Every Two Weeks	8-bour FPC
olids, Total Suspended	Sample Measurement				143.0			tæg/t.	0	Every Two Weeks	8-hour FPC
PARM Code 00130 G Mon.Site No. INF-1	Permit Requirement				Report (Mo.Avg.)			ng/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement				58.6			Percent	0	Monthly	Calculated
PARM Code 00180 I Mon,Site No. FLW-1	Pennit Requirement				Report			Parcen		Monthly	Calculated
	Sample Measurement										
	Permit Requirement					<u> </u>					
	Sample Measurement										
	Permit Raquisement										
	Sample Measurement										
	Permit Requirement						}				

Initially, flow is limited to 0.270 MGD AADE. However, the flow may be increased after completion of the second treatment plant and pending the results the required load test DEP Form 62-620 910(10). Effective November 29, 1994

# DAILY SAMPLE RESULTS - PART B Facility: Wedgefield WWTF

Permit Number: Monitoring Period

FLA010900 From: April 10,2010

To: April 30,2010

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ML)	pli (Max)	pH (Min)	TRC (For Disinfect.) (mg/l.)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Total (as N) (mg/L)
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
Mon. Site	EFA-I	EFA-I	EFA-1	EFA-1	EFA-I	EFB-1	EFB-1	FLW-I	EFA-1
-		2	7.5	7.5	1.5	1.0	2.8	0.280	
2		<1	7.7	7.7	1.0	L.1	2.9	0.228	
3			7.3	7.3	3.2		2.9	0.247	
4			7.4	7.4	1.4		2.9	0.269	
5		<1	7_3	7.3	LA.	0.1	2.9	0,244	
6		<1	7.5	7.5	0.1	1.0	2,9	0,227	
7		<1	7.6	7.6	2.4	1.2	2.3	0.187	
8		4	7.4	7.4	2.4	1.6	2.9	0.208	
9			7.3	7.3	2.5	-	2.9	0.238	
10			7,2	7.2	0.1		2.9	0.240	
- 11			7.3	7.3	1.0		2.9	0.272	-
12		<1	7.4	7.4	2.5	1.3	2.9	0.238	
13		2	7.3	7.3	2.4	1.0	2.9	0.254	
14	5.0	<1	7.3	7.3	2.4	1.7	2.8	0.239	6.66
15		<1	7.3	7.3	2.3	1.0	2.3	0.238	
16			7.2	7,2	2.3		2.5	0,247	
17			7.0	7.0	1.7		2.3	0.217	
18			7,3	7.3	1.8		2.5	0.211	
19		<1	7.2	7.2	2.3	1.6	2.9	0.325	
20		5	7.3	7.3	3.3	4.1	2.9	0.246	<u> </u>
21		<i< td=""><td>7.4</td><td>7,4</td><td>5,0</td><td>4.5</td><td>2.9</td><td>0.243</td><td></td></i<>	7.4	7,4	5,0	4.5	2.9	0.243	
22		<1	7.5	7.5	5.0	1.9	2.9	0.217	
23			7.2	7.2	5.0		2.9	0.207	
24			7.6	7.6	3.2		2.9	0.231	
25			7.4	7.4	4.6		2.9	0.282	
26			7.2	7,2	5.0		2.9	0.191	
27		<	7.4	7.4	2.6	7.9	2.9	0.235	
28	8.0	<1	7.5	7.5	2.5	1,1	2.2	8.241	7,82
29		<1	7.3	7.3	1.7	1.1	2.9	0.230	
30			7_3	7.3	2.2		2.1	0.226	
Total	13.0	19.5	220.6	220.6	76.6	34.1	R2.7	7.158	14.48
Mo. Avg.	6.5	1,14	7.3	7.3	2,5	2.0	2.7	0.238	7.24

## PLANT STAFFING:

Day Sout Opermor	Class;	<u>C</u>	Certificate No:	16046	Name:	Paul Tzareff
Day Shift Operator	Class:		Certificate No:		Name:	
Night Shift Operator	Class:		Certificate No:		Name:	
Lead Operator	Class:	<u> </u>	Certificate No:	8863	Name:	Roger Holsuppic

## DAILY SAMPLE RESULTS - PART B

Permit Number:

FLA010900

Facility: Wedgefield WWTF

Monitoring Period

From: April 01, 2010 To April 30, 2010

Code Mon. Site	golf course 50050 F1.W-2	Flow (MGD) Zone I	Zone 2	Flow (MGD) Zone 3	Flow (MGD) GW makeup	CBOD5 (mg/L)	TSS (mg/L)		ŀ	ł
Mon. Site	course 50050	50050		70ne 3			1			
Mon. Site		50050		ZOIC 3	well				ļ	
Mon. Site			50050	50050	50050	80082	00530			-
		FLW-3	FLW-4	F1.W-5	FLW-6	INF-1	INF-1			
	0.806	0,00	0.00	0.00	0.00					
2	0.766	0.00	0.00	0.00	0.00					
3	0.731	0.00	0.00	0.00	0.00					
4	0.751	0.00	0.00	0.00	0.00	_				
5	0.626	0.00	0.00	0.00	0.00					
6	0.742	0.00	0.00	0.00	0.00					
7	0.073	0.00	0.00	0.00	0.00					
8	0.076	0.00	0.00	0.00	0.00					
9	0.079	0.00	0.00	0.00	0.00		1			
10	0.068	0.00	0.00	0.00	0.00					
11	0.000	0 00	0.00	0.00	0.00	_				
12	0.008	0.00	0.00	0.00	0.00					
13	0.148	0.00	0.00	0.00	0.00	-			<del>                                     </del>	
14	0.156	0.00	0.00	0.00	0.00	159.0	128.0			
15		0.00	0.00	0.00	0.00		1		<del>†                                     </del>	<u>†                                      </u>
16	0.168	0.00	0.00	0.00	0.00		†		<del> </del>	1
17		0.00	0.00	0.00	0.00			_		
18	0.000	0.00	0.00	0 00	0.00	<del>                                     </del>	<u> </u>		<del> </del>	
19	0.053	0.00	0.00	0.00	0.00				<del> </del>	<u> </u>
20	0.081	0.00	0.00	0.00	0.00					<u> </u>
21	0.145	0.00	0.00	0.00	0.00				<del></del>	<u> </u>
22	0.142	0.00	0.00	0.00		<u> </u>	<del>                                     </del>			
23	0.103	0.00	0.00	0.00	0.00	<del>                                     </del>	<del>                                     </del>		+	
24	0.082	0.00	0.00	0.00	0.00	<del> </del>	<del>-</del>		<del> </del>	<del> </del>
25	0.044	0.00	0.00	0.00	0.00	-	<del></del>		<del> </del>	
26	0.000	0.00	0.00	0.00	0.00				<del> </del>	
27	0.000	0.00	0.00	0,00	0.00					<del>                                     </del>
28	0.018	0.00	0.00	0.00	0.00	189,0	158.0			
29	0.052	0.00	0.00	0.00	0.00				-	<del> </del>
30	0.019	0.00	0.00	0.00	0.00		<del> </del>			
	0.117		-	-	0.00			, <del></del>	<del></del> -	
Total	6.360	0.00	0.00	0.00	0.00	348.0	286.0		<del>_</del>	ļ
Mo. Avg.	6.364 0.212	0.00	0.00	0.00	0.00	174.0	143.0		1	

PLANT STAFFING:

Day Shift Operator	Class.	C.	Certificate No:	16046	Nume:	Paul Tzareff
					•	
Day Shift Operator	Class:		Certificate No:		Name:	
Ni. to Ship on	4.11		o			
Night Shift Operator	Class:		Certificate No:		Name:	
Lead Operator	Class:	<u> </u>	Certificate No:	8863	Name:	Roger Holsapple





June 24, 2010

Florida Department of Environmental Protection

Subject: DMR exceedence

Dear, William Hesser

I have two exceedences on the DMR for the month of May 2010. The Nitrate sample was not taken with the first composite samples and was over looked the second time we took the composite sample. This is due to operator error. We are taking extra samples for the month of June. The second thing is, one of the Fecal Coliform samples exceeded the 25ml with a result being 37ml. We did not notice in time to resample. This was due to a lack of communication between the lab and the operator.

Sincerely,

Roger Holsapple Chief Operator 3100 Bancroft Blvd. Orlando, Fl. 32833 Office: (407) 586-2112

Cell: (407) 259-6991

rholsapple@utilitypartnersllc.com

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A propertient of Lovironmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, FL, 32803-3767 When Completed until this report to: Department of Lovironmental Protection, Central District, 3319 Magnire Boulevard Suite 232, Orlando, Ft., 32803-3767

PERMITTEL NAME: Pluris-Wedgefield MAILING ADDRESS: 6608 Walton Way Tampa Florida, 33610

PERMIT NUMBER LIMET CLASS SIZE:

11.4010900

REPORT GROUP:

FACILITY:

COUNTY

Wedgefield WWTF 3100 Bancroft Boulevard

MONITORING GROUP NUMBER

R-0.)]

Final

Public Access Reuse, including Influent

Orlando, I-L Orange

NO DISCHARGE FROM SITE

MONITORING GROUP DESC:

MONITORING PERIOD From: May 01,2010

To: May 31,2010

Parameter		Quantity or Loading	Units	Qua	Quality or Concentration		No.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0.227	MGD				0	5 Days/Week	Flow meters an
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Requirement	0.368 (An.Avg.)	MGD					5 Days/Week	Flow meters and totalizers
Flow	Sample Measurement	0.212	MCD				0	5 Days/Week	Flow meters an
PARM Code 50050 I Mon Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)	MGD					5 Days/Week	Flow meters and totalizers
GOD, Carbonaceous 5 day, 20C	Sample Measurement			8.2			0	Every Two Weeks	8-hour FPC
ARM Code 80082 Y  Mon.Site No. EFA-1	Permit Requirement			20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement			8,0	9.0	Ngrii	0	Every Two Weeks	8-hour FPC
PARM Code 80082 A Mon. Site No. EFA-1	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	нıg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			4,6		ang/t	0	4 Days/Week	Grab
PARM Code 00530 B Mon.Site No. EFB-1	Permit Requirement			5.0 (Max.)		արվ.		4 Days/Week	Grab
pН	Sample Measurement			7.2	7.8	su	0	5 Days/Week	Grab
PARM Code 00400 A Mon.Site No. EFA-1	Pennit Requirement			6.0 (Min.)	8 \$ (Max.)	SU		5 Days/Week	Grab

Learnity 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 property 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 impresonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECU	JTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY:MM-DD)
Roger Holsapple	Lead Operator	the Holgant	407-869-1919	2010/06/24

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference ull attachments here). FARM code: 60620 The infinite sample for this month was not taken due to operator error PARM code 74055 Fecal Coliform is 37 exceeds the max of 25 % 100ML

DFP Form 62-620 910(10), I Hective November 29, 1994

#### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

MONITORING GROUP NUMBER: MONITORING PLRIOD From: May 01, 2010

R-001

PERMIT NUMBER: FLA010900

ETQRING PERIOD Fr. May 01,2010 Fo: May 31,2010

Parameter		Quantity of	or Loading	Units	Qu	ality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Typ
oliform, Fecal, % less than letection	Sample Measurement				81,25		PER- CENT	0	4 Days/Week	Grab
PARM Code 51005 A Mon.Site No. EFA-1	Permit Requirement				75 (Min.)		PER- CENT		4 Days/Week	Grab
oliform, Fecal	Sumple Measurement				37		Winesil.	7	4 Days/Week	Grab
ARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement				25 (Max.)		4/100MI,		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.0		mg/1.	0	Continuous	Meter
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)		mg:L		Continuous	Meter
Turbidity	Sample Measurement				2.9		NTU	0	Continuous	Meter
PARM Code 00070 B Mon.Site No. EPB-1	Permit Requirement				Report (Max.)		NTU		Continuous	Meter
Nitrogen, Nitrate, Total (as N)	Sample Measurement				ANC		mg/l	'	Monthly	8-hour FP(
PARM Code 00620 A  Mon.Site No. EFA-1	Permit Requirement				12.0 (Max.)		rag/L		Monthly	8-hour PPC
w (from groundwater well)	Sample Measurement	00,00		MGD				0	Continuous	Flow meters a
PARM Code 50050 P Mon.Site No. FLW-6	Permit Requirement	Report (An.Avg.)		MOD	:				Continuous	Flow meters as
Flow (from groundwater well)	Sample Measurement	0.00	0.00	MGD				0	Continuous	Flow meters a totalizers
PARM Code 50050 Q Mon.Site No. FLW-6	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow meters a totalizers
Flow (total to zone 3)	Sample Mogurement	0.000		MGD				0	Continuous	Flow meters a
PARM Code 50050 R Mon.Site No. Fl.W-5	Permit Requirement	0.0232 (An.Ayg.)		MGD					Continuous	Flow meters as totalizers
Flow (total to zone 3)	Sample Measurement	0,000	066,0	NGD				Ü	Continuous	Flow meters a totalizers
PARM Code 50050 S Mon.Site No. FLW-5	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow meters at
Flow (total to zone 2)	Sample Measuroment	0.000		MGD				Đ	Continuous	Flow meters a totalizers
PARM Code 50050 T Mon.Sire No. FLW-4	Permit Requirement	0.0634 (An.Avg.)		MQD					Continuous	l'low meters au
Flow (total to zone 2)	Sample Measurement	0.000	OHHU.O	MGD				0	Continuous	Flow meters a totalizers
PARM Code 50050 U Mon.Site No. FLW-4	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow meters at

COMMENTS: Flow was going to reuse on the 12th of February when NO3 result was 12.12

#### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgetield WWTF

R-001

PERMIT NUMBER: FLA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: May 01,2010

To: May 31,2010

				From: Ala	9 01,2010	10: May 31,	2010				
Parameter		Quantity	or Loading	Units	Qua	lity or Concentra	tion	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (total to zone 1)	Sample Measorement	0.000		MGD	<u> </u>				0	Continuous	Flow meters and
PARM Code 50050 V Mon Site No. FLW-3	Permut Requirement	0.0114 (An.Avg.)		MÚD						Continuous	Flow meters and totalizers
Flow (total to zone 1)	Sample Measurement	0.000	009.0	MGD					0	Continuous	Flow meters and totalizers
PARM Code 50050 W Mon.Site No. FLW-3	Permit Requirement	Report (Mo Avg.)	Report (3-Mo.Avg.)	MGD						Continuous	Flow meters and totalizers
Flow (total to golf course)	Sample Measurement	0.222		MGD					0	Continuous	Flow meters and totalizers
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	0.270 (An.Avg.)		MGD						Continuous	Flow meters and totalizers
Flow (total to golf course)	Sample Measurement	0.147	0.264	MGD	~				0	Continuous	Flow meters and totalizers
PARM Code 50050 Mon. Site No. PLW-2	Pennit Requirement	Report (Mn.Avg.)	Report (3-Mo Avg.)	MGD						Continuous	Flow meters and totalizers
BOD, Carbonaueous 5 day, 20C	Sample Measurement				172.5			mg/t.	Ó	Every Two Weeks	8-hour FPC
PARM Code 80082 G on.Site No. INF-1	Permit Requirement				Report (Mo.Avg.)			mg/l.		Every Two Weeks	8-hour FPC
olids, Total Suspended	Sample Measurement				129.0			<b>■g/1.</b>	G	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement				60.8		<del></del>	Percent	0	Monthly	Calculated
PARM Code 00180 1 Mon.Site No. FLW-1	Permit Requirement		ļ		Report			Percent		Monthly	Calculated
	Sample Measurement			ļ							<u></u>
	Permit Requirement	<del>_</del>									
	Sample Measurement										
	Permit Requirement	<u> </u>									
	Sample Measurement										
	Permit Requirement		Į			1					

³ Initially, flow is limited to 0.270 MGD AADF. However, the flow may be increased after completion of the second treatment plant and pending the results the required load test. DEP Form 62-620-910(10), Effective November 29, 1994

## DAILY SAMPLE RESULTS - PART B | Wedgefield WWTF

Permit Number: Monitoring Period

F1.A010900 From: May 01,2010

To: May 31,2010

	CROD5 (mg/L)	Fecal Coliform Bacteria (#/100ML)	pH (Max)	pH (Min)	TRC (For Disinfect.) (mg/L)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Total (as N) (mg/L)
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-I	EFB-1	EFB-1	FLW-1	EFA-L
1			7.2	7.2	1		2.6	0,244	
2			7.3	7.3	1.5		2.9	0.275	
3		<1	7.5	7.5	3	1,0	2.9	0.211	
4	<u> </u>	<1	7.7	7.7	3.0	1.0	2.9	0.230	
.5		<	7.3	7.3	2.4	1.0	2.9	0.226	<u> </u>
6		<1	7.4	7.4	1.1	3.1	2.9	0.222	
7			7.5	7.5	1		1,6	0.245	
8			7.6	7.6	1		2.7	0.195	
9			7.4	7,4	1.2		2.1	0.239	
10		37	7.4	7.4	1.1	4.1	2.9	0.194	ļ
11		3	7.3	7.3	1.3	4.4	2.0	0.209	
12	7.0	3	7.4	7.4	1	4.6	2.4	0.194	
13		<1	7.5	7.5	1.1	2.5	2.5	0.195	ļ
14			7.7	7.7	1		2.9	0.181	
15	!		7.4	7.4	3		1.6	0.173	
16			7.8	7.8	1.3		1.9	0.294	,
17			7.5	7,5	1.1		2.9	0.210	
18		<1	7.4	7.4	3	1.0	2.9	0.235	
19		<1	7.3	7.3	5	1.2	1.1	0.190	
20		<i< td=""><td>7.4</td><td>7.4</td><td>5</td><td>1.0</td><td>2.9</td><td>0.192</td><td></td></i<>	7.4	7.4	5	1.0	2.9	0.192	
21		<1	7.8	7.R	11	1.6	0.9	0.209	
22		<u> </u>	7.3	7.3	1	<u> </u>	0.6	0.182	
23			7.4	7.4	1.5		2.9	0.203	
24		<1	7.3	7.3	2.5	1.0	2.9	0.205	
25		<1	7.4	7.4	3.3	2.0	2.9	0.194	
26	9.0	<1	7.2	7.2	2	1.0	2.4	0.204	
27		<1	7.5_	7.5	2	1.0	2.9	0.199	
28			7.3	7.3	2		1.7	0.194	
29			7.4	7.4	1.6		2.5	0.223	
30			7.6	7.6	2.3		2.8	0.210	
31			7.2	7.2	,		2.0	0.213	
Total	16.0	49.5	230.4	230.4	59.3	31.5	74	6.59	
Mo. Avg.	8.0	3.09	7.4	7.4	1.9	1.96	2.3	0.212	

PLA	NT	STA	FF	ING:

Day Shift Operator	Class:	C	Certificate No:	16046	Name:	Paul Tzareff
Day Shift Operator	Class:		Certificate No:		Name:	
Night Shift Operator	Class:		Certificate No:		Name:	
Lead Operator	Class:	<u> </u>	Certificate No:	8863	Name:	Roger Holsapple

## DAILY SAMPLE RESULTS - PART B Facility: Wedgefield WWTF

Permit Number: Monitoring Period

FLA010900 From: may 01,2010 To May 31,2010

	Flow (MGD) golf	Flow (MGD) Zone 1	Flow (MGD) Zone 2	Flow (MGD)	Flow (MGD) GW makeup	CBOD5 (mg/L)	TSS (mg/L)			
	course			Zone 3	well					
Code	50050	50050	50050	50050	50050	80082	00530			
Mon. Site	F1.W-2	FLW-3	F1.W-4	FLW-5	Fl.W-6	INF-1	INF-I			
1	0.026	0.00	0.00	0.00	0.00		<u> </u>			
2	0.000	0.00	0.00	0.00	0.00					
3	0.095	0.00	0.00	0.00	0.00		<u> </u>		<u> </u>	
4	0.635	0.00	0.00	0.00	0.00					
5	0.102	0.00	0.00	0.00	0.00					
6	0.226	0.00	0.00	0.00	0.00					
7	0.083	0.00	0.00	0.00	0,00					
8	0.056	0.00	0.00	0.00	0.00		<u> </u>			
9	0.000	0.00	0.00	0.00	0.00					
10	0.112	0.00	0.00	0.00	0.00				I	
11	0.141	0.00	0.00	0.00	0.00					
12	0.209	0.00	0.00	0.00	0.00	164,0	110.0			
13	0,155	0.00	0.00	0.00	0.00					
14	0.162	0.00	0.00	0.00	0.00			•		
15	0.436	0.00	0.00	0.00	0.00				1	
16	0.187	0.00	0.00	0.00	0.00					
17	0.266	0.00	0.00	0.00	0.00					
18	0.254	0.00	0.00	0.00	0.00					
19	0.140	0.00	0.00	0.00	0,00					
20	0.181	0.00	0.00	0.00	0.00			. <del></del>		
21	0.183	0.00	0.00	0.00	0.00				1	
22	0.035	0.00	0.00	0.00	0.00					
23	0.000	0.00	0.00	0.00	0.00					
24	0.113	0.00	0.00	0.00	0.00					
25	0.201	0.00	0.00	0.00	0.00					
26	0.182	0.00	0.00	0.00	0.00	181.0	148.0	<del></del>	1	
27	0.132	0.00	0.00	0.00	0.00				1	1
28	0.144	0.00	0.00	0.00	0.00			<del></del>		
29	0.116	0.00	0.00	0.00	0.00		1 1		1	
30	0.000	0.00	0.00	0.00	0.00			-		
31	0.000	0.00	0.00	0.00	0.00					
Total	4.57	0.00	0.00	0.00	0.00	345.0	258.0		1	
Mo. Avg.		0.00	0.00	0.00	0.00	172.5	129.0			

PLANT STAFFIN	17

Day Shift Operator	Class:	С	Conificate No:	16046	Name:	Paul Tzareff
Day Shift Operator	Class:		Certificate No:	-	Name:	
Night Shift Operator	Class:		Certificate No:	<del></del>	Name:	
Lead Operator	Class:	С	Certificate No:	8863	Name:	Roger Holsappie

#### DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

1	When Completed mail ti	his report to: Department of Environmental Protection, Central Di	strict, 3319 Maguire Bouleverd Suite 2	32, Orlando, FL, 32803-3767		
	PERMITTEE NAME: MAILING ADDRESS:	Wedgefield-Pluris	PERMIT NUMBER	FLA010900		
		Tampe Florids 33610	LIMIT: CLASS SIZE:	Final N/A	REPORT: GROUP:	Monthly Domestic
		Wedgefield WWTF			GRODI.	Postsciffe
	LOCATION:	3100 Bancroft Boulevard	MONITORING GROUP NUMBER:	R-001	_	
		Orlando, FL	MONITORING GROUP DESC:	Public Access Reuse, Including Inf	livent (	FILE
	COUNTY:	Orange	NO DISCHARGE PROM SITE:		¥4	l I le la
			MONITORING PERIOD From: June 01,2010			
			To: June 30,2010			

Parameter	Quantity or Loading		or Loading	Units	Qua	lity or Concenti	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0.225		MQD				MGD	0	5 Days/Week	Flow maters on totalizers
PARM Code 50050 Y Mon. Site No. FLW-1	Permit Requirement	0.368 (An.Avg.)		MGD		9 9		ta (a)		5 Days/Week	Flow meters on totalizers
Flaw	Sample Managerement	0.209		MACED				MOD	0	5 Days/Week	Plow meters an
PARM Code 50050 1	Pennit Requirement	(Mo.Avg.)		MGD						5 Days/Week	Flow meters as totalizem
), Carbonaceous 5 day, 20C	Sample Measurement				8.12			MG/L	0	Every Two Weeks	8-bour FPC
PARM Code 80082 Y Monthia No. BPA-1	Permit Requirement				20.0 (An.Avg.)			mg/l		Every Two Weeks	B-hour PPC
BOD, Carbonaceous 5 day, 20C	Sample Mossucement				7.5	8		MO/L	0	Every Two Weeks	B-hour PPC
PARM Code \$0082 A Mga,Site No. 87A-1	Permit Regulrement				30.0 (Ma.Avg.)	60,0 (Max.)		we/L		Every Two	8-bour PPC
Solids, Total Suspended	Sample Measurement				2.9			MG/J.	0	4 Days/Week	Grab
PARM Code 00530 B Mon. Site No. RFB-1	Pecnis Requirement	de la Caracti		7.	5.0 (Mast:)	$\frac{1}{2} \frac{1}{2}	mg/L		4 Dege/Week	Orab	
рH	Sample Measurement				7.0	7.6		BU	•	5 Days/Week	Grab
PARM Code 00400 A Mos Site No. BFA-1	Permit Requirement				6,0 (Min.)	8.5 (Max.)		30		5 Days/Week	Grab

I cartify under penalty of law that this document and all strachments 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, accourate, and complete. I am aware that there are significent penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

			1	•	
NAME/TITLE OF PRINCIPAL EXE	CUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OF	FICER OR AUTHORIZED A	GENT TELEPHONE NO	DATE (YY/MM/DD)
Roger Hotsappie	Lead Operator	Markenill		407-259- <del>69</del> 91	2010-07-23
COMMENT AND EXPLANAT	ION OF ANY VIOLATIONS (Reference all attach	nests been			<del></del>

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

DEP Form 62-620,910(10), Effective November 29, 1994

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

R-001

PERMIT NUMBER: FLA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: June 91,2810 To: June 30,2010

Parameter		Quantity o	Quantity or Loading Units			ality or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sample Type
Colliform, Focal, % less than detection	Semple Measurement				100%			PER- CENT	•	4 Days/Weak	Grab
PARM Code 51005 A Mon.Sim No. EFA-1	Permit Requirement				75 (Mln.)			PER- CENT		4 Days/Week	Greb
Colliform, Feesi	Sample Measurement				0.5			a/100ML	•	4 Days/Week	Grab
PARM Code 74055 A. Mon.Site No. EFA-1	Permit Requirement				25 (Max.)			4/1009-EL		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Mossurement				1.0			mg/L	•	Continuous	Mater
PARM Code 50060 A Mott Site No. EFA-1	Permit Requirement	n 1, 1, 1, 1			. 1.0 (Min.)			eg/L		Continuous	Motor
Turbidity	Semple Measurement				2.9			NTU	•	Continuous	Meter
PARM Code 00070 B Mon.Site No. EPB-1	Persalt Regularement				Report (Max.)			MU		Continuous	Meser
Nitrogen, Nitrata, Total (as N)	Sample Measurement				10.41			mg/L	•	Monthly	8-hoor FPC
ARM Code 00620 A	Permit Requirement				12.0 (Max.)			ma/L		Monthly	8-hour FPC
Plow (from groundwater well)	Sample Measurpment	0.00		MOD				MOD	•	Continuous	Flow meters and totalizers
PARM Code 50050 P Mon.Site No. FLW-6	Permit Requirement	(An.Avg.)	The Art of S	MOED						Continuous	Flow meters and totalizars
Plow (from groundwater well)	Sample Measurement	0.00	0.90	MQD				MGD	0	Continuous	Flow meters and totalizars
PARM Code 50050 Q Mon.Site No. PLW-6	Permit Requirement	Report (Mo.Avg.)	(3-Ma.Avg.)	MOD		1 1			ļ	Continuous	Flow meters and totalizers
Flow (total to zone 3)	Sample Messyrument	0.00		MGE				MOD	•	Continuess	Flow meters and totalizers
PARM Code 50050 R Mon.Site No. FLW-5	Pormit. Requirement	0.0232 (An.Avg.)		MGD		1				Continuous	Flow meters and totalizans
Flow (total to zone 3)	Sample Measurement	94.9	9.00	MGD				MGD	•	Continuous	Flow moters and totalizers
PARM Code 50050 8 Mon.Bite No. FLW-5	Permit Requirement	Report (Mo.Avg.)	(3-Mo.Avg.)	MGĐ						Continuous	Flow motors and
Flow (total to zone 2)	Sample Measurement	9.00		MOD				MGD	•	Continuous	Flow meters and totalizors
PARM Code 50050 T Mon.Site No. PLW-4	Person Requirement	0.0634 (An.Avg.)		MOD						Continuous	Now meters and
Flow (total to zone 2)	Sample Measurement	6.00	0.00	MGD				MGD	0	Continuous	Flow meters and totalizers
PARM Code 50050 U	Perset Requirement	Report (Mo.Avg.)	(3-Mo.Avg.)	MOD			1			Continuous	Flow meters and

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

MONITORING GROUP NUMBER: MONITORING PERIOD From: June 01,2010 To: June 30,2010

R-001

PERMIT NUMBER: FLA010900

Parameter		Quantity	or Loading	Units	Qua	lity or Concentr	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
Now (total to some 1)	Sample Measurement	9.00		MOD				MGD	•	Continuous	Flow meters an
ARM Code 50050 V Non-Sim No. FLW-3	Permit Requirement	0.0114 (ArlAvg.)		MOD						Continuous	Flow motors an totalizers
Flow (total to zone 1)	Sample Measurement	9.80	0.00	MGD				MGD	Ō	Continuous	Plow meters an
PARM Code 50030 W Mort/Site No. FLW-3	Permit Requirement	Report (Mo,Avz.)	Report (3-Mo.Avz.)	MOD						Continuous	Plow rosters as totalizars
Flow (total to golf course)	Sample Measurement	0.204		MQD				MOD	٥	Continuous	Flow meters and total intern
PARM Code 50050 Mon.Site No. FLW-2	Perceit Regulrement	0,270 (An.Avg.)		MOD						Continuous	Flow meters en totalizars
Flow (total to golf course)	Sample Measurement	0.108	0.155	MGD				MOD	۰	Continuous	Flow meters an totalizers
PARM Code 50030 Mon.Site No. FLW-2	Permit Requirement	Report (Mo,Avg.)	Report (3-Mo.Avg.)	MOD						Continuous	Flow meters an totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement		<u> </u>		183.5			mg/L	·	Every Two Weeks	i-hour FPC
'ARM Code 80082 G Mon.Site No. INF-1	Perset Requirement				Report (Mo.Avg.)		· ′	mg/L		Every Two Weeks	1-hour FPC
Bolids, Total Suspended	Sample Measurement				1.5			me/L	0	Every Two Weeks	Mour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement		·		Report (Mti.Avg.)			ma/L		Bvery Two Weeks	I-hour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement		<u> </u>		59			Percent	0	Montaly	Calculated
PARM Code 00180 1 Mon,Site No. FLW-1	Permit Requirement Sample		<u> </u>	ļ	Report			Percent		Monthly	Calculated
	Measurement Permit		<u> </u>						Ш		<u> </u>
	Requirement Semple		ļ	ļ						5. S. J.	
	Messurement			-							
sate of the same	Requirement		ļ:							·	
egypte Calgorial State Cal	Semple Measurement Permit		<u> </u>	<del> </del>				<del> </del>			
	Requirement		l	1	<u> </u>	l				•	

¹ Initially, flow is limited to 0.270 MGD AADF. However, the flow may be increased after completion of the second treatment plant and pending the results the required load test. DEP Form 62-620.910(10). Effective November 29, 1994

## DAILY SAMPLE RESULTS - PART B

Permit Number:

FLA010900

Monitoring Period From: June 01,2010 To: June 30,2010

Facility: Wedgefield WWTF

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ML)	pH (Max)	рН (Мів)	TRC (For Disinfect.) (mg/L)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Total (as N) (mg/L)
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFB-1	EFB-1	FLW-1	EFA-1
1		<1	7.3	7.3	1.0	1.0	2.9	0.257	
2	·	<1	7.4	7,4	1,2	1.6	2.9	0.215	
3		<1	7.3	7.3	2.4	1.1	2.9	0.221	
4		<1	7.6	7.6	1.0	1.0	0.9	0.221	<u> </u>
5			7.5	7.5	1.0		12	0.211	<u> </u>
6		1	7,4	7.4	1		2.9	0.261	
7		<1	73	7.3	3.1	1.0	2.9	0.221	ļ
8		<1	7.0	7.0	2.0	1.1	2.5	0.237	
9	7.0	<1	7.1	7.l	1.0	1.0	2.7	0.182	6.78
10		<1	7.2	7.2	1.8	1.0	2.9	0.182	
11			7.0	7.0	2.9	ļ	1.6	0.189	ļ
12			7.4	7.4	4.6	<u> </u>	1.3	0.185	
13			7.3	7.3	2.0		2.0	0.210	
14		<1	7.2	7.2	2.0	1.0	2.8	0.213	<u> </u>
15		<1	7,5	7.5	5.0	1.0	2.9	0.252	
16		<	7.3	7.3	13	1.0	2.9	0.159	
17		<1	7.3	7.3	2.6	1.8	29	0.189	<u> </u>
18			7.1	7.1	1.0		2.0	0.234	<u>.                                    </u>
19			7.2	7,2	1.6		12	0.205	
20			7.1	7.1	5.0		2.9	0.213	
21		<1	7.2	7.2	23	1.1	22	0,161	ļ
22		<1	7.2	7,2	1.9	1.0	2.9	0.223	
23	8.0	<1	7.3	7.3	2.0	1.0	2.2	0.203	10.41
24		<1	7.4	7.4	2.4	2.9	2.5	0.206	
25			7.0	7.0	3.1		29	0.190	
26			7.1	7.1	5.0		2.9	0.237	
27			7.4	7.4	1.4		2.9	0.130	-
28		<1	7.2	7.2	1.6	1.0	2.9	0.223	
29	ļ	<1	7.4	7.4	2.3	1.0	2.9	0.234	
30		<1	7.3	7.3	2.3	1.0	2.4	0.210	
31 Total	15.0	0.6				22.6			1210
Total	15.0	9.5	217,89	217.89	67.8	22.6	69.7	6.274	17.19
Mo. Avg.	7.5	0.5	7.26	7.26	2.26	1.50	2.3	0.2091	8

PLANT STAFFING: Day Shift Operator	Class:	С	Certificate No:	16046	Name:	Psui Tzareff
Day Shift Operator	Class:		Certificate No:		Name:	
Night Shift Operator	Class:		Certificate No:		Name:	
Lead Operator	Class:	_c	Certificate No:	8863	Name:	Roger Holsapple

## DAILY SAMPLE RESULTS - PART B

Permit Number: **Monitoring Period**  FLA010900

From: June 01,2010 To: June 30,2010

Facility: Wedgefield WWTF

	Flow (MGD)			Flow (MGD)	Flow (MGD) GW makeup	CBOD5 (mg/L)	TSS (mg/L)		}	
	golf course	Zone 1	Zone 2	Zone 3	well	(mg/1.)				
			*****	F0050	cocc	80080	1 00000		<del>                                     </del>	<del> </del>
Code Mon. Site	50050 FLW-2	50050 FLW-3	50050 FLW-4	50050 FLW-5	50050 FLW-6	80082 INF-1	00530 INF-1		<del> </del>	_
1	0.114	0.00	0.00	0.00	0.00		1		1	
2	0.093	0.00	0.00	0.00	0.00		<del>                                     </del>		<del> </del>	<del> </del>
3	0.224	0.00	0.00	0.00	0.00				1	1
4	0.171	0.00	0.00	0.00	0.00		1			
5	0.013	0.00	0.00	0.00	0.00		1			<del>                                     </del>
6	0.000	0.00	0.00	0.00	0.00				<u> </u>	
7	0.000	0.00	0.00	0.00	0.00		<b>├</b> ──┤			
8	0.129	0.00	0.00	0.00	0.00		1			
9	0.071	0.00	0.00	0.00	0.00	174.0	176.0		1	<u>-</u>
10	0.147	0.00	0.00	0.00	0.00				1	1
11	0.246	0.00	0.00	0.00	0.00	·	<u> </u>		<del>                                     </del>	
12	0.000	0.00	0.00	0.00	0.00				<b>†</b> —	<del>                                     </del>
13	0.001	0.00	0.00	0.00	0.00	,	† <del>*****</del>		<del>                                     </del>	<del> </del>
14	0.046	0.00	0.00	0.00	0.00		1	······································	1	+
15	0.011	0.00	0.00	0.00	0.00				<del> </del>	<del> </del>
16	0.526	0.00	0.00	0.00	0.00				<del>                                     </del>	<del> </del>
17	0.189	0.00	0.00	0.00	0.00					<del></del>
18	0.156	0.00	0.00	0.00	0.00	<u> </u>			<del>                                     </del>	<del></del>
19	0.129	0.00	0.00	0.00	0.00				<del> </del>	
20	0.000	0.00	0.00	0.00	0.00					<del> </del>
21	0.000	0.00	0.00	0.00	0.00		†			<del> </del>
22	0.000	0.00	0.00	0.00	0.00				<del></del>	<del> </del>
23	0.061	0.00	0.00	0.00	0.00	193.0	108.0			
24	0.600	0.00	0.00	0.00	0.00					<b></b>
25	0.199	0.00	0.00	0.00	0.00					<del></del>
26	0.059	0.00	0.00	0.00	0.00					1
27	0.000	0.00	0.00	0.00	0.00					<del> </del>
28	0.000	0.00	0.00	0.00	0.00					
29	0.000	0.00	0.00	0.00	0.00					<del>                                     </del>
30	0.070	0.00	0.00	0.00	0.00				<b> </b>	<del> </del>
31	0.114	0.00	0.00	0.00	0.00		<del>                                     </del>			<del> </del>
Total	3.26	0.00	0.00	0.00	0.00	367.0	284.0			
Mo. Avg.	0.1085	0.00	0.00	0.00	0.00	183.5	142.0			

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PLANT STAFFING: Day Shift Operator	Class;	с	Certificate No:	16046	Name:	Paul	Tzareff		· · · · · · · · · · · · · · · · · · ·	9
Day Shift Operator	Class:		Certificate No:		— Name:			<del></del>		
Night Shift Operator	Class:		Certificate No:	<del></del>	Name:				<del></del> .	
Lead Operator	Class:	<u> </u>	Certificate No:	8863	Name:	Roge	r Holsapple			

## Florida Department of Environmental Protection

Twin Towers Office Bldg. 2600 Blair Stone Road Tallahassee, Florida 32399-2400

## **GROUND WATER MONITORING REPORT**

Rule 62-522.600(11)

PART I GENERAL INFORM	MATION	
(1) Facility Name_Wedg	efield WWTF	
Address 3100 Banc	roft Blvd.	
City <u>Orlando Flo</u>	orida	Zip 32833
Telephone Number	( 407) 25 <del>9-8</del> 991	
(2) The GMS Identification	on Number 3048P03712	
(3) DEP Permit Number	FLA010900	
(4) Authorized Represen	tative Name Roger Holsapple	В
Address 6606 Walto	n Way	
City Tampa Florida		Zip 33610
Telephone Number	(813) 359-8327	
(5) Type of Discharge D	ornestic Waste	
(6) Method of Discharge	Golf Course / Sprayfield Imi	gation
attachments and that, base	ed on my inquiry of those individe, and complete. I am aware sonment.	nined and am familiar with the information submitted in this document and all riduals immediately responsible for obtaining the information, I believe that the that there are significant penalties for submitting false information, including the Signature of Owner or Authorized Representative
PART II QUALITY ASSUR	ANCE REQUIREMENTS	
Sample Organization	Advanced E	nvironmental Laboratories
Analytical Lab	NELAC Certification #	E84589
	NELAC Certification #	
Lab Name Advanced Em	vironmental Laboratories	
Address 528 S. North	Lake Blvd. Suite 1016 Altamo	onte Springs Florida 32701
Phone Number ( 407) 937	-1594	

Printed 4/15/2004

County: Facility Name: Permit Number. Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

MWB-1

Well Type: Description:

Background Background
Well Name MW-1
Golf Course
WAFR #6006
GMS# 3048A13413
4/27/2010
11:46

Monitoring Period
Was the well purged before sampling?

From: April 2010 To: June 2010 X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Anniysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Somples Filtered (L/F/N
Water Level Relative to Feet, NGVD	<b>8254</b> 5	_	61.90	Feet	Report	N/A	Field	pump	N
Nitrate, (as N)	00620		0.043	mg/l	Report	0.047	SM4500NO3-F	breat	N
Solids, Total Dissolved(TDS)	70295	70296	300	mg/l	Report	8	E160.1	powp	N
Chloride (as CI)	00940	-	120	rog/I	Report	3.6	EJ25.2	pomp	N
Caliform, Feest	74055	<u> </u>	1.0	#/100/m]	Report	1.0	SM9222D	beauto	N
Н	00400			SU	<b>Report</b>	N/A	Field	pump	Ŋ
Turbidity, Lab - Nepholometric	82079		2.3	NTU	Report	0.13	E180.1	brind	N N
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COMMENTS AND EXPLANATION:

4/15/2004

DSP Form 62-920 910(10), offenive November 29, 1994

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description:

MWB-2 Background Well Name MW-2 Golf Course

WAFR # 6005 OMS# 3048A13414

Monitoring Period From: April 2010 To: June 2010
Was the wall purged before sampling? X Yes ____ No

Date Sample Obtained: Time Sample Obtained:

4/27/2010 09:29

Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Unite	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (LJF/N
<b>82545</b>		66.99	Feet	Report	N/A	Field	pump	N
00620	-	0.043	mg/l	Report	0.047	SM4500NO3-F	bauto	N
70295	70296		mg/l	Report	8	E160.1	pump	N
00940			rng/l	Report	3.6	E325.2	pwnp	N
74055	<b></b>	1.0	#/100/ml	Report	1.0	SM9222D	branto	N
00400	_		\$U	Report	N/A	Field	ритр	N
\$2079	-	0.20	NTU	Report	0.13	E180.1	pump	N
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T								
	Bailder PARM Code 82345 00620 70295 00940 74055	Builder   PARM Code   PARM Code	Besilder   PARM Code   (Analysis Results)	Builder   PARM Code   (Analysis Results)	Builder   PARM Code   (Analysis Results)   Requirement	Bellder   PARM Code   (Analysis Results)   Requirement	Beilder   PARM Code   (Analysis Results)   Requirement	Beilder   PARM Code   (Analysis Results)   Requirement   Equipment   Equipment Used

COMMENTS AND EXPLANATION:

4/15/2004

County: Facility Name: Permit Number: Orange County Wadgefield WWTF FLA010906

GMS# 3048P03712

Permit Builder MW ID:

Welf Type: Description: MWB-3 Background
Well Name MW-3
Golf Course
WAFR # 6004

GMS# 3048A 13415 4/27/2010 12:16

Monitoring Period Was the well purged before sampling?

From: April 2010 To: June 2010 X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

Permit Builder PARM Code	PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
82545	_	66.79	Foot	Report	N/A	Field	pump	N
00620	-	0.085	mg/ī	Report	0.047	SM4500NO3-F	pump	N
70295	70296	1200	mg/i	Report	2	E160.1	pump	N
00940		46	mg/l	Report	3.6	E325.2	pump	N
74055		1.0	#/100/ml	Report	1.0	SM9222D	pearip	N
00400			SU	Report I	NA	Field	breath	N
B2079	-	9.3	טדע	Report	0.13	E180,1	brauk	N
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	Ballder PARM Code  #2545  00620  70295  00940  74055	PARM Code  82545 00620 70295 70296 00940 74055 00400	Builder   PARM Code   (Analysia Results)	Builder   PARM Code   (Analysis Results)	Builder   PARM Code   (Analysis Results)   Requirement	Builder   PARM Code   (Analysis Results)   Requirement	Builder   PARM Code   (Analysis Results)   Requirement	Builder   PARM Code   (Analysis Results)   Requirement   Equipment Used

4/15/2004

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Bullder MW ID:

Well Type: Description: MWI-4 Intermediate Well Name MW-4

Golf Course WAFR # 6003 GMS# 3048A13416 4/27/2010 11:23

Monitoring Period From: April 2010 To: June 2010
Was the well purged before sampling? X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Futered (L/F/N
Water Level Relative to Feet, NGVD	\$2545		64.75	Feet	Report	N/A	Field	рептр	N
Nitrate, (as N)	00620	-	0.043	mg/l	Report	0.047	SM4500NO3-F	punp	N
Solids, Total Dissolved(TDS)	70295	70296	210		Report	8	E160.1	pemp	N
Chloride (as Cl)	00940		44	mg/l	Report	3.6	E325.2	band	N
Coliform, Fecal	74055		1.0	#/100/m1	Report	1.0	SM9222D	purip	N
н	00400			su	Report	N/A	Field	рыпр	N
Turbidity, Lab - Nepholometric	82079	-	9.7	NTU	Report	0.13	E180.I	pomp	א
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COMMENTS AND EXPLANATION:

4/15/2004

10

DBP Farm 42-620.910(10), effective November 29, 1994

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID;

Well Type: Description: MWC-6 Compliance Well Name MW-6

Golf Course WAFR #6001 GMS# 3048A13418 4/27/2010 10:43

Monitoring Period
Was the well purged before sampling?

From: April 2010 To: June 2010 X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

Paramèter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Calu	Permit Requirement	Detection 1.imits	Analysis Method	Sampling Equipment Used	Samples Filtured (L/F/N
Water Level Relative to Feet, NGVD	82545	••	66.00	Feet	Report	N/A	Field	punto	N
Nitrate, (as N)	00620	1	0.043	mg/i	10	0.047	SM4500NO3-F	pomp	N
Solids, Total Dissolved(TDS)	70295	70296	210	mg/l	500		E160.1	pomp	N
Chloride (as Cl)	00940		32	mg/l	250	3.6	E325.2	рипир	н
Coliform, Fecal	74055		1.0	4/100/m3	4	1.0	SM9222D	punip	N
pH	00400			su	6.5-8.5	N/A	Field	pump	N
Turbidity, Lab - Nepholometric	£2079	-	12	NTU	Report	0.13	E140.1	pump	ĸ
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COMMENTS AND EXPLANATION:

4/15/2004

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWI-7 Intermediate
Well Name MW-7

Golf Course WAFR # 6000 GMS# 3048A13419

4/27/2010

Date Sample Obtained: Time Sample Obtained:

11:48 From: April 2010 To: June 2010 X Yes ___ No Monitoring Period

Was the well purged before sampling? Samples Filtered (L/F/N) Sampling Equipment Used Analysis Method Detection Limits Permit Links Sample Measurement Requiremen Other Historic Permit Builder (Analysis Results) Parameter PARM Code pump Field N/A PARM Cod Report N 65.64 Feet SM4500NO3-F 0.047 Water Level Relative to Feet, NGVD 82545 Report puzsp 1.5 E160.1 00620 Report 580 ms/l EJ25.2 Hitrate, (as N) 70296 3.6 70295 pump N Report Solida, Total Dissolved(TDS) 240 ma/l SM9222D 1.0 00940 N 1.0 #/100/ml Report Chlorida (ss C1) Field N/A ринтр N 74055 SU_ Report Coliforn, Feoral E180.1 0.13 00400 9.2 NTU Report H Turbidity, Lab - Nepholometric \$2079

COMMENTS AND EXPLANATION:

4/15/2004

DRP Form 62-620,910(10), effective November 39, 1991

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type:

MWC-1 Compliance

Description:

Compliance
Well Name MW-1
On-Site Irrigation
WAFR # 32995
GMS# -4/27/2010
06:31

Monitoring Period From: April 2010 To: June 2010 Was the well purged before sampling? X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Builder PARM Code	Other Historie PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (LJF/N
Water Lavel Relative to Feet, NGVD	82545		65.09	Feet	Report	N/A	Field	Pump	И
1" Month of Quarter Water Level Relative to Feet, NGVD	<b>82545</b>	-	66.77	Foot	Report	N/A	Field	Pump	N
2 nd Month of Quarter Water Level Relative to Feet, NGVD	82545		64.12	Feet	Report	N/A	Field	Pump	N
Month of Quarter Nitrate, (as N)	00620		0.043	mg/i	10	0.047	Field	Pump	N
Solids, Total Dissolved(TDS)	70295	70296	56	mg/î	500		Field	Pump	N
Chloride (es Cl)	00940		14	mg/l	250	3.6	Field	Pump	N
Coliform, Fecal	74055		1.0	#/100/mi	4	1.0	Field	Pump	N
рН	00400	1		SU	6.5-8,5	N/A	Field	Pump	И
Turbidity, Lab - Nepholometric	82079	-	14	NTU	Report	0.13	Field	Pump	N
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COMMENTS AND EXPLANATION:

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWC-2 Compliance Well Name MW-2

On-Site Irrigation WAFR # 32996 GMS# --

Monitoring Period
Was the well purged before sampling?

From: April 2010 To: June 2010 X Yes ___ No

Date Sample Obtained: Time Sample Obtained: 4/27/2010 08:57

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Units	Permit Regairement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N
Water Level Relative to Feet, NGVD	82545	-	65.30	Feet	Report	N/A	Field	Pump	N
I* Month of Quarter Weter Level Relative to Feet, NGVD	82545		72.13	Feet	Report	N/A	Pield	Pump	N
2 th Month of Querter  Water Level Relative to Feet, NOVD	B2545		64.91	Fest	Report	N/A	Field	Pump	N
Month of Quarter	00620		84	trig/1	10	0.047	Field	Pump	N
Nitrate, (as N) Solids, Total Dissolved(TDS)	70295	70296	0,043	mg/l	500		Fjeld	Pump	א
Chloride (as CI)	00940	-	18	mg/l	250	3.6	Field	Pump	N
Coliform, Pecel	74055		1.0	#/100/m1	4	1.0	Field	Pump	N
pH	00400			SU	6.5-8.5	N/A	Field	Pemp	N
Turbidity, Lab - Nepholometric	82079		14	NTU	Report	0.13	Field	Ритр	N
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COMMENTS AND EXPLANATION:

4/15/2004

14

DEP Form 61-630.910(10), affective Nevember 29, 1994

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMSN 3048P03712

Pennit Builder MW ID: Well Type:

Description:

MWC-3 Compliance

Compliance
Well Name MW-3
Os-Site Irrigation
WAFR # 32997
GMS# -4/27/2010
10:13

Monitoring Period
Was the well purged before sampling?

From: April 2010 To: June 2010 X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Mensurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Asalysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Foot, NOVD	B2545	-	67.81	Feet	Report	N/A	Field	Pump	N
* Month of Quarter  Water Level Relative to Feet, NGVD	82545	-	64.54	Feat	Report	N/A	Field	Pump	N
Month of Quarter  Water Level Relative to Feet, NGVD	<b>82545</b>	-	67.57	Fost	Raport	N/A	Field	Pump	N
Month of Quarter	00620	-	0.043	mg/l	10	0.047	Field	Pump	N
Solids, Total Dissolved(TDS)	70295	70296	480	mg/l	500	1	Field	Pump	N
Chloride (as CI)	00940		200	mg/l	250	3.6	Field	Pump	N
Coliform, Fecal	74055		1.0	#/100/ml	4	Lo	Field	Pump	N
pH	00400	_		SU	6.5-8.5	N/A	Field	Pump	N
Turbidity, Lah - Nepholometric	82079		0.90	NTU	Report	0.13	Field	Pump	N
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4/15/2004

County: Facility Name: Pennit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Bullder MW ID:

MWP-1 Well Type: Piezometer

Well Name MWP-1* Description:

On-Site Irrigation WAFR # 55881

GMS# --

Monitoring Period
Was the well purged before sampling?

From: April 2010 To: June 2010

Date Sample Obtained: Time Sample Obtained:

Sampling Equipment Used Other Historic Sample Measurement Unite Permit Detection Limits Permit Bullder Analysis Method Samples Parameter Fikered (L/F/N) (Analysis Results) PARM Code PARM Code 67.44 Feet N/A Water Level Relative to Feet, NGVD 82545 Report Solinst I" Month of Quarter Water Level Meter 63.18 Water Level Relative to Feet, NOVD Feet N/A 82545 Report Water Level Meter 2nd Month of Quarter 62.20 Foot N/A 82545 Report Solinst Water Level Meter Water Level Relative to Feet, NOVD 1th Month of Quarter

COMMENTS AND EXPLANATION:

* MWP-1 is the well labeled "Well #1" as shown on Sheet C-12 dated 12/1/98 4/20/2004

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID: Well Type:

MWP-2 Piezometer

Description:

Well Name MWP-2

On-Site Irrigation WAFR # 55883

GMS# --

Mositoring Period
Was the well purged before sampling?

From April 2010 To: June 2010

Yes X No

Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Anniyats Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Flittered (L/F/N)
Water Level Relative to Feet, NGVD	£2545	-	66.69	Feet	Report	N/A		Solinat Water Lavel Meter	
I'' Month of Quarter Water Level Relative to Feet, NGVD	82545	-	63.25	Feet	Report	N/A		Solinet Weter Level Meter	
2 nd Month of Quarter  Water Level Relative to Feet, NGVD  If Month of Quarter	82545	-	65.65	Foot	Report	N/A		Solinat Water Level Meter	
Month of Cast in									
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COMMENTS AND EXPLANATION:
MWP-2 is the well labeled "Well #2" as shown on Sheet C-12 dated 12/1/98

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

4/20/2004

### INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT

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 shall be mailed to the address printed on the DMR by the 28° 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—ell of which may or may not be applicable to every facilities may have one or more Part A's for reporting effluent or reclaimed water data. Alt domestic wastewater 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 raw data are different.

CODE	DESCRIPTION/INSTRUCTIONS
ANC	Analysis not conducted.
DRY	Dry Well
FLD	Plood disaster.
IFS	Insufficient flow for sampling.
is	Lost sample.
MNR	Monitoring not required this period.

CODE	DESCRIPTION/INSTRUCTIONS
NOD OPS OTH SEF	No disoherge from/to site.  Operations were shutdown so no sample could be taken.  Other. Please enter an explanation of why monitoring data were not available.  Sampling equipment failure.

When reporting enalytical results that fall below a laboratory's reported method detection limits or practical quantification limits, the following instructions should be used:

- 1. Results greater than or equal to the PQL shall be reported as the measured quantity.

  2. Results less than the PQL and greater than or equal to the MDL shall be reported as the laboratory's MDL value. These values shall be deemed equal to the MDL when necessary to calculate an average for that parameter and when determining compliance with paramit limits.

  3. Results less than the PQL and greater than or equal to the MDL shall be reported by extering 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 the effluent limit, whichever is lower, shall be used for that sample when necessary to calculate an average for that parameter. Values less than the MDL are considered to demonstrate compliance with an effluent limitation.

### PART A -DISCHARGE MONITORING REPORT (DMR)

Part A of the DMR is comprised of one or more sections, each having its own header information. Facility information is preprinted in the header as well as the monitoring group number, whether the limits and monitoring quirements are interim or final, and the required submittal frequency (e.g. monthly, answally, quarterly, stc.). Submit Part A based on the required reporting frequency in the header and the instructions shown in the permit. The llowing should be completed by the permittee or authorized representative:

No Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data or codes to be entered for all of the parameters on the DMR for the entire monitoring group number; however, if the monitoring group includes other monitoring locations (e.g., influent sampling), the "NOD" code should be used to individually denote those parameters for which there was no discharge.

Meattering Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed, Bample Measurements: 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. interins or first) and that the data or collected shoulded results for each parameter on this row in the non-shaded area above the limit. Be sure the result being entered corresponds to the appropriate statistical base code (e.g. annual average, monthly average, single sample maximum, etc.) and units.

No, Ex.1 Enter the number of sample measurements during the measurement attring the measurement in the sample measurement attring the measurement was made in the space above the shaded area. If none, evier zero.

Frequency of Amalysis: The shaded areas in this column contain the minimum number of times the measurement is required to be made according to the permit. Enter the actual number of times the measurement was made in the space above the shaded areas.

Frequency of Assignate The shaded areas in this column contain the instrument manner of times the measurement is required to be made according in the permit. Enter the actual number of times the measurement was made in the space above the shaded areas. Sample Type: The shaded areas in this column contain the type of sample (e.g. grab, composite, continuous) required by the permit. Enter the actual sample type that was taken in the space above the shaded areas.

Sagnature: This report must be signed a secondance with Rule 52-520.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

Comment and Explanation of Any Violations: Use this area to explain any exceedances, any upset or by-pass events, or other items which require explanation. If more space is needed, reference all statements in this area.

#### PART B - DAILY SAMPLE RESULTS

Menitering Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

Daily Menitering 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 data in the units indicated. Table 1 in Chapter 62160, F.A.C., containt a complete list of all the data qualifier codes that your laboratory may use when reporting analytical results. However, when transferring numerical results onto Pert B of the DMR, only the following data

4	**************************************
CODE	DESCRIPTION/INSTRUCTIONS
	The compound was analyzed for but not detected.
	Value reported is the mean (average) of two or more determinations.
	Estimated value, value not accurate.
Q	Sample held beyond the actual holding time.
_ <del>\</del>	Laboratory engines 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 Staffings 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

Menitoring Period: Enter the month, day, and year for the first and lest day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the date on this report were collected and analyzed.

Time Sample Obtained: Enter the time 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: Report the results of the analysis. If the result was below the minimum detection limit, indicate that.

Sample Measurement: Report the detection limits of the smalytical methods used.

Analysis Method: Indicate the analytical method used. Record the analysical methods used.

Analysis Method: Indicate the analytical method used. Record the analysical method used. Record the analysical method used. Record the analysical pump, etc.)

Sampling Equipment Used; Indicate the procedure used to collect the sample (e.g. afrilift, bucket/bailet, 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 Rale 62-62-936, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

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

### TECIAL INSTRUCTIONS FOR LIMITED WET WEATHER DISCHARGES

ow (Limited Wet Weather Discharge): Erser the measured average flow rate during the period of discharge or divide gallons discharged by duration of discharge (converted into days). Record in million gallons per day (MGD).

(MGD).
Flow (Upstreams): 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 based on two stessurements; one made at the start and one made at the end of the discharge period. Measurements are to be made at the upstream gauging station described in the permit.

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 Dilution Ratio accurate to the nearest 0.1.
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 Dilution Ratio. On Part B of the DMR, enter an autorisk (*) if the SDF is greater than the Stream Dilution Factor was greater than the Stream Dilution Factor was greater than the Stream Dilution Factor was greater than the Stream Dilution Ratio

CBOD,: Enter the average CBOD, of the reclaimed water discharged during the period shown in duration of discharge

CBODs: Enter the average CBOD, 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 8. Enter the actual cumulative rainfall to date for this calendar year and the actual total monthly rainfall on Part A. The cumulative rainfall to date for this calendar year is the total amount of rain, in inches, that has been recorded since January 1 of the current year through the morth for which this DMR contains date.

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 cumulative rainfall for the average rainfall year is the amount of rain, in inches, which fill during the average rainfall during the average rainfall year on which this DMR contains date.

No. of Days LWWO Activated During Calendar Year: Enter the cumulative number of days that the limited wet weather discharge was activated since January 1 of the current year.

Reason for Discharge: Attach to the DMR a brief explanation of the factors contributing to the need to activate the limited wet weather discharge.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail (	his report to: Departs	ent of Environmental	Protection, Contral	District, 3319 Ma	guire Boulevard Suite	232, Orlando, FL, 32803-3767	,				
PERMITTEE NAME: MAILING ADDRESS:	Plans-Wedgefield 6608 Walton Way			PERMIT NU	MBER	F1.A030900					
Tampa Florida. 33610  FACILITY: Wedgefield WWTF LOCATION: 3100 Bancroft Boulevard			LIMIT: CLASS SIZE:		Final N/A	REPORT GROUP:			Jonthly Jonestic		
										Domasii	
			MONITORIN NUMBER:	G GROUP	R-001						
	Orlando, Fi.			MONITORIN	G GROUP DESC:	Public Access Reuse, include	ing Influent	_			
COUNTY:	Orange			NO DISCHAI SITE: MONITORI! From: July 0	NG PERIOD	Te: July 31,2010		R	F	ILE	
Parameter		Quantity	or Loading	Units	Quality	or Concentration	Units		requency of	Sample Type	
								Ex.	Analysis	f	
Flow	Sample Measurem	0.222 ::ul		MGb				0 5	Days/Week	Flow meters as	

Parameter	Parameter Quantity or Loading		Units	Quality of deliberation			Units	No.	Frequency of Analysis	Sample Type	
Flow	Sample Measurement	0.222		MGD					0	5 Days/Week	Flow meters and totalizers
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Requirement	0.368 (An.Avg.)		MGD						5 Days/Prook	Flow meters and totalizers
Flow	Sample Measurement	0.211		MGD					0	5 Duya/Week	Flow meters and totalizers
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Requirement	Repart (Mo.Avg.)		MGD						5 Duys/Week	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement			<u> </u>	8.1				0	Every Two Weeks	8-bour FPC
Mon.Site No. EFA-I	Permit Requirement			<u>i_</u>	20.0 (Ar.Avg.)			mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				8.5	9,0		mg/l	0	Every Two Weeks	8-hour FPC
PARM Code 80082 A Mon.Site No. EFA-1	Ponelt Requirement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				2.2			mg/1	0	4 Days/Week	Grab
PARM Code 00530 B Mon. Size No. EPB-1	Permit Requirement				5.0 (Max.)			mg/l.		4 Days/Week	Grab
pH	Sample Measurement				6.9	7.6		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

Learnify 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 property 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 arm aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXE	CUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Roger Holsappie	Lead Operator	Ma Astande	407-259-6991	2010/08/24
		22		<del>'                                    </del>

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

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

### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

R-001

PERMIT NUMBER: FLA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: July 01,2010

To: July 31,2010

Parameter		Quantity or Loading		Units Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal, % less than	Sample				100%		PER- CENT	0	4 Days/Week	Grab
detection PARM Code 51905 A Mon-Site No. EFA-1	Messurement Permit Requirement	<del></del>	<del></del> -	<del>                                     </del>	75 (Min.)		PER- CENT	1	4 Days/Wook	Grah
Coliform, Fecal	Sample				0.5		0/100301.	0	4 Days/Week	Grab
PARM Code 74055 A Mon.Site No. EFA-I	Megairement Permit Requirement				25 (Max.)		0/100ML	$\Box$	4 Days/Week	Grab
Total Residual Chlorine (For	Sample				I.O	<del> </del> -	mg/1.	0	Continuous	Meter
Disinfection) PARM Code 50060 A Mon.Site No. EFA-1	Measurement Permit Requirement			<del>                                     </del>	1.0 (Min.)	<del>                                     </del>	ng/L	Н	Continuous	Meter
Turbidity	Sample Measurement				2.9		MIL	0	Continuous	Meter
PARM Code 00070 B Mon.Site No. EFB-1	Pennit Requirement				Report (Max.)		טזא		Continuous	Meter
Natrogen, Nitrate, Total (as N)	Sample Measurement				9,73		mg/L	0	Monthly	8-hour FPC
PARM Code 00620 A 4on.Site No. EFA-1	Permit Requirement	<u>,                                      </u>			[2.0 (Max.)		eg/L		Monthly	8-hour FPC
low (from groundwater well)	Sumple Measurement	0.00	<del></del>	MGD	(1.1-1.7			a	Continuous	Flow meters at
PARM Code 50050 P Man Site Na. FLW-6	Permit Requirement	Report (An.Avg.)		MÖD					Continuous	Flow snoters as
Flow (from groundwater well)	Sample Measurement	0.00	U.00	MGD				•	Continuous	Flow meters as
PARM Code 50050 Q Mon,Site No. FLW-6	Permit Requirement	Keport (Mo, Avg.)	Report (3-Mo.Avg.)	MIOD					Continuous	Flow motors an
Flow (total to zone 3)	Sample Measurement	0.000		MGD				•	Continuous	Flow meters as
PARM Code 50050 R Mon Site No. FLW-5	Permit Requirement	0.0232 (An.Avg.)		WGD					Continuous	Flow meters an
Flow (total to zone 3)	Sample Measurement	0.000	6,000	MGD				0	Continuous	Flow meters at
PARM Code 50050 S Mon.Site No. Fl.W-5	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow meters an
Ficw (total to zone 2)	Sample Measurement	0.000		MGD				0	Continuous	Flow meters no totalizers
PARM Code 50050 T Mon,Site No. FLW-4	Permit Requirement	0.0634 (Ap.Avg.)		MK/D					Continuous	Flow meters an
Flow (total to zone 2)	Sample Measurement	9.000	9.000	MGD				٥	Continuous	Flow meters as
PARM Code 50050 U Mun.Site No. FLW-4	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo Avg.)	MGD					Continuous	Flow meters an

COMMENTS:

### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

MONITORING GROUP NUMBER: MONITORING PERIOD From: July 91,2010

R-001

PERMIT NUMBER, FLA010900

Parameter		Quantity or Loading		Units	Qua	Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
Flow (sotal to zone 1)	Sample Measurement	000.0		MGD			[		•	Continungs	Flow meters and totalizers
PARM Code 50050 V Mon.Site No. FLW-3	Permit Requirement	0.0114 (An.Avg.)		MGD						Continuous	Flow meters and totalizers
Flow (total to zone 1)	Sample Measurement	000.0	0.000	MGD					0	Continuous	Flow meters and totalizers
PARM Code 50050 W Mon.Site No. FLW-3	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD						Continuous	Plow meters and totalizers
Flow (total to golf course)	Sample Measurement	8.217	<u> </u>	MGD		<u> </u>			•	Continuous	Flow meters and totalizers
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	0.270 (An.Avg.)		MGD			<u> </u>			Continuous	Flow meters and totalizors
Flow (total to golf course)	Sample Measurement	0.269	B.174	MGD					0	Continuous	Flow meters and totalizers
PARM Code 50050 Mon.Site No. PLW-2	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD			<u> </u>			Continuous	Flow meters and rotalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement				167.0			mg/L	0	Every Two Weeks	8-hour FPC
ARM Code \$0082 G ion.Site No. INF-1	Permit Requirement				Report (Mo.Avg.)		<u> </u>	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sumple Measurement				1.4		<u> </u>	mg/L	8	Every Two Weeks	a-bour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement		ļ <u>.</u>		Report (Mo Avg.)		<u></u>	mag/l.		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100 PARM Code 00180 1	Sample Measurement Permit		<u> </u>		57.0			Percent	0	Monthly	Calculated
Mon.Site No. FLW-1	Requirement	<del> </del>	ļ		Report	ļ		Percent		Monthly	Calculated
	Sumple Megsurement Permit		ļ								
·	Requirement		ļ								
	Sample Measurement				···						
·	Permit Requirement			<u> </u>		<u> </u>					
	Sample Measurement										
	Permit Requirement		1								

¹ Initially. Bow is limited to 0,270 MGD AADF. However, the flow may be increased after completion of the second treatment plant and pending the results the required lond test. DEP Form 62-620,910(10), Effective November 29, 1991.

# DAILY SAMPLE RESULTS - PART B Facility: Wedgefield WWTF

Permit Number: Monitoring Period FLA010900

From: July 01,2010

To: July 31,2010

	CBOD5 (mg/l.)	Feeal Coliform Bacteria (#/100ML)	pH (Max)	pH (Min)	TRC (For Disinfect.) (mg/L)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Total (as N) (mg/L)
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
Mon. Site	EFA-1	EFA-I	EFA-1	EFA-1	EFA-1	EFB-1	EFB-1	FLW-1	EFA-1
-		<1	7.3	7.3	2,2	1.0	2.1	0.194	
2			7.2	7.2	2.5		2.5	0.179	
3		···	7.4	7.4	5		2.9	0.203	
4			7.3	7.3	2.0		2.7	0.265	
5			7.3	7.3	2.3		2.9	0.233	
6		<1	7.2	7.2	2.3	1.0	2.9	0.265	
7	8.0	<1	7.4	7.4	2.4	1.0	2.9	0.240	9.73
8		<1	7.3	7.3	1.8	1.0	2.9	0.232	<u> </u>
9		<1	7.6	7,6	1	1.0	2.6	0.217	
10			7.5	7.5	4.2		1.4	0.221	
11			7.6	7.6	2.3		2.9	0.214	
12		</td <td>7.4</td> <td>7.4</td> <td>1.8</td> <td>1.0</td> <td>2.9</td> <td>0.250</td> <td></td>	7.4	7.4	1.8	1.0	2.9	0.250	
13		<1	7.3	7.3	2	1.0	2.9	0.217	
14		<1	7.4	7.4	1.7	1.0	2.9	0.224	
15		<1	7.2	7.2	1.6	1.0	2.9	0.201	
16		-	7.4	74	1		2.9	0.224	
17		1	6.0	6.9	1		2.6	0.205	
18			7.3	7.3	1.5		2.9	0.252	
19		<1	7.4	7.4	1.8	1.6	2.7	0.227	
20		<1	7.4	7.4	1.5	1.0	2.9	0.209	
21	9.0	<1	7.1	7.1	1.3	1.0	2.9	0.197	<u> </u>
22		<1	7.3	7.3	1.7	1.0	2.9	0.202	
23			7.2	7.2	1.5		2.9	0.211	
24			7.1	7.1	1		2.0	0.201	
25			7.3	7.3	1.3		2.9	0.229	
26		<1	7.5	7.5	1.8	1.0	2.6	0.235	
27		<1	7.1	7.1	1.7	1,0	2.9	0.033	
28		<1	7.3	7.3	1.2	1.0	2.9	0.191	1
29		<)	7.4	7.4	1.3	2.2	2.9	0.186	
30			7.0	7.0	1.3		1.2	0.179	
31			7.3	7.3	1		2.4	0.212	
Total	17.0	8.5	226.4	226.4	57	18.8	82.8	6.548	
Mo. Avg.	8.5	0.5	7.3	7.3	1.9	1.4	2.7	0.211	

### PLANT STAFFING:

Day Shift Operator	Class:	C Certificate No:	16046	Name:	Paul Tzareff
Day Shift Operator	Class:	Certificate No:		Name:	
Night Shift Operator	Class:	Certificate No:		Name:	
Lead Operator	Class:	C Certificate No:	8863	Name:	Roger Holsapple

# DAILY SAMPLE RESULTS - PART B Facility: Wedgefield WWTF

Permit Number: Monitoring Period

FLA010900 From: July 91, 2010

To July 28, 2010

	Flow (MGD) golf course	Flow (MGD) Zone 1	Flow (MGD) Zone 2	Flow (MGD) Zone 3	Flow (MGD) GW makeup well	CBOD5 (mg/L)	TSS (mg/L)		
Code	50050	50050	50050	50050	50050	80082	00530	<u> </u>	
Mon. Site	FLW-2	FLW-3	FLW-4	FLW-5	F1.W-6	INF-I	INF-1		
,	0.713	0.00	0.00	0.00	0.00		<b>.</b>		
2	0.134	0.00	0.00	0.00	0.00				
3	0.011	0.00	0.00	0.00	0.00				
4	0.000	0.00	0.00	0.00	0.00				
5	0.000	0.00	0.00	0.00	0.00				
6	0.614	0.00	0.00	0.00	0.00				
7	0,699	0.00	0.00	0.00	0.00	169.0	78.0		
8	0.128	0.00	0.00	0.00	0.00				
9	0.698	0.00	0.00	0.00	0.00				
10	0.007	0.00	0.00	0.00	0.00				
11	0.000	0.00	0.00	0.00	0.00				
12	0.000	0.00	0.00	0.00	0.00		T 1		
13	0.000	0.00	0.00	0.00	0.00				
14	0.000	0.00	0.00	0.00	0.00				
15	0.000	0.00	0.00	0.00	0.00		1		
16	0.974	0.00	0.00	0.00	0.00				
17	0.302	0.00	0.00	0.00	0.00				
18	0.592	0.00	0.00	0.00	0.00		1 1		
19	0.569	0.00	0.00	0.00	0,00		<del>' </del>		
20	0.506	0.00	0.00	0.00	0.00	·	1	***	
21	0.562	0.00	0.00	0.00	0.00	165.0	170.0		
22	0.208	0.00	0.00	0.00	0.00	<del>_</del>			
23	0.225	0.00	0.00	0.00	0.00		<del>                                     </del>	-	
24	0.253	0.00	0.00	0.00	0.00		<del>                                     </del>		
25	0.000	0.00	0.00	0.00	0.00				
26	0.071	0.00	0.00	0.00	0.00				
27	0.238	0.00	0.00	0.00					
28	0.353	0.00	0.00	0.00	0.00		<del> </del>		
29	0.333	0.00	0.00	0.00	0.00	· · · · · · · · · · · · · · · · · · ·	-		
30	0.169	0.00	0.00	0.00	0.00				
31		0.00	0.00	0.00	0.00				<del>  </del>
Total	0.113	0.00	0.00	0.00	0.00	334.0	245.0		
Mo. Avg.	8.351 0.269	0.00	0.00	0.00	0.00	167,0	122.5		
L	U.269		1.00	3.00	0.00	107,0	142.3		

PLANT	STAFFING:
-------	-----------

Day Shift Operator	Class:	С	Certificate No:	16046	Name:	Paul Tzareff
						<del></del>
Day Shift Operator	Class:		Certificate No:		Name:	
Night Shift Operator	Class:		Certificate No:		Name:	
Lead Operator	Class:	С	Certificate No:	8863	Name:	Roger Holsapple

### DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail (	his report to: Department of Environmental Protection, Central I	District, 3319 Maguire Boulevard Suite	232. Orlando, FL, 32803-3767			
PERMITTEE NAME: MAILING ADDRESS:	Phase-Wedgefield	PERMIT NUMBER	FLA010900			
MAILING ADDICESS:	Tampa Florida, 33610	LIMIT:	Final	REPORT:	Monthly	
	1 Without brussed 22.0.0	CLASS SIZE:	NA	GROUP:	Domestic	
PACILITY:	Wedgefield WWTF					
LOCATION:	3100 Bancroft Boulevard	MONITORING GROUP	R-001			
	Orlando, FL	NUMBER: MONITORING GROUP DESC:	Public Access Reuse, including Influent			
COUNTY:	Orange	NO DISCHARGE FROM SITE: MONITORING PERIOD	]			
		From: August 01,2010	To: August 31,2010			

Parameter		Quantity or Loading	Units	Qua	lity or Concentration	Units	No. Ex.		Sample Type
Flow	Sample Measurement	0.217	MGD					S Days/Week	Flow meters an
PARM Code 50050 Y Mon.Site No. FLW-1	Perset Requirement	0.368 (An.Avg.)	MGD					5 Days/Week	Flow meters use totalizers
Flow	Sample Measurement	0.225	MGD				8	S Days/Wesk	Flow meters an totalizers
PARM Code 50050 1 Mon. Site No. FLW-1	Perset Regainment	Report (Mo.Avg.)	MOD					5 Days/Week	Flow meters and totalisms
OD, Carbonaceous 5 day, 20C	Sample Monurement			8.6			0	Every Two Weeks	8-hour FPC
PARM Code #0082 Y Man, Size No. EFA-1	Permit Requirement			20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement			8.0	9.0		•	Every Two Weeks	S-hour FPC
PARM Code 8082 A Mon.Blue No. BPA-1	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Mex.)	mg/l,		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			1.4		mg/l	0	4 Days/Week	Grab
PARM Code 00330 B Mon.Site No. EFB-1	Permit Requirement			5.0 (Max.)		Mg/L		4 Days/Week	Grab
pH	Baraple Megarement			6.3	7.6	<b>\$</b> U	0	5 Days/Week	Grab
PARM Code 00100 A Mon.Site No. EFA-1	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab

I certify under pensity of taw that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel property gather and evaluate the information submitted. Based on my inquiry of the penson or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXEC	CUTIVE OFFICER OR AUTHORIZED AGENT	SKHATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Roger Holsapple	Lead Operator	Middle	407-869-1919	2010/8/21
COMMENT AND EXPLANATION	ON OF ANY VIOLATIONS (Reference all mitach	ments here)		

### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

R-001

PERMIT NUMBER: FLA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: August 61,2010

To: August 31,2010

Parameter		Quantity or Loading		Units		ality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Feesl, % less then	Sample Measurement				88%		PER- CENT	•	4 Days/Week	Gnsb
PARM Code 51905 A Mon.Sian No. BFA-1	Permit Requirement				75 (Min.)		PER- CENT	$\top$	4 Days/Work	Grab
Oliform, Fecal	Semple Measurement				1		WIDOME	0	4 Days/Week	Grab
PARM Code 74055 A Man.Site No. EFA-1	Puruit Regulrement				25 (Mex.)		4/1006/EL		4 Days/Week	Grab
Total Residual Chlorine (For Distribution)	Sample Measurement				1.0		sag/L	0	Continuous	Meter
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1,0 (Min.)		mg/L		Continuous	Mater
Turbidity	Sample Measurement				2.9		NTU	•	Ceatlaunus	Meter
PARM Code 00070 B Mon.Sies No. EFB-1	Permit Requirement				Report (Max.)		NTU		Continuous	Motor
Hitrogen, Nitrate, Total (as N)	Sample Measurement				4,04		mg/L	9	Meadily	8-hour FPC
PARM Code 00620 A 60n.Size No. EFA-I	Permit Requirement				12.0 (Max.)		sø/L		Monthly	8-hour PPC
/low (from groundwater well)	Semple Measurement	0.00		MGD				•	Continuous	Flow motors an
PARM Code 50050 P Mon.Site No. FLW-6	Permit Regultement	Report (An.Avg.)		MOD					Continuous	Plow meters and totalizane
Flow (from groundwater well)	Sample Measurement	0.00	0.00	MGD				ě	Continuous	Flow meters set totalizers
PARM Code 50050 Q Man.Site No. FLW-6	Peendt Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MOD					Continuous	Flow meters and totalisms
Plow (total to some 3)	Sample Magazrement	9,000		MGD				•	Continuous	Flow meters and totalizers
PARM Code \$0050 R Mon.Sits No. FLW-5	Perset Regainsment	0.0232 (An.Avg.)		MOD					Continuous	Flow meters and totalizors
Flow (total to zone 3)	Sample Measurement	0.000	0.000	MGD				0	Continuous	Flow meters and
PARM Code 50050 S Mon. Sign No. FLW-5	Permit Regelerment	Report (Mo.Avg.)	Report (3-Mo,Avg.)	MGD					Continuoum	Flow meters and totalizers
Flow (total to some 2)	Sample Measurement	0.000		MGD				•	Continuous	Flow eneters and totaliners
PARM Cole 50050 T Mon. Site No. FLW-4	Permit Requirement	0.0634 (An.Avg.)		MGD					Continuous	Flow meters and totalizers
Flow (total to some 2)	Sample Measurement	0,800	6.000	MGD				0	Continuence	Flow meters and totalizers
PARM Code 50050 U Mon,Site No. FLW-4	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow moters and

COMMENTS:

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

PERMIT NUMBER: FLA019900

MONITORING GROUP
NUMBER:
MONITORING PERIOD
From: August 91,3910
To: August 31,3010

Parameter		Quantity	or Loading	Units			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (lotal to some 1)	Sample Measurement	0.000		MGD				•	Continuous	Flow meters o
PARM Code 50050 V Man.Site No. FLW-3	Permit Requirement	0.0114 (An.Avg.)		MGD					Continuous	Flow meters a totalizers
Flow (total to zone 1)	Semple Measurement	9.000	8,600	MGD					Continuents	Flow meters a
PARM Code 50050 W Mon.Site No. FLW-3	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MOD					Continuous	Flow meters to
Plow (total to golf course)	Sample Messurement	0.209		MGD				•	Continuous	Flow meters a
PARM Code 50050 Mon.Sim No. FLW-2	Permit Recomment	0.270 (As.Avg.)		MGD					Continuous	Flow motors a
Flow (total to golf course)	Sample Messurement	9.195	8.190	MGD				0	Continuous	Flow meters a totalizers
PARM Code 50050 Mon.Size No. PLW-2	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MOD					Continuous	Flow meters a
BOD, Cerbonassous 5 day, 20C	Sample Measurement				283.5		mg/L	•	Every Two Weeks	8-bour PPC
*ARM Code 80082 G Jon, Site No. INF-1	Persek Regularement				Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				194,6		mg/l.	0	Every Two Weeks	8-bour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Regularment				Report (Mo.Avg.)		me/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Semple Measurement				58.4		Personi	0	Monthly	Calculated
PARM Code 00180 1 Mon.Sitz No. FLW-!	Permit Regainement				Report		Percent		Monthly	Calculated
	Sample Measurement									
	Permit Requirement									
	Sample Measuroment									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									

¹ Initially, flow is limited to 0.270 MGD AADF. However, the flow may be increased after completion of the second treatment place and pending the results the required load test. DEP Form 62-620.910(10), Effective November 29, 1994

# DAILY SAMPLE RESULTS - PART B Facility: Wedgefield WWTF

Permit Number: Monitoring Period

FLA010900

From: August 01,2010

To: August 31,2016

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ML)	рН (Мах)	pH (Min)	TRC (For Disinfect) (mg/L)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Tota (as N) (mg/L
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
don. Site	EFA-1	EFA-1	EFA-1	EFA-I	EFA-1	EFB-I	EFB-1	FLW-1	EFA-1
<del></del> -			7.3	13	2.3		2.9	0.248	
2		<1	72	7.2	2.3	1.0	2,9	0.294	
3		<1	73	7.3	2.6	1.0	2.9	0.229	
4	9.0	<1	7.4	7.4	2,7	1.4	2.9	0.204	4.04
5		</td <td>73</td> <td>7.3</td> <td>1.0</td> <td>1.1</td> <td>2.9</td> <td>0.210</td> <td></td>	73	7.3	1.0	1.1	2.9	0.210	
6			7.6	7.6	3.6		2.9	0.210	
7			7.5	7.5	1.6		2.6	0.196	ļ
8			7.2	7.2	3.4		2.9	0.258	
9		<1	7.1	7.1	2.6	1.4	2.9	0.290	
10		<1	7.3	7.3	3	1.0	2.9	0.230	<u> </u>
li		<1	72	7.2	1	1.0	2.9	0,237	
12		<1	7.3	7.3	. 3	1.0	2.9	0.218	
13			7.1	7.1	2,5		2.2	0.226	
14			7.0	7.0	1		2.9	0.207	1
15			7.2	7.2	1.7		2.9	0.263	
16		1	7.3	7.3		1.0	2.9	0.233	
17		<1	7.4	7.4	1	1.0	2.9	0.223	
18	7.0	1	7.1	7.1	1	1.0	1.7	0.219	
19		<1	7.2	7.2	1	1.0	1.5	0.204	
20			6.8	6.8	1.5		1.6	0.207	
21			6.9	6.9	1		1.6	0.207	
22			7.1	7.1	ŀ		1.2	0.277	
23		<1	7.3	7.3	1	1.3	1.9	0.213	
24		<1	7.2	7.2	i	1.0	2.9	0.219	
25		<1	7.2	7.2	1	1.2	2.4	0.192	
26		<1	7.3	7.3	1.3	1.0	2.9	0.168	
27			7.2	7.2	1.4		2.2	0.201	
28			7.0	7.0	1		2.6	0.211	
29			7.3	7.3	1		2.9	0.224	
30		<1	7.2	7.2	1	1.0	2.9	0.254	
31		<1	7.0	7.0	1	13	2.5	0.208	
Total	16.0	10	223.5	223.5	51.5	19.7	79.1	6.980	4.04
Mo. Avg.	8.0	0.55	7.2	7.2	1.66	1.09	2.55	0.225	4.04

	Day Shin Operator	Class:	С	Certificate No:	16046	Name:	Paul Tzareff
	Day Shift Operator	Class:		Certificate No:		Name:	
	Night Shift Operator	Class:		Certificate No:		Name:	
_	.ead Operator	Class:	<u>c</u>	Certificate No:	8863	Name:	Roger Holsupple

# DAILY SAMPLE RESULTS - PART B Facility: Wedgefield WWTF

Permit N Monitor	lumber: ing Period	FLA010900 From: Aug	ust 01, 2010		SAMPLE R. 151 28, 2010			edgefield WW	rf	
	Flow (MGD) golf course	Flow (MGD) Zone 1	Flow (MGD) Zone 2	Flow (MGD) Zone 3	Flow (MGD) GW makeup well	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	50050	50050	50050	50050	80082	00530			
Mon. Site	FLW-2	FLW-3	FLW-4	FLW-5	FLW-6	INF-I	INF-1			ļ
1	0.000	0.00	0.00	0.00	0.00					<u> </u>
2	0.000	0.00	0.00	0.00	0.00					
3	0.000	0.00	0.00	0.00	0.00					
4	0.204	0.00	0.00	0.00	0.00	207.0	152.0	<b>\</b>		
5	0.210	0.00	0.00	0,00	0.00					
6	0.226	0.00	0.00	0.00	0.00					
7	0.055	0.00	0.00	0.00	0.00					
8	0.000	0.00	0.00	0.00	0.00					
9	0.000	0.00	0.00	0.00	0.00					1
10	0.000	0.00	0.00	0.00	0.00		1	1		<u> </u>
11	0.000	0.00	0.00	0.00	0.00	•				
12	0.006	0.00	0.00	0.00	0,00		· · · · ·			
13	0.154	0.00	0.00	0.00	0.00					<u> </u>
14	0.044	0.00	0.00	0.00	0.00		<del>                                     </del>			<del>                                     </del>
15	0.000	0.00	0.00	0.00	0.00		-			<del>                                     </del>
16	0.112	0.00	0.00	0.00	0.00			<del>                                     </del>		<del> </del>
17	0.372	0.00	0.00	0.00	0.00					<del> </del>
18	0.000	0.00	0.00	0.00	0.00	200.0	236.0	<del> </del>		<del> </del>
19	0.137	0.00	0.00	0.00	0.00		<del> </del>	<u> </u>		<del>                                     </del>
20	0.217	0.00	0.00	0.00	1			<del> </del> -		
21	0.000	0.00	0.00	0.00	0.00			<u> </u>		<u> </u>
22		0.00	0.00	0.00	0,00					
23	0.000	0.00	0.00	0.00	0.00				<u> </u>	ļ
24	0.000	0.00	0.00	0.00	0.00		<del> </del>			<b>.</b>
25		0.00	0.00	0.00	0.00					ļ
26	0.000	0.00	0.00	0.00	0.00					
27	0.615	0.00	0.00	0.00	0.00					<b></b>
28	0.438	0.00	0.00	0.00	0.00					ļ
29	0,334	0.00	0.00	0.00	0.00		<del> </del>			
30	1.552	0.00	0.00	0.00	0.00					
31	0.625	0.00	0.00	0.00	0.00					
Total	0.771	0.00	0.00		0.00	445.5				
Mo. Avg.	6.072	0.00	0.00	0.00	0.00	407.0	388.0			
	0.195	0.00	0.00	0.00	0.00	203.5	194.0			

DI ANT	CT.	CEINO.
PLANT	SIA	J-ING:

Day Shift Operator	Class:	C	Certificate No:	16046	Name:	Paul Traneff
Day Shift Operator	Class:		Certificate No:		Name:	
Night Shift Operator	Class:		Certificate No:		Name:	
Lead Operator	Class:	с	Certificate No:	8863	Name:	Roger Holsapple

### DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail thi	s report to: Department of Environmental Protection, 3319 Ma	guire Blvd, Sune 232, Orlando, FL 32803-3767			
PERMITTEE NAME: MAILING ADDRESS:	Ploris Wedgefield, Inc 2600 Commercentre Dr	PERMIT NUMBER:	FI_A010900-005-DW2P	Expiration Date:	January 27, 201.
	Lake Forest, CA 92630	LIMIT: CLASS SIZE:	Final N/A	REPORT: PROGRAM:	Monthly Domestic
FACILITY: LOCATION:	Wedgefield WWTF 3100 Bancroft Blvd	MONITORING GROUP NUMBER MONITORING GROUP DESCRIPTION:	R-001 Public Access Reclaimed Wate		
LOCATION:	Orlando, FL 32833-4011	RE-SUBMITTED DMR.	September 1", 2010	September 30th, 2010	
COUNTY: OFFICE:	Orange Central District	MONITORING PERIOD From:	To To	September 30 , 2010	

Perameter		Quantity or Londing	Units	Quality or Concentration	Units	No.	Frequency of Analysis	Sample Type
Flow(Total through Plant)	Sample Measurement	.211	MGD			0	5 Days/Week	Flow Totalire
PARM Code 50050 Y	Permit	0.330	MGD			<del>  -  </del>	5 Days/Week	Flow Totalize
Mon. Site No. FLW-1	Requirement	(An.Avg.)			<u>l</u>	$\perp$		L
Flow(Total through plant)	Sample Measurement	.211	MGD			0	5 Days/Week	Flow Totalize
PARM Code 50050 1 Mon, Site No. FLW-1	Permit Requirement	0,330 (An,Avg.)	MGD				5 Days/Week	Flow Totalize
Flow(Total through Plant)	Sample Measurement	.221	MGD			o	5 Days/Week	Flow Totaliza
PARM Code 50050 P Mars. Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow lotalize
ow(Total to Golf Course)	Sample Measurement	.190	MGD			ō	Continuous	Flow Totaliza
ARM Code 50050 Q Mun. Site No. FLW-2	Permit Requirement	0.270 (An.Avg.)	MOD		-	$\Box$	Continuous	Flow Totaliza
low(Total to Golf Course)	Sample Measurement	.122	MGD			0	Continuous	Flow Totalize
PARM Code 50050 R Mon. Site No. FLW-2	Permit Requirement	Report (Mo.Avg.)	MGD				Continuous	Flow Totalize
Flow(Total to Zone 1)	Sample Measurement	0	MOD			0	Continuous	Flow Totalize
PARM Code 50050 S Mon. Sile No. FLW-3	Permit Requirement	0.0096 (An Ave.)	MGD				Continuous	Flow Totalize

Locally under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

!	NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (yymm/dd)
į	Paul Tzareff/Lead Operator		407-641-7622	10-10-21

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

# DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

PERMIT NUMBER: FLA010900-005-DW2P

MONITORING GROUP R-001
NUMBER:
MONITORING PERIOD From: September 1*, 2010

Parameter	1 1	Quantity or Loading	Units		Quality or Concentrate	tion	Units	No.	Frequency of	Sample Typ
low(Total to Zone 1)	<del> </del>	<del></del>	1.00				_1	Ex	Analysis	
FROM( I DUME TO ZONG 1)	Sample	0	MGD		ļ		1	0	Continuous	Flow Totaliz
DADIAG / 40000	Measurement		1							
PARM Code 50050 T	Permit	Report	MGD			1			Continuous	Flow Totaliz
Mon. Site No. FLW-3	Requirement	(Mo,Avg.)								
Flow(Total to Zone 2)	Sample	0	MGD				T	0	Continuous	Flow Totaliz
	Measurement					L				
PARM Code 50050 U	Permit	0.0309	MGD					1	Continuous	Flow Totaliza
Mon. Site No. PLW-4	Requirement	(An.Avg.)	1		1		i i	1		1 1011 101111
Now(Total to Zone 2)	Sample	0	MGD				1	10	Continuous	Flow Totaliz
	Measurement		1				1	l ·	V-3311111044	
PARM Code 50050 V	Permit	Report	MGD			T	<del> </del>	1	Continuous	Flow Totaliza
Mon. Site No. FLW-4	Requirement	(Mo.Avg.)					1	i	CONTINUOUS	
Flow(Total to Zone 3)	Sample	0	MGD		1 **	T	<del>                                     </del>	0	Continuous	Flow Totaliza
	Measurement				1		1	١,٠	CONTINUOUS	FIOW LOCALIZA
PARM Code 50050 W	Permit	0.0195	MGD			<del>                                     </del>	<del></del>	+-	Continuous	Flow Totaliza
Man. Site No. FLW-5	Requirement	(An.Ayg.)	1					1	CONTRIBUDUE	FIOW LOUBING
Flow(Total to Zone 3)	Sample	8	MGD	· · · · · · · · · · · · · · · · · · ·	<del></del>	<del> </del>	<del></del>	-		Charles Table
- (	Measurement	•				1		0	Continuous	Flow Totaliz
PARM Code 50050 W	Permit	Report	MOD		<del> </del>	<del></del>	+	-		Flow Totalm
Mon. Site No. FLW-5	Requirement	(Mo.Avg.)					1	l	Continuous	I, IDA. 1 OURID
'ow(from groundwater well)	Sample	0	MGD		<del></del>	<del> </del>	<del>↓</del>	+	<del></del>	
The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	Measurement		1		1			0	Continuous	Flow Totaliza
ARM Code 50050 W	Peznik	Report	MGD		<del></del>	<del></del>	<del> </del>	┼		
Mon. Site No. FLW-6	Requirement	(An.Avg.)						1	Continuous	Flow Totaliza
Flow(from groundwater well)	Sample	0	MGD		<del> </del>	<del> </del>	<del> </del>	<del>-</del> -		
· ····································	Measurement	'	1			1		0	Continuous	Flow Totaliza
PARM Code 50050 W	Permit	Report	MGD		<del></del>		+			
Mon. Site No. FLW-6	Requirement	(Mo.Avg.)	,027		Į.	1			Continuous	How Totalize
BOD, Carbonactous 5 day, 20C	Sample	(80.84.)	<del> </del>		7,9		<del></del>	<b>.</b>		
BOD, Carbunacious 3 Bay, 20C	Measurement				7.9		mg/L	0	Bi-weekly; every	8-hr PPC
PARM Code 80082 Y	Permit	<del>-</del>	1			ļ	<del></del>	L	2 weeks	
Mon. Site No. EFA-1			1		20,0		mg/L	ļ	Bi-weekly; every	B-hr FPC
	Requirement		<del>                                     </del>		(An.Avg.)		<u> </u>		2 weeks	
BOD, Carbonaceous 5 day, 20C	Semple	•	1 1	9.0	n/a	7.7	12.0/1	0	Bi-weekly, every	8-hr FPC
DARLES A SOCIO	Measurement								2 weeks	
PARM Code 80082 A	Permit			60.0	45,0	30.0	nug/L	"	Bi-weekly; every	8-hr FPC
Mon. Site No. EFA-1	Requirement		ļ	(Max.)	(Wk.Avg.)	(Mu.Avg.)	<u> </u>	I	2 weeks	
Solids, Total Suspended	Sample					2.7	mg/l	0	4 Days/Week	Grab
	Measurement					<u> </u>	l .	L	-	
PARM Code 00530 B	Permit					5.0	mg/l.		4 Davs/Week	Grab
Mon. Sine No. EFB-1	Requirement				1	(Max.)	1			

### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

MONITORING GROUP NUMBER:

R-001

PERMIT NUMBER: FLA010900-005-DW2P

MONITORING PERIOD From: September 14, 2010 To: September 30th, 2010 Parameter Quantity or Londing Units Quality of Concentration Units Frequency of Sample Type Analysis 5 Days/Week ᆵ Sample 6.7 7.6 Grab Measurement PARM Code 00400 A Permit 60 5 Days/Week Grah Mon. Site No. EFA-1 Requirement (Min.) (Max.) 12 s/100mL 4 Days/Week Grah Measurement PARM Code 74055 A Permit 25 #/100ml 4 Days/Week Grab Mon. Site No. EFA-1 Coliform, Focal, % less than Requirem (Mex.) 94 4 Davs/Week Calculated Measurement PARM Code 51005 A 4 Days/Week Calculated percent Mon. Site No. EFA-1 (Mo.Total) Requirement Chlorine, Total Residual(For Sample 1.0 ang/L Continuous Meter Disinfection)
PARM Code 50060 A
Mon. Site No. EFA-1 Мевритетнепо 10 mg/L Continuous Requirement (Min.) Turbidity 2.9 NTU Ω Continuous Meter Measurement PARM Code 00070 B NTU Meter Report Continuous (Mex.) Mon. Site No. EPB-1 Requirement tropen, Nitrate, Total (as N) 8-hr FPC mg/L Monthly ARM Code 00620 A 12.0 mg/L Monthly 8-hr PPC Mon. Site No. EFA-1 Requirement (Max.) Flow(Total through plant) MGD 221 219 5 Days/Week Flow Totalizer Measurement PARM Code 50050 W Report (Qt.Avg.) MGD Report 5 Days/Week Flow Totalizer Mon. Site No. Fl.W-1 Percent Capacity, (TMADE) Requirement (Mo.Avg.) Sample Measurement 67 Monthly Calculated Permitted Capacity) x 100 PARM Code 00180 P Calculated Report Monthly Mon. Site No. CAL-1 Requirement (Mo.Avg.) 206 BOD, Carbonaceous 5 day, mg/L 8-hr FPC Bi-weekly, every 20C(Influent)
PARM Code 80082 P
Mon. Site No. INF-1
Sulids, Total Suspended(Influent) Measurement 2 weeks Bi-weekly, every 8-hr FPC Report (Max.) Permit my/L Requirem 2 weeks 122 mı/L weekly, every 8-hr FPC Measurement 2 weeks Bi-weekly, every PARM Code 00530 P Report mg/L 8-hr FPC Mm. Site No. INF-I Requirement (Max.) 2 wcoks

# DAILY SAMPLE RESULTS - PART B Facility: Wedgefield WWTF

Permit Number: Monitoring Period

FLA010900-005-DW2P From: September 1st, 2010 To: September 30th, 2010

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine, Total Residual mg/L	Coliform, Fecal #/100mL	Nitrogen, Nitrate, Total (as N) mg/t.	pH s.u.	Solids, Total Suspended mg/l.	Turbidity NTU	Flow MGD	Flow MGD
Code	80082	50060	74055	00620	00400	00530	00070	50050	50050
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	FFA-I	EFB-1	EFB-1	FLW-I	FLW-2
J	8.0	1.0	<1	7.39	7.2	<1 .	1.6	.197	.157
2		1.0	<1	· · · · · · · · · · · · · · · · ·	7.1	<1	1.9	.239	.120
3		1,0			7,1	<u> </u>	2.2	.196	.152
4		1.0			7.4		2.9	.198	.098
5		1.0			7.2		2.9	.277	0
6		1.8			7.3		2.9	.216	.098
7		1.0	<1		7.6	<1	2.9	.233	.060
8		1.6	<1		7.5	<1	2.4	.225	.171
9		3.0	12		7.3	<1	2.9	.238	.156
10		1.0	<1		7.2	<1	2.9	.201	0
11		3.0			7.0		2.9	.191	0
12		3.8			7.1		2.9	.247	0
13		3.4	<1		7.2	<1	2.9	.247	.131
14		3.6	< j		7.3	1.1	2.9	.200	.257
15	6.0	2.8	<1		6.9	1.4	2.3	.205	.384
16		2.1	<1		7.2	1.2	2.0	.212	.085
17		1.4			7.4		2.3	.197	.110
18		1.4			7.3		2,3	.217	.020
19		2.4			7.2		2.9	.236	0
20		3.3	<1		7.5	2.7	2.9	.242	.147
21		3.6	<1		7.1	<1	2.9	.193	.200
22		2.1	<i< td=""><td></td><td>7.3</td><td>&lt;1</td><td>2.9</td><td>.187</td><td>.303</td></i<>		7.3	<1	2.9	.187	.303
23		3.5	<i< td=""><td></td><td>7.2</td><td>&lt;1</td><td>2.9</td><td>.236</td><td>.285</td></i<>		7.2	<1	2.9	.236	.285
24		1.6			7.0		2.9	.215	.184
25		1.2			7.2		2.9	.219	.013
26		1.0			7,1		2.9	.226	0
27		1.0	<1		7.4	1.4	2.9	.261	0
28		1.0	<1		7.3	<1	2.9	.204	.502
29	9.0	3.6	<1	7.9	7,1	<1	2.9	.260	.016
30		1.0	<1		7.5	<1	2.0	.234	0
31									
Total	23	60.19	20.5	15.29	217.2	14.3	79.9	6.631	3.649
Mo. Avg.	7.7	2.01	1.14	7.65	7.24	.794	2.66	.221	.122

Mo. Avg.	7,7	2.01		1.14	7.65		7.24		.794	2.66	.221	.122
PLANT STAFF	ING:											
Day Shift Opera	tor	Class:	<u> </u>	Certificate	No:	16046		Name:	Paul M.	Tzareff		
Evening Shift O	perator	Class:		Certificate	: No:			Name:				
Night Shift Ope	rator	Class:		Certificate	No:			Name:				
Lead Operator		Class:	<u>C</u>	Certificate	: No: _	16046		Name:	Paul M.	Tzareff		

### DAILY SAMPLE RESULTS - PART B

Pennit Number: Monitoring Period FLA010900-005-DW2P

From: September 1st, 2010 To: September 30th, 2010

Facility: Wedgefield WWTF

BOD. Solids, Total Flow Flow Flow Flow MGD MGD Carbonaccous 5 MGD MGD Suspended day, 20C mg/L mg/L R0082 00530 50050 50050 Code 50050 50050 FLW-3 FLW-4 FLW-5 FLW-6 INI-I INF-I Mon. Site 0.00 0.00 0.00 0.00 172.0 106.0 0.00 0.00 2 0.00 0.00 0.00 0.00 3 0.00 0.00 4 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 5 0.00 0.00 0.00 6 0.00 0.00 0.00 0.00 0.00 7 0.00 0.00 0.00 0.00 8 9 0.00 0.00 0.00 0.00 0.00 0.00 10 0.00 0.00 11 0.00 0.00 0.00 0.00 12 0.00 0,00 0.00 0.00 13 0.00 0.00 0.00 0.00 14 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 206.0 70.0 15 0.00 16 0.00 0.00 0.00 0.00 0.00 17 0.00 0.00 18 0.00 0.00 0.00 0.00 0.00 19 0.00 0.00 0.00 20 0.00 0.00 0.00 0.00 21 0.00 0.00 0.00 0.00 22 0.00 0.00 0,00 0.00 23 0.00 0.00 0.00 0.00 24 0.00 0.00 0.00 0.00 25 0.00 0.00 0.00 0.00 26 0.00 0.00 0.00 0.00 27 0.00 0.00 0.00 0.00 28 0.00 0.00 0.00 0.00 29 0.00 0.00 0.00 0.00 164.0 122.0 30 0.00 0.00 0.00 0.00 31 0.00 0.00 0.00 0.00 Total 0.00 0.00 0.00 0.00 546 298 0.00 0.00 0.00 Mo. Avg. 0.00 182.0 99.3

PLANT STAFFING:						
Day Shift Operator	Class:	С	Certificate No:	16046	Name:	Paul M. Tzareff
Evening Shift Operator	Class:		Certificate No:	<del></del>	Name:	
Night Shift Operator	Class:		Certificate No:		Name:	
Lead Operator	Class:	С	Certificate No:	16046	Name:	Paul M. Tzareff

# Florida Department of Environmental Protection

Twin Towers Office Bldg. 2600 Blair Stone Road Tallahassee, Florida 32399-2400

# **GROUND WATER MONITORING REPORT**

Rule 62-522.600(11)

PART I GE	NERAL INFOR	MATION		
(1) Faci	lity Name_Wed	<u>gefield WWTF – Orange Cou</u>	nty	
Addre	ss 3100 Bancr	oft Blvd.		
City_	Orlando			Zip_ 32833
Telep	hone Number _	( 407-568-2112 )	<del></del>	
(2) The (	GMS Identification	on Number 3048P03712		. <del></del>
(3) DEP	Permit Number	FLA010900		
(4) Auth	orized Represer	ntative Name Paul Tzareff		
Addr	ess 3100 Band	roft Blvd.		
City	Orlando			Zip <u>32765</u>
Telep	hone Number (	407 ) 641-7622		
(5) Type	of Discharge_D	omestic Waste		
~(6) Metho	od of Discharge	Golf Course / Sprayfield Irriga	tion	
attachmen information possibility	der penalty of la hts and that, bas n is true, accura of fine and impr	ed on my inquiry of those individ te, and complete. I am aware th isonment.	luals immediately respon	he information submitted in this document and all sible for obtaining the information, I believe that the enalties for submitting false information, including the
Date: Oct	ober 21 st , 2010		<u></u>	
			Signature	of Owner or Authorized Representative
PART II Q	UALITY ASSUF	ANCE REQUIREMENTS		
Sample O	rganization	Advanced En	wironmental Laboratories	<u> </u>
Analytical	Lab	NELAC Certification #	E-84589	
		NELAC Certification #	4	
Lab Name	Advanced En	vironmental Laboratories	_ <del></del>	
Address _	528 South North	Lake Blvd. Suite 1016 Altamon	te Springs Florida 32701	
Phone Nu	mber ( <u>407</u> ) 93	7-1594		
11/20/200	9			

County: Facility Name: Permit Number: Monitoring Period	Orange Cot Wedgefield FLA010900 From: July 2010	WWTF GM:	5# <b>3048P0</b> 3 : September 20		Permit Builder MW ID: Well Type: Description:	MWB-1R* Beckground Well Name MW-1 Golf Course WAFR # 6006 GMS# 3048A13413			
Was the well purged before sampling?  GW TOC 66.30	_X Yes		Squalita 2	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Unte Sample Obtained: Time Sample Obtained:	09/24/10 06:50		
Parameter	Permit Bulider PARM Code	Sample Messurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Use	Samples d Filtered (L/F/N)
Water Level Relative to Feet, NGVD	B2545	60.89	Poet	Report	N/A	Field	Quarterly	Pump	N
Nitrate, (as N)	00620		me/L	Report	0.043	IC 300.0	Quarterly	Pump	N
Solids, Total Dissolved(TDS)	70295	<u>-</u>	me/L	Report	01	E160.t	Querterly	Pump	N
Chloride (as CI)	00940		mu/L	Report	0.81	IC 300.0	Quarterly	Pumo	N
Coliforna, Fecal	74055		#/100ml.	Report.	1.0	\$M9222D	Quarterly	Pump	N
pHIIq	00400	5.02	SU	Report	N/A	Field	Quarterly	Pump	N
Turbidity, Lab - Nepholometric	82079		NTU	Report	910,0	E180.1	Ownterly	Pump	N
Addal: Nevamber 2009**	, <b>, , , ,</b> , , ,		1 4 4	11 Jan 19 1	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	ડુંગેલ _{ું કે} જિલ્લામાં કૃષ્ણ	4		
Sodken	00923	44	mg/L	Report	0.026	SW846 6010	Quarterly	Pump	N
Trihalomethane, Total	82080	0.60 U	ug/L	Report	0.60	E524.2	Quarterty	Pump	И
Priginal well MWB-I was dan "Based on the circust concentrations of certify under penalty of law that I have to believe the submitted information is true."	of these parameter personally examin c, accurate and co	s in the offluent samples, para ed and are familiar with the in mplets. I are aware that there a	neture Sodium formation sub- re significant	and Total Tribu mitted herein; as penalties for sub	alomethans (TTHMs) nd based on my inqui maliting false informa	ry of those individuals imm tion including the possibili	ediately responsit ly of fine and imp	de for obtaining the risonment.	information,
NAME/TITLE OF PRINCIPAL EXEC	DITAR OLLICE	UR AVI BURIZED AGENT	BRUKAT	URE OF PRINC	IPAL EXECUTIVE O	FFICER OR AUTHORIZED	ACENT TE	LEPHONE NO	DATE (YYMMADO)
COMMENTS AND EXPLANATION:			l	·		<del></del>			

DPF Form 62-420-910(10), effective November 29, 1994

County: Facility Name: Permit Number:	Orange County Wedgeffeld WWTF FLA010900	GM5# 3048P03712	Permit Builder MW 11): Well Type: Description:	MWB-2 Background Well Name MW-2 Golf Course	
Monitoring Period Was the well purged before sampling? GW TOC 70.10	From: July 2010 _X Yes No	To: September 2010	Date Sample Obtained: Time Sample Obtained:	WAFR # 6005 GMS# 3048A13414 09/24/10	
Barra and an	Pounds Samuels Manager				

Parameter	Parmit Bullder PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysh Method	Monitoring Frequency	Sampling Equipment Vool	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82543	64.7	Feet	Report .	N/A	Field	Churrenty	Pamp	N
Nitrate, (as N)	00620		me/L	Report	0.043	IC 300.0	Quanterty	Pump	N
Solids, Total Dissolved(TD\$)	70295		mg/L	Report	10	E160.1	Querterly	Pump	N
Chloride (as Ci)	00940	· · · · · · · · · · · · · · · · · · ·	me/L	Report	0.81	IC 100.0	Querterly	Purno	N
Coliforn, Prosi	74055	·	#/100mt	Report	1.0	SM9222D	Quarterly	Pymp	N
pH	00400	4,71	SU	Report	N/A	Field	Quarterly	Pump	N.
Turbidity, Lab - Nepholometric	82079		NTU	Report	0.016	E180.1	Quarterly	Pamo	N
Added: Nevember 2009**			at a	1 1 7	ytt a file			James Harris	
Sodium	0092)	_12	ms/L	Report	0.026	SW846 6010	Quarterly	Релир_	N
Tribelomethane, Total	82080	0.60 U	ug/L	Report	0.60	E524.2	Quarterly	Рапр	N
						J			

^{**} Based on the elevated concentrations of these parameters in the effluent samples, parameters Sodium and Total Tribalomethane (TTFUMs) have been added to the current Groundwater Monitoring Plan (GWMP).

COMMENTS AND EXPLANATION:

(1.20-2009)

SW846 6010

E524.2

Quarterly

at 14 数 5 产产

Pemp

Pamp

County: Peclity Name: Permit Number:  Monitoring Period Was the well purged before ampling? GW TOC 67.90	Orange Co Wedgefield FLA010900 From July 201 X_Yes	0	S# 3048P0	3712		Pernut Builder MW ID: Well Type: Description: Date Sample Obtained: Time Sample Obtained	MWB-3 Backgroun Well Nam Golf Cour WAFR #6 GMS# 304 09/24/10	ne MW-3 ree 6904 18A 13415	
Parameter	Primit Builder PARM Code	Sample Messurvenent (Analysis Results)	Valu	Purmit Requirement	Detection Limits	Analysis Method	Monituring Frequency	Sampling Equipment Used	Samples Fittered (L/F/N)
Water Level Relative to Feet, NGVD	B2545	65.15	Feet	Report	N/A	Pield	Quarterly	Parite	N
Nitrate, (no N)	00620		neg/L	Report	0.043	IC 300.0	Quarterly	Pump	N
Solids, Total Dissolved(TDS)	70291	1400	mg/L	Report	10	E160,1	Quarterly	Pump	N
Chipride (as Cl)	00940		me/L	Report	14,0	6C 300.0	Quarterly	Permp	N
Coliform, Fecal	74055	_	#/100mL	Report	1.0	SM9222D	Quarterly	Pamp	N
pH	00400	6.06	SU	Report	N/A	Field	Quarterly	Pump	N
Torbidley I sh . Nonholometric	R2079		NTU	Remot	0.016	RIBO 1	Comment.		

-

mg/L

Report

0.026

Added: November 2009**

Trihalomethane, Total

00923

82080

68

0.60 U

^{**} Based on the elevated concentrations of these parameters in the efficient samples, parameters Sodium and Total Tribalomethane (TTHMs) have been added to the current Groundwater Monitoring Plan (GWMP).

COMMENTS AND EXPLANATION11/20/2/099

County: Facility Name: Permit Number:	Orange County Wedgefield WWTF FLA910900	GMS# 3048P03712	Pormit Builder MW (D: Well Type* Description:	MWI-4 Intermediate Well Name MW-4 Golf Course
Monitoring Feriod Was the well purged before sampling?	From: July 2010	To: September 2010	Date Sample Obtained: Time Sample Obtained:	WAFR # 6003 GMS# 3048A13416 09/24/10 08:31

Parameter	Permit Bullder PARM Code	Sample Measurement (Anniyats Results)	Unks	Permit Requirement	Detection 1.imits	Analysis Method	Monitoring Frequency	Sompling Equipment Used	Sampire Filtered (L/F/N
Water Level Relative to Feet, NGVD	82545	63.64	Fea	Report	N/A	Field	Quarterly	Pomp	Ň
Nitrate, (as N)	00620		nae/L	Report	0.043	IC 300.0	Quarterty	Pump	N
Solids, Total Dissolved(TDS)	70295		ms/L	Report	10	E160.t	Quarterly	Pemp	N
Chloride (ps Cl)	00940		DW/L	Report	0.81	IC 300.0	Quarterly	Pump	. N
Coliform, Fecal	74055		# (QQmt.	Report	1.0	SM9222D	Quarterly	Pump	N
pH	00480	5.20	SU	Report	N/A	Field	Questorly	Pamp	
Turbidity, Lab - Nepholometric	#2079		NTU	Report	9,916	E180,1	Quarterly	Pemp	. N
Added: November 1897**	<u> </u>		3, 4,			og Folkligfere gj			
Sodium	00923	46	mg/L	Report	0.026	SW846 6010	Quarterly	Pump	N
Frihalomethane, Total	82080	0.60 1/	w/L	Report	0.60	E524.2	Quarterly	Pump	N
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	-						<del> </del>	<del></del>	
	-	<del>.</del>					<del> </del>		
		<del> </del>			<b></b>				

^{**} Based on the elevated concentrations of these parameters in the effluent samples, parameters Sodium and Total Tribatomethane (ITHMs) have been added to the current Groundwater Monitoring Plan (GWMP), COMMENTS AND EXPLANATION:
[11-24-24NP]

County: Facility Name:	Orange County Wedgefield WWTF		Permit Builder MW ID; Well Type:	MWC-6 Compliance		
Perioli Number:	FLA010900	GMS# 3048P03712	Description:	Well Name MW-6 Golf Course WAFR # 6001		
Monitoring Period Was the well purged before sampling? (13W TOC 65.04	From: July 2010No	To: September 2010	Date Sample Obtained: Time Sample Obtained:	GMS# 3048A13418 09/24/10 08:56		

Parameter	Permit Builder PARM Code	Sample Measurement (Analysis Results)	Uniku	Permit Requirement	Detection Limits	Anniyeis Method	Monitoring Frequency	Rempling Equipment Used	Semples Filtered (L/F/N
Water Lovel Relative to Feet, NGVD	82545	59.21	Free	Report	N/A	Field	Quarterly	Pump	N
Njerate, (as N)	00620		nu/L	10	0.043	IC 300.0	Quarterty	Pump	N.
Solids, Total Dissolved(TDS)	70295		ma/L	500	10	E160.1	Quarterly	Panno	N.
Chloride (an C)	00940		mg/L	250	0.81	IC 300.0	Quarterly	Pump	N
Coliform, Fecal	74035	5,0	#/100mL	4	1.0	SM9222D	Owenerty	Pump	N
pHHq	00400	5.28	su	6,5-8.5	N/A	Fjeld	Quarterty	Permo	N
Turbidky, Lab - Nepholometric	82079		עזא	Report	0.016	£180.1	Quenarily	Pettap	N
Added: November 2009**						h san ar gala Marana ar gala Marana ar gala			
odium	00913	31	me/L	160	0.026	SW846 6010	Quartorly	Pung	N
ribalomethane, Total	82080	0.60 U	<u>ue/L</u>	<b>B</b> O	0.60	E524.2	Quarterly	Paresp	N_
									<u> </u>
			j		·		1		i i

^{**} Based on the elevated concentrations of these parameters in the effluent samples, parameters Sodium and Total Trihalomethane (TTHMs) have been added to the current Groundwater Monitoring Plan (GWMP).

COMMENTS AND EXPLANATION:

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DEP Form \$2-620 910(10), effective November 29, 1994

Orange County		Permit Builder MW ID:	MWI-7
Wedgefield WWTF		Well Type:	Intermediate
FLA010900	GMS# 3048P03712	Description:	Well Name MW-7
			Golf Course
			WAFR # 6000
From: July 2010	To: September 2010	Date Sample Obtained: Time Sample Obtained:	GMS# 3048A13419 09/24/10 07:44
	Wedgefield WWTF FLA010900 From: July 2010	Wedgefield WWTF FLA010900 GMS# 3048P03712  From: July 2010 To: September 2010	Wedgefield WWTF         Well Type:           FLA010900         GMS# 3048P03712         Description:           From: July 2010         To: September 2010         Date Sample Obtained:

Parameter	Permit Beliëer PARM Code	Sanapie Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Mentering Frequency	Sampling Equipment Used	Samples Filtered (LJP/N)
Water Level Relative to Feet, NGVD	82545	64.38	For	Report	N/A	Field	Ouerterty	Ринар	N
Nitrate, (as N)	00620	0.21 ป	ma/L	Report	0.21	IC 300.0	Querterly	Pamp	N
Solids, Total Dissolved(TDS)	70295	880	mg/L	Report	10	E160.1	Quarterly	Perso	N
Chloride (as Cl)	00940	400	ms/L	Report	4,0	IC 300,0	Ownterly	Рипио	N
Coliform, Fecal	74055	1.0 Ü	#/IOOmL	Report	1,0	SM9272D	Querterly	Permp	N
pH	00400	5.56	su	Report	N/A	Field	Quarterly	Pwmp	N
Turbidity, Lab - Nephalometric	\$2079		עדע	Report	0,016	E180.1	Quarterly	Punio	N
Added: November 2009	. 1.	e de Markette (1971)	1 24 1	1				્રોક કે કે <del>કે પ્રો</del> ફોસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રેસ્ટ્રે	ea _{r a} se y de
Sodium	00923	240	mg/L	Report	0.026	SW846 6010	Quarterly	Pump	N
Tripatomethane, Total	82080	0.60 U	ue/L	Report	0.60	E524,2	Quarterly	Pump	N
									:
			<u> </u>						

^{**} Based on the elevated concentrations of these parameters in the effluent samples, parameters Sedium and Total Tribalomethane (TTFfMs) have been added to the current Groundwater Monitoring Plan (GWMP).

11:20:20:09

County: Facility Name: Pannis Number:	Orange County Wedgefield WWTF FLA010900	GMS# 3048P03712	Permit Buildor MW ID; Well Type: Description:	MWC-1 Compliance Wall Name MW-1 On-Site Irrigation WAFR # 32995
Monitoring Period Was the well purpol before sampling? GW TOC 71.53	From: July 2010XYesNo	To: September 2010	Date Sample Obtained: Time Sample Obtained:	09/24/10 10.00

Parameter	Permit Builder PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Manisering Fraquency	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545	62.65	Foet	Report	N/A	Field	Questally	Pump	_ N
Nitrate (at N)	00620		mg/L	10	0.043	IC 300.0	Quarterly	Pump	N
Solids, Total Dissolved(TDS)	70295		me/L	500	10	E160.)	Overtorly	Pump	_ N
Chloride (44 Cl)	00940		ang/L	250	0.81	IC 300,0	Overterly	Peano	N
Coliform, Fecal	74055		#/100ml	4	1.0	SM9222D	Ownrestly	Pump	N
pH	00400	5.22	su	6.5-8.5	N/A	Field	Quarterly	Purmp	N
Twoidity, Lab - Nepholometric	82079		NTU	Report	0.016	E180.1	Quarterly	Pump	N
Added: Nevember 2009**	<u>.</u>		1 41 5						
Sodjem	00923	9,7	me/l.	160	0.026	2M846 6010	Quarterly	Pump	N
Tribalogacthums, Total	82080	0. <b>60</b> U	ue/L	80	0.60	E524.2	Ounterly	Pernp	
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^{**} Based on the elevated concentrations of these parameters in the effluent samples, parameters Sodium and Total Tribalomethane (TTHMs) have been added to the current Groundwater Monitoring Plan (GWMP).

COMMENTS AND EXPLANATION:
11 20/2019

DEP Form \$2-620 9100103, officians Navember 29: 1994

County: Facility Name; Permit Number:	Orange County Wedgefield WWTF FLA010900	GMS# 3048P03712	Pormit Builder MW ID: Well Type: Description:	MWC-2 Compliance Well Name MW-2 On-Site Irrigation WAFR # 32996
Monitoring Period Was the well purged before sampling?	From: July 2010No	To: September 2010	Date Sample Obtained: Time Sample Obtained	09/24/10 10:23

Parameter	Permit Bullder PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detaction Limits	Analysis Method	Monitoring Frequency	Sempling Equipment Used	Semples Filtered (L/F/N
Water Level Relative to Foot, NGVD	82545	62.35	Fect	Кероп	N/A	Field	Quarterly	Pump	N
Nitrate (as N)	90620		me/L	10	0.043	IC 300.0	Quarterly	Pamp	N
Solids, Total Dissolved(TDS)	70295		me/L	500	10	E160.1	Quarterly	Penp	N
Chioride (as Ci)	00940		mg'l.	250	0.81	IC 300.0	Quarterly	Penp	н
Coliform, Fecal	74055		#/100mL	4	1,0	SM9222D	Quarterly	Pump	Ņ
nH Ha	00400	4.93	su	6.5-8.5	N/A	Field	Quarterly	Pymp	N
Turbidity, Lab - Nepholometric	82079		NTU	Report	0.016	E180.1	Quarteriv	Purag	N
Added: November 2007**			· · ·			A Company			
Sndium	00923	59	me/L	160	0.026	SW846 6010	Querterly	Pump	N
Tribalomethane, Total	<b>8208</b> 0	0,60 (1	98/2	60	0.60	E524.2	Quarterly	Purp	N
			<del> </del>			<del></del>			
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^{**} Based on the elevated concentrations of these parameters in the effluent samples, parameters Sodium and Total Tribalomethane (TTHMs) have been added to the current Groundwater Monitoring Plan (GWMP).

COMMENTS AND EXPLANATION:

11/20/2(NJ9)

Orange County Wedgefield WWTF Permit Builder MW ID: MWC-3 Pacitity Name: Well Type: Compliance Pensis Number: FLA010900 GMS# 3048P03712 Description: Well Name MW-3 On-Site Irrigation WAFR # 32997 Monitoring Period From: July 2010

Was the well purged before sampling?

CW TOC 72 26 To: September 2010___ Date Sample Obtained: Time Sample Obtained: 09/24/10__ 09:20____

Parameter	Permit Builder PAIRM Code	Sample Measurement (Analysis Remits)	Vain	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Fect, NOVO	<b>B2545</b>	66.65	Poct	Report	N/A	Field	Quarterty	Permo	N
Nitrate, (no N)	00620		mg/L	10	0.043	IC 300.0	Quarterly	Pamp	N
Solids, Total Dissolved (TDS)	70295	610	mg/L	500	10	E160.1	Quarterly	Permp	N.
Chloride (ps Cl)	00940		me/L.	250	0.61	IC 300.0	Quarterly	Pump	N
Coliform, Fecs)	74055		#/100ml		1,0	SM9222D	Quarterly	Pump	N
pH	00400	5.63	su	6,5-8.5	N/A	Field	Quenterly	Pump	N
Turbidity, Lab - Nepholometric	\$2079	<u></u>	NTU	Report	0.016	E190.1	Ouarterly	Purso	N
Added: November 2005		gi, garangalah geografi	16.73			<b>特的 自然基本</b> 例如			
Sodium	00923	140	mg/L	150	0.026	\$W846 6010	Quarterly	Pump	N
Trihelomethene, Total	82080	0.60 U	146/L	80	0.60	E524,2	Ocupriorty	Pumpo	N
<del></del>	<del>                                     </del>		<del> </del>			<del></del>	<del> </del>		<del></del>
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	1			<b> </b>		·····	<del> </del>		

^{**} Based on the elevated concentrations of these parameters in the efficient samples, parameters Sodium and Total Tribalomethane (TTHMs) have been added to the current Groundwater Monitoring Plan (GWMP).

COMMENTS AND EXPLANATION:

11/20/2009

(SEP Form 63-620,9 (0) (0), affiguire November 29, 1994

Permit Budder MW ID:

E;80.)

SW846 6010

E524.2

Quarterly

Quarterly

Ownerly

Parme

100

N

Facility Name: Permit Number:	Wedgefield FLA010900		S# 3 <b>048P0</b> 3	3712	Well Type: Description:	Equipment Blank			
Monitoring Period. Was the well purged before sumpling?	From: July 2010 _X Yes		: September 2	010	<del></del>	Date Sample Obtained: Time Sample Obtained:	09/24/10 06:35	<del></del>	
Perameter	Permit Balider PARM Code	Sample Measuroment (Analysis Results)	Units	Permit Roquirement	Detection Limits	Analysis Method	Monitoring Fraquency	Sampling Equipment Used	Samples Filtered (L/F/I
Weser Level Relative to Feet, NGYD	82545	,,,,	Feet	Report	N/A	Field	Quarterly	Pump	N
Nitrate, (as N)	00620		me/L	Report .	0.043	IC 300.0	Quarterty	Pemp	N
Solids, Total Dissolved(TDS)	70295	10 U	mg/L	Report		E160.1	Quarterly	Pump	N
Chloride (as Cl)	00940	0.81 U	mg/L	Report	0.81	IC 300.0	Questerly	Pump	N
Coliforn, Teral	74055	1.0 U	#[00ml	Report	1.0	SM9222D	Quarterly	Pump	N
Hq	00400		SU	Report	N'A	Field	Quarterly	Paino	N

9.016

0,026

0.60

Ntu

** Original well MWB-1 was damaged and replaced by MWB-1R on 06/08/2007. The WAFR ID remains the same.

*** Based on the elevated concentrations of these parameters in the efficient samples, parameters Scidium and Total Tribalomethane (TTHMs) have been added to the current Groundwater Munitaring Plan (GWMP). I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and hased on my lequity of those individuals impacticately responsible for obtaining the information.

I believe the submitted information is true, according to the complete 1 pm 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 TELEPISONE NO DATE (YY/M

Report

DATE (YY/MM/DD)

COMMENTS AND EXPLANATION: 11/20/2009

Turbidity, Lab - Nepholometric

Added: November 2007**

Tribulomethese, Total

**Orange County** 

**\$2079** 

00921

82080

0.0261/

0.60 U

DEP 1 pm 62 630 910(10), affecting biovender 29, 1994

Cou	erdy:	
Faci	lity Name:	
_		

Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW (D:

Well Type: Description: MWP-I

Piezometer Well Name MWP-1 On-Site Lyrigation WAFR # 55881

Montitoring Period	
Was the well purged	before sampling?
GW TOC	69,62

To: Suppendent

Date Sample Obtained: 1/17/10 - 3/19/10 - 3/15/11
Time Sample Obtained:

Paramoter	Permit Builder PARM Code	Sample Messurement (Analysis Remits)	Units	Permit Requirement	Detection Limits	Analysic Method	Sempling Equipment Used	Samples Filteral (L/F/N)
Water Level Relative to Feet, NGVD	B2545	67.30	Fest	Report				_
Water Level Relative to Feet, NGVD  2 nd Month of Quarter	82545	16.38	Feet	Report				
Water Level Relative to Feet, NGVD  3rd Month of Quarter	R2545	64.56	Foot	Report	! 			

COMMENTS AND EXPLANATION: 11/20/2009

(NEP Form 62-620 9 (010), effective Nevergher 21, 1994

11

Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW (I):

Well Type: Description: MWP-2 Piezometer

Well Name MWP-2 On-Site Irrigation WAPR # 55883

Monitoring Period

Was the well purged before sampling?

GW 700 7.5. 23

- Yax No

Date Sample Obtained: 1/14/16/8/19/10 - 1/15/10

Paramoter	Perudi Bullder PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD  If Month of Quarter	82545	06.13	Feet	Report				
Water Level Relative to Fact, NGVD 2 nd Month of Querter	82545	65,34	Feet	Report				
Water Level Relative to Feet, NGVD 3 rd Month of Querter	#2545	64,43	Feel	Report				
		L						

COMMENTS AND EXPLANATION: (1/20/2009)

DEF Form \$2-530-910 FO), effective Neverther 29, 1994

12

GMS# 3048P03712

County: Facility Name: **Orange County** 

Permit Number:

Wedgefield WWTF

FLA010900

Permit Builder MW ID:

Well Type: Description: Background Well Name MW-1

**Golf Course** 

WAFR # 6006 GMS# 3048A13413 07/15/2010 12:47

Monitoring Period From: July 2010 To: September 2010 Was the well purged before sampling? X Yes No

Date Sample Obtained: Time Sample Obtained:

MWB-1

Parameter	Parmit Builder PARM Code	Other Historic PARM Code	Sample Manuscrament (Analysis Results)	Valu	Permi: Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/Y/N
Water Level Relative to Feet, NGVD	<b>\$7545</b>		6178	Feet	Report	N/A	Field	Ришо	N
Nitrate, (as N)	00620		0.043 U	mg/L	10	0.043	IC 300.0	Pudan	N
Solids, Total Dissulved(TDS)	70295	70296	270	me/L	500	10	E160.1	Pamp	N
Chloride (an Cl)	00940		97	mg/L	250	0.61	1C 300.0	Pump	Ņ
Coliforn, Fesal	74055		1.0 U	Col/100 mL	4	1.0	SM9222D	Рылор	8
ekt	00400		4.94	SU	6.5-8.5	NA	Field	Pump	N
Turbidity, Lab - Nepholometric	82079		3.8	NTU	Report	0.016	E190.1	Pamp	N
	<del>                                     </del>								

**Orange County** 

Wedgefield WWTF

FLA010900 GMS#3048P03712 Permit Builder MW ID:

Well Type: Description: MWB-2

Background
Well Name MW-2
Golf Course
WAFR # 6005

GMS# 3048A13414 07/15/2010 13:12

Monitoring Period Was the well purged befo

From: July 2010 To: September 2010
X Yes No

Date Sample Obtained: Time Sample Obtained:

GW TOC 70.10	^ (₩.				The Supple Countries: 13:12						
Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Messurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Mathed	Sampling Equipment Used	Samples Filtered (L/F/)		
Water Level Relative to Feet, NGVD	\$2545		65.96	Feet	Report	N/A	Field	Perm	_N		
Nivate, (as N)	00620		0.043U	nue/L	10	0.043	IC 300.9	Pump	N		
Solids, Total Dissolved(TDS)	70295	70296	88	1218/L	500	10	E160.1	Pump	N_		
Chioride (se Ci)	00940		13	nug/L	250	0.61	1C 300.0	Pump	N		
Coliform, Fecal	74055		1.0 U	CoV 100 mil	4	1.0	SM9222D	Puno	N_		
pH	00400		4.66	SU	6,5-8.5	N/A	Field	Pump	N_		
Turbidity, Lab - Nepholometric	<b>82</b> 079	<u> </u>	4.4	טדע	Report	0.016	E110.1	Pump	N .		
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County: Facility Name: Permit Number. Orange County

Wedgefield WWTF

FLA010900

GMS# 3048P03712

Permit Builder MW (D:

Well Type:

Background Well Name MW-3 Description:

Golf Course

WAFR # 6004 GMS# 3048A13415

07/15/2010 12:17

MWB-3

Monitoring Period
Was the well purged before sampling?
GW TOC 67.90 From: July 2010 Yo: September 2010 X Yes ___No Date Sample Obtained: Time Sample Obtained:

Pacameter	Permit Builder PARM Code	Other Kistoric PARM Code	Sample Measurement (Analysis Rassits)	Units	Permit Requirement	Desection Limits	Analysis Method	Sampling Equipment Fool	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82549		66.18	Feet	Report	N/A	Pield	67.90 top	N.
Nitrate, (as N)	00620		0.21	Irig/L	10	0.085	IC 300.0	Pump	N
Solids, Total Dissolved(TDS)	70295	70296	1400	mg/L	500	10	E160.1	Pump	N
Chloride (pt Cl)	00940		57	mg/L	250	0,61	IC 300.0	Purup	N_
Coliform, Feed	74055		1.0 U	Col/100 mL	4	_1.0	SM9222D	Pump	
140	00400		6.23	รบ	6.5-3.5	N/A	Field	Pump	N
Turbidity, Lub - Nepholometric	82079		9.3	עדא	Report	0.016	E160.1	Pump	N
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COMMENTS AND EXPLANATIONS	<u> </u>			L		l			<u> </u>

County: Facility Name: **Orange County** 

Wedgefield WWTF

FLA810900

Permit Builder MW ID:

MWI-4

Permit Number:

GMS#3048P03712

Well Type: Description:

Intermediate Well Name MW-4

Golf Course WAFR # 6003

GMS# 3048A13416

From: July 2010 To: September 2010 X Yes ___ No

Date Sumple Obtained: Time Sample Obtained:

07/15/2010 10:46

Monitoring Period
Was the well purged before sampling?
OW TOC 67.70 Other Historic Sautple Mensurement Units Socoptes Itered (L/F/N) Parameter Permit Detection Limits Analysis Malhed PARM Code (Analysis Results) PARM Cede 64.42 Water Level Relative to Feet, NGVD 82545 Foet Report N/A Field N Parac 0.043U Nitreto, (as N) 00620 la 0.043 XC 300.0 200 Piezo Solids, Total Dissolved (TDS) 70295 70296 500 E160,1 39 Chloride (as Cl) 00940 250 0.61 IC 300.0 N 1.0 U Coliform, Fecal 74055 CoV 100 mL 1.0 SM9222D Pump 5.06 ρH 00400 SU 6.5-8,5 N/A <u>Field</u> N Tump 70 NTU Turbidity, Lab - Nepholometric 12079 Report 0.079 E180.1

Facility Name:

Orange County Wedgefield WWTF

Permit Number: FLA010900 GMS# 3048P03712

Permit Builder MW ID:

MWC-6

Well Type: Description: Compliance Well Name MW-6

Golf Course WAFR # 6001

GMS# 3048A13418

Monitoring Period
Was the well purged before sampling?

From: July 2010 X Yes ___ No

To: September 2010

Date Sample Obtained: Time Sample Obtained:

07/15/2010 11:40

Parameter	Persuit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545	•	60.58	Foet	Report	NA	Field		Ж
Mitrate, (as N)	00620	<b>_</b>	0.043 U	mg/L	10	0.043	JC 300.0	Pump	N
Solids, Total Dissolved(TDS)	70295	70296	220	mg/L	500	10	P160.J	Pump	N
Caloride (es CI)	00940	-	25	mg/L	250	0.61	IC 300.0	Ристер	N
Coliform, Pecal	74055	-	6	Col/100 mL	4	1.0	SM9222D	Pensp	N
pH	00400		5.83	3U	6.5-8.5	N/A	Field	Purup	N
Turbidity, Lab - Nepholometric	82079		31	NTU	Report	0.016	E180,1	Pressp	N

County: Facility Name: Permit Number: Orange County

Wedgefield WWTF

FLA010980

GMS#3048P03712

Permit Builder MW ID:

Well Type: Description: MWI-7 Intermediate

Well Name MW-7 Golf Course

WAFR # 6000 GMS# 3048A13419 07/13/2010 11:14

From: July 2010 X Yes ___ No

To: September 2010

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Units	Fermit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Scarpin Fikered (L/F/N
Water Level Relative to Feet, NGVD	82545		65.36	Feet	Report	N/A	Field		N
Nitrate, (as N)	00620		0.28	mg/L	10	0.078	IC 300.0	Pump	N_
Solids, Total Dissolved(TDS)	70295	70296	920	mg/L	500	10	E160.1	Pemp	N _
Chloride (gs Cl)	00940	-	370	mg/L	250	0.61	IC 300.0	Pump	N
Colliform, Fecal	74055		24	Col/100 mL	4	1.0	\$M9222D	Pump	и
pH	00400		5.54	SU	6.5-8.5	N/A	Fjeld	Pump	N
Turbidity, Lab - Napholometric	\$2079		65	NTU	Report	D.016	E180.1	Pump	_ N
<del></del>	<del> </del>			+				<del> </del>	

COMMENTS AND EXPLANATION: U= Not Detected Above The Detection Limit

i = The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.

GMS#3048P03712

County: Facility Name:

Orange County

Permit Number:

Wedgefield WWTF

FLA010900

Parmit Builder MW ID:

Well Type: Description: MWC-1 Compliance

Weli Name MW-1 On-Site Irrigation WAFR # 32995

GMS# --07/L3/2010 08:58

Munitoring Period
Was the well purged before sampling?

Frage: July 2010 To: September 2010

Date Sample Obtained: Time Sample Obtained:

Builder	Other Historic PARM Code	Sample Messurement (Analysis Results)	Umite	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Bamples Filtered (1/F/N
82545	-	64.02	Feet	Report				
\$2545	-		Feet	Report				
12545			Feet	Report		Field	Pump	N
00620	1	0.043 U	mg/L	iO	0.043	IC 300.0	Pump	N
70295	70296	82	mg/L	500	10	E160.1	Pump	N
00940	••	12	mg/L	250	0.61	JC 300,0	Pump	N
74055		1.0 U	Col/100 ml		1.0	5M9222D	Pump	N
00400		5.04	SU	6.5-8.5	N/A	Field	Pemp	N
82079	•	50	NTU	Report	0.016	EIBO.I	Pump	8
	Builder PARM Code 82345  82545  82545  90620 70295 00940 74055 90400	Bultier PARM Code   PARM Code   82545	Pallifer   PARM Code   (Amelysis Results)	Duilder   PARM Code   (Amilyala Results)	Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part   Part	Builder   PARM Code   (Amelysia Results)   Requirement	PARM Code   PARM Code   (Assiyala Results)   Requirement   Report	PARM Code   PARM Code   (Anelysia Results)   Requirement   Requirement   Requirement   Requirement   Requirement   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Report   Rep

GMS# 3048P93712

Orange County Wedgefield WWTF

FLA010900

Permit Builder MW (D:

Well Type: Description: MWC-2

Compliance

Well Name MW-2 On-Site Irrigation WAFR # 32996

GMS# --

Monitoring Pariod
Was the will purpod believe sampling?

From: July 2010 To: September 2010 X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

07/15/2010 09:22

Parameter	Pornit Bullder PARM Code	Other Eletoric PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Amilysis Method	Sampling Equipment Used	Sample: Piltered (L/F/N)
Water Level Relative to Feet, NGVD	<b>82545</b>		64.11	Feet	Report		72.00 ta e		
Water Level Relative to Fest, NGVD 2 nd Moath of Quarter	82545			Fast	Report	N/A	Field	Pump	N
Water Level Relative to Foct, NOVD 3 rd Month of Quarter	82545	•		Foot	Report	N/A	Field	Рипр	И
Nitrate, (as N)	00620	-	0.043 U	mg/L	10	0.043	IC 300.0	Pump	N
Solida, Total Diasolved(TDS)	70295	70296	180	reig/L	500	10	E160.I	Pump	N
Chioride (as Cl)	00940		45	τ <b>υα</b> /L	250	0.61	IC 300.0	Рипр	N _
Coliform, Focal	74055		1.0 U	CoV100 mil.	4	1.0	SM9222D	Pump	N
pH Hid	90460		5.43	รบ	6.5-8.5	NA	Field	Pemp	N
Turbidity, Lab - Nepholometric	82079		11	עדע	Report	0.016	E180.1	Рипър	N

COMMENTS AND EXPLANATION:

GMS# 3048P03712

Facility Name: Permit Number: Orange County Wedgefield WWTF

FLA010900

Permit Builder MW ID:

MWC-3

Well Type: Description: Compliance Well Name MW-3

On-Site Irrigation WAFR # 32997

GMS# --

Monitoring Period From: July 2010 To: September 2010
Was the well purged before sampling? _X_ Yes _ No
GW TOC 72.26

Date Sample Obtained: Time Sample Obtained:

07/15/2010 J0:06

Parameter	Permit Bullder PARM Code	Diker Historic PARM Code	Sample Messurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545		68.81	Feet	Report		72.26 to c		
I Month of Quarter								<u> </u>	[
Water Level Relative to Fest, NGVD	82545			Feet	Report				
2 rd Month of Quarter	ļ			<u> </u>					
Water Level Relative to Fest, NGVD	82545	-		Foot	Report	N'A	Field	Pump	N
3 st Month of Quarter		<u> </u>							<u> </u>
Nitrate, (as N)	00620		0.043 U	me/L	10	0,043	JC 300.0	Pump	N
Solids, Total Dissolved(TDS)	70295	70296	560	mg/L	500	10	E160.1	Primp	N
Chloride (as Cl)	00940		200	/mg/L	250	0.61	IC 300,0	Pump	N
Coliform, Facal	74055		1.0 U	Col/190 mi	4	1.0	\$M9222D	Pamp	И
pHHq	00400		5.87	SU	6.5-8.5	N/A	Field	Pump	N
Turbidity, Lab - Naphotometric	82079		6.9	NTU	_Report	0.916	E189.1	Pump	N

CUMMENTS AND EXPLANATION:

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA910900

dgefield WWTF A010900 GMS# 3048P03712 Permit Builder MW ID:

Well Type: Description:

Equipment Blank

Monitoring Period Was the well purged before sampling? From: July 2010 To: September 2010

Date Sample Obtained: Tient Sample Obtained:

Obtained: 07/15/2010 Obtained: \$:35

Forumeter	Permit Builder PARM Code	Other Historic PARM Code	Sample Messarumant (Analysis Romits)	Units	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Semples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82543		N/A	Feet	Report	N/A	Field		N
Nitrate, (as N)	00620		0.043 U	tre/L	10	0.043	IC 309.0	Pump	N
Solids, Total Dissolved (TDS)	70295	70296	10 U	mg/L	500	10	E160.1	Pump	N
Chloride (se Cl)	00940	-	0.81 U	me/L	250	0,81	EC 300.0	Pump	N
Coliform, Fecal	74055	[	1.0 U	Covicos est	4	1.0	SM9222D	Pemp	N
pH	00400		N/A	SU	6.5-8.5	N/A	Field	Ригир	N
Turbidity, Lab - Nepholometric	\$2079		1.6	NTU	Report	0.10	E186,1	Pump	N

COMMENTS AND EXPLANATION: U- Not Detected Above The Detection Limit

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed shall this report to: Department of Environmental Protection, 3319 Magnire Blvd, Suite 232, Orlando, Ft. 32803-3767

Pluris Wedgefield, Inc. 2600 Commercentre Dr Luke Forest, CA 92630 PERMITTEE NAME: MAILING ADDRESS. PERMIT NUMBER FLA010900-005-DW2P Expiration Date: January 27, 2015 LIMIT: REPORT: PROGRAM: CLASS SIZE: N/A FACILITY: LOCATION: Wedgefield WWIF MONITORING GROUP NUMBER
MONITORING GROUP DESCRIPTION:
RE-SUBMITTED DMR;
NO DISCHARGE FROM SITE:
MONITORING PERIOD R-001 3100 Bancroft Blvd Orlando, FL 32833-4011 Public Access Reclaimed Water, including Influent

COUNTY-OFFICE: Orange Central District October 1th To: October 31st

Parameter		Quantity or Leading	Units	Quality or Concentration	Units	No	Frequency of Analysis	Sample Type
Flow(Total through Plant)	Sample Measurement	.212	MGD			p	Continuous	Flow Totalize
PARM Code 50050 Y Mon. Site No. FLW-1	Permit Requirement	0.330 (An.Avg.)	MGD				5 Days/Week	Flow Totalize
Flow(Total through plant)	Sample Measurement	.212	MuD			n	Continuous	Flow Totaliza
PARM Code 50050   Mon. Site No. FLW-1	Permit Requirement	0,330 (An.Avg.)	MGD			<b>†</b>	5 Days/Week	Flow Totaliza
Flow(Total through Plant)	Sample Measurement	.218	MGD		·	0	Continuous	Flow Totaliza
PARM Code 50050 P Mon. Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)	мар				5 Days/Week	Flow Totaliza
Muw(Total to Golf Course)	Sample Measurement	.190	MGD			0	Continuous	Flow Totaliz
ARM Code 50050 Q Mon. Site No. FLW-2	Permit Requirement	0.270 (An Ayg.)	MGD				Continuous	l'kou Totaliz
Flow(Total to Golf Course)	Sample Measurement	.180	MGD			0	Continuous	Flow Totaliza
PARM Code 50050 R Mon. Site No. FLW-2	Permit Requirement	Report (Mo.Avg.)	MGD				Continuous	Flow Totalize
Flow(Total to Zone 1)	Sample Measurement	0	MGD			0	Continuous	Flow Totaliza
PARM Code 50050 S Mon. Site No. FLW-3	Permit Requirement	0.0096 (An.Avg.)	MGD				Continuous	Flow Totalia

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 property gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR ALTHORIZED AGENT	IELEPTKINE NO	DATE (yy/mm/dd)	ı
Paul Tzareff		407-641-7622	2010/11/22	ĺ
			1	

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

#### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

MONITORING GROUP

R-001

PERMIT NUMBER: FLA010900-005-DW2P

NUMBER:
MONITORING PERIOD From: October 1* To: October 31.* Parameter Quantity or Loading Units Quality or Concentration Units No. Ex. Frequency of Sample Type Analysis Flow(Total to Zone 1) Sample MOD Mo 0 Continuents Flow Totalizer PARM Code 50050 T Permit Report MGD Flow Totalizer Requirement Continuous (Mo.Avg.) Flow(Total to Zone 2) 0 MGD Measurement Permit 0 Flow Totalizer Continuous PARM Code 50050 U 0.0309 MGD Flow Totalizer Mon. Site No. FLW-4 Requirement (An.Avg.) Continuous Flow(Total to Zone 2) Sample 0 MGD Flow Totalizer Мевкительств Continuous PARM Code 50050 V Report MGD Mon. Site No. Fl.W-4 Flow Totalizer Continuous Requirement (Mo.Avg.) Flow(Total to Zone 3) Sample ۵ MGID 0 Messurement Permit Continuous Flow Totalizer 0.0195 MOD Flow Totalizer Mon. Site No. FLW-5 Requirement (An.Avg.) Continuous Flow(Total to Zone 3) Sample 0 MGD Measurement 0 Continuous Flow Totalizer PARM Code 50050 W Report MGD Mon. Site No. FLW-5 Flow Totalizer Requirement Continuous (Mo.Avg.) ww(from groundwater well) 0 MOD Measurement 0 Flow Totalizer Continuous .RM Code 50050 W Mon. Site No. FLW-6 Report MOD Flow Totalizer Requirement (An.Avg.) Continuous Flow(from groundwater well) 0 MGD 0 Continuous Flow Totalizer PARM Code 50050 W Report MGD Mon. Site No. PLW-6 Flow Totalizer Requirement (Mo.Avg.) BOD, Carbonaceous 5 day, 20C Bi-weekly; every Measurement 0 8-hr FPC Ma/L PARM Code 80082 Y Permit 20.0 Bi-weekly, every 8-hr FPC Mon. Site No. EFA-1 BOD, Carponaceous 5 day, 20C mg/1. (An. Avg.) 8 7.5 Bi-weekly; every 7.5 Mg/L 0 8-hr FPC Measurement 2 weeks PARM Code 80082 A Mon. Site No. EFA-I 60.0 45.0 30.0 8-hr FPC mg/l. Requirement (Max.) (Wk.Avg.) (Mo.Avg.) 2 weeks Solids, Total Suspended 1.6 0 Grab Ma/L 4 Days/Weck Meusurement PARM Code 00530 B Permit 5.0 Grab Mon. Site No. EFB-1 4 Days/Week mg/L Require (Max.)

#### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

MONITORING GROUP NUMBER:

R-001

PERMIT NUMBER: FLA010900+005-DW2P

MONITORING PERIOD From: October 1st To: October 31st Parameter Quantity or Loading Units Quality or Concentration Frequency of Analysis Units No. I:x. Sample Type pl I Sample Memorement 7.6 0 5 Days/Week Grab PARM Code 00400 A Permit 6.0 (Min.) Mon. Site No. EFA-1 8.5 Requirement **1.**0 5 Days/Week (Max.) Grab Sample Measurement .5 ≰/100ml. Ð 4 Days/Week Grab PARM Code 74055 A 25 Mon. Site No. El-A-I Requirement #100m1 4 Days/Week Grab (Max.) Coliform, Fecal, % less than энпріс Measurement percent 4 Days/Week Calculated PARM Code 51005 A Permit 75 Mon. Site No. EFA-1 Roquireme (Mu.Total) 4 Days/Week Calculated Chlorine, Total Residual(For Sample 1.0 Measurement Ma/L O Continuous PARM Cude 50060 A 1.0 Mon. Site No. EFA-I Requirement 019/(. (Min.) Continuous Meter Turbidity Sample Mensurement 2.9 NTU 0 Continuous Meter PARM Code 00070 B Permit. Report Mon Site No. EFB-1 Requires NTU Continuous (Max.) Meter trogen, Nitrate, Total (as N) Mensurement 6.7 Mw1. 0 Monthly 8-hr FPC JRM Code 00620 A Permit Mon. Site No. EFA-1
Flow(Total through plant) 12.0 mg/1. Requirement Monthly 8-hr FPC (Max.) .218 .221 MOD Measurement 0 5 Days/Week Flow Totalizer PARM Code 50050 W Report Report (Qt.Avg.) Permit MCD Mon. Site No. FLW-1 Percent Capacity, (TMADF/ Requirement (Mu.Avg.) 5 Days/Wock Flow Totalizer Permitted Capacity) x 100 Measurement 66% 0 DBI CEN Monthly Calculated PARM Code 00180 P Report Mon. Site No. CAL-I Requirement perceni Monthly Calculated (Mo.Avg.) BOD. Carbonaceous 5 day. Sample Bi-weekly, every 20C(Influent) Measurement 176.0 MwL 8-hr FPC PARM Code 80082 P 2 weeks Bi-weekly; every Permit Report Mon. Site No. INF-1 Requirement mg/L 8-br FPC (Max.) Solids, Total Suspended(Influent) 2 weeks Hi-weekly, every 156.0 Measurement Mg/L 0 8-hr FPC 2 weeks PARM Code 00530 P Mor. Site No. INF-1 Report Bi-weekly: every Requirement mg ! 8-hr FPC (Max.) 2 weeks

## DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period

FLA010900-005-DW2P From: October 1" To: October 31st

Facility: Wedgefield WWTF

	BOD, Carbonaccous 5 day, 20C mg/L	Chlorine, Total Residual mg/L	Coliform, Fecal #/100mL	Nitrogen, Nitrate, Total (as N) mg/L	pH s.u.	Solids, Total Suspended mg/L	Turbidity NTU	Flow MGD	Flow MGD
Code	80082	50060	74055	00620	00400	00530	00070	50050	50050
Mon. Site	EFA-I	EFA-1	ÉFA-1	EFA-1	efa-i	EFB-1	EFB-1	FLW-I	FLW-2
1 2		1.0			7.1		2.9	.202	.028
3		4.8			7.3		1.4	.213	0
		3.3			7.1	ļ	2.9	.242	.128
4		3.5	<1		7.4	<i< td=""><td>2.9</td><td>.204</td><td>.188</td></i<>	2.9	.204	.188
5		4.0	<1		7.3	<i< td=""><td>2.9</td><td>.247</td><td>.316</td></i<>	2.9	.247	.316
6		2.9	<1		7.3	1.6	2.7	.134	.017
7		1.5	<1		7.2	<1	1.6	.207	.149
8		1			7.3		2.9	.193	0
9		1.2			7.4		2.9	.272	.075
10		1.3			7.1		2.3	.263	.155
11		1.7	<1		7.1	<1	2.3	.219	.312
12	· · · · · · · · · · · · · · · · · · ·	2.4	</td <td></td> <td>7.3</td> <td>&lt;1</td> <td>2.9</td> <td>213</td> <td>.254</td>		7.3	<1	2.9	213	.254
13		1	<1		7.2	<l< td=""><td>2.9</td><td>.!98</td><td>.231</td></l<>	2.9	.!98	.231
14	8.0	2.4	<]	6.7	7.1	<1	2.0	.190	.252
15		2.3			7.4		2.3	.206	.055
16		1.5			7.6		2.3	.173	0
17		1.0			7.3		1.9	.265	.128
18		2.5	<1		7.5	<1	2.7	.204	.702
19		1.0	<1		7.1	<1	1.6	.200	.219
20		1.0	<1		7.3	<1	2.0	.192	.439
21		1.5	<1		7.3	<1	2.2	.198	.543
22		2.0			7.2		2.0	.194	.021
23		2.0			7.2		5.0	.252	0
24		1.0			7.4		1.6	.267	.087
25		2.0	<1		7.0	<1	2.0	.213	.399
26		1.0	<1		7.1	<1	2.3	.216	.175
27	17.00	1.0	<1		7.4	1,2	1.5	.207	.297
28	7.0	1.0	ব		7.3	1.2	1.7	.183	.573
29		2.3			7.1		2.6	.195	.042
30		1.0			7.3		2.9	.300	0
31		1.0			7.0		2.9	.324	.071
Total	15	57.1	8	6.7	224.7	10.5	75.0	6.786	5.856
Mo. Avg.	7.5	1.8	0.5	6.7	7.25	0.656	2.4	.218	.18

PLANT STAFFING:						
Day Shift Operator	Class:	С	Certificate No:	16046	Name:	Paul Tzareff
Evening Shift Operator	Class:		Certificate No:		Name:	
ght Shift Operator	Class:		Certificate No:			
⊸ad Operator	<b>~</b> 1				Name:	
Scau Ope, ato,	Class:	<u>c</u>	Certificate No:	16046	Name:	Paul Tzareff

# DAILY SAMPLE RESULTS - PART B Facility: Wedgefield WWTF

Permit Number: Monitoring Period FLA010900-005-DW2P From: October 1 To: October 31*

	Flow MGD	Flow MGD	Flow MGD	Flow MGD	BOD, Carbonaceous 5 day, 20C mg/L	Solids, Total Suspended mg/L			
Code	50050	50050	50050	50050	80082	00530			
Mon. Site	F1.W-3	F1,W-4 0.00	FLW-5	FLW-6 0.00	INF-1	INF-I		_	
2	0. <b>0</b> 0	0.00	0.00	0.00				<del> </del> -	<del> </del>
3	0.00	0.00	0.00	0.00	<del> </del>			<del></del>	<del>                                     </del>
4	0.00	0.00	0.00	0.00				<del></del>	<del></del>
5	υ.00	0.00	0.00	0.00	<del>                                     </del>			<del></del>	<del> </del> -
6	0.00	0.00	0.00	0.00	<del>                                     </del>			<del>-}</del>	<del>- </del>
7	0.00	0.00	0.00	0.00	-			<del> </del>	
8	0.00	0.00	0.00	0.00					
9	0.00	0.00	0.00	0.00	1		<del></del>	<del> </del>	<del> </del>
10	0.00	0.00	0.00	0.00	<del>   </del>			<del> </del> -	
11	0.00	0.00	0.00	0.00				<del></del> -	<del>                                     </del>
12	0.00	0.00	0.00	0.00					
13	0.00	0.00	0.00	0.00	1			1	1
14	0.00	0.00	0.00	0.00	176.0	152.0		<del>                                     </del>	
15	0.00	0.00	0.00	0.00			_,,		
16	0.00	0,00	0.00	0.00				<del></del> -	
17	0.00	0.00	0.00	0.00	7		- <del></del>		<del>                                     </del>
18	0.00	0.00	0.00	0.00					
19	0.00	0.00	0.00	0.00				- <del>  </del>	
20	0.00	0.00	0.00	0.00				<u> </u>	
21	0.00	0.00	0.00	0.00					
22	0.00	0.00	0.00	0.00					
23	0.00	0.00	0.00	0.00					
24	0.00	0.00	0.00	0.00					
25	0.00	0.00	0.00	0.00					
26	0.00	0.00	0.00	0.00					
27	0.00	0.00	0.00	0,00					
1	0.00	0.00	0.00	0.00	173.0	156.0			
29	0.00	0.00	0.00	0.00					
30	0.00	0.00	0.00	0.00					
31	0.00	0.00	0.00	0.00					
Lotal	0.00	0.00	0.00	0.00	349.0	308.0			
Mo. Avg.	0.00	0.00	0.00	0.00	174.5	154.0			

28	0.00	0.00	0.00	0.00	173.0	156.0	·	
29	0.00	0.00	0.00	0.00		1		·
30	0.00	0.00	0.00	0.00				
31	0.00	0.00	0.00	0.00	<del></del>	<del>                                     </del>	<del>-                                     </del>	
Total	0.00	0.00	0.00	0.00	349.0	308.0		
Mo. Avg.	0.00	0.00	0.00	0.00	174.5	154.0		
PLANT ST Day Shift C Evening Sh Night Shift Lead Opera	Operator  Operator	Class:	Certi	ficate No: 160 ficate No: ficate No:	Nar Nar	ine:		
2000 (7)210		C1435	CCent	100F	46 Nau	me: Paul Tzareff		

## Florida Department of Environmental Protection

Twin Towers Office Bldg. 2600 Blair Stone Road Tallahassec, Florida 32399-2400

# GROUND WATER MONITORING REPORT Rule 62-522.600(11)

DADT 1	CEN	IFRA)	INFORMATIO	M
PARIL	GER			/17

(1)	Facility Name Wed	gefield WWTF – Orange County					
	Address						
	City		Zip				
	Telephone Number	(_)					
(2)	The GMS Identification	on Number 3048P03712					
(3) DEP Permit Number FLA010900							
(4)							
1.7							
(5)	Type of Discharge						
(6)	Method of Discharge						
i ce etta info	chments and that, bas	ed on my inquiry of those individuals te, and complete. I am aware that ti	and am familiar with the information submitted in this document and all simmediately responsible for obtaining the information, I believe that the here are significant penalties for submitting false information, including the				
Dat	e:						
			Signature of Owner or Authorized Representative				
		RANCE REQUIREMENTS					
	nple Organization	<del></del>					
Ana	alytical Leb	NELAC Certification #					
		NELAC Certification #					
Lat	Name						
Add	dress						
	20/2009						

County. Facility Name: Permit Number:	Orange Co Wedgefield FLA010900	WWTF				Pernut Builder MW ID: Well Type. Description:	Backgroun Well Nam Golf Cour WAFR#	MWB-1R* Background Well Name MW-1 Golf Course WAFR # 6006		
Monitoring Period Was the well purged before sampling?	From:Yes	No To.	<del></del>	<del></del>		Date Sample Obtained: Time Sample Obtuned.	GMS# 304	I <b>8A</b> 13413		
Parameter	Permit Builder PARM Code	Sample Measurement (Analysis Results)	Lnits	Permit Requirement	Detection Limits	Analysis Method	Moniming Frequency	Sampling Equipment Used	Sasuples Filtered (L/F/N)	
Water Level Relative to Feet, NGVD	12345		Foa	Report			Quarterly			
Nitrato, (as N)	00620		mg/L	Report			Quarterly	<u> </u>		
Solids, Total Dissolved(TDS)	70295		mg/L	Report			Quarterly			
C'hleride (as Cl)	00940		mg/l.	Report			Quarterly			
Coliform, Fecal	74055		#/100ml	Report			Quarterly			
nH	00400		SU	Report			Quarterly			
roidity, Lah - Nepholometric	\$2079		NITI	Report			Quarterly			
Added; November 2009**										
Sodium	00923		mg/l,	Report			Quarterly			
Trihalomethane, Total	\$2080		ug/l.	Report			Quarterly			
	ļ								<del> </del>	
* Original well MWR-1 was demaged at ** Based on the elevated concentrations I certify under penalty of law that I have I believe the submitted information is tru	of these paramete personally exami	rs in the effluent samples, param ned and am familiar with the infi	teters Sodium ormation subt	and Total Tribai	d based on my inquir	s of those individuals immed	littely reconnsib	le for obtaining the is	VMP). I formation,	
NAME/ITTLE OF PRINCIPAL EXEC	1 TIVE OFFICE	OR AUTHORIZED AGENT	SIGNAT	TRE OF PRINC	PAL EXECUTIVE O	FFICER OR AL THORIZED	GENT T		DATE (V V/MM/DD)	
COMMENTS AND EXPLANATION: 11/20/2009		<del></del>	L			<u>.                                    </u>				

County Facility Name Persont Number:	Orange County Wedgefield WWTF FLA010900	GMS# 3048P03712	Permit Builder MW 10: Well Type: Description:	MWB-2 Background Well Name MW-2 Golf Course WAFR # 6805
Monitoring Period	From:	te.	In a name	GMS# 3048A13414
Was the well purged before sampling?	You No	100	Date Sample Obtained: Time Sample Obtained:	**************************************

Parameter	Permit Builder PARM Code	Sample Measurement (Analysis Results)	l nits	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sempling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545		i cet	Report			Quarterix		
Nitrate, (as N)	00620		mg/I	Report			Quarteriv		
Solids, Total Disentived(TDS)	70295		mg/1.	Report			Quarterly		
Chloride (as Cl)	80940		mg/l.	Report			Quarterly		
Coliform, Freel	74055		#/100mL	Report			Quarterly		
<u>'4</u>	00400	<del></del>	su	Report			Quarterly		
rurbidity, Lab - Nepholometric	82079		NTU	Report			Quarterly		
Added; November 2009**									
Sodium	00923		mg/l.	Report			Quarterly		
Tribalomethuse, 1 otal	82080		ug/L	Report			Quarterly		
		·							
		<del></del>			<del></del>				
	1			1			<del> </del>		

^{**} Based on the elevated concentrations of these parameters in the effluent samples, parameters Sodium and Total Tribalomethane (THEMs) have been added to the current Groundwater Munituring Plan (GWMP). COMMI-NTS AND EXPLANATION:
11/20/2009

County: Orange County Pacifity Name: Wedgefield WWTF Permit Number: FLA010900 GMS# 3048P03712  Monitoring Period From. To:						Permit Builder MW ID, Well Type. Description: Date Sample Obtained. Time Sample Obtained;	MWB-3 Backgroun Well Nam Golf Cour WAFR # 6 GMS# 304	e MW-3 se 6004	
Parameter	Permit Builder PARM Code	Sample Measurement (Analysis Results)	Usits	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sumpling Equipment Used	Samples Filtered (1./F/N)
Water Level Relative to Feet, NGVD	82545		Feet	Report			Quarterly		
Nitrale, (as N)	0(1620)		mg/I	Report	<b></b>		Quarterly		
Solids, Local Dissolved(TDS)	70295		mg/l.	Report		<u> </u>	Quarterly		
Chloride (es CI)	80940		mg/l.	Report	L		Quarterly		
Coliform, Fecal	74055		#/100mi	Report	<u> </u>		Quarterly		
`L	00400		su	Report	ļ		Quarterly		
rurbidity, Lah - Nepholometric	82079	<u> </u>	אינ	Report		<u> </u>	Quarterly		
Added: November 2009**			.,						
Sodium	00923		mg/l.	Report			Quarterly		
Trihalomethane, Total	82080		ug/l.	Report			Quarterly		

^{**} Based on the elevated concentrations of these parameters in the effluent samples, parameters Sodium and Total Tribalomethane (TTIMs) have been added to the current Groundwater Monitoring Plan (GWMP). COMMENTS AND EXPLANATION: 11/20/2009

County: Escility Name: Permit Number:	Orange County Wedgefield WWTF FLA010900	GMS# 3048P03712	Pennit Builder MW ID- Well Type Description:	MWI-4 Intermediate Well Name MW-4 Golf Course WAFR # 6003
Monitoring Period	From:	To:	Date to a section of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of	GMS# 3048A13416
Was the well purged before sampling?	Yes No	,	Date Sample Obtained: Time Sample Obtained:	

	<del></del>								
Parameter	Permit Builder PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	\fonitaring Frequency	Sampling Equipment Used	Samples Filieved (1 /F/
Water Level Relative to Feet, NGVD	82545		Feet	Report			Quarterly	-	
Nitrate, (as N)	00620		mg/L	Керон			Quarterly		
Solids, Total Dissolved(TDS)	70295		mg/l	Report			Quarterly		
Chloride (us C1)	00940		mg/t.	Report			Quarterly		
Coliform, Fecal	74055		#/100mL	Report			Quarterly		
`	00400		SU	Report		-	Quarterly		
urbidity, Lab - Nepholometric	82079		NTU	Report			Quarterly		
Added: November 2009**							- Quantily		
Sodium	00923		mg/l.	Report			Quarterly		
Frihalomethane, Total	82080		us/L	Report			Quarterly		
	<del>                                     </del>								
	<u> </u>								
	<u> </u>								·
to Reved out the elevated assessment									

^{**} Based on the elevated concentrations of these parameters in the ellisent samples, parameters. Sodium and Total Tribalomethane (TTIMs) have been added to the current Groundwater Monitoring Plan (GWMP), COMMENTS 11/20/2009

Pennit Builder MW ID:

MWC-6

Facility Name:	Wedgefield	WWTF				Well Type: Compliance				
Permit Number:	FLA010900	GM:	S# <b>3048P0</b> 3	3712		Description: Well Name MW-6 Golf Course WAFR # 6001 GMS* 2019 A LA LA				
Monitoring Period  Was the well purged believe sampling?	Front: Yes 1	No To		<del></del>	Date Sample Obtained: Time Sample Obtained:	GMS# 3048A13418				
Parameter	Permit Builder PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N)	
Water Level Relative to Feet, NGVD	82545	_ <del></del>	Feet	Report			Quarterly			
Nitrate, (as N)	00620		mg/l	10			Quarterly			
Solids, Total Dissolved(TDS)	70295		mg/L	500			Quarterly			
Chloride (as Cl)	00940		mg/l.	250			Quarterly			
Coliform, Fecal	74055		4/100mj.	4		l	Quarterly			
	00400		su	6.5-8.5			Quarterly			
urbidity, Lab - Nepholometric	82079		NTU	Report			Quarterly			
Addrd; Nevember 2009**	<u> </u>	·· ···		<u> </u>						
Sodium	00923		mg/L	160_			Quarterly			
Tribalomethane, Total	82080		ug/l	80			Quarteriy			
			<u> </u>		! 					

County:

Orange County

^{**} Based on the elevated concentrations of these parameters in the effluent samples, parameters Studium and Total Trihaformethane (TTHMs) have been added to the current Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:
11/20/2009

Facility Name: Wedgefield WWTF Permit Number: FLA010900 GMS# 3048 P03712  Monitoring Period From: To:						Permit Builder MW ID Well Type: Description:  Date Sample Obtained: Time Sample Obtained:	MWI-7 Intermedia Well Nam Golf Cour WAFR#6 GMS#304	e MW-7 se 5000	
Parameter	Permit Builder PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Fittered (L/F/N)
Water Level Relative to Feet, NGVD	82545		Feet	Report			Quarterly		
Nitrite, (as N)	00620		mg/l	Report	<u> </u>		Quarterly		
Solids, Total Dissolved(TDS)	70295		mg/l	Report			Quarterly		
Chloride (as Cl)	00940	<u> </u>	mg/L	Report			Quarterly		
Coliform, Fecul	74055		#/100mil.	Report			Quarterly		
<b>`</b>	00400		SU	Report		<u> </u>	Quarterly		
grurbidity, Lab - Nepholometric	82079		NTU	Report		<u> </u>	Quarterly		
Added: November 2009**	<del>.,</del> ,		,			<del></del>		<del>,</del>	
Sodium	00923	******	mg/L	Report		<u> </u>	Quarterly		
Trihalomethane, Total	82080		ug/L	Report			Quarterly		
				1					

^{**} Based on the elevated concentrations of these parameters in the offluent samples, parameters Sodium and Total Trihalomethane (TTHMs) have been added to the current Groundwater Monitoring Plan (GWMP). COMMENTS AND EXPLANATION:
11/20/2009

County. Facility Name. Permit Number:	Orange Cor Wedgefield FLA010900	WWTF	5# <b>3048</b> P03	3712	Permit Builder MW ID- Wall Type: Description:	MWC-1 Compliand Well Nam On-Site in WAFR # 3			
Monitoring Period Was the well purged before sampling?	From Yes	1o:			_	Date Sample Obtained Tune Sample Obtained:	•		
Parameter	Permit Builder PARM Code	Sample Mensurement (Analysis Results)	timits	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	B2545		Feet	Report			Quarterly		
Nitrate, (as N)	00620		mg/L	10	ļ		Quarterty		
Solids, Total Dissolved(TDS)	70295	<del></del>	mg/L	500			Quarterly		
Chloride (as C))	00940		mg/l,	250			Quarterly		
Coliform, Fecal	74055	<del></del>	#/100ml.	4			Quarterly		
	00400		Sυ	6,5-8.5		<u> </u>	Quarterly		
urbidity, Lah - Nepholometric	\$2079		NTU	Report	<u> </u>		Quarterly		
Added; November 2009**			<del>,</del>		· · · · · · · · · · · · · · · · · · ·				
Sodium	00923		mg/L	160			Quarterly		
Tribalomethane, Total	82080		uge/i.	80	l		Quarterly		
		<del></del>	<u> </u>						
<u> </u>		<u></u>		<u> </u>					
		·		<u> </u>					
				1					

** Based on the elevated concentrations of these parameters in the effluent samples, parameters Sodium and Total Tribalomethane ("TTIMs) have been added to the current Groundwater Monitoring Plant (GWMP), COMMENTS AND EXPLANATION:
11/20/2009

County: Facility Name: Permit Number:	Wedgefield	Wedgefield WWTF FLA010900 GMS# 3048P03712					Wodgefield WWTF				Permit Builder MW ID; Well Type: Description:	MWC-2 Compliance Well Name MW-2 On-Site Irrigation WAFR # 32996		
Monitoring Period Was the well purgod before sampling?	Frum:Yes	No To:	· <u>-</u> .			Date Sumple Obtained: Time Sample Obtained:	*****							
Parameter	Permit Bullder PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Flitered (L/F/N)					
Water Level Relative to Feet, NGVD	B2545		Feet	Report			Quarterly							
Nitrate, (us N)	00620		mæ/l.	30			Quarterly							
Solids, Untal Dissolved(TDS)	70295		mg/t	500			Quarterly							
Chloride (as Cl)	00940		me/L	250		<u> </u> _	Quarterly							
Coliform, Fecat	74055		#/100ml.	4			Quarterly							
<u></u>	00400		SU	6.5-8.5			Quarterly							
(urbidity, Lab - Nopholometric	R2079	<u> </u>	NTU	Report		l	Quarterly							
Added; November 2009**			····											
Sodium	00923		mg/ī.	160			Quarteriv							
Tribalomethane, Total	#2080		ug/1.	80			Quarterly							

^{**} Based on the elevated concentrations of these parameters in the effluent samples, parameters Sodium and Total Tribals/methane (TTHMs) have been added to the current Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:
11/20/2009

County: Facility Name: Permit Number:	Orange Co Wedgefield FLA010900	WWTF	S# <b>3</b> 048P03	712	Permit Builder MW ID, Well Type: Description:	WID. MWC-3 Compliance Well Name MW-3 On-Site Irrigation WAFR # 32997			
Monitoring Period Was the well purged before sampling?	From:Yes	No				Oute Sample Obtained: Time Sample Obtained:	=		
Parameter	Permit Bullder PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection (Amits	Analysis Method	Monitoring Frequency	Sampling Equipment Lord	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545		Feet	Report			Ouarterly		
Nitrate, (as N)	00620		mg/l.	10	<u> </u>	<u> </u>	Quarterly		
Solids, Total Dissolved(TDS)	70295		mu/l	500		ļ	Quarterly		
Chloride (as Cl)	00940		mg/I.	250			Quarterly		
Coliform, Fecal	74055		#/100mL	1.4			Quarterly		
	00400		SU	6.5-8.5			Quarterly		
urbidity, Lab - Nepholometric	U2079	<u> </u>	עוא	Report		<u> </u>	Quanterly		
Added; November 2009**						<b>,</b>			
Sodium	00923		mg/l.	061			Quarterty		
Trikalomethane, Total	82080		ug/l.	*0			Quarterly		
			ļ	ļ					
			<u> </u>						
			<u> </u>						
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^{**} Based on the elevated concentrations of these parameters in the effluent samples, parameters Sodium and Total Tribalomethane (TTHMs) have been added to the current Groundwater Monitoring Plan (GWMP). COMMENTS AND EXPLANATION: 11/20/2009

County: Facility Name. Pennit Number:	Orange Co Wedgefield FLA01090	WWTF	S# 3048P03	3712	Permit Builder MW ID: Well Type: Description	MWP-1 Piczometer Well Name M On-Site Irriga WAFR # 5588	tion	
Monitoring Period Was the well purged before sampling?	From: Yes	To:				Date Sample Obtained: Time Sample Obtained:		
. Parameter	Permit Builder PARM Code	Sample Measurement (Analysis Results)	l nits	Permit Requirement	Detection Limits	Applysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD  1 Month of Quarter	82545		Feet	Report				
Water Level Relative to Feet, NGVD 2 nd Month of Quarter	82545		Feet	Keport				
Water Level Relative to Feet, NGVD totals of Quarter	82545		Feet	Report				
}	<u> </u>							
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AND EVEN AND THE VIEW								

COMMENTS AND EXPLANATION: 1/20/2009

County: Fucility Name: Permit Number:	Orange Co Wedgefield FLA01090	WWTF		Permit Builder MW ID: Well Type; Description:	MWP-2 Piczonieter Well Name MWP-2 On-Site Irrigation WAFR # 55883				
Monitoring Period Was the well purged before sampling?	From: Yes	No To:	···		Date Sample Obtained: Time Sample Obtained.	· · · · · · · · · · · · · · · · · · ·	1-market paragraph		
Parameter	Permit Builder PARM Code	Sample Mensurement (Analysis Results)	l nits	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)	
Water Level Relative to Feet, NGVD 1* Month of Quarter	R2545		Feet	Report					
Water Level Relative to Feet, NGVD  2 nd Month of Quarter	82545		Feet	Report					
Water Level Relative to Feet, NGVD  Month of Quarter	82545		Feet	Report					
				<del>}</del> -				_	
	<del>                                     </del>			<del></del>				· · · · · · · · · · · · · · · · · · ·	
COMMENTS AND EXPLANATION: 11/20/2009									

DFP Form 62-620.910(10), Uffective November 29, 1994

#### INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT

Read these instructions as well as the SUPPLEMENTAL INSTRUCTIONS FOR CUMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT before completing the DMR. Hard copies and/or electronic 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 link. A signed, original DMR shall be mailed to the address printed on the DMR 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 or reclaimed water data. All domestic wastewater 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 about the used on parts A and D of the DMR and an explanation provided where appropriate. Note: Codes used on Part B for raw data are different.

CODE	DESCRIPTION/INSTRUCTIONS	
ANC	Analysis not conducted.	
DRY	Dry Well	
FLD	Flood disaster.	
IFS	Insufficient flow for sampling.	
LS	Lost sample.	

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 manitoring data were not available.
SEF	Sampling equipment failure

When reporting analytical results that full below a laboratory's reported method detection lunits or practical quantification lunits, the following instructions should be used

- Results greater than or equal to the PQL shall be reported as the measured quantity
- Results less than the PQL and greater than or equal to the MDL stall be reported as the laboratory's MDL value. These values shall be deemed equal to the MDL when necessary to calculate an average for that parameter and when determining compliance with pernut limits.

  Results less than the MDL shall be reported by entering a less than sign ("<") followed by the Inhoratory's MDL value, e.g. < 0.001. A value of one-half the MDL or one-half the effluent limit, whichever is lower, shall be used for that sample when necessary to calculate an average for that parameter. Values less than the MDL are considered to demonstrate compliance with an effluent limit, whichever is lower, shall be

#### PART A -DISCHARGE MONITORING REPORT (DMR)

Part A of the DMR is comprised of one or more sections, each having its own header information. Facility information is preprinted in the header as well as the monitoring group number, whether the limits and monitoring sequirements are interim or final, and the required submittal frequency (e.g. monthly, annually, quarterly, etc.) Submit Part A based on the required reporting frequency in the header and the instructions shown in the permit. The Howing should be completed by the permittee or authorized representative:

No Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data or codes to be entered for all of the parameters on the DMR for the entire monitoring group number; however, if the monitoring group includes other monitoring locations (e.g., influent sampling), the "NOD" code should be used to individually denote those parameters for which there was no discharge.

Mositoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed Sample Measurement: Before filling in sample measurements in the table, check to see that the data collected correspond to the limit indicated on the DMR (i.e. interim or final) and that the data correspond to the monitoring group number in the header. Enter the data or calculated results for each parameter on this row in the non-shaded area above the limit. Be sure the result being entered corresponds to the appropriate statistical) base code (e.g.

annual average, monthly average, single sample maximum, etc.) and units.

No. Ex.: Enter the number of sample measurements during the mentioning period that exceeded the period limit for each parameter in the non-shaded area. If noise, enter zero,

Frequency of Analysis: The shaded areas in this column contain the minimum number of times the measurement is required to be made according to the permit. Enter the actual number of times the measurement was made in the

space above the shaded areas in this column contain the type of sample (e.g. grab, composite, continuous) required by the permit. Enter the actual sample type that was taken in the space above the shaded area.

Signature: This report must be signed in accordance with Rule 62-620-395. F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are

Squarters from agreed a signed a signed as a signed a signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed continued by the second signed c

#### PAR'T B - DAILY SAMPLE RESULTS

Monitoring Period: finter the month, day, and year for the first and hart day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

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 data in the units indicated, Table 1 in Chapter 62160, 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 onto Part B of the DMR, only the following data until ter codes should be used and an explanation provided where appropriate

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

Laboratory analysis was from an 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 were collected and analyzed.

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

Dampier Measurement: Record the results of the analysis. If the result was nellow the imminute selection office, include sizes.

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

Analysis Method: Indicate the analysical method used. Record the method number from Chapter 62-160 or Chapter 62-601, F.A.C., or from other sources.

Analysis Methods: indicate the analysical method used in related an interest and in chapter 02-011, F.A.C., or from other sources.

Sampling Equipment 1 facel: Indicate the procedure used to collect the sample (e.g. acidit, busket/baller, contribugal 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 the official may be reached in the event there are 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 area

#### PECIAL 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 (converted into days). Record in million gallons per day (MGD).

(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 based on two measurements; one made at the start and one made at the end of the discharge period. Measurements are to be made at the upstream gauging station described in the permit.

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 Dilution Ratio accurate to the nearest 0, 1.

No. of Days the SDF > Stream Dilution Ratio. On Part B of the DMR, enter an asterisk
(*) if the SDF is preser 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 Stream Dilution Factor was greater than the Stream

ion Ratio.

CBOD; Enter the average CBOD, of the reclaimed water discharged during the period shown in duration of discharge

C. (FOD): Effect the average CRO1, of the recommend water discharged during the period shown in duration of discharge.

Actual Ratafall: Enter the average TKN of the reclaimed water discharged during the period shown in duration of discharge.

Actual Ratafall: Enter the social ratinfall 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. The cumulative rainfall to date for this calendar year is the total amount of rain, in inches, that has been recorded since January 1 of the current year through the month for which this DMR contains data

Ratafall During Average Rainfall Vear: On Part A, enter the total monthly rainfall during the average rainfall year and the cumulative rainfall for the average rainfall year. The cumulative minfall for the average rainfall year is

No. of Days I. WWD Activated During Calendar Year: Enter the cumulative number of days that the limited wert weather discharge was activated since January 1 of the current year.

Resson for Discharge: Attach to the DMR a brief explanation of the factors contributing to the need to activate the limited wert weather discharge.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed small this report to: Department of Environmental Protection, 3319 Magnire Blvd, Suite 232, Orlando, FL 32803-3767

PERMITTEE NAME: MAILING ADDRESS:

Pluris Wedgefield, Inc. 2600 Commercentre Dr Lake Forest, CA 92630

PERMIT NUMBER:

FLA010900-005-DW2P

Expiration Date:

January 27, 2015

Final N/A R-001 REPORT: PROGRAM:

Monthly Domestic

FACILITY: LOCATION: Wedgefield WWTF 3100 Bancroft Blvd Orlando, FL 32833-4011

LIMIT:
CLASS SIZE:
MONITORING GROUP NUMBER:
MONITORING GROUP DESCRIPTION:
RE-SUBMITTED DMR:
NO DISCHARGE FROM SITE:
MONITORING PERIOD
From: November 1, 2010
To: November 30, 2010

Public Access Reclaimed Water, including Influent

COUNTY:

Orange

OFFICE:

Central District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No.	Frequency of Analysis	Sample Type
Flow(Total through Plant)	Semple Measurement	0.222	MOD		<u> </u>		Continuous	Flow Totaliza
PARM Code 50050 Y Mon. Site No. FLW-1	Permit Requirement	0.330 (An.Avg.)	MGD		+	Ť	- 5	Flow Totaliza
	Semple Measurement	6.198	MGD			0	Days/Week Continuous	Flow Totaliza
	Permit Requirement	0.330 (At: Avg.)	MGD				5 Days/Wesk	Flow Totaliz
- ·	Semple Measurement	.264	MQD			_	Continuous	Flow Totaliz
ARM Code 50050 P	Permit Requirement	Report (Mo.Avg.)	MGD				9 Days/Week	Flow Totalia
	Sample Measurement	0.210	MGD			_	Continuous	Flow Totalia
	Permit Requirement	0.270 (As.Avg.)	MOD			7	Continuous	Flow Totalia
	Semple Measurement	0.135	MOD			0	Continuous	Flow Totaliza
	Permit Requirement	Report (Mo.Avg.)	MGD				Continuous	Plow Totaliza
	Semple Measurement	0	MGD			0	Continuous	Flow Totaliza
ARM Code 50050 S fon, Site No. FLW-3	Permit Requirement	0.0096 (An.Avg.)	MGD				Continuous	Flow Totalize

I certify under pasalty of lew that this document and all ettachments 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 admitted 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 knowling violations.

	NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT TELEPHONE NO	DATE (yy/mm/dd)
	Gregory Hooper, Operator-in-Charge	107-641-7622	10/12/24
4	COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments	hgid): ( ) A )	L

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wodgefield WWTF

R-001

PERMIT NUMBER: FLAC10900-005-DW2P

MONITORING GROUP NUMBER: MONITORING PERIOD From: November 1, 2010 To: November 30, 2010

Parameter		Quantity or Loading	Units		Quality or Concentry	tion	Units	No.		Sample Type
Flow(Total to Zone 1)	Sample	0	MGD		T	T	+	_	Anelysis	·
PARM Code 50050 T	Metaurement Permit		1900				1	0	Continuous	Flow Totaliza
Mon. Site No. FLW-3	Requirement	Report (Mo.Avg.)	MGD						Continuous	m
Flow(Total to Zone 2)	Sample		+		<del> </del>	<del> </del>			Continuous	Flow Totaliza
	Measurement		MGD		1	İ		0	Continuous	Flow Totalize
PARM Code 50050 U	Parmit	0.0309	MGD		<del> </del>	<del>                                     </del>	<del> </del>	┿	<u> </u>	1
Mon. Site No. FLW-4	Requirement	(An.Avg.)	MOD			1	1	]	Continuous	Flow Totaliza
Flow(Total to Zonc 2)	Sample	0	MOD		] ""	1		1		<del> </del>
PARM Code 50050 V	Measurement Permit	Report	<del>  </del>			<u> </u>		0	Continuous	Flow Totalize
Mon. Site No. PLW-4	Requirement	(Mo.Avg.)	MGD		1	,			Continuous	Flow Totalize
Flow(Total to Zone 3)	Sample		<del>                                     </del>	<del></del>	<del> </del>	<del> </del>		Ь.	CONTINUOUS	FIOW 1 DULI 122
•	Measurement		MOD		ļ	J	1	0	Continuous	Flow Totaliza
PARM Code 50050 W	Permit	0.0195	MGD				<del> </del>			
Mon. Site No. PLW-5	Requirement	(An.Avg.)	MOD				1	1	Continuous	Flow Totalizas
Flow(Total to Zone 3)	Sample	0	MOD		1		1	+-		<del></del>
PARM Code 50050 W	Measurement Parmit		7100					0	Continuous	Flow Totaliza
Mon. Site No. FLW-5	Requirement	Report (Mo.Avg.)	MGD				7		Continuous	Flow Totalizer
low(from groundwater well)	Semele		<del> </del>		<del> </del>	<del> </del>	<del> </del>	Ĺ	COMMUNICATION	Flow Totalizer
,	Measurement	0	MGD				1	١٥	Continuous	Flow Totalizar
PARM Code 50050 W	Pormit	Report	МОО			<del>                                     </del>	<del>                                     </del>	-		
Mon. Site No. FLW-6	Requirement	(An.Avg.)	MUD		1		1		Continuous	Flow Totalizer
Flow(from groundwater well)	Semple	0	MGD		<u> </u>		<del> </del>	_		
PARM Code 50050 W	Measurement Permit	·····	****			<u> </u>	J i	0	Continuous	Flow Totalizer
Mon. Sitie No. FLW-6	Requirement	Report (Mo,Avg.)	MGD		1				Continuous	#1 a \$0 a.a.11
BOD, Carbonaceous 5 day, 20C	Sample	(MU,AVE)			<del></del>					Flow Totalizer
,	Measurement				7,7		Me/L	a	Bi-weekly: every	8-hr FPC
PARM Code 80082 Y	Permit				20.0	<del>                                     </del>	<del>                                     </del>		2 weeks	
Mon. Site No. EFA-I	Requirement		l		(An.Avg.)	Ì	mg/L	l	Bi-weekly, every	8-hr FPC
BOD, Cerbonaceous 5 day, 20C	Sample			9.0			<del>                                     </del>		Bi-weekly; every	
nama di a socia	Manustement				8.5	7.5	Mg/L	0	2 weeks	8-hr FPC
PARM Code 80092 A Mon. Site No. EFA-1	Permit Requirement			60.0	45.0	30.0	me/L		Bi-weekly, every	
Solids, Total Suspended	Semple			(Max.)	(Wk.Avg.)	(Mo.Avg.)			2 weeks	8-hr FPC
orius, i Qui Suiperacu	Menurement		1			2.9	Me/L	0	4 Days/Week	O-b
PARM Code 00530 B	Permit				<del> </del>		7-		- Days Wook	Grab
Mon. Site No. EFB-1	Requirement					5.0 (Max.)	mg/L	j	4 Days/Wook	Grab

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

R-001

PERMIT NUMBER: FLA010900-005-DW2P

MONITORING GROUP NUMBER: MONITORING PERIOD From: November 1, 2010 To: November 30, 2010

Parameter		Quantity	or Loading	Units		Duality or Concess	trition	Linits	No.		Sample Type
pH	Sample Measurement		Ì		7.1		7.6	6.71.	6	5 Days/Wook	Grab
PARM Code 00400 A	Pennit				6.0	<del> </del>	8.5		∔-`	7 20,0 11,000	CHED
Mon. Site No. EPA-1	Requirement		<u></u>		(Min.)	<u> </u>	_(Mix.)	8.0.	1	5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			Ţ		<u> </u>	1	#/100mL	0	4 Days/Week	Grab
PARM Code 74055 A	Permit			<u> </u>		<u> </u>	25	#/100mL	<del>                                     </del>	<del> </del>	<del>                                     </del>
Mon. Site No. EFA-1	Requirement			<del> </del>		ļ. <u> </u>	(Max.)	PYTOURL	<u>.</u>	4 Days/Week	Crab
Coliforn, Fecal, % less than desection	Sample Measurement				100%			percent	0	4 Days/Week	Culculated
PARM Code 51005 A	Permit		1		75		<del></del>	<del>                                     </del>	_		<del> </del>
Mon. Site No. EPA-1	Requirement				(Mo.Total)			percent	L	4 Days/Week	Calculated
Chlorine, Total Residual(For Disinfection)	Sample Measurement				1.0			Mg/L	0	Continuous	Motor
PARM Code 50060 A Mon. Site No. EFA-1	Permit Requirement				1.0 (Min.)			ms/L	_	Continuous	Meter
Turbidity	Semple				fight: 1	<del> </del>			-		TATO DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLONIA DE LA COLON
	Measurement						1.4	טדא [	0	Continuous	Motor
PARM Code 00070 B	Permit						Report	·	┝┈	<del>                                     </del>	
ion. Site No. EFB-I	Requirement					l	(Max.)	טוא	L	Continuous	Meter
vitrogen, Nitrate, Total (as N)	Sample Magazreraent			1			6.74	MøL	0	Monthly	8-br FPC
PARM Code 00620 A Mon. Site No. EFA-1	Permit Requirement						12.0 (Max.)	ing/L		Munthly	8-ltr FPC
Flow(Total through plant)	Sample Measurement	0.196	0.216	MGD			3,112.7		•	5 Days/Week	Flow Totalizer
PARM Code 50050 W Mon. Site No. FLW-1	Permit Requirement	Rapori (Mo,Avg.)	Report (Qt.Avg.)	MGD						5 Days/Week	Plow Totalizer
Percent Capacity, (TMADP/ Permitted Capacity) x 100	Sample Measurement						60%	Descript	0	Monthly	Calculated
PARM Code 00180 P Mon. Site No. CAL-1	Permit Requirement						Report (Mo.Avg.)	become		Monthly	Calculated
BOD, Carbonaceous 5 day, 20C(Influent)	Sample Measurement						190.5	Mg/L	0	Bi-weekly, every	8-hr FPC
PARM Code \$00\$2 P Mon. Site No. INF-!	Permit Requirement						Report	pea/L	_	2 weeks Bi-weekly; every	8-hr FPC
Solids, Total Suspended(Influent)	Sample			<del>                                     </del>			(Max.)			2 weeks	OHR ITC
1	Measurement						104.0	Mg/L	0	Bi-weakly; every 2 weeks	8-lw FPC
PARM Code 00530 P Mon. Site No. INF-I	Permit Requirement						Report (Max.)	mg∕l.		Bi-weekly; every 2 weeks	8-hr FPC

## DAILY SAMPLE RESULTS - PART B Facility: Wedgefield WWTF

Permit Number: Monitoring Period

Mo. Avg.

FLA010900-005-DW2P

	BOD, Carbonaccous 5 day, 20C mg/L	Chlorine, Total Residual mg/L	Coliform, Fecal #/100mL	Nitrogen, Nitrate, Total (as N) mg/L	рН s.u.	Solids, Total Suspended mg/L	Turbidity NTU	Flow MGD	Flow MGD Golf Course
Code	80002	50060	74055	00620	00400	00530			
Mon. Site	EFA-1	EFA-I	EFA-1	EFA-1	EFA-1	EFB-1	00070 EFB-1	50050 FLW-1	50050 FLW-2
1		2.4	1		7.1	1.2	1.3	0.209	<del></del>
2		2.5	1		7.4	1.4	15		0.295
3	<u> </u>	3.9	j		7.6	1.0	13	0.197	0.000
4		3.3	1		7.3	1.0	1.5	0.162	0.448
5		3.4			7.1		13	0.264	0.549
6		2.5			7.3	1		0.184	0.000
7		3.1			7.1	<del> </del>		0.204	0.000
8		5.0	1		7.1	1.9		0.228	0.047
9		5.0	-		7.4	1	1.2	0,167	0.813
10			1		7.4	+	1.5	0.183	0.118
11	7.0	5.0	1	2.62	7.3		1.6	0.182	0.242
12		5.0		——————————————————————————————————————	7.5	1.0	1,8	0.190	0.110
13		5.0	<b> </b>	<b></b>		1		0.181	0.071
14		5.0	<u> </u>		7.4			0.191	0.000
15		5.0	1		7.5			0.229	0.184
16		5.0	<u> 1</u> 1		7.3	1	1.0	0.187	0.140
17		5.0	1		7,2	1.3	1.2	0.183	0.188
17		5.0	1		7.3	2	1.4	0.183	0.134
19	8.9	5.0	1		7.4	1.3	2.91	0.158	
20		5.0			7.1			0.210	0.123
	'	5.0			7.3				0.087
21		5.0	1		7.2	1.4	13	0.205	0.000
22	L!	5.0	1		7,6	2.4		0.223	0.091
23		5.0	1		7.1	4.2	1.5	0,203	0.170
24		5.0	1		7.2	1.8	1.8	0,187	0.096
25		5.0			7.3	<del> </del>	2.9	0,188	0.102
26		5.4			7.3	<del>   </del>		0.227	0.064
27		5.0			7.4	<del></del>		0.186	0.004
28		5.0	<del></del>		7.5	<del> </del>		0.200	0.000
29			1		7.5	2.1		0.227	0.000
30		5.0	1		7.3		2.1	0.246	0.000
31		5.0	·		1.5	Li	1,0	0.171	0.000
Total	17.0		18	2.62					
		136.5		<b>2.62</b> [	219.4	29.82			

							 .1. <b>3</b> 5
PLANT STAFFING:							 
Day Shift Operator	Class:	_B	Certificate No:	04653	Name:	Garage II	
E					. ITALIE,	Gregory Hooper	
Evening Shift Operator	Class:		Certificate No:		<b>N</b> 2		 
Maka mana					Name:		
Night Shift Operator	Class:		Certificate No:		N		 <del></del> -
					Name:		
Lead Operator	Class:	С	Certificate No:	08863			 
				10003	Name:	Roger Holsapple	
						Tri-	

2.62

4.072

## DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period

FLA010900-005-DW2P
Prom: November 1, 2010
To: November 30, 2010

Facility: Wedgefield WWTF

4	¥22	T P*	Flore	Elem	000	Calida Tarat			
	Flow MGD	Flow MGD	Flow	Flow MGD	BOD, Carbonaceous 5	Solids, Total Suspended			
	MIGD	]	1400	MOD	day, 20C	mg/L.			
		1	1	1	me/L.				1
Code	50050	50050	#00#O	50050	90000	20520		ļ	
Mon. Site	FLW-3	50050 FLW-4	50050 FLW-5	FLW-6	80062 INF-1	00530 DNF-1		<del> </del>	
1	0.00	0.00	0.00	0.00				<del>                                     </del>	
2	0.00	0.00	0.00	0.00	<del>                                     </del>			<u> </u>	
3	0.00	0.00	0.00	0.00	<del>                                     </del>			ļ	
4	0.00	0.00	0.00	0.00				<u> </u>	<u> </u>
									<u> </u>
5	0.00	0.00	0.00	0.00	_ <b>_</b>	<u> </u>			
6	0.00	0.00	0.00	0.00					
7	0.00	0.00	0.00	0.00				† — — — — — — — — — — — — — — — — — — —	
8	0.00	0.00	0.00	0.00		<del></del>		<del>                                     </del>	<del> </del>
9	0.00	0.00	0.00	0.00	<del></del>	ļ ————			<del> </del>
10	0.00	0.00	0.00	0.00	-	<del></del>		ļ	ļ <del></del>
13	0.00	0.00	0.00	0.00	170.0			<del></del>	<u> </u>
12	0.00	0.00			170,0	74.0			
			0.00	0.00		<u> </u>		<u></u>	
13	0.00	0.00	0.00	0.00		L	L :		
14	0.00	0.00	0.00	0.00		}			
15	0.00	0.00	0.00	0.00			· · · · · · · · · · · · · · · · · · ·	i	<del>                                     </del>
16	0.00	0.00	0.00	0.00				<del> </del>	
17	0.00	0.00	0.00	0.00	<del> </del>			<del>}</del>	<u></u>
18	0.00	0.00	0.00	0.00	191,0	134,0	<u> </u>	<del> </del>	ļ <u>-</u> -
19	0.00	0.00	0.00	0.00	191.00			<b></b>	
20	0.00	0.00							
			0.00	0.00	<b></b>	<u> </u>			
21	0.00	0.00	0.00	0.00	<u> </u>	l			
22	0.00	0.00	0.00	0.00					
23	0.00	0.00	0.00	0.00				T	<u> </u>
24	0.00	0.00	0.00	0.00				<del>                                     </del>	
25	0.00	0.00	0.00	0.00	<del></del>	<del> </del>	<del></del>	<del> </del>	
26	0.00	0.00	0.00	0.00		<del> </del>		<del> </del>	ļ
27	0.00	0.00	0.00	0.00		<del> </del>		<u> </u>	
28	0.00	0.00	0.00	0.00		ļ		<b></b> _	\
		L							<u> </u>
29	0.00	0.00	0.00	0.00					
30	0.00	0.00	0.00	0.00					
31	0.00	0.00	0.00	0.00					
Total	0.00	0.00	0.80	0.00	381,0	208.0		†	<del>                                     </del>
Mo. Avg.	0.00	0.00	0.00	0.00	190.5	184.0			
						104.5		<u> </u>	

29	0.00	0.00	0.00	0.00		i			
30	0.00	0.00	0.00	0.00				<del></del>	
31	0.00	0.00	0.00	0.00		<del></del>	<del></del>	<del>                                     </del>	 
Total	0.00	0.00	0.80	0.00		381.0	208.0		 +
Mo. Avg.	0.00	0.00	0.00	0.00		190.5	184.0		<del>                                     </del>
PLANT STA Day Shift Operate Syching Shift Operate Lead Operate	perator R Operator Operator	Class: Class: Class: Class:	B Certi Certi	Ficate No:  Ficate No:  Ficate No:	04653 08863	Name Name Name	:	/ Hooper	

## Florida Department of Environmental Protection

Twin Towers Office Bldg. 2600 Blair Stone Road Tallahassee, Florida 32399-2400

## **GROUND WATER MONITORING REPORT**

Rule 62-522.600(11)

PAR	RT I GENERAL INFORMA	ATION	
(1)	Facility Name Wedge	field WWTF - Orange C	ounty
	Address 3100 Bancroft	Bivd	
	City Orlando		Zip 32833
	Telephone Number	407 ) 568-7869	
(2)	The GMS Identification	Number 3048P03712	
(3)	DEP Permit Number	FLA010900	
(4)	Authorized Represents	ative NameGregory M	I. Hooper
	Address 6608 Waiton	Way	
	City Tampa		Zip 33610
	Telephone Number (_8	313 ) 359-8327	
(5)	Type of Discharge Dor	nestic Waste	
(6)	Method of Discharge G	olf Course / Sprayfield Imig	gation
l ce atta info	schments and that, based	i on my inquiry of those indi , and complete. I am aware	mined and am familiar with the information submitted in this document and all ividuals immediately responsible for obtaining the information, I believe that the e that there are significant penalties for submitting false information, including the
Dat	te:12	/24/2010	and the second
			Signature of Owner or Authorized Representative
PA	RT II QUALITY ASSURA	NCE REQUIREMENTS	
Sar	mple Organization		Advanced Environmental Laboratories
Ana	alytical Lab	NELAC Certification #	E84589
		NELAC Certification #	
Lat	Name Advanced Enviro	onmental Laboratories	
Add	dress 528 S North Lake	Rhyd Suite 1015 Attemport	o Coringe Florida 20704

Phone Number ( 407 ) 937-1594

County: Facility Name: Permit Number:	Grange Cu Wedgefield FLA01090	unity   WWIF	ATER MO 5# 3048P03		WELL REPO	RT - PART D  Permit Builder MW ID: Well Type: Description:	MWB-IR' Backgroun Well Nam Gelf Cour WAFR#6	nd ne MW-1 TOP
Manisoring Period Was like well purged before sampling? GW TOC 66.30	From: October		To: Decembe	2010	<del></del>	Date Sample Obtained: Time Sample Obtained:	GMS# 304 10:27/10 13:10	8A13413
Parameter	Porndt Builder PARM Code	Sample Measurement (Anniyals Results)	Units	Permit Regulrement	Detection Limits	Analytic Method	Monitoring Frequency	<u>Sample</u> Equipment

Parameter	Permit Builder PARM Code	Sample Measurement (Anniyala Resulta)	Units	Permit Regulrement	Detection Liesky	Amilytic Method	Monitoring Frequency	Sampling Equipment Used	Semplus Filtured (L/F/)
Water Layer Relative to Fest, NOVD	82545	60.91	Feet	Report	N/A	Floid	Questarty	Num	N
Nitrate, (se N)	00620	0.043 U	Teri.	Raport	0.043	1C 100.0	Quarterly	tune	. N
Solids, Total Dissolved(TDS)	70293	210	me/L	Report	10	E160.1	Quarterly	Pump	N
Caloride (se Ci)	00940	57	me/L	Report	0.81	NC 300.0	Quarterly	Parme	N
Collium, Foosi	74053	1.0 U	#/160ms1.	Report		SM9222D	Overrerly	Pause	N
aHHa	20400	4.86	#U	Leons	N/A	Field	Quarterly	Zume	N
Turbidity, Lab - Nachelometric	12079	4.02	NTU	Report	0.016	E180.1	Osenelu	Pamp	N
Arris de la companya de la companya de la companya de la companya de la companya de la companya de la companya				ali la ramaer	1049-1				14. 124
Sodium	00923	40	ms/L	Report	0.026	3W846 6010	Overtorly	Pegg	N
Iribelomethese, Total	\$2000	0,60 U	10/L	Report	0.60	E524.2	Oversety	Pump	N
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	<u> </u>						<b> </b>		
	<u> </u>		<del> </del>						
<del></del>	ļ.——						<b> </b>		
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 Original well MWB-1 was desauged and replaced by MWB-1R on 08/08/2007. The WAPR ID remains the state.

*** Based on the deveated equampations of these parameters in the effluence empire, parameters fodjum and Total Tribalomentane (TTP)Ma) have been added to the current Groundwater Monkoring Plan (OWMP). I certify under pensity of law that I have parameter in the effluence assertion asterized berein; and bened on my inquity of those individuals instead interesting the information including the possible for obtaining the information including the possibility of face and instringeness.

I believe the refurthed differentian is time, accounts and possible. But swarp first there are significant quantities flar information including the possibility of face and instringeness.

NAME/ITTLE OF PRINCIPAL EXECUTIVE DEFICES OR AUTHORIZED AGENT

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICES OR AUTHORIZED AGENT

TEACHER TO

COMMENTS AND EXPLANATION:

11/20/2009 PATE (YYMM/DD) 107441-7622 10/12/24

EMP from 62-630-010(10), official Navigable 29, 1994

t

Orange County Wedgefield WWTF FLA010900 MWB-2 Background Well Name MW-2 Golf Course WARR # 6005 GMS# 3048A13414 10:27/19 13:34 Parait Builder MW ID: GMS# 3048P03712 Moultoring Period
Was the well purpod before templing?
OW TOC 70.10 From: October 2010_X_ Yes ___ No To: December 2010_

UW 10C 70.10							13.34	_	
Parameter	Permit Bellder PARM Code	Sample Measurement (Analysis Remits)	Unite	Pormit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	. Samples Pillared (L/P/
Water Level Relative to Fost, NOVD	, #2545	63.82	Feet	Report	N/A	Pieti		<del> </del>	
Nitrate (as N)	00620	0.043 U	He/L	Report	0.043		Quitariy	Parac	N
Solids, Total Dissolved (TD6)	70293	70	me/L	Report	10	IC 100.0	Owntedy	<u> </u>	N
Chloride (as Cl)	00940	15	me/L			E160.1	Chearterly	- Perce	
Coliform, Fecal	74035	1.0 U		Report	0.81	IC 100.0	Owertorly	Person	N
all	00400	4.43	#/100mL	Report	10	5M9713D	Overteny	Press	N
Turbleity, Lab - Numbelometric		0.09	SU_	Rapert	NA		- Chenery	Perso	N N
	82079		NTU STREET STREET	Report	9016	R140.1	Quench	Pump	
		The second second			<b>一大四种产业</b>		<b>建</b>	<b>建筑水水</b>	\$ 5 mag
Sodium .	00923	11	mg/L	Report	9.026	SW846 6010	Questarty	- Pum	
Irikalomethane, Total	\$2040	0.60 U	/L	Resert	0.60	E534.2	Questerly		N
							- Administra	hane	N
** Based on the stemiol or a service of							T		

of these passencers in the efficient samples, parameters Sodiess and Total Tribelomethese (TTHMs) have been added to the current Ordenderster Mentacring Plan (OWMP). COMMENTS AND EXPLANATION: 11/20/2009

DEP from 62-620.910(10), effective bis-ranker 20, 1994

2

County: Pacility Name: Perzelt Number:	Orange Co Wedgefield FLA01090	WWIF	S# 3048P0;	3712		Permit Bullder M W ID: Well Type: Description:	MWB-3 Backgroun Well Nam Golf Com WAFR #	e MW-3 ne 6004
Monitoring Puriod Was the well purged before sampling? GW TOC 67,90	Prom: October _X Yes		To: Decembe	2010	<u></u>	Date Sample Obtained: Time Sample Obtained:	GMS# 304 10:27/10 12:36	
Parameter	Permit	Semple Measurement	Unite	Permit	Detection Limits	Analysis Method	Mentioring	Sample

Parameter	Permit Believ PARM Cade	Sample Measurement (Analysis Results)	Unite	Permit Requirement	Detection Limits	Analysis Method	Menitoring Proquenty	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Fost, NGVD	12545	64.52	Feet	Report	N/A_	Field	Quarterly	Pump	N N
Nitrote, (as N)	00620	0.043 U	me/L	Report	0.041	IC 100.0	Quarterly	Pimo	N
Solids, Total Dissolved(TD\$)	70295	1400	ne/L	Basert	10	E160.1	Quarterly	Perso	N
Chioride (se Ci)	00940	89	me/i.	Report	0.81	JC 300.0	Concerty	Peno	<u> </u>
Coliform, Fecal	74055	1.0 U	#/100mil.	Report	1.0	\$M9322D	Quarterly	Pwnp	N
Hq	00400	5.99	នប	Report	N/A	Field	Opertenty	Pauro	N
Turbidity Lab - Numbolometric	\$2079	30.61	עדא	Report	0.016	E100.1	0	Pittio	——————————————————————————————————————
		of the original party				<b>第二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十</b>	\$15 P	<b>"</b> "一个的图	
Sodium	00923	64	me/L		0.026	SW846 6010	Quarterly	Pump	N
Tribelometheps, Total	E2000	0.60 U	ug/L	Report	0.60	E524.2	Quarterly	Penn	N
	ļ			ļ					
					<u> </u>				

** Based on the develod concentrations of these parameters in the effluent samples, parameters Sodium and Total Tribalconoftsase (TTHMs) have been added to the oursent Groundwater Monitoring Plan (GWMP).

11/20/2009

DEF Ferm 62-620.910(10), effective Hermiter 39, 1994

County: Facility Name: Permit Number:	Orange County Wedgelield WWTF FLA010900	GMS# 3048P03712	Pennit Builder MW ID: Wall Type: Description:	MW1-4 Intermediate Well Name MW-4 Golf Course
Monitoring Period Was the well purpod before sampling?	From: October 2010XYes No.	To: Decomber 2010	Date Sample Obtained: Time Sample Obtained:	WAFR # 6003 GMS# 3048A13416 10:27/10 10:49

Parameter	Parmit Builder PARM Code	Sample Messurement (Analysis Results)	Umita	Permit Requirement	Opigation ("Ingita	Assilysis Mathod	Mostoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/P
Water Lavel Relative to Twee, NOVD	\$2545	63.05	Fee	Benori	N/A	Field	Quarterly	Parmo	
Nitrate, (as N)	00620	1 860.0	me/L	Report	0.043	IC 300.0	Overanty	Parac	<u> </u>
Solids, Total Dissolved(TDS)	70295	140	ma/l.	Report	10	£160.1	Ownerty	Pimp	<u>N</u>
Chloride (as Ci)	00940	16	me/L	Report	0.81	JC 300.6	Quarterity	Pamo	N
Coliforn Petal	74055	1.0 U	#/190mL	Report	1.0	\$1492220	Quantity		<u> </u>
eH	00400	4.02	SU	Réport	NA	Pield	Contacto	Pum	N N
Turbifity, Lab - Numbolometric	82079	101.9	עווא	Rappet	0.016	E180.1	Oversely	Pytho	N
			A@0	ed: Nivember	2009**				N 48 (11.0)
Sodiym	00923	17	me/L	Report	0,026	5W846 6010	Ouertoriv	Pumo	N.
Tribelometheric, Total	#20H0	0.60 U	ue/L	Report	0.60	B524.2	Overterly	Pump	N N
							<del>  </del>		•
							1		

^{**} Based on the elevated consensations of these parameters in the efficient temples, parameters Sodium and Total Tribalomethene (TTHMs) have been added to the current Groundwater Monitoring Plan (OWMP).

11/20/2009

DEP Part 42-420910(10), official November 29, 199-

4

County: Pacifity Name: Parents Norther:	Orange County Wedgefield WWTF FLAS10900	CMS#3048703712	Persult Builder MW ID: Well Type: Description:	MWC-6 Compliance Well Name MW-6 Golf Course
Monitoring Period Was the will purged before sampling? 23W TYIC 65 04	Figure: October 2013XYesNo	To: December 2010	Dute Sample Obtained: Time Sample Obtained:	WAFR # 6001 GMS# 3048A13418 10:27/10 11:46

Parameter	Permit Builder PARM Code	Sample Megaurament (Analysis Resolts)	Units	Per <u>mi</u> t Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/K)
Water Level Relative to Feet, NOVD	27545	58.37	Pest	Jegori	H/A	Plats	Overtonly	Pumo	
Nitrate, (64 N)	00620	0.043 U	me/L	10	0,043	IC 300.0	Querierly	Casso	N N
Solids, Total Dissolved (TDS)	70295	170	000/1	500	10	E160.1	Operterly		N
Chieride (as Ci)	00140	20	_ me/L	250	0.81	IC 300.0	Ounterly	Paren	N
Coliforn Fatal	74035	1.0 U	#/190ml	4	1.0	SM9212D	Quarterly	Paran	N
pH	00400	4.97	10	63-63	N/A	Fleti	Duesterly	Pane	N
Torbidley, Lab - Nachologastric	82079	11,64	עזא	Report	0.016	E190.1	Ouerterty		N
File Co. Marie Bander (14 cm. 17 cm.)			A. P. September		- W-Neeun	では中国で	ででは		
Sodien	00923	25	00/1	160	0.026	SW\$46 6010	Quarterly	Penn	N
Tribelogythane, Total	<b>\$200</b> 0	0.60 U		80	0.60	E524.2	Querterly	Purac	N
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	<u> </u>		}						
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^{**} Based on the elevated concentrations of these parameters to the efficient numbers, parameters Sodiem and Total Tribalemethane (TTHMs) have been added to the current Groundwater Monitoring Plan (OWASP).

COMMENTS AND EXPLANATION:
11/20/2019

CIEP Posts 62-430 91 D(10), affective November 39, 1994

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County: Facility Name: Permit Number:	Orange County Wedgefield WWTF FLA010900	GMS# 3048P03712	Formit Builder MW ID; Wall Type: Description:	MWI-7 Intermediate Well Name MW-7 Gelf Course
Monitoring Period  Was the well purped before sampling?  GW TOO' 48 70	From: Cotober 2010NYesNo	To: Desember 2010	Date Sample Obtained: Time Sample Obtained;	WAFR # 6600 GMS# 3048A13419 10:27/10

Parameter	Paresis Bullder PARM Cade	Sample Managerement (Anniyela Rassita)	Units	Persit Requirement	Dotocilo R Limita	Annlysis Method	Monitoring Proquency	Sampling Equipment Used	Samples Filtered (L/S/
Water Level Relative to Past, NOVD	82545	63.83	Feet	Report	N/A	Field	Owerserby	Ponto	N
Nitrate. (at N)	00620	0.43 U	meri	Resort	0.43	IC 300.0	Connector	Page	N
Solida, Total Dissolved(TDS)	70295	780	RM/L	Report	10	E160.1	Osarterly	Purp	N N
Chloride (se Cl)	00940	290	_me/L	Report	4.0	IC 300.0	Quarterly	Pune	<u> </u>
Coliforne, Penel	74055	1.0 U	#/100miL	Raport	1.0	SM9222D	Quarterly	Puso	
ati	00400	5.47	_#U	Repert	N/A	Pield .	Ounterly	Penso	N
Turbidley Lab - Neobolometric	62979	40.02	NTU	Report	0.016	Riso.;	Quantity	Pump	N
			aj de Ma	ed: Neverther		ister der Albertauer in	a production	rright of the same	
odiem	00923	200	ne/L	Report	0.026	SW846 6010	Quarterly	Pumo	_ N
rihelometi-ane. Total	#20 <b>3</b> 0	0.60 U	ue/L	Report	0.60	E524.1	Openaty	tuno	N
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	<del>  </del>		<del> </del>	ļ			<u> </u>		

^{**} Stand on the elevated concentrations of these parameters in the effluent energies, parameters Sodium and Total Tribulomothane (TTRMs) have been added to the current Groundwater Monitoring Plan (GWMP).

COMMENTS AND EXPLANATION:

11/20/2009

DEF Parm 62-630.9 (0(10), effective Neverther 24, 1964

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		GECOUILD W	ALEK MO	MITORANG	WELL REPUI	KI - PAKI D			
County: Pacifity Name: Parralé Number;	Orange Cor Wadgefield FLA010906	WWTF	18# 3048P03712 To: December 2010			Pennit Bellder MW ID: Wall Type: Description: Date Sample Obtained: Time Sample Obtained:	MWC-] Compliance Well Name MW-] On-Site Irrigation WAFR # 32995		
Monitoring Period Was the well purged before sempling? GW TOC 71.53	Prom: OctoberX Yes								
Parameter	Permit Builder PARM Code	Sampie Massurement (Austysia Rasulta)	Units	Permit Requirement	Detection Lings	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Sumples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	<b>82545</b>	61,65	Fest	Report	N/A	Field	Querterly	Pemo	N N
Nitrata (06 N)	00620	0,043 U		10	0.943	IC 300.0	Quarterly	Pure	N N
Solide, Total Dissolver (TDS)	70293	62	94/L	500	10	E160.1	Quarterly	Person	N
Chloride (se Cl)	00940	16	ne/L	250	0.81	JC 300,0	Owartesty	Purse	N
Coliform, Passi	74055	1.0 U	#/190mL	4	1.0	\$M9222D	Ownterly	Ругир	N
해	00480	4.51	80	6.5-8.5	N/A	Flete	Opertedy	Pump	N
Turbidity, Lab - Napholometris	#2079	1.68	עזא	Report	0.016	ELSO.)	Overtedy	Punso	N.
<b>通過時期</b>		and the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of t		led: Kerrenber	200		PACE PROPERTY.	P. T.	
Sodium	00923	9.5	me/L	160	0.026	SW346 6010	Quarterly	Punto	N
Tribelomethene, Total	#20#0	5,60 U	te/L	<b>80</b>	0.60	E324.3	Overterly	lvap	N
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^{**} Based on the obvioled concentrations of these parameters in the efficient samples, parameters Sedium and Total Tribatomethace (TTHMs) have been added to the coursest Consistent Menitoring Plan (OWMP).

COMMENTS AND EXPLANATION:

1/20/2009

County: Facility Neous: Perzuit Number:	Orange County Wedgefield WWTF FLA010900	GMS# 3048P03712	Parask Builder M W (D); Wall Type: Description:	MWC-2 Compliance Well Name MW-2 On-Site Irrigation WAFR # 32996
Monhoring Period Was the well purged before sempling? GW TOC 72.00	Prom: October 2010No	To: December 2010	Date Sample Obtained: Time Sample Obtained:	10:27/18 09:15

Code 45 20	61.36 0.043 U 260 110 1.0 U	me/L me/L me/L e/(00mL	10 500 250	9,943 10 0,03	71e4 IC 300.8 E160.1	Quarterly Quarterly Quarterly	Page Page	N N
23 40	260 110	me/L	500	10	E160.1	Ownterly	Pier	N.
40	170	me/L					Puren	
			250	18.0				
55	1.0 U	A/189-1	1 7		IC 300.0	Questerty.	Promo	N
		V 1434	4	1.0	\$M9222D	Quarterly	Pama	N
90	4.64	su	65-8.5	NA	Field	Chartety	Page	N
79	1.62	NIU	Report	0.016	E140.1	Quarterly	Petto	N
. · · ·		AM	ed: Neverbler			加大的格件	<b>奇經濟</b> 素	
23	75	100	160	0.026	SW\$46 4010	Quarterty	Press	N
•0	0.60 U	us/L	80	0.60	E524.2	Quantity	Penn	N
		ļ				<u> </u>		
_		<b> </b>				<del> </del>		
֡	79	1.62 23 75	79 1.62 NTU  23 75 Maril. 40 0.66 U Warl.	79 1.62 NTU Report  Addard: No resident 23 75 mars. 160 40 0.60 U usrl. 80	79 1.62 NTU Report 0.016  Addid: November 2007  33 75 mars. 160 0.026  40 0.60 U usrl. 90 0.60	79 1.62 NTU Report 0.016 E180.1  Add 1 Particle 200 0.026 SW246 4010 0.00 0.00 E724.2	79 1.62 NTU Report 0.016 E180.1 Company  Addid: New York 1880 0.026 SW246 6010 Quarterly  40 0.60 U us/L 80 0.60 E524.2 Quarterly	1.62   NTU   Report   0.016   E180.1   Ownsety   Party

^{**} Based on the deviated concentrations of these parameters in the efficient samples, parameters Sodium and Total Tribalomethane (TTHMs) have been added to the current Groundwater Monitoring Plant (GWMP).

COMMENTS AND EXPLANATION:

(1/29/2009

DEF Form \$2-620.010(10), effective November 20, 1000

1

Facility Name:

Orange County Wedgefield WWTF FLA010900

GM5#3048P03712

Permit Builder MW ID:

Well Type: Description: MWC-3 Compliance Well Name MW-3 On-Site Irrigation WAFR # 32997

Monitoring Period
Was the well purged before sampling?
GRAP TOSC 77 26 From: October 2010_ _X__ Yes ___ No Date Sample Obtained: Time Sample Obtained: 10:27/10_ 09:39___ To: December 2010_

Permit Builder PARM Code	Sample Mensurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Monitoring Proquency	Broughing Equipment Used	Samples Fittered (L/Y/N
#2545	65.93	Feet	Namort	N/A	Pleid	Quarterly		N .
00420	0.043 U	me/L	10	0.043	IC 300.0	Operaciv	Pemo	N N
70293	620	me/L	500	10	E160.1	Overletty	Pune	N
00940	250	me/L	250	0.81	IC 300.0	Quarterly		N
74015		#/100mL	1	10	SM9733D	Counterly	Pump	N
00400		IIV.	6.5-8.5	NA	Pield	Questady	Pume	N
12079		NTU	Report	0.016	E180.1	Quarterly	Page 1	N
						1 2		
12010	0.60 U		30	0.60	E2N3	Courtesty	Pune	N N
		1						
		<del>  -</del> -	ļ		<del></del>			
	PARM Code  82545  00620  70925  00940  74035  00400  82079	Rutifler   (Amelysis Results)	Ruilifer   (Amelysis Resolut)		Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Registrement   Regi	Resident   (Amelysis Resolut)   Requirement   Requirement   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resident   Resi	Resident   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Programme   Progr	Regular   Resolve   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regular   Regu

^{***} Blanck on the elevated concentrations of these parameters in the effluent enumber, parameters Sodium and Total Tribalograthene (TTHMs) have been added to the current Groundwater Mentioning Plan (GWMP).

COMMENTS AND EXPLANATION:

9

County: Pnellity Name: Puzuli Number:	Orange County Wedgefield WWTF FLAS10900	GMS# 3848P03712	Permit Builder MW ID: Well Type: Description:	Equipment Blenk
Monitoring Period Was the well purged before sampling?	Front: October 2015	To: December 2010	Date Sample Obtained: Time Sample Obtained:	10:27/10 08:30

Parameter	Permit Bubbler PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	(Potoction Limits	Analysis Method	Monitoring Frequency	Sempling Equipment Used	Sampler Filtered (L/F/R)
Water Lavel Religive to Fact, NOVD	12345	NA	Feet	Report	N/A	Field	Quarterty	Pump	N
Nitrate, (as N)	90620	0.043 U	nw/L	Report	0.043	IC 300.0	Ownterly	Pueto	N
Solida, Total Dissolved(TDS)	19295	10 U		Reexi	10	E160.1	Destroriv	Tump	N
Chloride (as Cl)	00940	0.81 U	me/L	Report	0.8)	IC 300.0	Overterly	Pume	N
Coliforn, Pecal	14011	1.0 U	#/100mL	Report	1.0	8M9222D	Overterly	Nume	N
ph	00400	6.06	80.	Report	N/A	Flets	Ownerly	Pune	N
Turbidity, Leb - Neubelemetris	<b>£2079</b>	0.06	NTU	Report	0.016	E1801	Openedy	Ping	N and to the same of
ledien	00923	0.30	me/L	Report	0.026	\$W\$46 6010	Quencriy	Perso	N E LEVE
Tribaloguations, Total	<b>8200</b> 0	0.60 U	va/L	Kason	0.60	E524.2	Quantity	Person	N.
	<del></del>		<del> </del>		<del></del>	<del></del>	<del> </del>		
			<del> </del>						

^{**} Original well MWB-1 was damaged and replaced by MWB-1R on 06/08/2007. The WAPR ID personing the some.

*** Based on the allowed occombations of bear personates in the efficient enoughs, personates Solium and Tenal Tribulomethane (TTHMs) have been added to the current Groundwater Monthering Plan (GWMP).

I certify under pensity of law that ( have personally enoughed and one familier with the information submitted herein; and based on my jequity of those individuals immediately responsible for obtaining the information submitted.

1	believe the submitted information is true, acquests and complete, I see notice that there are	e similicant negation for submitting falso information including the monthlity of fine pro	impierenge.	<b>-</b>	
Г	NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORISED AGENT	MIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TRESPRENE NO	DATE (YY/MM/DD)	
-				<del></del>	

COMMENTS AND EXPLANATION: 11/20/2009

County: Pacility Name: Permit Number:	Orange County Wedgefield WWTF FLA010900	GMS# 3048P03712	Pennit Builder MW ID: Well Type: Description:	MWP-1 Piezometer Well Name MWP-1 On-Site Irrigation WAFR #55881
Monitoring Period Was the well purped before sampling?	From: _November 1, 2010 Yes No	To: November 30, 2010	Dute Sample Obtained: Time Sample Obtained:	

Parameter	Permit Builder PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysie Method	Sempling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NOVD	B2545	63.87	Fest	Report	N/A		Solimt Water Lavel Motor	
Water Level Relative to Feet, NGVD  2 nd Month of Querter	\$2545	63.35	Feet	Report	N/A		Solinat Water Level Meser	
Water Level Relative to Fost, NOVD  Month of Quarter	<b>82545</b>	63.56	Feet	Report	N/A		Solina Water Lovel Motor	

COMMENTS AND EXPLANATION: 1 (20/2009

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

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County:
Facility Name:
Permit Number:

Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID: Well Type:

MWP-2 Piczometer
Well Name MWP-2
On-Site Irrigation
WAFR # 55883

Monitoring Period From: November 1, 2010 To: November 30, 2010 Was the well purped before sampling? _X_ Yes ___ No

Description:

Date Sample Obtained; Time Sample Obtained.

Parameter	Permit Builder PARM Code	Sample Measurement (Analysis Results)	Vaite	Permit Requirement	Petection Limits	Anniysin Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545	66.64	Feet	Report	N/A		Solinst Water Level Meter	
Water Level Relative to Foot, NGVD	82545	63.57	Feet	Report	N/A		Solinst Water	
Water Level Relative to Feet, NOVD Month of Quarter	82545	64.62	Feet	Raport	N/A		Soliner Water Level Mater	
	-							
	-	<del></del>	<del>                                     </del>			<del></del>	<del></del>	<del></del>

COMMENTS AND EXPLANATION:

DEP Form 62-620,910(10), Effective November 29, 1994

17

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

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

	-					-		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
PERMITTEE NAM					PERMIT!	NUMBER	FLA01096	00				
MAILING ADONE		lorida 33610			LIMIT:		Fine		REPOR	T:	Мол	thiu
					CLASS S	ZE:	N/A		GROUP		Down	
FACILITY: LOCATION:		le WWTF oroft Boolevard			MONITO	RING GROUP	R-001					
20011110111					NUMBER	l:						
	Orlando.	ri			MONITOR	RING GROUP DE	SC: Public Aci	ess Rouse, including	Influent		(	an agraci
COUNTY:	Orange					HARGE PROM					FI	<b>!</b>
					SITE:	RING PERIOD	ليا		1		7 T K	
						comber 01,2010				K	,	
						nber 31,2619						
Paramet	er		Quantity	or Loading	Units	Qu	ality or Concen	tration	Units	No.	Frequency of	Sample Type
<u></u>				r						Ex.	Analysis	<u> </u>
Flow		Sample Measurement	0.209	ļ	MOD	l .	1		MOD	•	5 Days/Week	Flow meters and totalizors
PARM Code 50050	Y	Permit	0.364		MGD			<del>                                     </del>	+	┿	J Days/Week	Flow maters and
Mon.Site No. FLW-1		Requirement	(An.Avg.)				. <b></b>		.1			totalizers
Flow		Sample Mosstroment	0.194		MOD	i	1		MOD	0	5 Days/Work	Flow meters and
PARM Code 50050	1	Permit	Report		MOD		<del> </del>		+	╂─┤	5 Days/Week	totalizers
on.Site No. FLW-1		Requirement	(Mo.Avg.)								> Days/Week	Flow meters and totalizers
)D, Carbonaceous	5 day, 20C	Sample				7.7			MG/L	0	Every Two	8-hour FPC
PARM Code 80082	Y	Messarement Permit	<del></del>	<del></del>	<del></del>	26.0	<del></del>	<del></del>	1	1	Weeks	<del> </del>
Mon Site No. EFA-1	·	Requirement				(An.Ave.)	<u> </u>	_1	Http/L	1 1	Every Two Weeks	8-hour FPC
BOD, Carbonaceous	5 day, 20C	Sample	•		. –	7.5	8.0		MG/L	•	Every Two	8-hour FPC
PARM Code 80082	A	Measurement Parndt				30.0	60.0	<del> </del>	me/L	-	Weeks	1 1 2 2 2 2
Mon.Site No. BFA-1		Requirement				(Mo.Avg.)	(Max.)		1		Every Two Weeks	8-hour FPC
Solids, Total Suspen	ded	Semple				2.8			MG/L	0	4 Days/Week	Greb
PARM Code 00530	B	Measurement Perselt				5.0	<del></del>	<del></del>	me/L	<del>} - }</del>	45	1
Mon.Site No. EFB-1		Requirement				(Max.)		1		1	4 Days/Wook	Grab
рН		Sample				7.3	7,8		SU	0	5 Days/Work	Grab
PARM Code 00400	A	Messurement Permit				6.0	8.5		<u>ku</u>			
Mon.Site No. EFA-I	^	Requirement				(Mis.)	(Max.)	1	80	il	5 Days/Week	Greb
		-1. d			di							
I certify under ponelty avaluate the informat	y or new uses s inn submitted	. Rased on my in	outry of the senson	ot petrous who	n my arreduce of	r supervision in acc on, or those necessit	KOFDANCE WILD & SYSKI K. Římský: SPEROMAÍN	em dealgned to assure	that qualific	persor	nuel busberly Bret	otrand
of my knowledge and	d belief, true, I	course, and com	plete. I am aware t	has there are sign	rificant penalties	for submitting fuls	e information, inclu	ding the possibility of	fine and im	begodsur A manazul	ent for knowing v	s, to me paix rightions.
NAME/TITLE OF PRI	NCIPAL EXEC	UTIVE OFFICEA C	OR AUTHORIZED A	JENT	SIGNATURE OF	PRINCIPAL EXEC	UTIVE OFFICER OR	UTHORIZED AGENT	- 7	TELEPHI	ONE NO DAT	E (YY/MOM/DD)
Roger Hoksepple		Lea	d Operator		.7	h//	lonale			107-259	6991 201	/01/19
					//	V 1/11	CANO V	-"				

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

# DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY

Wedgefield WWTF

R-001

PERMIT NUMBER FLA010900

MONITORING GROUP NUMBER. MONITORING PERIOD From: December 81,2810 To: December 31,2010

Perameter		Quantity	or Loading	Units	Qu	sality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecul, % less than detection PARM Code \$1005 A	Sample Measurement				100%		PER- CENT	0	4 Days/Week	Cirab
Mon.Site No EFA-I	Permit Requirement		İ	1 1	75 (Min.)		PER- CENT		4 Days/Week	Grab
Coliform, Fecal	Sample Measurement		1		0.5		#/100A41.	10	4 Dens/Work	Grab
PARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement	***************************************			25	<del>   </del>	#-100Mj.		4 Days/Week	Grab
otal Residual Chlorine (For	Sample		<del> </del>	+	(Max.)	<del></del>		ـــا		
Disinfection)	Measurement		1		1.0	l i	mµ/L	0 ]	Continueus	Meter
ARM Code 50060 A	Permit				1.0	<del>                                     </del>	reg/L	-4	Continuous	Meier
dou.Site No. EFA-I urbiday	Requirement	***			(Min.)	<u> </u>			Comprise	1916401
morally.	Sample Measurement			1 1	2.9	1	NTU	0	Continuous	Meter
PARM Code 00070 B	Permit			┼──┼	Report	<del> </del>				<u> </u>
Ann.Site No. EFB-1	Requirement		}	1 1	(Max.)	1 1	NTU	Π	Continuous	Meter
Vitrogen, Nitrate, Total (as N)	Sample			<del>/ /</del>	11.68	<del> </del>		⊢⊸		<del> </del>
-	Measurement			i l	F 1 -4340		mg/L	0	Monthly	8-hour FPC
ARM Code 00620 A	Permit		1		12.0		mg/L	$\vdash$	Monthly	8-hour FPC
on.Site No. EFA-1	Requirement		<u> </u>	<u> </u>	(Max.)	<u>                                     </u>	·		(WALMALIN'S	041001 FTC
low (from groundwater well)	Sample	0.00		MGD		1	MGD	9	Continuous	Flow moters an
ARM Code 50050 P	Measurement Permit	5		I			'	- T	COMMISSION	totalizers
Mon.Site No. FLW-6	Requirement	Report (An.Avg.)	ŀ	MGD					Continuous	Flow moters as
low (from groundwater well)	Samole	(VIII.V(AR.)	0.00	MGD -		ļ <u> </u>				totalizers
	Measurement	0.00	1.54	MAIL		1	MOD	0	Continuous	Flow mesers an
PARM Code 50050 Q	Permit	Kenort	Report	MGD	·	<del>                                     </del>				totulizers
Mon Site No. FLW-6	Requirement	(Mo.Avg.)	(3-Mo Avg.)	1 1		i I	l i	- 1	Continuous	Flow moters an totalizers
flow (total to zone 3)	Sample	9.00		MGD		<del>                                     </del>	MGD	<del>-6  </del>	Continuous	Flow meters on
	Measurement					]		٠,	Commissions	totalizers
ARM Code 50050 R	Permit	0.0232		MOID				-+	Continuous	Flow meters an
don.Site No. FLW-5	Requirement	(An.Avg.)		<u> </u>		<u>i                                     </u>	1 1	ı	Commissions	totalizers
low (total to zone 3)	Sample	0.00	0.00	MGD		1	MGD	0	Continuous	Flow meters an
ARM Code 50050 S	Mensurement Permit	Report		MGD				1		totalizers
Ion, Site No. FLW-5	Requirement	(Mu Avg.)	Report (3-Mo Avg.)	MAID		1		T	Continuous	Flow meters an
low (total to zone 2)	Sample	0.00	13-milt./VAR.1	MGD		<del>                                     </del>				totalizers
, J.	Measurement	4,40	ļ	"		1	MGD	0	Continuous	Flow meters an
ARM Code 50050 T	Permit	0.0634	1	MGU		<del> </del>	<del></del>		E	totalizers
don Site No FLW-I	Requirement	(An Avg.)							Continuous	Flow numbers and
low (total to zone 2)	Sample	0.00	0.00	MGD		<del> </del>	MGD	-	Carrier	tivalizers
	Measurement					1	""(10	"	Continuous	Flow meters and
PARM Code 50050 U	Permit	Report	Report	MGD		<del>                                     </del>	<del></del>		Continuous	flow meters use
Mon.Site No. FLW-4	Requirement	(Mo.Avg.)	(3-Mo Avg.)						C DECEMBORS	LAMINGER ME

# DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY.

Wedgefield WWTF

R-001

PERMIT NUMBER, FLA010900

MONITURING GROUP NUMBER. MONITORING PERIOD From: December 01,2010 To: December 31,2010

Parameter		Quantity	or Loading	Units	Qu	ality or Conce	entration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (ustal to zone 1)	Sample Measurement	00.0		MGD				MGD	0	Continuous	Flow meters and
PARM Code 50050 V Mon Site No. FLW-3	Permit Requirement	(An Avg.)		MGD						Continuous	lion meters and totalizers
Flow (total to zone 1)	Sample Measurement	09.0	0.90	MGD				MGD	9	Continuous	Flow ineters and totalizers
PARM Code 50050 W Mon Site No. FLW-3	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo Avg.)	MGD						Continuous	Flow meters and totalizers
Flow (total to golf course)	Sample Measurement	0.198		MGD				MGD	0	Continuous	Flow meters and jounizers
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	0,270 (An.Avg.)		MGD						Continuous	Flow meters and totalizers
Flow (total to golf course)	Sample Measurement	0.22R	0.181	MGD				MGD	0	Continuous	Fixw repters and totalizers
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	Report (Mo.Avg.)	Report (3-Me Avg.)	MGD						Continueus	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement				198.0			mg: L	•	Every Two Weeks	8-hour FPC
RM Code 80082 G un Site No. 1NF-1	Permit Requirement				(Mo, Avg.)			mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement	1			111.0			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement				Report (Mo.Avg.)			mg/l.		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement				55.1		<u> </u>	Percent	0	Monthly	Calculated
PARM Code 00180 1 Mon Site No. Fl.W-1	Permit Requirement		ļ <u>.</u>		Report			Percent		Monthly	Calculated
	Sample Mepsyroment			<b></b>						···	
<u></u>	Permit Requirement Sample		ļ						_		
	Measurement Permit									· · · · · · · · · · · · · · · · · · ·	
	Requirement								_		
	Sample Measurement		ļ								
	Perms Requirement								i		

Instally, flow is limited to 0,270 MGD AADF. However, the flow may be increased after completion of the second treatment plant and pending the results the required food test DEP Form 62-620 910(10), Effective November 29, 1994.

## **DAILY SAMPLE RESULTS - PART B**

Pennit Number: Monitoring Period

FL-A010900

From: December 01,2010 To: December 31,2010

Facility: Wedgefield WWTF

	CBOD5 (mg/L)	Coliform Bacteria (#/100ML)	pH (Max)	pH (Min)	TRC (For Disinfect.) (mg/L)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Total (as N) (mg/L)
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
Mon. Site	EFA-1	EFA-1	EFA-I	EFA-1	EFA-I	EFB-I	EFB-I	FLW-1	EFA-1
1		<1	7.4	7,4	1	1.0	2.9	0.208	
2		<1	7,1	7.1	3.3	1.0	2.9	0.180	
3		<1	7.3	7.3	1.8	1.0	2.9	0.171	
4			7.2	7.2	2		2.9	0.208	
5			7.5	7.5	111		2.7	0.232	
6			7.4	7.4	2.2		2.9	0.182	
7		<1	7.3	7.3	2.7	1.0	2.9	0.180	
8	8,0	<]	7.4	7.4	1.8	1.0	2.9	0.173	11.68
٩		<1	7.5	7.5	2.2	1.0	2.5	0.189	
10			7.5	7.5	1.9		2.2	0.167	
- 11			7.6	7.6	2.3		2.7	0.212	
12			7.5	7.5	2.7		2.4	0.238	
13		<1	7.8	7.8	2.6	1.0	2.4	0.200	
14		<1	7,6	7.6	2.5	1.0	2.6	0.179	
15		<1	7.8	7.8	1.8	1.0	2.9	0.183	
16		<1	7.7	7.7	2.1	1.0	2.5	0,177	
17			7.8	7.8	2.5		2.6	0.180	
18			7.7	7.7	2.4		2.1	0.209	
19			7.4	7,4	1,8		2.1	0.210	
20		<1	7.6	7.6	2.7	2.1	2.4	0196	
21		<1	7.7	7.7	3.3	2.8	2.9	0.186	
22	7.0	<1	7.6	7.6	2.5	1.0	2.7	0.179	
23		<1	7.4	7.4	3.5	2.4	2.5	0.206	
24			7.5	7.5	3.2		2.5	0.212	
25			7.6	7.6	3.2		2.9	0,209	
26			7.2	7.2	3.4		2.9	0.185	
27		<1	7.6	7.6	3.2	1.0	2.9	0.205	
28		<1	7.6	7.6	4.5	1.0	2.3	0.187	
29		<1	7.6	7.6	3.5	2.2	2,0	0.189	
30		<1	7.5	7.5	3.1	1.0	2.9	0.194	
31			7.7	7.7	2.3		2.1	0.194	
Total	15.0	9	233,1	233.1	79	23.5	81	6.02	11.68
Mo. Avg.	7.5	0.5	7.5	7.5	2.5	1.3	2.6	0.194	11.68

PLANT STAFFING: Day Shift Operator	Class:	B Certificate N	u: 04653	Name:	Gregory Hooper
Day Shift Operator	Class:	Certificate N	0:	Name:	
Night Shift Operator	Class:	Certificate N	o:	Name:	
Lead Operator	Class:	C Certificate N	o: <u>8863</u>	Name:	Roger Holsapple

# DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period

FLA010900 From: December 01,2010 To: December 31,2010

Facility: Wedgefield WWTF

	Flow (MGD)		Flow (MGD)	Flow	Flow (MGD)	CBOD5	TSS (mg/L)			<del></del>
;	golf course	Zone 1	Zone 2	(MGD) Zone 3	GW makeup well	(mg/L)				
Code	50050	50050	50050	50050	50050	80082	00530		<del> </del> -	<del></del>
Mon. Site	FLW-2	FLW-3	FLW-4	FLW-5	FLW-6	INF-1	INF-1		+	
	0.001	0.00	0.00	0.00	0.00				+	+
2	0.117	0.00	0.00	0.00	0.00				<del> </del>	+
3	0.044	0.00	0.00	0.00	0.00				<del>                                     </del>	+
4	0.000	0.00	0.00	0.00	0.00				<del>                                     </del>	
5	0.000	0.00	0.00	0.00	0.00			<del></del>	<del></del>	<del> </del>
6	0.129	0.00	0.00	0.00	0.00				<del> </del>	┪
7	0.054	0.00	0.00	0.00	0.00				<del> </del>	<del>                                     </del>
8	0.077	0.00	0.00	0.00	0.00	194.0	122.0			<del></del>
9	0.132	0.00	0.00	0.00	0.00			<del></del> -	<del> </del>	<del> </del>
10	0.019	0.00	0.00	0.00	0.00	<del></del>			<del>                                     </del>	<del></del>
11	0.000	0.00	0.00	0.00	0.00			<del></del>	┼┈┈-	
12	0.021	0.00	0.00	0.00	0.00			·-···	<del> </del>	<del> </del>
13	0.017	0,00	0.00	0.00	0.00				<del> </del>	<del> </del>
14	0.000	0.00	0.00	0.00	0.00				<del> </del>	<del> </del>
15	0.024	0.00	0.00	0.00	0.00					<del></del>
16	0.384	0.00	0.00	0.00	0.00				ļ	<del> </del>
17	0.373	0.00	0.00	0.00	0.00				<del> </del>	
18	0.067	0.00	0.00	0.00	0.00			<del></del> ,	<del> </del>	<del> </del>
19	0.275	0.00	0.00	0.00	0.00		<u>-</u>		<u> </u>	<del> </del>
20	0.695	0.00	0.00	0.00	0,00		<del></del> +		<del>                                      </del>	
21	0.380	0.00	0.00	0.00	0.00				<del> </del>	<del> </del>
22	0.551	0.00	0.00	0.00	0.00	202.0	100,0			ļ
23	0.533	0.00	0.00	0.00	0.00					<u> </u>
24	0.672	0.00	0.00	0.00	0.00			<del></del>		<u> </u>
25	0.759	0.00	0.00	0.00	0.00					ļ
26	0.809	0.00	0.00	0.00	0.00			-		
27	0.192	0.00	0.00	0.00	0.00					
28	0.078	0.00	0.00	0.00	0.00					
29	0.341	0.00	0.00	0.00	0.00					
30	0.169	0.00	0.00	0.00	0.00					
31	0.169	0.00	0.00	0.00	0.00					
Total	7.082	0.00	0.00	0.00	0.00	396.0	222.0			
Mo. Avg.	0.228	0.00	0.00	0.00	0.00	198.0	222.0			
	EEINC.				5.00	170.0	111.0			

PLANT STAFFING:						
Day Shift Operator	Class:	В	Certificate No:	04653	Name:	Gregory Hooper
D eu a a			•	<del></del>		
Day Shift Operator	Class:		Certificate No:		Name:	
Night Shift Operator	Class:				, vontre.	
·	<b>₩</b>		Certificate No:		Name:	
Lead Operator	Class:	С	Certificate No:	08863		
				00003	Name:	Roger Holsapple

# Florida Department of Environmental Protection

Twin Towers Office Bldg. 2600 Blair Stone Road Tallahames, Florida 32399-2400

# **GROUND WATER MONITORING REPORT**

Rule 62-522.600(11)

PART I GENERAL INFORMATION	
(1) Facility Name Wedgefield WWTF	
Address 3100 Bancroft Blvd.	
City Orlando Florida	Zip 32833
Telephone Number <u>(407) 259-6991</u>	
(2) The GMS Identification Number 3048P03712	
(3) DEP Permit Number FLA010900	
(4) Authorized Representative Name Roger Holsapple	
Address 6608 Walton Way	
City_Tampa_Florida_	Zip 33610
Telephone Number (813) 359-8327	
(5) Type of Discharge Domestic Waste	
→6) Method of Discharge Golf Course / Sprayfield Irrigati	ion
attachments and that, based on my inquiry of those individu	ed and am familiar with the information submitted in this document and all hals immediately responsible for obtaining the information, I believe that the at there are significant penalties for submitting false information, including the
	Signature of Owner or Authorized Representative
PART II QUALITY ASSURANCE REQUIREMENTS  Sample Organization Advanced Envir	onmental Laboratories
Analytical Lab NELAC Certification #	E84589
NELAC Certification #	
Lab Name Advanced Environmental Laboratories	
Address 528 S. North Lake Blvd. Suite 1016 Altamonte	Springs Florida 32701
Phone Number ( 407) 937-1594	
Printed 4/15/2004	
	CII E



County. Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID. Well Type:

Description

MWB-IR* Background Well Name MW-1

**Golf Course** WAFR # 6006 GM5# 3048A13413

Date Sample Obtained: Time Sample Obtained:

19/27/2010 13.10

Monitoring Period
Was the well purged before sampling!
GW TOC: 66,30

From: October 2010 To: December 2010 X Yes ____ No

	PARM Code	Other Historic PARM Code	Sumple Mensurement (Annlysis Results)	L nits	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Sumples Filtered (L/F/N)
Vater Level Relative to Feet, NGVI)	82545		60.91	Feet	Report	N/A	Field	Quarterly	quitip	N
fitrate, (as N)	00620		0.043U	mgul	Report	0.043	IC: 300 U	Quarterly	pump	2
olids, Total Dissolved(TDS)	70295	70296	210	mg/l	Report	10	£160.1	Quarterly	pump	N
Paloride (as CI)	00940	-	57	mg/l	Report	0.81	IC 300 D	Quarterly	pump	N
oliform, Fecal	74055	_	1.0U	e/100/mi	Report	1,0	SM9222D	Quarterly	bruth	N .
1	00400		4.86	su	Report	N/A	Field	Quarterly:	benub	N
urbidity, Lab - Nepholometric	82079	_	4.02	NTU	Report	0.016	E186.1	Quarterly	pump	N
ded: November 2009**										
dium	00923		40	mg/l.	Report	0.026	SW8466010	Quarterly	pump	N
ihalomethane, Total	82080	-	0.60U	ug/L	Report	0.60	E524.2	Quencily	ետու	N
			·							

^{*}Original well MWB-1 was damaged and replaced by MWB-1R on 06/08/2007. The WAFR ID remains the same

*Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Tribalomethane (TT()\(\frac{1}{2}\)) have been added to the Groundwater Monitoring Plan (GWMP)

COMMENTS AND EXPLANATION:

11/20/2009

County. Facility Name: Permit Number **Orange County** 

Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW 11):

MWB-2

Well Type: Description:

Background Well Name MW-2

Golf Course WAFR # 6005 GMS# 3048A 13414 10/27/2010 13.34

Monitoring Period Was the well purged before sampling?

From: October 2010 To: December 2010 X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Bullder PARM Code	Other Historic PARM Code	Sample Mensurement (Analysis Results)	Calts	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Sample Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545	-	63.82	Feet	Report	N/A	Field	Quarterly	pump	N
Nitrate, (as N)	90620		0.043U	mg/l	Report	0.043	IC: 300.0	Quarterly	Бишф	N
Solids, Total Dissolved(TDS)	70295	70296	70	mg/t	Report	10	E160.1	Quarterly	pump	N
Chloride (as CI)	00940	<u></u>	15	mg/l	Report	0 \$1	IC 300.0	Quantry	bamp	N
Celiform, Fecal	74055	_	1.00	#/100/ml	Report	1.0	SM92221)	Quarterly	pump	N
4	00400	-	4.43	รบ	Report	N/A	Field	Quarterly	pump	N
Furhidity, Lab - Nepholometric	12079		0.09	שדע	Report	0.016	E180.1	Quarterly	brumb	N
dded: November 2009**				را						
odium	00923	-	11	mg/L	Report	0.026	SW8466010	Quarterly	besteb	N
rihalomethane, Total	82060		0.60∪	ug/L	Report	0,60	F:524.2	Quarterly	pump	ĸ
	<del></del>									

^{**}Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Tribulomethaue (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:
11/20/2009

County: Facility Name. Permit Number: Orange County Wedgefield WWTF

FLA010900

GMS# 3048P03712

Well Type: Description: MWB-3 Background

Well Name MW-3 Golf Course

WAFR # 6004

GMS# 3048A13415 18/27/2010-12/20/2010 12:36-11.17

Monitoring Period Was the well purged before sampling? GW TOC:67.90

From: October 2010 To: December 2010 X Yes ____ No

Date Sample Obtained: Time Sample Obtained.

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Mensurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Lised	Sample Filtere (L/F/N
Water Level Relative to Feet, NGVD	82545		64.52/64.65	Feet	Report	N/A	Field	Quarteris	pump	N.
Nitrate, (as N)	00620	-	0.043U	mg/l	Report	0.043	IC 300.0	Quarterly	рипр	N
Solids, Total Dissolved(TDS)	70295	70296	1400	mg/l	Report	10	£160.1	Quarterly	britab	N
Chloride (as C1)	00940		89	mg/l	Report	0.81	IC 300,0	Quarterly	pump	N
Coliform, Fecal	74055		1.0U	#/100/ml	Report	10	SM9222D	Quarterly	brimb	N
1	00480		5.99/6.02	SU	Report	N/A	Field	Quarterly	pump	N
Turbidity, Lab - Nepholometric	\$2079		30.61	NTU	Report	0.016	£180.1	Quarterly	putnp	N
Added: November 2009**										
Sodium	00923		64	mg/L	Report	0.026	SW8466010	Quarterly	ритр	N
rihalomethane, Total	82080		0.60U	ug/l.	Report	0.60	E524.2	Quarterly	bruth	N
	+									

**Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION 11/20/2009

GMS# 3048P03712

County: Facility Name: Permit Number: **Orange County** Wedgefield WWTF

FLA010900

Permit Builder MW ID.

Well Type. Description: MWI-4 Intermediate Well Name MW-4

Golf Course WAFR # 6003 GMS# 304BA13416

Monitoring Period
Was the well purged before sampling?
GWTOC: 67.70

From October 2010 To December 2010

X Yes ___ No

Date Sample Obtained: Lime Sample Obtained:

10/27/2010

Detection Limits Parameter Permit Other Sample Measurement t nits Permit **Analysis Method** Monitoring Sampling Samples Filtered rquirem Frequency Equipmen Used (Analysis Results) t (L/F/N) PARM Code PARM Code 63,05 82545 Report Field Water Level Relative to Fret, NGVD Feet N/A Quarterly Quarterly N pemp 0.0681 Nitrate, (as N) 00620 Report 0.043 IC 300.0 140 Quarerly Solids, Total Disselved (TDS) 70295 70296 mg/l Report 10 E160,1 N 16 pump 00940 Chloride (as CI) Report 0.81 IC 300.0 mg/l N 1.**0**U Quarterly Cotiform Fecal 74055 #/100/m) Report 10 SM9222D N 4.82 Quarterly pump 00400  $\mathbf{s}\mathbf{v}$ Report N/A Field N 101.9 Quarterly DIMIND NTU Report urbidity, Lab - Nepholometric 82079 0.016 E180.1 Added: November 2009** Quarterly pump 00923 mg/l. Report Sodium 0.026 SW8466010 17 N Quarterly braub \$2080 0.60U uar∕l. Report 0.60 E524.2 Tribalomethane, Total N

^{**} Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Tribalomethane (TTTIMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION.

^{11/20/2009} 

County: Facility Name. Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID;

Well Type: Description: MWC-6

MWC-6 Compliance Well Name MW-6 Golf Course WAFR # 6001 GMS# 3048A13418 10/27/2010 11:46

From October 2010 To: December 2010 X Yes ____ No

Munitoring Period Was the well purged before sampling?

Date Sample Obtained; Time Sample Obtained:

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Mensurement (Analysis Results)	Units	Permit Requiremen t	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545	-	58.37	Feet	Report	N/A	Field	Quarterly	pump	N
Nitrate. (as N)	00620		0.043U	mg/l	Report	0.04,3	IC 300.0	Quarterly	brunb	N
Solids, Total Dissolved(TDS)	70295	70296	170	mg/l	Report	10	E160.1	Quarterly	pump	N
Chloride (m. C1)	(10940	1	20	mg/l	Report	0.81	IC 300.0	Quarterly	bump	N
Coliform, Fecal	74055	-	1.00	#/100/mt	Report	1.0	SM9222D	Quarterly	puntp	N
	00490	-	4.97	su	Report	N/A	Field	Quarterly	pump	N
Turbidity, Lab - Nepholometric	R2079	-	11.64	NTU	Report	0.016	E180.1	Quarterly	brush	N
dded: November 2009**										
odium	00923		25	mg/L	Report	0.026	SW8466010	Quarterly	brimb	N
rihalomethanu, Total	82080	1	0.60U	up/L	Report	0 60	E524.2	Quarterly	pump	N

^{***} Hased on the elevated concentrations COMMENTS AND EXPLANATION: 11/20/2009

County. Facility Name Pennit Number Orange County Wedgefield WWTF

FLA010900

GMS# 3048P03712

Permit Hudder MW ID

Description

MWI-7 Well Type.

Intermediate Well Name MW-7

Golf Course WAFR # 6000 GMS# 3048A13419 10/27/2010/12/20/2010 11:19-10:51

Monitoring Period
Was the well purged before sampling?
GWTOC:68.70

From October 2010 For December 2010 X Yes ..... No

Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	( nits	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (1.7F/N)
Water Level Relative to Feet, NGVD	\$2545		63.83/64.05	Fort	Report	N/A	Field	Quarterly	ритр	N N
Nitrate, (as N)	00620		0.43U	mg/l	Report	0.043	IC 300.b	Quarterly	Lessale	N
Solids, Total Dissolved(TDS)	10295	70296	780/650	mg/l	Report	10	E 160.1	Quarterty	pump	N
Chloride (as CI)	00940		290/240	ng/l	Report	0.81	IC 300.0	Quarterly	pump	N
Catiform, Feat	74055		1.0U	#/100'ml	Report	10	SM9222D	Quarterly	pump	N
4	00400	**	5.475.52	SU	Report	N/A	Field	Quarterly	pump	N
Turbidity Lab - Nepholometric	82079	-	40.02	NIU	Keport	0.016	F180.1	Quarterly	pump	Z
Added: November 2009**	<u> </u>			<u> </u>						
Sodium	00923		200/170	mg/L	Report	0.026	5W8466010	Quarterly	brunb	N
Tribalomethans, Total	B24H0	**	0.60U	up/L	Кероп	0 60	L524.2	Quarterly	рипър	N
	<b>_</b>				<u> </u>					
		L		<u> </u>			[			

^{**}Based on the elevated concentrations of these parameters in the influent samples parameters Sodium and Tritialomethane (UTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:
11/20/2009

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Pennit Builder MW tD. Well Type.

MWC-I Compliance Description

Well Name MW-1 On-Site Irrigation WAFR # 32995 GMS# --10/27/2010 08:46

Monitoring Period Was the well purged before sampling? GWTOC: 71.53

From October 2010 To December 2010 X Yes ____ No

Date Sumple Obtained: Time Sample Obtained

		(Analysis Results)		Requirement	Limbs	Method	Frequency	Equipment Used	Filtered (L/F/N)
II2545	-	61.65	Feet	Report	N/A	Field	Quarterly	DUMP	N
00620		0.043U	mg/l	Report	0.043	IC: 300.0	Quarterly	pump	N
70295	70296	62	mg/l	Report	10	£160.1	Quarterly	рипр	N
009-10		16	mg/l	Report	0.81	1C 300,0	Quarterly	pump	N
74055		1.0U	#/100/ml	Report	1.0	SM9222D	Quarterly	рипар	N
00400		4.51	SU	Report	N/A	Field	Quarterly	pump	N
112079		1.68	NTU	Report	0.016	£180.1	Quarterly	វិកឃ្មាំ	Ň
	L		<u> </u>						
00923	-	9.5	mg/l.	Report	0 026	SW8466010	Quarterly	ритр	N N
82080		0.60U	ug/L	Report	0.60	E524.2	Quarterly	pump	N
	00620 70295 00940 74055 00400 82079	00620	00620         -         0.043U           70295         70296         62           00940         -         16           74055         -         1.0U           00400         -         4.51           82079         -         1.68	00620         —         0.043U         mg/l           70295         70296         62         mg/l           00940         —         16         mg/l           74055         —         1.0U         #/100ml           00400         —         4.51         5U           82079         —         1.68         NTU           00923         —         9.5         mg/l	000620	00620         —         0.043U         mg/l         Report         0.043           70295         70296         62         mg/l         Report         10           00940         —         16         mg/l         Report         0.81           74055         —         1.0U         #/100/ml         Report         1.0           00400         —         4.51         SU         Report         N/A           82079         —         1.68         NTU         Report         0.016           00923         —         9.5         mg/L         Report         0.026	00620         —         0.043U         mg/l         Report         0.043         R/ 300.0           70295         70296         62         mg/l         Report         10         £160.1           00940         —         16         mg/l         Report         0.81         RC 300.0           24055         —         1.0U         #/100ml         Report         1.0         SM9222D           00400         —         4.51         SU         Report         N/A         Field           82079         —         1.68         NTU         Report         0.016         F180.1           00923         —         9.5         mg/L         Report         0.026         SW8466010	0.043U   mg/l   Report   0.043   R 300.0   Quarterly	0.043U   mg/l   Report   0.043   IC 300.0   Quarterly   pump

^{**}Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Tribalomethane (ETHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:
11/20/2009

County: Facility Name: Permit Number:

**Orange County** Wedgefield WWTF

FLA010900

GMS# 3048P03712

Permit Builder MW ID: Well Type:

MWC-2 Compliance Description: Well Name MW-2 On-Site Irrigation

WAFR # 32996

GMS# --

Monitoring Period
Was the well purged before sampling?
GWTOC: 72.00

From: October 2010 To: December 2010 X Yes ____ No

Date Sample Obtained: Time Sample Obtained:

10/27/2010 09:15

Parameter Other Historie Sample Measurement ('plts Permit Detection Annlysis Moultoring Sampling Equipment Used Samples Requirement Limits PARM Code Frequency (Analysis Results) Filtered (1./F/N) PARM Co 61.36 Water Level Relative to Feet, NGVD 82545 Feet Report N/A Field Quarterly Quarterly Pump N 0.043U Nitrate, (as N) 00620 mg/l Report 0.043 IC 300.0 PURID N 260 Solids. Total Dissolved(TDS) 70295 70296 Quarterly E160.1 PLAND mg/l Report 10 N Chloride (as Cl) 110 00040 Quarterly Report 0.81 IC 300.0 N 1.00 Coliform, Fecal 74055 Quarterly PUMO #/100/ml Report SM92220 10 N 4.64 00400 Quarterly PUTE Report N/A Field N 1.62 Turbidity, Lab - Nepholometric Quarterly 82079 NTU Report 0.016 E180.1 N Midded: November 2009** odium 00923 Quarterly 75 mg/L Ropon pump 0.026 SW8466010 Tribalomethune, Total Quarterly 82080 0.60U ug/L K*e*port PURTE 0.60 E524.2 N

^{**}Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:

^{11/20/2009} 

County: Facility Name: Permit Number: Orange County Wedgefield WWTF

FLA010900

GMS# 3048P03712

Permit Builder MW ID: Well Type: Description:

MWC-3 Compliance

Well Name MW-3 On-Site Irrigation WAFR # 32997

GMS# --

Monitoring Period Was the well purged before sampling? GWTOC: 72.26

From: October 2010 - To: December 2010 - X. Yes ____ No

Date Sample Obtained: Fine Sample Obtained

10/27/2010 09:59

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	l mits	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N)
Witer Level Relative to Feet, NGVI3	82545		65.93/66.87	Foei	Report	N/A	Field	Quarterly	puntp	N
Nitrate, (as N)	00620		0.043U	mg/l	Report	0.043	IC 300.0	Quarterly	pump	N
Solids, Total Dissolved(TDS)	70295	70296	620/520	mg/l	Report	10	£160.1	Quarterly	brush	N
Chloride (as Cl)	(9)940	_	250/230	nig/l	Report	0.81	IC 300:0	Quarterly	pump	N
Coliform, Fecal	74055		1.00	#/100/ml	Report	10	SM9222D	Quarterly	brub	N
1	004(4)		5.55/5.47	SU	Report	N/A	Field	Quarterly	pump	N
Turbidity, 1.sb - Nepholometric	H2079		1.57	ัทบ	Report	0.016	£180,1	Quarterly	ритр	N.
Added: November 2009**									<u> </u>	
iodium	00923		140	mg/L	Report	0.026	SW8466010	Quarterly	bnuti	N
ribalomethane, Total	82080	-	0,60U	ug/L	Report	0 60	E524.2	Quarterly	pump	N
					]					

^{**}Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Tribalomethane (TTIMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:
11/20/2009

County. Facility Name: Orange County Wedgefield WWTF FLA010900

Permit Builder MW ID: Well Type:

MWP-1 Piezometer

Permit Number:

GMS# 3048P03712

Description:

Well Name MWP-1* On-Site Irrigation WAFR # 55881 GMS# --

Monitoring Period

From. October 2010

To. December 2010

Date Sample Obtained: †0/13/10-11/24/10-12/10/10 Time Sample Obtained:

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Messurement (Analysis Results)	[/alts	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N
Water Lovel Relative to Feet, NGVD  1* Month of Quarter	82545		66.64	Feet	Керон	N/A		Stilest Water Level Meter	
Water Level Relative to Feet, NGVD	82545		63.72	Feet	Report	N/A		Solinal Water Level Meter	
water Level Relative to Feet, NOVD  3 rd Month of Quarter	82545		63,56	Feet	Report	N/A		Solinst Water Level Meter	

DEP Form 62-620 910cHr, officeive November 29 (1991

COMMENTS AND EXPLANATION:

* MWP-1 is the well labeled "Well #1" as shown on Sheet C-12 dated 12/1/98 4/20/2004

County. Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID: Well Type:

Description:

MWP-2 Piezometer

Well Name MWP-2 On-Site Irrigation WAFR # 55883

GMS# --

**Montoring Period** 

From: October 2010

To: December 2010

Date Sample Obtained:10/13/10-11/24/10-12/10/10 Time Sample Obtained:

Was the well purged before sampling? Yes X No

Parameter	Permit Bullder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	l'nin	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Goed	Samples Fittered (1./F/N)
Water Level Relative to Feet, NGVD  1" Month of Quarter	82545	<b></b>	63.87	Feet	Report	N/A		Solipst Water Level Meter	
Water Level Relative to Feet, NGVD  2nd Month of Quarter	82545	_	64.73	Feel	Report	N/A		Solinst Water Level Mater	
aner Level Relative to Feet, NGVD	82545		64.62	Feet	Report	N/A		Solinst Water Level Meter	
					ļ <u></u>				
								<del></del>	
	<u> </u>								
				<u> </u>	-				
	<del> </del>	<del>                                     </del>		<del> </del>					

COMMENTS AND EXPLANATION:
* MWP-2 is the well labeled "Well #2" as shown on Sheet C-12 dated 12/1/98
4/20/2004

#### 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 completing the DMR. Hard empires analysis electronic explica of the required pairs 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 shall be mailed to the address printed on the DMR 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 or reclaimed water data. All domestic wastewater Sacilities 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 raw data are different.

CODE	DESCRIPTION/INSTRUCTIONS
ANC	Analysis not conducted
DRY	Dry Well
FLD	Flood diseaster.
IFS	Insufficient flow for sampling
LS	Lust sample.
MNR	Monitoring not required this period.

CODE	DESCRIPTIONANSTRUCTIONS
NOD OPS OTH SEF	No discharge frontto site: Operations were shutdown so no sample could be taken. Other: Please exter an explanation of why monitoring data were not available. Sampling equipment failure.

When reporting unalytical results that fall below a Inhoratory's reported method detection limits or practical quantification limits, the following instructions should be used:

- Results greater than or equal to the PQL shall be reported as the measured quantity.

  Results less than the PQL and greater than or equal to the MDL shall be reported as the laboratory's MDL value. These values shall be deemed equal to the MDL when necessary to calculate an average for that parameter. and when determinant complice with permit limits.
- any wiper occurring comprising comprising with permit times.

  Results less than the MDL state to exported 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 the effluent limit, whichever is lower, shall be used for that sample when necessary to calculate an average for that parameter. Values less than the MDL are considered to demonstrate compliance with an effluent limitation.

#### PART A -DISCHARGE MONITORING REPORT (DMR)

Part A of the DMR is comprised of one or more sections, each having its own header information. Facility information is preprinted in the header as well as the monitoring group number, whether the limits and monitoring thements are interiment or final, and the required submittal frequency (e.g. monthly, quarterly, etc.). Submit Part A based on the required reporting frequency in the header and the instructions shown in the permit. The swing should be completed by the permittee or authorized representative:

No Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data or codes to be entered for all of the parameters on the DMR for the entire monitoring group number; however, if the monitoring group includes other monitoring locations (e.g., influent sampling), the "NOD" code should be used to individually denote those parameters for which there was no discharge Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

Sample Measurement: Before filling in sample measurements in the table, check to see that the data collected correspond to the limit indicated on the DMR (i.e. interim or final) and that the data correspond to the monitoring group number in the header. Enter the data or calculated results for each parameter on this row in the non-shaded area above the limit. Be sure the result being entered corresponds to the appropriate statistical base code (e.g.

annual 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 number of times the measurement was made in the apace above the shaded area.

Sample Type: The shaded areas in this column contain the type of sample (c.g. grab, composite, continuous) required by the permit. Enter the actual sample type that was taken in the space above the shaded area.

Signature: This report must be signed in accordance with Rule 62-62/305, F.A.C. Type or point the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

Comment and Explanation of Any Violations: Use this area to explain may exceedances, any upset or by-pass events, or other items which require explanation. If more space is needed, reference all attachments in this area.

#### PART B. DAILA 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 were collected and analyzed for January is data sheets for all day(s) that samples were collected. Record the data in the units indicated. Table 1 in Chapter 62-qualifier codes should be used and an explanation provided where appropriate.

CODE	DESCRIPTION/INSTRUCTIONS
	The compound was manyzed for but not detected.
	Value reported is the mean (average) of two or more determinations
<b></b>	Estenated value, value not accurate
18	Sample held beyond the actual holding time.
<u> </u>	Laboratory analysis was from an improperty of improperty nevers of comple

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 mane, certificate number, and class of all state certified operators operating the facility during the monitoring period. Use additional sheets as necessary

#### PART B - GROUND WATER MONITORING REPORT

Monitoring Period: Enter the month, day, and year for the first and last day of the monttoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed. Thus Sample Obtained: Enter the data the sample was taken. Also, check whether or not the well was purged before sampling.

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

Beterfield Elimits: Become the detection limit of the minimum detection limit, indicate that.

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

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. artifit, bucker/bailer, centritugal pump, etc.)

Samples Fibered: Indicate whicher 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 peint the name and trile of the signing official toclude the selephone number where the official may be reached in the event there are 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 area.

SPECIAL INSTRUCTIONS FOR LIMITED WET WEATHER DISCHARGES

ow (Limited Wet Weather Discharge): Enter the measured average flow rate during the period of discharge or divide gallons discharged by duration of discharge (converted into days). Record in million gallons per day . wan

(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 based on two measurements; one made at the start and one made at the end of the discharge period. Measurements are to be made at the upstream gauging nation described in the permit.

Actual Stream Dilution Ratio; To calculate the Actual Stream Dilution Ratio divide the average discharge instream flow rate by the average discharge flow rate. Enter the Actual Stream Dilution Ratio divide the average discharge instream flow rate. Enter the Actual Stream Dilution Ratio on accurate to the nearest 0.1.

(a) 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 Stream Dilution Factor was greater than the Stream Dilution Factor was greater than the Stream

CBODs: Enter the average CBODs of the reclaimed water discharged during the period shown in duration of discharge

CBOD₂: Enter the average CBOD₂ of the reclaimed water discharged during the period shown in duration of discharge.

TENS: Enter the average TEN of the reclaimed water discharged during the period shown in duration of discharge.

Actual Rainfall: Enter the actual minfall for each day on Part B. Enter the actual consultative rainfall to date for this calendar year and the actual total monthly minfall on Part A. The cumulative rainfall to date for this calendar year and the actual total monthly minfall on Part A. The cumulative rainfall to date for this calendar year is the total amount of rain, in inches, that has been recorded since January 1 of the current year through the month for which this DMR comains data.

No. of Days LWWD Activated During Calendar Year: Enter the cumulative rainfall year is the sum of min in makes, which fell during the average rainfall year to manuary through the month for which this DMR contains data.

No. of Days LWWD Activated During Calendar Year: Enter the cumulative rainfall is the limited wet weather discharge was accivated since January 1 of the current year.

Reason for Bischarge; Attach to the DMR a brief explanation of the factors contributing to the need to accivate the finited wet weather discharge.

# 2011 DMRs

#### DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed shall this report to: Department of Environmental Protection, Control District, 3319 Magnire Boulevard Suite 232, Orlando, FL, 32803-3767

PERMITTEE NAME: Pluris-Wedgefield
MAILING ADDRESS: 6608 Walton Way
Tampa Florida, 33610

PERMIT NUMBER

CLASS SIZE:

LIMIT:

FLA010900

Final N/A

REPORT: GROUP:

Monthly

FACILITY: LOCATION:

Wedgefield WWTF 3100 Bancroft Boulevard Orlando, FL

MONITORING GROUP NUMBER: R-001
MONITORING GROUP DESC: Public Access Rouse, including Influent

Domestic

COUNTY:

NO DISCHARGE FROM SITE: MONITORING PERIOD

From: January 01,2011 to January 31,2011

Parameter		Quantity or Loading		Units	Qua	lity or Concentr	etion	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0.211		MGD					0	5 Days/Week	Flow meters and totalizers
PARM Code 50050 Y Mon.Site No. FLW-I	Permit Requirement	0.368 (An.Avg.)		MGD						5 Days/Week	Flow moters and metalisers
Flow	Sample Measurement	0.199		MGD					0	5 Days/Week	Flow meters and totalizers
PARM Code 50050 I Mon-Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)		MOD						5 Days/Week	Flow meters and totalizem
BOD, Carbonaceous 5 day, 20C	Sample Measurement				7.6				0	Every Two Weeks	8-hour FPC
RM Code 80082 Y	Permit Requirement				20.0 (Ал.Ауд.)			rag/L		Every Two Weeks	1-hour FPC
BOD, Carbonaceous 5 day, 20C	Sample Monsurument				6,5	7.0		mg/l	0	Every Two Weeks	8-hour FPC
PARM Code 80082 A Mon.Site No. EFA-1	Permit Requirement				30,0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Semple Measurement				6.4			Ngez	1	4 Days/Week	Grab
PARM Code 00530 B	Permit Requirement				5.0 (Max.)			mg/L		4 Days/Work	Grab
pН	Sample Measurement				7,2	7.9		SU	0	5 Days/Week	Grab
PARM Code 00400 A	Permit Requirement				6.0 (Min.)	8.5 (Max.)		\$U		5 Days/Wook	Grab

1 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 property gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Roger Holsappie Lend Operator	13 Halande	407-869-1919	2011/2/22

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

PARM Code 00530 B - The 6.4 result is a possible lab error. The turbidity at the time of the sample was 1.8 mg/l

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

#### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

MONITORING GROUP NUMBER: MONITORING PERIOD From: January 01,2011 to January 31,2011

R-001

PERMIT NUMBER: FLAU10900

Parameter		Quantity o	r Loading	Units	Qu	ality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Feoul, % less then detection	Sample Measurement				100%		PER- CENT	0	4 Days/Week	Grab
PARM Code \$1005 A Mon.Site No. EFA-I	Permit Requirement				75 (Min.)		PER- CENT		4 Days/Week	Grab
Coliform, Fecal	Sample Measurement				0.5		#/100M1.	0	4 Days/Week	Grab
PARM Code 74055 A Mon.Site No. BFA-1	Permit Requirement		_		25 (Max.)		#/100MIL		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Semple Measurement				1.0		mg/L	0	Continuous	Meter
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)		mug/L		Continuous	Meier
Turbidity	Sample Mussurement				2.9		NTU	0	Continueus	Meter
PARM Code 00070 B Mon.Site No. EFB-1	Pormit Requirement				Report (Max.)		טדא		Cominuous	Moter
Nitrogen, Nitrate, Total (as N)	Sample Measurement				0.35		me/L	0	Monthly	8-hour FPC
ARM Code 00620 A Mon.Site No. EFA-1	Permit Requirement				12.0 (Max.)		mp1.		Monthly	8-hour FPC
Flow (from groundwater well)	Sample Measurement	0.00		MGD				0	Continuous	Flow meters at
PARM Code 50050 P Mon.Site No. PLW-6	Permit Requirement	Report (An.Avg.)		MGD					Continuous	Flow meters an
Flow (from groundwater well)	Sample Measurement	0.00	0,00	MGD				0	Continuous	Flow meters of
PARM Code 50050 Q Mon, Site No. FLW-6	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD			1		Continuous	Flow meters an
Flow (total to zone 3)	Sample Measurement	0.000		MGD				0	Costinuous	Flow meters a
PARM Code 50050 R Mon.Site No. PLW-5	Permit Regultement	0.0232 (An.Avg.)		MOD					Continuous	Flow maters an
Flow (total to zone 3)	Sample Measurement	0.000	0.000	MGD				0	Centinuous	Flow meters at
PARM Code 50050 S Mon.Site No. FLW-5	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MOD					Continuous	Flow meters an
Flow (total to zone 2)	Sample Measurement	0.000		MGD				0	Contlaueus	Flow meters at
PARM Code 50050 T Mon.Site No. FLW-4	Permit Requirement	0.0634 (An.Avg.)		MGD					Continuous	Flow maters an
Flow (total to zone 2)	Sample Measurement	0.000	0.000	MGD				0	Continuous	Flow meters an
PARM Code 50050 U Mon.Site No. FLW-4	Permit Requirement	Report (Mo.Avg.)	Report (3-Ma.Avg.)	MGD				1	Continuous	Flow meters an

COMMENTS: Flow was going to reuse on the 12th of February when NO3 result was 12,12 1)EP Form 62-620 910(10), Fflective November 29, 1994

## **DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY:

Wedgefield WWTF

MONITORING GROUP NUMBER: R-001 MONITORING PERIOD From: January 01,2011 to January 31,2011

PERMIT NUMBER: FLA010900

Parameter		Quantity (	or Loading	Units	Qu	ality or Concen	tration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (total to zone 1)	Sampic Measurement	0.000		MGD					•	Continuous	Flow meters and totalizers
PARM Code 50050 V Mon.Site No. FLW-3	Permit Requirement	0.0114 (An.Avg.)		MOD						Continuous	Flow meters and totalizers
Flow (sotal to zone 1)	Sample Measurement	0.000	0.000	MGD					0	Continuous	Flow meters and totalizers
PARM Code 50050 W Mon.Site No. FLW-3	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MOD						Continuous	Flow meters and sotalizers
Flow (total to golf course)	Sample Measurement	0.189		MGD					9	Continuents	Flow meters and totalizers
PARM Code 50050 Mon.Site No. PLW-2	Permit Requirement	0.270 (An.Avg.)		MGD						Continuous	Flow meters and totalizers
Flow (total to golf course)	Sample Measurement	4,193	0.166	MGD					0	Continuens	Flow tneters and totalizers
PARM Code 50050 Mon.Site No. FLW-2	Penuit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD						Continuous	Plow meters and totalizers
BOD, Carbonacsous 5 day, 20C	Sample Measurement				213.5			mg/L	0	Every Two Weeks	8-hour FPC
ARM Code 80082 G	Permit Requirement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
solide, Total Suspended	Sample Messurement				1.8			mp/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement				Report (Mo.Avg.)			ang/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Manuscrement				\$3.5			Percent	0	Monthly	Calculated
PARM Code 00180 1 Mon.Site No. FLW-1	Permit Requirement				Report			Percent		Monthly	Calculated
	Sample Measurement			·							
	Pennit Requirement					]					
	Sample Measurement										
	Persuit Requirement										
	Sample Measurement										
	Permit Requirement										

¹ Initially, flow is limited to 0.270 MGD AADF. However, the flow may be increased after completion of the second treatment plant and pending the results the required load test. DEP Form 62-620.910(10). Effective November 29, 1994.

# DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period FLA010900

From: January 01,2011

To: January 31,2011

Facility: Wedgefield WWTF

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ML)	pH (Max)	pH (Min)	TRC (For Disinfect.) (mg/L)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Total (as N) (mg/L)
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
Mon. Site	EFA-1	EFA-I	EFA-1	EFA-I	EFA-1	EFB-1	EFB-I	FLW-I	EFA-1
1			7.6	7.6	4.5		2.7	0,220	
2			7.4	7.4	4		2.5	0.196	
3		<1	7.7	7.7	42	2.6	2.4	0.240	
4	-	<1	7.7	7.7	4.7	1.0	2.4	0.178	
5	7.0	<1	7.7	7.7	5	1.0	2.5	0.195	0.35
6		<1	7.6	7.6	4.5	6.4	2.7	0.187	
7			7.7	7.7	1.8		1.2	0.191	
8			7.5	7.5	4.6		2.9	0.216	
9			7.6	7.6	1.3		2.2	0.185	
10		<1	7.6	7.6	4.2	3.6	2.5	0.242	
11		<1	7.6	7.6	2.2	2.8	2.4	0.201	
12		<1	7.5	7.5	3.5	1.0	2.6	0.187	
13		<1	7.5	7.5	1	1.0	2.5	0.128	
14			7.8	7.8	ī		2.9	0.223	
15			7.9	7.9	1		2.9	0.194	
16			7.8	7.8	1		2.8	0,202	
17		<1	7.5	7.5	1.1	1.6	2.9	0.202	1
18		<1	7.7	7.7	1	2.7	2.9	0.294	
19	6.0	<1	7.7	7.7	1	1.2	2.9	0.201	
20		<1	7.5	7.5	1_1_	1.0	2.9	0.172	<u> </u>
21			7.2	72	1		2.9	0.214	
22			7.3	7.3	3.4		2.9	0.211	
23			7.3	73	3.5		2.9	0.210	
24		<1	7.4	7.4	3	1,0	2.9	0.228	
25		<1	7.7	7.7	4.2	1.0	2.2	0.181	
26		<1	7.5	7.5	1	1.0	2.9	0.059	
27		</td <td>7.6</td> <td>7.6</td> <td>2.5</td> <td>1.0</td> <td>2.9</td> <td>0.193</td> <td></td>	7.6	7.6	2.5	1.0	2.9	0.193	
28	*		7.4	7.4	1.3		2.9	0.207	
29			7.7	7.7	1		2.9	0.19}	<u> </u>
31			7.7	7.7	1.5		2,9	0.217	
31		<1	7.5	7.5	2.7	1.0	2.9	0.220	
Total	13.0	8.5	234.9	234.9	77.7	30.9	82.9	6.185	0.35
Mo. Avg.	6.5	0.5	7.5	7.5	2.5	1.8	2.67	0.199	0.35

## PLANT STAFFING:

Day Shift Operator	Class:	В	Certificate No:	4653	Name:	Gregory Hooper
		<del></del>				Ologory Hooper
Day Shift Operator	Class:		Certificate No:		Name:	- <del></del>
Night Shift Operator	Class:		Certificate No:		Name:	
					1 vanist,	
Lead Operator	Class:	<u>c</u>	Certificate No:	B863	Name:	Roger Holsapple

# DAILY SAMPLE RESULTS - PART B

Permit Number:

FLA010900

Monitoring Period From: January 61,2011

To January 31,2011

Facility: Wedgefield WWTF

F	Flow (MGD)	Flow (MCD)	Flow (MGD)	Firm (MGD)	Flow (MGD)	CBOD5	TSS (mg/L)			
	golf course		Zone 2	Zone 3	GW makeup	(mg/L)	(/			
ļ	<b>S</b>				well					
	50050	conen	50050	50050	50050	80082	00530			
Code Mon, Site	50050 FLW-2	50050 FLW-3	FLW-4	FLW-5	FLW-6	INF-1	INF-1			
1	0.106	0.00	0.00	0.00	0.00					
2	0.234	0.00	0.00	0.00	0.00					
3	0.120	0.00	0.00	0.00	0.00					
4	0.133	0.00	0.00	0.00	0.00				_	
5	0.084	0.00	0.00	0.00	0.00	212.0	250.0			
6	0.023	0.00	0.00	0.00	0.00					[
7	0.067	0.00	0.00	0.00	0.00					
8	0.009	0.00	0.00	0.00	0.00					
9	0.001	0.00	0.00	0.00	0.00					
10	0.086	0.00	0.00	0.00	0.00					
11	0.111	0.00	0.00	0.00	0.00					
12	0.001	0.00	0.00	0.00	0.00					
13	0.000	0.00	0.00	0.00	0.00					
14	0.709	0.00	0.00	0.00	0.00					
15	0.076	0.00	0.00	0.00	0.00			·		
16	0.000	0.00	0.00	0.00	0.00					
17	0.054	0.00	0.00	0.00	0.00					
18	0.014	0.90	0.00	0.00	0.00					
19	0.000	0.00	0.00	0.00	0.00	215.0	248.0			
20	0.00i	0.00	0.00	0.00	0.00					
21	0.000	0.00	0.00	0.00	0.00					
22	0.000	0.00	0.00	0.00	0.00					1
23	0.000	0.00	0.00	9.00	0.00					
24	0.017	0.00	0.00	0.00	0.00					
25	0.543	0.00	0.00	0.00	0.00					
26	0.618	0.00	0.00	0.00	0.00					
27	0.659	0.00	0.00	0.00	0.00					
28	0.526	0.00	0.00	0.00	0.00					]
29	0.000	0.00	0.00	0.00	0.00					
30	0.000	0.00	0.00	0.00	0.00					
31	0.001	0.00	0.00	0.00	0.00					
Total	4.193	0.00	0.00	0.00	0.00	427.0	498.0			
Mo. Avg.	0.135	0.00	0.00	0.00	0.00	213.5	249.0			

# PLANT STAFFING:

Day Shift Operator	Class:	В	Certificate No:	4653	Name:	Gregory Hooper
		<del></del>				
Day Shift Operator	Class:		Certificate No:		Name:	
Night Shift Operator	Class:		Certificate No:		Name:	
Lead Operator	Class:	<u>c</u>	Certificate No:	8863	Name:	Roger Holsapple

# 7DEPARTMENT 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: Pluris-Wedgefield 6608 Walton Way Tampa Florida, 33610

FACILITY:

COUNTY:

LOCATION:

Wedgefield WWTF

3100 Bancroft Boulevard Orlando, FL

Orange

PERMIT NUMBER

LIMIT:

CLASS SIZE:

FLA010900

Final N/A

REPORT: GROUP:

Monthly Domestic

MONTTORING GROUP NUMBER: R-001 MONITORING GROUP DESC:

Public Access Reuse, including Influent

NO DISCHARGE FROM SITE: MONITORING PERIOD

From: February 01,2011

To: February 28,2011

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0.211		MGD			<u> </u>		۰	5 Days/Week	Flow meters an
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Requirement	0.368 (An.Ayg.)		MGD						5 Days/Week	Flow meters and totalizers
Flow	Sample Measurement	0.105		MGD					Û	5 Days/Week	Flow meters an
PARM Code \$0050 1 Mon.Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)		MQD						5 Days/Week	Flow meters and totalizers
BOD, Carbonaccous 5 day, 20C	Sample Measurement			<u>                                     </u>	7.4					Every Two Weeks	8-hour FPC
ARM Code 80082 Y	Permit Requirement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour FPC
OD, Carboneceous 5 day, 20C	Semple Measurement				5.0	8.0		##g/1	0	Every Two Weeks	8-bour PPC
PARM Code 80082 A Mon.Site No. EFA-I	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Wooks	8-hour FPC
Solids, Total Suspended	Sample Measurement				7,1			10,001	1	4 Days/Week	Grab
PARM Code 00530 B Mon.Site No. EPB-1	Permit Requirement				5.0 (Max.)			nig/L		4 Days/Wook	Orab
pH	Sumple Measurement				7.2	7.8		\$U	0	5 Days/Week	Grab
PARM Code 00400 A Mon,Site No. BFA-1	Permit Requirement				6.0 (Min.)	8.5 (Max.)		\$U		5 Days/Week	Greb

I certify under pensity of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EX	CECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Roger Holsapple	Lead Operator	My Carry 10	407-259-6991	2011/03/16

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): PARM CODE 00530: TSS result of 7.1 is due to sampler error. The sample was taken during a backwash cycle with a Turbidity of 2.7

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

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# DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

R-001

PERMIT NUMBER: FLA010900

MONITORING GROUP NUMBER. MONITORING PERIOD From: February 01,2011

m: February 01,2011	To: February 28,2011

Parameter		Quantity	or Loading	Units	<del></del>	uality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Coliforn, Fecal, % less than detection	Sample Measurement			11	15%		PER- CENT	0	4 Days/Week	Grab
PARM Code 51005 A Mon.Site No. EFA-1	Permit Requirement				75 (Min.)		PER- CENT		4 Days/Week	Grab
Coliform, Fecal	Sample Messurement				3		8/100M1L	0	4 Days/Week	Grab
PARM Code 74055 A Mon.Site No. EFA-I	Permit Requirement				25 (Max.)		#/IOOML		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				L.O		mg/L	0	Сопілнова	Meter
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				l.0 (Min.)		mg/L		Continuous	Meter
Turbidity	Sample Measurement				2.9		Mrc	0	Ceatinuous	Meter
PARM Code 00070 B Mon, Site No. EFB-1	Permit Requirement				Report (Max.)		טדא		Continuous	Meter
Nitrogen, Nitrate, Total (as N)	Sample Measurement				7.47		mg/L	8	Monthly	8-hour FPC
PARM Code 00620 A	Permit Requirement				12.0 (Max.)		mg/L		Monthly	8-hour FPC
/w (from groundwater well)	Sample Measurement	0.000		MGD	, <u> </u>			0	Continuous	Flow meters a
PARM Code 50050 P Mon.Site No. FLW-6	Permit Requirement	Report (An.Avg.)		MGD				$\dashv$	Continuous	Flow meters an
Flow (from groundwater well)	Sample Measurement	0.000	6.000	MGD			_	0	Continuous	Flow meters at
PARM Code 50030 Q Mon,Site No. FLW-6	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD	· · · · · · · · · · · · · · · · · · ·			7	Continuous	Flow meters as
Flow (total to zone 3)	Sample Measurement	0.000		MGD	****			0	Continuous	Flow meters as
PARM Code 50050 R Mon, Site No. FLW-5	Permit Requirement	0.0232 (An.Avg.)		MGD			1 1	+	Continuous	Flow maters an
Flow (total to zone 3)	Sample Measurement	0.000	0.800	MGD				0	Continuous	Flow meters as
PARM Code 50050 S Mort. Site No. FLW-5	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo Avg.)	MGD				$\neg$	Continuous	Flow meters an
Flow (total to zone 2)	Sample Memurement	0.000		MGD				0	Continuous	Flow meters an
PARM Code 50050 T Mon,Site No. FLW-4	Permit Regulæment	0.0634 (An,Avg.)		MGD			1	-	Continuous	Flow meters an
Flow (total to zone 2)	Sample Measurement	6.000	0.000	MGD			<b>-</b>	•	Сояприемя	totalizers Flow meters as
PARM Code 50050 U Mon. Site No. FLW-4	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow meters and totalizers

COMMENTS:

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

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## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wodgefield WWTF

MONITORING GROUP NUMBER: R-001 MONITORING PERIOD From: February 01,2011 To: Fel

To: February 28,2011

PERMIT NUMBER: FLA010900

Parameter	Quantity or Loading		Units	Units Quality or Concentr		atration	Units	No. Ex.	Frequency of Analysis	Sample Type	
Flow (total to zone 1)	Sample Measurement	0.000		MGD					0	Continuous	Flow meters as
PARM Code 50050 V Mon.Site No. FLW-3	Permit Requirement	0.0114 (An.Avg.)		MOD		-				Continuous	Flow meters and totalizers
Flow (total to zone 1)	Sample Measurement	0.000	040.0	MGD				_	B	Continuous	Flow meters as
PARM Code 50050 W Mon.Site No. FLW-3	Permit Requirement	Report (Mo.Ave.)	Report (3-Mo.Avg.)	MOD						Continuous	Flow meters an intelligens
Flow (total to golf course)	Sample Measurement	0.196		MGD	· · · · · · · · · · · · · · · · · · ·				•	Continuent	Flow meters at tetalizers
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	0.270 (An.Avg.)		MQD						Continuous	Flow meters and totalizers
Flow (total to golf course)	Sample Measurement	0.198	0.186	MGD					0	Continuous	Flow meters an totalizers
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MOD			<u> </u>			Continuous	Flow meters an totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement				193.5		ļ	mg/L	•	Every Two Weelu	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Requirement				Report (Mo,Avg.)	<u></u> _		mg/L		Every Two Weeks	8-hour FPC
lids, Total Suspended	Sample Measurement				140.0			mg/L	0	Every Two Weeks	8-bour FPC
PARM Code 00530 G Mon. Site No. INF-1	Permit Requirement				Report (Mo.Avg.)	ļ	ļ	rug/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement				52.17	ļ		Percent	0	Monthly	Calculates
PARM Code 00180 1 Man.Site No. FLW-1	Permit Requirement		<u> </u>		Report	ļ	<u> </u>	Percent	$\Box$	Monthly	Calculated
	Sample Monurement								_		
	Permit Requirement						<del> </del>				
	Sample Measurement Permit						<del></del>				
	Requirement						<u></u>	_			
	Sample Measurement Permit										
	Requirement		L			<u> </u>					

Initially, flow is limited to 0.270 MGD AADF. However, the flow may be increased after completion of the second treatment plant and pending the results the required load test. DEP Form 62-620.910(10), Effective November 29, 1994

# DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period FLA010900

From: February 01,2011

To: February 28,2011

Facility: Wedgefield WWTF

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ML)	рН (Мях)	pH (Min)	TRC (For Disinfect.) (mg/L)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Tota (as N) (mg/L
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFB-1	EFB-1	FLW-1	EFA-I
1	2.0	<1	7.5	7.5	2.3	1.6	2.3	0.192	7.47
2		<1	7.4	7.4	4.5	1.0	2.9	0.196	
3		<1	7.5	7.5	4	0.1	2.9	0.194	
4			7.4	7.4	2.1		2.2	0.208	
5			7.6	7.6	2.7		2.1	0.193	
6			7.6	7.6	3.5		2.9	0.220	
7		<}	7.5	7.5	3	1.0	2.9	0.246	
8		<1	7.3	7.3	3	1.5	2,9	0.202	
9		<1	7.6	7.6	1.8	1.1	2.9	0.151	
10		<1	7.5	7.5	1	1.5	2.9	0.012	
11			7.6	7.6	3.4		2.8	0.190	
12			7.2	7.2	1		2.5	0.191	
13			7.6	7.6	1		2.9	0.195	
14		<1	7.5	7.5	1.2	1.0	2.9	0.158	
15		<1	7.6	7.6	4	1.0	2.7	0.188	
16	8.0	<1	7.4	7.4	3.2	1.0	3.2	0.175	
17		<1	7.2	7.2	3.5	3.4	2.9	0.193	
18			7.3	7.3	3.5		1.8	0.121	
19			7.6	7.6	3.1		2.9	0.161	
20			7.6	7.6	1		2.9	0.200	1
21		3	7.8	7.8	3.9	4.1	2.2	0.234	
22		1	7.8	7.8	2.5	7.1	2.7	0.183	
23		<1	7.6	7.6	3.3	4.6	2.6	0.192	
24		<1	7.7	7.7	3.5	1.0	2.9	0.146	
25			7.6	7.6	1.3		2.9	0.238	
26			7.4	7.4	1.4		2.9	0.231	
27			7.6	7.6	2.5		2.9	0.150	1
28		<1	7.8	7.8		4.1	2.9	0.233	
								1	
	<u>-</u>								
Total	10.0	1)	210.8	210.8	72.2	36.0	76.3	5.193	7.47
Mo. Avg.	5.0	5.5	7.5	7.5	2.5	2.25	2.7	0.185	7,47

Day Shift Operator	Class:	B Certificate No:	4653	Name:	Gregory Hooper
Day Shift Operator	Class:	Certificate No:		Name:	
Night Shift Operator	Class:	Certificate No:		Name:	
Lead Operator	Class:	C Certificate No:	8863	Name:	Roger Holsapple

# DAILY SAMPLE RESULTS - PART B

Permit Number:

FLA010900

Monitoring Period From: February 81,2011 To: February 28,2011

Facility: Wedgefield WWTF

	Flow (MGD) golf course	Flow (MGD) Zone 1	Flow (MGD) Zone 2	Flow (MGD) Zone 3	Flow (MGD) GW makeup well	CBOD5 (mg/L)	TSS (mg/L)	<u></u>		
Code	50050	50050	50050	50050	50050	80082	00530		<u> </u>	
Mon. Site	FLW-2	FLW-3	FLW-4	FLW-5	FLW-6	INF-I	INF-1			
l l	0.000	0.00	0.00	0.00	0.00	210.0	234.0			
2	0.000	0.00	0.00	0.00	0.00					
3	0.025	0.00	0.00	0.00	0.00				1	
4	0.692	0.00	0.00	0.00	0.00				<del>                                     </del>	
5	0.026	0.00	0.00	0.00	0.00					<del>                                     </del>
6	0.000	0.00	0.00	0.00	0.00				<del> </del>	<del>                                     </del>
7	0.115	0.00	0.00	0.00	0.00				<del></del>	<del>                                     </del>
8	0.041	0.00	0.00	0.00	0.00			·		
9	0.117	0.00	0.00	0.00	0.00		1		<del> </del>	<del> </del>
10	0.689	0.00	0.00	0.00	0.00				<del> </del>	<del>                                     </del>
11	0.689	0.00	0.00	0.00	0.00		<u> </u>		<del> </del>	<del> </del>
12	0.035	0.00	0.00	0.00	0.00	<del></del> -		·	<del> </del>	
13	0.000	0.00	0.00	0.00	0.00	· · · · ·				<del> </del> -
14	0.160	0.00	0.00	0.00	0.00	<del></del>			<del> </del>	<del> </del>
15	0.140	0.00	0.00	0.00	0.00		<del>                                     </del>		<del> </del>	<del> </del>
16	0.704	0.00	0.00	0.00		177.0	46.0		<del> </del>	<del> </del>
17	0.032	0.00	0.00	0.00	0.00			<del></del>	<del>-</del>	ļ
18	0.088	0.00	0.00	0.00	0.00			<del></del>	<del> </del>	
19	0.022	0.00	0.00	0.00	0.00		<del>  </del>		<del> </del>	<u></u>
20		0.00	0.00	0.00	0.00				<del>}</del>	<u> </u>
21	0.000	0.00	0.00	0.00	0.00					<b></b>
22	0.110	0.00	0.00	0.00	0.00	······························				
23	0.126	0.00	0.00	0.00	0.00			<del></del>	<u> </u>	
24	1.257	0.00	0.90	0.00	0.00				<u> </u>	
25	0,143	0.00	0.00	0.00	0.00		<del> </del>		<u> </u>	
26	0.174	0.00	0.00	0.00	0.00		ļ		ļ <u></u>	ļ
27	0.037	0.00	0.00	0.00	0.00		<del>                                     </del>		<u> </u>	
28	0.000	0.00	0.00	0.00	0.00		<b> </b>			
	0.060	0.00	0.00		0.00		<u> </u>			
								·		
Total		0.00	265							
	5.482	0.00	0.00	0.00	0.00	387.0	280.0			
Mo, Avg.	0.195	0.00	0.00	0.00	0.00	193.5	140.0			

### PLANT STAFFING:

Day Shift Operator	Class:	В	Certificate No:	4653	Name;	Gregory Hooper
Day Shift Operator	Class:		Certificate No:		Name:	
Night Shift Operator	Class:		Certificate No:		Name:	
land Orange		_				
Lead Operator	Class:	<u> </u>	Certificate No:	8863	Name:	Roger Holsapple

#### DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

				MON MONTH OR MORE	ONI-LVKI V					
١	When Completed small this report to: Department of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, FL, 32803-3767									
	PERMITTEE NAME: MAILING ADDRESS:	Pluris-Wedgefield 6608 Walton Way	PERMIT NUMBER	FLA010900						
		Tampa Florida 33610	LIMIT: CLASS SIZE:	Final N/A	REPORT: OROUP:	Monthly Domestic				
	FACILITY:	Wedgefield WWTF				Donnestic				
	LOCATION:	3100 Bancroft Boulevard	MONITORING GROUP NUMBER:	R-001						
		Orlando, FL	MONITORING OROUP DESC:	Public Access Reuse, including Influent						
	COUNTY;	Orange	NO DISCHARGE FROM SITE: MONITORING PERIOD From: March 01, 2011 To: March 31, 2011							

Parameter		Quantity or Loading		Qua	lity or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	8.207	MGD			MGD	0	5 Days/Week	Flow meters and metalizers
PARM Code 50050 Y Man.Site No. FLW-1	Permit Requirement	0.368 (An.Avg.)	MGD					5 Deys/Weck	Flow meters and totalizers
Flow	Sample Measurement	0.172	MGD			MOD	0	5 Days/Week	Flow meters and totalizers
PARM Code 50050 I on Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)	MGD					5 Days/Wook	Flow meters and totalizers
iD, Carbonaceous 5 day, 20C	Sample Measurement			7.4		MG/L	0	Every Two Wooks	8-hour FPC
PARM Code 80082 Y Mon.Site No. EFA-I	Pennit Requirement			20,0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement			7.6	9.0	MG/L	0	Every Two Works	I-hour FPC
PARM Code 80082 A Mon.Site No. EFA-1	Permit Regulrement	·		30.0 (Mo.Avs.)	60.0 (Max )	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			3.1		MO/L	0	4 Days/Week	Grab
PARM Code 00530 B Mon.Site No. EFB-1	Permit Requirement			5,0 (Max.)		mg/L		4 Days/Wook	Grab
pH	Sample Measurement			7.2	7.9	SU	•	5 Days/Week	Gmb
PARM Code 00400 A Mon.Site No. EFA-I	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	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 property gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

			-					
NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OF HICER OR AUTHORIZED AGENT	TILLEPHONE NO	DATE (YY/MM/DD)					
Roger Holsappie Lead Operator	The Molante	407-259-6991	2011/04/19					
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)								

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

1

FACILITY

Wedgefield WW ff

R-001

PERMIT SUMPLES: FLA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: March 01, 2011 Fa: March 31,2011

Detection	Sample Measurement Permit Requirement Sample Measurement				84%				E
Mon.Site No. EPA-1 F Coliform, Fecal S PARM Code 74055 A F	Kequirement Sample					PER- CENT	D	4 Days/Week	Grah
PARM Code 74055 A					75 (Min.)	 Par- CENT		4 Days/Wook	Ciruh
PARM Code 74055 A					8	# IOOM).	0	4 Days/Week	Grah
Mon.Site No. FFA-1 B	Permit Requirement				25 (Max.)	#-IDOML		4 Days/Week	Grah
Total Residual Chlorine (For S	Sumple Measurement				0.1	rag/L	0	Continuous	Meter
PARM Code 50060 A 1	Permit Requirement	<del> </del>			1.0 (Mm-)	mg/L.		Continuous	Meter
Turbidity :	Sample Measurement				2.9	NIU	0	Continuous	Meter
PARM Code 00070 B	Permit Requirement				Report (Max.)	שוע		Continuous	Meter
Nitrogen, Nitrate, Total (as N)	Sample Measurement	<del></del>			5.12	mgl	0	Monthly	8-hour FPC
.RM Code 00620 A	Permit Requirement				12.0 (Max )	mg/L		Monthly	8-hour FPC
Flow (from groundwater well)	Sumple Measurement	0.00		MGD		MGD	0	Continuous	Flow meters and totalizers
PARM Code 50050 P	Permit Requirement	Report (An Avg.)		MGD	·			Continuous	Flow meters and totalizers
Flow (from groundwater well)	Sample Measurement	0.00	0.00	MGD		MGD	U	Continuous	Flow meters and totalizers
PARM Code 5(0)50 Q	Permit Requirement	Report (Mo Avg.)	Report (3-Mo.Avg.)	MGD	·· <u>·</u>			Continuous	Flow moters and totalizers
Flow (total to zone 3)	Sample Measurement	0.00		MGD		MGD	0	Continucus	Flow meters and totalizers
	Permit Requirement	0,0232 (An Ave.)		MGD	· · · · · · · · · · · · · · · · · · ·			Continuous	Flow meters and totalizers
Flow (total to zone 3)	Sample Measurement	0.00	00.0	M(il)	-	MGD	0	Continueus	Flow meters and totalizers
PARM Code 50050 S	Permit Requirement	Report (Mn Avg.)	Report (3-Mo.Avg.)	MOD				Continuous	Flow meters and totalizers
Flow (total to zone 2)	Sample Measurement	0.00	-	MGD		CON	0	Continuous	Flow meters and totalizers
PARM Code 50050 1	Permit Requirement	0 0634 (An Avg.)		MGD			-	Consinueus	How meters and totalizers
Flow (total to zone 2)	Sample Measurement	0.00	0.00	MGD	_ · ·	MGD	"	Continuous	Flow meters and totalizers
PARM Code 50050 U	Permit Requirement	Keport (Mo Avg.)	Report (3-Mo Avg.)	MGD		 		Continuous	Flow meters and totalizers

FACILITY

Wedgefield WWTF

PERMIT NUMBER: 11.4010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: March 01,2011 To: March 31, 2011

Parameter		Quantity	or Loading	Units	Qua	lity or Concentr	ation	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (total to zone 1)	Sample Measurement	0,(R)		MGD				MGD	0	Continuous	Flow meters ar
PARM Code 50050 V Mon.Site No. F1.W-3	Permit Requirement	0.0114 (An Avg )		Mod						Continuous	Flow motors as totalizers
Flow (total to rone 1)	Sample Measurement	0.00	90,0	MGD				MGD	0	Continuous	Flow meters an
PARM Cude 50050 W Mon Site No. FLW-3	Permit Requirement	Report (Mo Avg.)	Report (3-Mn,Avg.)	MGD						('ontinuous	Fkow meters an totalizers
Flow (total to golf course)	Sample Measurement	0.176		MGD				MGD	0	Continuous	Flow meters an totalizers
PARM Code 50050 Mon Site No. 11.W-2	Permit Requirement	0 270 (An Avg.)		MGD						Continuous	Flow meters an totalizers
Flow (total to golf course)	Sample Measurement	0.189	0.173	MGD				MGD	0	Continuous	Flow meters an totalizers
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MOD	107.0					Continuous	f low meters an totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement				193.0 Report			mg-l.	0	Every Two Weeks Every Two	8-hour FPC 8-hour FPC
RM Code R0082 G vion.Site No. BNF-1 Solids, Total Suspended	Permit Requirement Sample				(Mo.Avg.) 202.6			mg-L	0	Weeks Every Two	K-hour FPC
PARM Code 00530 G	Measurement Permit				Report			mg/L		Weeks Every Two	8-hour FPC
Mon. Site No. INF-1 Percent Capacity, (TMADF/	Requirement				(Mo Avg )			Percont	0	Weeks Monthly	Calculated
Permitted Capacity) x 100 PARM Code 00180 1	Measurement Permit				Repost			Percent		Monthly	Calculated
Mon Sile No. FLW-1	Requirement Sample										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement			<u> </u>							
	Measurement										
	Permit Requirement										

⁴ Initially, flow is limited to 0.270 MGD AADI. However, the flow may be increased after completion of the second treatment plant and pending the results the required load test. DEP Form 62-62/(910)(10), Effective November 29-1994.

## DAILY SAMPLE RESULTS - PART B Facility: Wedgefield WWTF

Permit Number: Monitoring Period

FI.A010900 From: March 01, 2011 To: March 31, 2011

)	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ML)	pił (Max)	pH (Min)	TRC (For Disinfect.) (mg/L)	TSS (mg/l.)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Total (as N) (mg/L)
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
Mon. Site	EFA-I	EFA-1	CFA-1	EFA-1	EFA-1	EFB-1	EFB-1	FLW-I	EFA-1
		<1	7.9	7.9	3.3	1.0	2.9	0.190	
2	7.0	<l< td=""><td>7.7</td><td>7.7</td><td>1.5</td><td>1.0</td><td>2.7</td><td>0.185</td><td>5.12</td></l<>	7.7	7.7	1.5	1.0	2.7	0.185	5.12
3		<1	7.9	7.9	3	1.0	1.8	0.189	
4			7.6	7.6	1.B	"	2.4	0.175	
5			7.8	7.8	1.9		0.9	0.199	
6			7.7	7.7	1.8_		2.0	0,206	
7		<1	7.8	7.8	1	1.3	2.2	0.071	
8		<	7.6	7.6	2	1.0	2.6	0.189	
9		<1	7.8	7.8		1.0	2.7	0.190	
10		<1	7.2	7.2	]	1.0	2.3	0.183	
11			7.4	7.4	11		1.4	0.175	
12			7.8	7.8	1		1.4	0.193	
13			7.7	7.7	1.2		2.2	0,174	
14		2	7.7	7.7	2.3	2.6	2.9	0.189	
15		<]	7.5	7.5	2.5	3.1	1.8	0.181	
16		<1	7.5	7.5	2.2	1.0	1.5	0.161	
17	7.0	<1	7.8	7.8	2.4	1.0	2.5	0.169	
18			7.6	7.6	t	· · · · · · · · · · · · · · · · · · ·	2.9	0.163	
19			7.7	7.7	1.8		1.6	0.159	
20		<del> </del>	7.7	7.7	1		1.5	0.179	
21		8	7.7	7.7	1.6	1.0	2.5	0.207	
22		<i< td=""><td>7.6</td><td>7.6</td><td>2</td><td>1.0</td><td>2.9</td><td>0.164</td><td></td></i<>	7.6	7.6	2	1.0	2.9	0.164	
23		<]	7.7	7.7	2	1.0	2.6	0.194	
24		2	7.8	7.8	3.2	1.0	1.8	0.126	
25			7.6	7.6	3.4		1.0	0.152	
26			7.9	7.9	2.7		1.7	0.168	
27			7.6	7.6	2.5		1.5	0.152	
28		<1	7.7	7.7	2	1.0	2.7	0.156	
29		<1	7.8	7.8	1.8	1.0	2.4	0.194	
30	9.0	<1	7.7	7.7		1.0	2.1	0.187	
31		<1	7.5	7.5	3.4	1.0	1.8	0.112	
Total	23.0	20	238.0	238.0	60,3	23.0	65.2	5.332	5.12
Mo. Avg.	7.6	1.0	7.6	7.6	1,9	1.2	2.1	0.172	5.12
PLANT ST Day Shift C		Class.	В	Certificate No:	04653	Na		gory Hooper	
Day Shift C	Operator	Class:		Certificate No:	_	Na Na	une:		
	Operator	Class:		Certificate No:		<del></del>	 me:		· · · · · · · · · · · · · · · · · · ·

Class:

ead Operator

Name:

Roger Holsapple

8863

_ Certificate No:

### DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period

FLA010900 From: March 01,2011 To: March 31,2011

Facility: Wedgefield WWTF

		Flow (MGD)		Flow (MGD)	Flow (MGD) GW makeup	CBOD5 (mg/L)	TSS (mg/L)			
Į	golf	Zone 1	Zone 2	Zone 3	well	(mg/L)	<u> </u>			ļ
	course	1		20.00			}		1	
Code	50050	50050	50050	50050	50050	80082	00530			
Mon. Site	FLW-2	F1.W-3	FLW-4	FLW-5	FL.W-6	INF-I	INF-1			
1	0.129	0.00	0.00	0.00	0.00	217.0	1440			
2	0.120	0.00	0.00	0.00	0.00	217.0	164.0		<del>- </del>	
3	0.386	0.00	0.00	0.00	0.00				1	
4	0.153	0.00	0.00	0.00	0.00					
5	0.042	0.00	0.00	0.00	0.00		<u> </u>			
6	0.000	0.00	0,00	0.00	0.00					
7	0.123	0.00	0.00	0.00	0.00			-	<u>.</u>	
8	0.212	0.00	0.00	0.00	0.00					
9	0.666	0.00	0.00	0.00	0.00					
10	0.744	0.00	0.00	0.00	0.00					
11	0.750	0.00	0.00	0.00	0.00			•		
12	0.088	0.00	0.00	0.00	0.00					
13	0.000	0.00	0.00	0.00	0.00					
14	0.121	0.00	0.00	00,0	0.00					
15	0.115	0.00	0.00	0.00	0.00				· - · · · · · · · · · · · · · · · · · ·	
16	0.147	0.00	0.00	0.00	0.00				1	
17	0.238	0.00	0.00	0.00	0.00	181.0	234.0		<b> </b>	
18	0.098	0.00	0.00	0.00	0.00		<b>.</b>		<del> </del>	
19	0.115	0.00	0.00	0.00	0.00				<del>                                     </del>	
20	0.239	0.00	0.00	0.00	0.00		<del>                                     </del>	<del></del>	<del> </del>	
21	0.040	0.00	0.00	0.00	0.00	·		· M · · · · · · · · · · · · · · · ·	<del> </del>	
22	0.136	0.00	0.00	0.00	0.00				<del> </del>	<del></del>
23	0.243	0.00	0.00	0.00	0.00				<del></del>	
24	0.139	0.00	0.00	0.00	0.00				<del>                                     </del>	<del>-  </del>
25	0.232	0.00	0.00	0.00	0.00		<del> </del>		<del> </del>	
26	0.055	0.00	0.00	0.00	0.00		<del>                                     </del>		<del> </del>	
27	0.099	0.00	0.00	0.00	0.00		<del> </del>		+	
28	0.104	0.00	0.00	0.00	0.00		†·		<del></del>	+
29	0.002	0.00	0.00	0.00	0.00					
30	0.142	0.00	0.00	0.00	0.00	181.0	210.0		<del>                                     </del>	
31	0.000	0.00	0.00	0.00	0.00		<del> </del>			
Totai	5.678	0.00	0.00	0.00	0.00	579.0	608.0		<del></del>	<del>- </del>
Mo. Avg.	0.183	0.00	0.00	0.00	0.00	193.0	202.6		1	
PLANT ST Day Shift (	AFFING:	Class:	В	Certificate No	: 04653	N	ame: Greg	ory Hooper		<del></del>
Day Shift (	Derator	Class;		Certificate No				···		<del></del>
Night Shift							ame:		\	
right Dilll	Орегани	Class:		Certificate No	·	N	ame:			

Class: C Certificate No:

Lead Operator

Roger Holsapple

### Florida Department of Environmental Protection

Twin Towers Office Bldg. 2600 Blair Stone Road Tallahassee, Florida 32399-2400

# GROUND WATER MONITORING REPORT Rule 62-522.600(11)

PAR	T I GENERAL INFORMATION		
(1)	Facility Name Wedgefield WW	TF	
	Address 3100 Bencroft Bivd.		
	City Orlando Florida		Zip 32833
	Telephone Number <u>(407) 259-6</u>	3991	
(2)	The GMS Identification Number 3	3048P03712	
(3)	DEP Permit Number FLA01090	00	
(4)	Authorized Representative Name	Roger Holsapple	
	Address 6608 Walton Way		
	City Tampa Florida		Zip 33610
	Telephone Number (813) 359	-8327	
(5)	Type of Discharge Domestic Was	ste	
<b>~</b> 3)	Method of Discharge Golf Course	/ Sprayfield Imigation	
i cer ettac infor	chments and that, based on my inq	uiry of those individuals imme	familiar with the information submitted in this document and all diately responsible for obtaining the information, I believe that the e significant penalties for submitting false information, including the
Date	: 2011/04/19		Molgale
	/ /		Signature of Owner or Authorized Representative
PAR	RT II QUALITY ASSURANCE REQ	UIREMENTS	
Sam	ple Organization	Advanced Environmenta	Laboratories
Anai	lytical Lab NELAC C	ertification # E8458	39
	NELAC C	Certification #	
Lab	Name Advanced Environmental	Laboratories	
Add	Iress 528 S. North Lake Blvd. S	Suite 1016 Altamonte Springs	Florida 32701
Pho	ne Number ( 407) 937-1594		

Printed 4/15/2004

County. Facility Name: Permit Number: **Orange County** Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWB-IR* Background Well Name MW-I

Golf Course WAFR # 6006 GMS# 3048A13413 01/26/2011

From January 2011 X Yes ___ No

To: Murch 2011

Date Sample Obtained: Time Sample Obtained

Monitoring Period Was the well purged before sampling? GW TOC: 66.30

Parameter Parameter	Permit Builder PARM Code	Other Historic PARM Code	Saropie Measurement (Analysis Results)	Units	Permit Regulrement	Desection Limits	Auslysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVI)	82545		62.59	Feet	Report	N/A	Field	Quarterly	brnub	N.
Nitrate, (as N)	(10620		0.10 1	mg/l	Report	0.043	R, 300 0	Quarterly	brinb	×
Solids, Total Dissolved(TDS)	70295	70296	300	mg/l	Report	10	F160,I	Quarterly	pump	N
Chloride (as CI)	00940		110	mg/l	Report	0.81	IC 300 0	Quarterly	ритр	N
Coliform, Fecal	74055		1.0U	#/L00/mi	Report	1.0	SM9222D	Quarterly	pump	N
1	00400		4.15	su	Report	N/A	Field	Quarterly	bnub	N

(4111ME: 149 14)	1 11111									
Solids, Total Dissolved(TDS)	7()295	70296	300	mg/l	Report	10	F160.1	Quarterly	pump	N
Chloride (as CI)	00940		110	mg/l	Report	0.81	IC 300 0	Quarterly	pump	N
Coliform, Fecal	74055		1.0U	#/L00/mi	Report	1.0	SM9222D	Quarterly	pump	N
1	00400		4.15	su	Report	N/A	Field	Quarterly	bamb	N
Turbidity, Lab - Nepholometric	82079		6.0	NTU	Report	0.016	I-180.1	Quarterly	pump	N
Added: November 2009**										
Sodium	00923		72	mg/L	Report	0.026	SW8466010	Quarterly	pump	N
Trihalomethane, Total	82080	-	0.60U	ug/l.	Report	0.60	E524.2	Quarterly	bamb	N
							Ĭ <u>.</u>			
		1								
						,				

^{*}Original well MWB-1 was damaged and replaced by MWB-1R on 06/08/2007. The WAFR ID remains the same
**Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Tribalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP)
COMMENTS AND EXPLANATION.

^{11/20/2009} 

County: Facility Name: Permit Number **Orange County** Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID. Well Type

Background Description

Well Name MW-2 Golf Course WAFR # 6005 GMS# 3048A13414

MWB-2

Monitoring Period

From January 2011

To: March 2011

Date Sample Ontained. Time Sample Obtained.

01/26/2011 11.45

Was the well purged before sampling? GW TOC:70.10 X Yes __ No Other Historia Monitoring Sampling Equipment Used Sample 1 mits Permit Detection Parameter Permit Analysis Sample Frequency PARM Code (1/F/N)ARM Code inglysia Results) 67.05 Feet Water Level Relative to Feet, NGVD 82545 Report NΑ Field Quarterly Querterly punip 0.043U pump 00620 mg/l Report 0.043 IC 300.0 ١ Nurate, (as N) 78 Ounterly punip 70295 70296 10 E360.1 N Solids, Total Dissolved(TDS) mg/| Report 16 pump 00940 me/l 0.81 IC 300.0 Ν Chloride (as Cl) Report 1.0U Quarterly grung #/100/mi diform, Fecal 74055 Report 10 SM9222D N 4.43 Quarterly besteb N 00400 Report N/A Field pН 0.50 Quarterly brinth NTU E1**3**9.1 N U 016 Turbidity, Lab - Nepholometric 82079 Report Added November 2019** Quarterly pump 60923 0.026 SW8466010 N 12 mg/l. Report odium Quarterry punup #20**8**0 0.60U ug/L Report h524.2 N rihalomethane, Total

**Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Tribulomethane (LTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:

11/20/2009

County: Facility Name Permit Number Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW/ID

Well Type: Description. MWB-3 Background Well Name MW-3

Golf Course WAFR # 6004

GMS# 3048A13415

Monitoring Period Was the well purged before sampling? GW TOC:67.90

From January 2011 X Yes ___ No

To March 2011

Date Sample Obtained: Time Sample Obtained

01/26/2011 10:31

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Munitoring Frequency	Sampling Equipment Used	Sampl Filtere (L/F/N
Water Lovel Relative to Feet, NGVD	82545		67.1	i-cet	Report	N/A	l'ield	Quarterly	punip	N
Nitrate, (as N)	00620		0.085U	mg/l	Report	0 043	1C 300 0	Quarterly	putap	N
Solids, Total Dissolved(TDS)	70295	70296	1600	mg/l	Report	10	E160.1	Quarterly	pump	N
Thloride (as Cl)	00940		93	nig/l	Report	0.81	IC 300 0	Quarterly	pump	N
oliform. Focal	74055		1.0U	#:)f(v/m)	Report	1.0	SM9222D	Quarterly	рилир	Ň
pH	00400		6.26	st:	Report	N/A	Field	Quarterly	hamb	N
Turbidity, Lab - Nepholometric	82079		29	NTU	Report	0.016	E180.1	Quarterly	նուսե	Z
Added: November 2009**										
Sodium	00923	-	71	mg/1.	Report	0.026	SW8466010	Quarterly	britth	N
rihalomethane. Total	82080		0.60U	บุราโ.	Report	(1 <b>6</b> /l)	13524.2	Quarterly	pump	N
	-					-				
	<del></del>	<del> </del>	<del>  </del>			<del></del>	<del> </del>			

**Based on the elevated concentrations of these parameters in the influent samples parameters Sodium and Trihalomethane (TTINS) have been added to the Circumdwater Monitoring Plan (GWMP) COMMENTS AND UNPLANATION:
11/20/2009

County: Facility Name: Permit Number Orange County Wedgefield WWTF FLA010900

GMS#3048P03712

Permit Builder MW ID. Well Type

Description:

MWI-4 Intermediate Well Name MW-4
Golf Course

WAFR # 6003 GMS# 3048A13416

Monitoring Period
Was the well purged before sampling?
GWTOC: 67:70

From January 2011 X Yes ... No

To, March 2011

Date Sample Obtained: Time Sample Obtained:

01/27/2011 09:17

Parameter	Permit Builder PARM Code	Other Historic PARM Code		Units	Permit Requiremen t	Detection Limits	Analysis Method	Munituring Frequency	Sampling Equipment Used	Sample Flittered (L/F/N)
Water Level Relative to Feet, NGVI)	82545	_	65.5	Feet	Report	N/A	Field	Quarterly	pump	N
Sitrate, (as N)	00620		0.043U	ing/l	Report	0.043	IC 300.0	Quarterly	pump	N
iolids, Total Dissolved(TDS)	70295	70296	180	mg/1	Report	10	E160.1	Quarterly	brush	N
Thloride (as CI)	00940		32	my-l	Report	0.81	IC: 300.0	Quarterly	pemp	N
iliform, Fecal	74055		1.00	#/100/ml	Report	10	SM9222D	Quarterly	pump	N
<u></u>	00400		4.95	SU	Report	N/A	Field	Quarterly	pump	N N
Furbidity, Lab - Nepholometric	82079		110	NIL	Report	0.016	E180,1	Quarterly	brusb	N
dded: November 2009**										
odium	00923	-	23	mg/L	Report	0.026	SW8466010	Quarterly	brund	N
rihalomethane, Total	82080		0.60U	ug/l.	<b>Report</b>	0.60	E524.2	Quarterly	bramb	N
<del></del> -	-					<del></del>			<u> </u>	
Plased on the elevated concentrations of						-				

County. Facility Name: Permit Number: **Orange County** Wedgefield WWTF

FLA810900

GMS# 3048P03712

Permit Builder MW ID

Well Type: Description: MWC-6 Compliance

Well Name MW-6 **Golf Course** 

WAFR # 6001 GMS# 3048A13418

Monitoring Period

Was the well purged before sampling" GWTOC: 65.04

From January 2011 To: March 2011

X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

01/27/2011 10:23

Parameter Other Sample Measurement Permit Linita Permit Detection Analysis Method Monitoring Sampling Samples Requiremen Limita Frequency Equipment Fittered (L/F/N) (Analysis Results) Used PARM Code PARM Code 61.05 82545 Water Level Relative to Feet, NGVD Feet Report N/A Field Quarterly Quarterly ĸ pump 1.1 Nitrate, (as N) 00620 mg/l Report 0.043 pump IC 300.0 N 190 Quarterly 70296 рилир Solids, Total Dissolved(TDS) 70295 nıg/l Report 10 E160.1 N 24 Quarterly pump Chloride (as Cl) 0((94)) mg/l Report 0.81 IC 300 0 N 1.00 Quarterly Coliforn, Fecal 74055 pump #/100/ml 1.0 Report SM9222D N 5.36 00400 Quarterly briuth pН SU Report Field N 85 pump Turbidity, Lab - Nepholometric 82079 NTU Report 0.016 E180.1 N Added: November 2009** Quarterly pump iodium 00923 Report 0.026 SW8466010 23 mg/L N Quarterly Trihalomethane, Total 82080 0.600 ug/L Report E524.2 N 0.60

**Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Tribalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION

11/20/2009

County. Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW/ID

Well Type: Description: MWI-7 Intermediate

Well Name MW-7 Golf Course

WAFR # 6000 GMS# 3048A13419

01/27/2011

Monitoring Period
Was the well purged before sampling?
GWTOC:68.70

From January 2011 To: March 2011 X Yes ___ No

Date Sample Obtained: Time Sample Obtained

09:51

Other Historic Sample Measurement Units Parameter Permit Permit Detection Munituring Sampling Samples Apelysia Equipment ( sed Filtered (L/F/) Frequency PARM Code (Analysis Results) ARM Code 65.89 Water Level Relative to Feet, NGVI) 82545 Feet Field Report N/A Quarterly Quarterly N pump 4.1 purne Nitrate, (as N) 00620 mg/l Report 0.043 IC 100.0 N 250 Quarterly pump 70295 70296 10 E160.1 N Solids, Total Dissolved(TDS) mg/l Report 55 Quarterly pultip 00440 0.81 IC 300.0 N Chloride (as Cl) ing/l Report 1.00 Quarterly DUMP uliform, Fecal 74055 #:100/m1 Report 1.0 SM9222D N 5.53 Quarterly brumb 00400 SU Report NA Field N 80 Quarterly рипф NTU 82079 N Turbidity, Lab - Nepholometric Report 0.016 E180.1 Added: November 2009** Quarterly 0.026 00923 41 mg/L Report SW8466010 N odium Quarterly pump 82080 E524.2 N 0.60U ug/L. Report 0.60 Tribalomethane, Total

**Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:

11/20/2009

County: Facility Name

Permit Number

Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWC-1 Compliance

Well Name MW-1

On-Site Irrigation WAFR # 32995

GMS# --01/26/2011 08:33

Monitoring Period Was the well purged before sampling?

From: January 2011 X. Yes ____ No

To March 2011

Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Builder PARM Code	PARM Code	Sample Measurement (Anniysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Sample: Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545		64.96	Feet	Report	N/A	Field	Quarterly	pultip	N
Vitrate, (as N)	00620		0.043U	ng/l	Report	0.043	IC 300.0	Quarterly	brunb	N
iolids Total Dissolved(TDS)	70295	70296	82	ng/l	Report	10	E160.1	Quarterly	pump	N
Chloride tus CI)	00940		18	mg/l	Report	0.81	IC 300.0	Quarterly	pump	N
aliform, Fecal	74055		1.0U	*/100/ml	Report	1.0	SM9222()	Quarterly	սուսի	N
pH	00490	-	4.47	SU.	Report	N/A	Field	Quarterly	pump	N
Turbidity, Lah - Nepholometric	82079		9.2	NTU	Report	0.016	12180 1	Quarterly	bmub	N
dded: November 2009**										
odium	00923	_	9.8	mg/L	Report	0.026	SW8466010	Quarterly	pump	N
rihalomethane, Total	82080		0.60U	ug/1.	Report	0.60	E524.2	Quarterly	branh	N
	.]				]					

^{**}Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:

11/20/2009

County: Facility Name: Permit Number. Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Pennit Builder MW ID.

Well Type Description. MWC-2 Compliance

Well Name MW-2 On-Site Irrigation WAFR # 32996

GMS# --

Monitoring Period
Was the well purged before sampling?

From January 2011 Fo March 2011 X Yes ____ No

Date Sample Obtained: Time Sample Obtained

01/26/2011 09:25

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Mensurement (Anniysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N
Nater Level Relative to Feet, NGVD	82545		64.89	Feet	Report	N/A	Field	Quarterly	gump	N
vitrate, (as N)	00620		0.043U	mg/)	Report	0.043	IC 300.0	Quarterly	pump	N
iolids, Total Dissolved(TDS)	70295	70296	120	mg/l	Report	10	E160.1	Quarterly	pump	N
Chloride (su Cl)	00940		11	mg/i	Report	0.81	IC 300.0	Quarterly	pump	N
oliform, Fecal	74055	]	1.0U	#/100/m1	Report	1.0	SM9222D	Quarterly	ջսութ	N _
H	00400	-	5.39	SU	Кероп	N/A	Field	Quarterly	hmub	N
Furbidity, Lab - Nepholometric	<b>X2</b> 079		12	STU	Report	0.016	E180.1	Quarterly	pump	N
dded: November 2009**										Ī
ndium	00923	-	5.3	mg/L	Report	0.026	SW8466010	Quarterly	ритр	N
ribalomethane, Total	82080		0,600	ug/l.	Report	0.60	E524.2	Quarterly	ритр	N

^{**}Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHSIs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION-11/20/2009

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Pennit Builder MW ID:

Well Type: Description: MWC-3 Compliance

Well Name MW-3 On-Site Irrigation WAFR # 32997

GMS# --

Monitoring Period
Was the well purged before sampling?

Date Sample Obtained: Time Sample Obtained:

01/26/2011 12:34

From: January 201110: March 2011 X Yes ____ No

Parameter	Permit Builder PARM Code	Other Hintoric PARM Code	Sample Measurement (Analysis Results)	Unita	Permit Requirement	Detection Limits	Aunlysis Niethod	Manitoring Frequency	Sampling Equipment back	Samples Filtered (17F/N
Water Level Relative to Feet, KGVD	82545		69.25	I cet	Report	N/A	Field	Quarterly	pump	N N
Nitrate. (as N)	00620		0.79	mg/l	Report	0.043	IC 300.0	Quarterly	pump	N.
Solids, Total Dissolved(TDS)	70295	70296	480	rhg/l	Report	10	17160.1	Quarterly	punip	N.
Chloride (as Cl)	00940		180	mg/l	Report	0.81	IC 300.0	Quarterly	pump	N
diform, Fecal	74055	_	1.0U	#/100/ml	Report	1.0	SM9222D	Quarterly	pump	N
pH	00400	_	5.55	SU	Report	N/A	Field	Quarterly	րսոր	ĸ
Turbidly, Lab - Nepholometric	82079		14	טווא	Report	0.016	E180.1	Quarterly	pump	_ N
idded: November 2009**				<u> </u>						
odium	00923		100	mg/l.	Report	0 026	SW8466010	Quarterly	ритр	N
rihalomethane, Total	<b>8208</b> 0	-	0.60U	ug/L	Report	0.60	E524.2	Quarterly	ршпр	N
	<u> </u>	<u> </u>								
							1			

**Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMF) COMMENTS AND EXPLANATION:
11/20/2009

County. Facility Name: Permit Number: **Orange County** Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID Well Type Description

MWP-1 Piezometer

Well Name MWP-1* On-Site Irrigation WAFR # 55881 GMS# --

Monitoring Period

From January 2011

fo March 2011

Date Sample Obtained: 1/5/2011-2/16/2011-3/16/2011 Time Sample Obtained:

Was the well purged before sampling?

___ Yes X No

Other Historic Permit Builder Sample Measurement Units Detection Limits Samples Filtered (L/F/N) Parameter Permit Analysis Method Sampling Requirement Louipment Used PARM Code (Analysis Results) PARM Code 63.27 82545 Water Level Relative to Feet, NGVD lect Report  $N/\Lambda$ Solinst I* Month of Quarter Water Level Meter 66.88 fater Level Relative to Feet, NGVI) 82545 Feet **Report** N/A .4 Month of Quarter Water Level Meter 60.77 82545 Water Level Relative to Feet, NGVD Feet Report N/A Solinst Water Level 3rd Month of Quarter Meter

COMMENTS AND EXPLANATION:

* MWP-1 is the well labeled "Well #1" as shown on Sheet C-12 dated 12/1/98

DEP form (2-650 9.0) for effective Neverteen by 1991

16

County Facility Name: Pemit Number. Orange County Wedgefield WWTF

FLA010900

GMS# 3048P03712

Permit Builder MW ID

Well Type: Description: MWP-2 Piezometer

Well Name MWP-2 On-Site Irrigation WAFR # 55883 GMS# ---

Monitoring Period

From January 2011

To: March 2011

Date Sample Obtained 1/5/2011-2/16/2011-3/16/2011 Time Sample Obtained,

Was the well purged before sampling?

___ Yes X No

Parameter	Permit Bullder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detective Limits	Analysis Method	Sampling Equipment Land	Samples Filtered (L/F/S)
Water Level Relative to Feet, NOVD	82545		64.05	Feet	Report	N/A		Solimet	
I" Month of Quarter	Ì							Water Level Moter	
Water Level Relative to Feet, NGVD	82545		65.62	Feet	Report	N/A	<del>-</del>	Solinst Water Level Moter	
Month of Quarter  Water Level Relative to Feet, NGVD  3rd Month of Quarter	82545		65.25	Feet	Report	N/A		Solinat Water Level Meter	
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				<u> </u>	ļ				

DEPFum 62 (d) (quid) effective Sovember 29 (994

COMMENTS AND EXPLANATION

* MWP-2 is the well labeled "Well #2" as shown on Sheet C-12 dated 12/1/98
4/20/2004

### DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT. DART A

		THE PROPERTY OF THE		'UKI-PAKIA	
When Completed mail 1	this report to: Department of Environmental Protection, Central D	istrict, 3319 Maguire Boulevard Suite:	232, Orlando, FL, 32803-3767		
PERMITTEE NAME: MAILING ADDRESS:		PERMIT NUMBER	FLA010900		
	Tampa Fiorida, 33610	LIMIT: CLASS SIZE:	Final N/A	REPORT: GROUP:	Monthly Domestic
FACILITY:	Wedgefield WWTF			ONOUI.	DOMESTIC
LOCATION:	3100 Bencroft Boulevard	MONITORING GROUP NUMBER:	R-001		
	Orlando, FL	MONITORING GROUP DESC:	Public Access Reuse, including Inf	Ruent	
COUNTY:	Orange	NO DISCHARGE FROM SITE: MONITORING PERIOD From: April 01,2011	To: April 30,2011		

Parameter		Quantity or Loading	Units	Qua	lity or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0,264	MGD				0	5 Days/Week	Flow meters as
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Requirement	0,368 (An.Avg.)	MGD					5 Days/Week	Flow maters an
Flow	Sample Measurement	0.204	MGD				0	5 Days/Week	Flow meters an
PARM Code 50050 1 Mon.Site No. Ft.W-1	Permit Requirement	Report (Mo.Avg.)	MOD					5 Days/Work	Flow meters an
GOD, Carbonaceous 5 day, 20C	Sample Monurement			7,6			0	Every Two Weeks	8-hour FPC
/ARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement			20.0 (An.Avg.)		reg/L		Every Two Weeks	8-hour FPC
BOD, Carbonacsous 5 day, 20C	Sample Measurement			9.5	10.0	mg/l	0	Every Two Weeks	8-keur FPC
PARM Code 80082 A Mon.Site No. EFA-1	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	mag/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			4.4		mg/l	0	4 Days/Week	Grab
PARM Code 00530 B Mon Site No. EFB-1	Permit Requirement			5.0 (Max.)		mg/L		4 Days/Week	Grab
pHi	Sample Measurement			7,6	7.9	<b>S</b> U	0	5 Days/Week	Grab
PARM Code 00400 A Mon.Site No. EFA-I	Permit Requirement			6.0 (Mín.)	8.5 (Max.)	šu		5 Days/Week	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 property gather and evaluate the Information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXEC	CUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO DATE (YY/MM/DD)
Roger Holsapple	Lead Operator	12 Made Ac	407-259-6991 2011/05/10
			<del></del>

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

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

FACILITY:

Wedgefield WWTF

R-001

PERMIT NUMBER: FLA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: April 01,2011

To: April 30,2011

Parameter		Quantity or Lozding		Units		ality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Typ
Coliform, Fecal, % less than detection	Sample Measurement	,			87.5		PER- CENT	U	4 Days/Week	Grab
PARM Code 51005 A Mon.Site No. EFA-1	Permit Requirement				75 (Min.)		PER- CENT		4 Days/Week	Grab
Coliform, Fecal	Sample Measurement				3		#/100h11.	ð	4 Days/Week	Grab
PARM Code 74055 A Mon.Sise No. EFA-1	Permit Requirement				25 (Max.)		#/100ML		4 Days/Week	Cirah
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.0		mg/l.	0	Continuous	Meter
PARM Code 50060 A Mon.Site No. EFA-1	Permit Requirement				1.0 (Min.)		mp1.		Continuous	Meter
Turbidity	Sample Measurement				2.9		NTU:	0	Continuous	Moter
PARM Code 00070 B Mon.Site No. EFB-1	Permit Requirement				Report (Max.)		עזא		Continuous	Meter
Nitrogen, Nitrate, Total (as N)	Sample Measurement				7.31		mg/l.	0	Monthly	8-hour FPC
PARM Code 00620 A lon.Site No. EFA-1	Permit Requirement				(2.0 (Max.)		mg/L		Monthly	8-hour FPC
low (from groundwater well)	Sample Measurement	0.06		MGD				ō	Continuous	Flow meters a
PARM Code 50050 P Men.Site No. FLW-6	Permit Requirement	Report (An.Avg.)		MGD					Continuous	Flow meters as totalizers
Flow (from groundwater well)	Sample Measurement	0.00	9.8C	MGD				0	Continueum	Flow meters a totalisers
PARM Code 50050 Q Mon.Site No. FLW-6	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow meters at
Flow (total to zone 3)	Sample Measurement	0.000		MGD				0	Contiquents	Flow meters as
PARM Code 50050 R Mon.Site No. FLW-5	Pensit Requirement	0.0232 (An.Avg.)		MGD					Continuous	Flow meters an totalizers
Flow (total to zone 3)	Sample Measurement	0.000	900.0	MGD				0	Continuous	Flow meters at
PARM Code 50050 S Mon.Site No. Fl.W-5	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo Avg.)	MOD					Continuous	Flow meters ar totalizers
Flow (total to zone 2)	Sample Measurement	0.000		MGD				0	Солинионя	Flow meters a totalizers
PARM Code 50050 T Mon.Site No. FLW-4	Permit Requirement	0.0634 (An.Avg.)		MGD					Continuous	Flow meters an totalizers
Flow (total to zone 2)	Sample Measurement	000.0	0,000)	MGD				0	Continuous	Fluw meters as totalizers
PARM Code 50050 U Mon.Site No. FLW-4	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow meters an

COMMENTS: Flow was going to reuse on the  $12^{\rm th}$  of February when NO3 result was 12.12

FACILITY:

Wedgefield WWTF

PERMIT NUMBER: FLA010900

MONITORING GROUP
NUMBER:
MONITORING PERIOD
From: April 01, 2811

To: April 30, 2011

Parameter		Quantity or Loading		Units	Qu	ality or Concentrati	on Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (total to zone 1)	Sample Measurement	0.040		MGD				0	Continuous	Flow meters no totalizers
PARM Code 50050 V Mon.Site No. FLW-3	Permit Requirement	0.0114 (An.Avg.)		MGD					Continuous	Flow meters an
Flow (total to zone 1)	Sample Measurement	0.000	0.000	MGD				0	Continuous	Flow meters an
PARM Code 50050 W Mon.Site No. FLW-3	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow meters and totalizers
Flow (total to golf course)	Sample Measurement	0.186		MGD				0	Continuous	Flow meters an
PARM Code 50050 Mort.Site No. FLW-2	Permit Requirement	0.270 (An.Avg.)		MOD					Continuous	Flow nactors and totalizors
Flow (total to golf course)	Sample Messurement	0.338	0.240	MGD				0	Continuens	Flow meters and totalizers
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MOD					Continuous	Flow meters and totalizers
BOD, Cerbonaccous 5 day, 20C	Sample Measurement				229.5		mrg/1.	Û	Every Two	8-bour FPC
PARM Code 80082 G vion.Site No. INF-I	Permit Requirement				Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				118.0		rog/L	0	Every Two Weeks	8-hour PPC
PARM Code 00530 G Mon.Site No. INF-I	Permu Requirement				Report (Mo.Avg.)		mg/l.		Every Two Weeks	K-hour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement				50.0		Percent	•	Monthly	Calculated
PARM Code 00180 I Mon.Site No. FLW-I	Permit Requirement				Report		Perceis		Monthly	Calculated
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									

¹ Initially, flow is limited to 0.270 MGD AADF. However, the flow may be increased after completion of the second treatment plant and pending the results the required load test. DEP Form 62-620.910(10), Effective November 29, 1994

### DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period

FLA010900 From: April 81, 2011

To: April 30, 2011

Facility: Wedgefield WWTF

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ML)	pH (Max)	pH (Min)	TRC (For Disinfect.) (mg/L)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Total (as N) (mg/L)
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
Mon. Site	EFA-1	EFA-1	EFA-J	EFA-1	EFA-1	EFB-1	EFB-1	FLW-1	EFA-1
,			7.8	7.8	1		2.9	0.142	
2			7.9	7.9	1		2.9	0.189	
3			7.8	7.8	1.5		2.9	0.229	
4		<1	7.6	7.6	1.1	2.1	2.9	0.245	
5		<	7.6	7.6	1.0	2.0	2.9	0,224	
6		<1	7.6	7.6	1	1.4	2.8	0.233	
7		<1	7.7	7.7	1	3.7	2.5	0.206	
. 8			7.7	7.7	1		2.9	0.210	
9			7.9	7.9	1		2.9	0.182	
10			7.6	7.6	1.5	I	2.9	0.239	
11		<1	7.6	7.6	1.2	4.4	2.2	0,235	
12		<1	7.7	7.7	1	3.2	2.9	0.211	
13	9.0	<1	7.7	7.7	1	3.8	2.5	0.189	7.31
14		<1	7.6	7.6	1	1.0	2.2	0.180	
15			7.8	7.8	1.6		2.0	0.194	
16			7.8	7.8	1.6		1.5	0.190	· · · · · · · · · · · · · · · · · · ·
17		1	7.8	7.8	j		2.9	0.224	1
18		<1	7.8	7.8	8.1	1.0	2.5	0.223	
19		<1	7.7	7.7	1.4	1.0	2.5	0.206	
20		2	7.8	7.8	1	1.0	2.8	0.189	
21		<1	7.8	7.8	1	1,0	1.6	0.204	
22			7.6	7.6	L L		1.5	0.204	
23			7.8	7.8	1		1.2	0.206	
24			7.8	7.8	2		2.5	0.145	
25		<1	7.7	7.7	1	2.9	2.9	0.215	
26		3	7.7	7.7	1	1.4	2.9	0.234	<u> </u>
27	10.0	<1	7.6	7.6	2	1.0	2.5	0.208	<u> </u>
28		<]	7.7	7.7	2.3	1.0	1.2	0.206	
29			7.6	7.6	1,5		1.9	0.204	
30			7.8	7.8	2		2.0	0.175	1
Total	19.0	12	231.6	231.6	38.5	31.9	72.7	6.141	7.31
Mo. Avg.	9.5	0.75	7.7	7.7	1.28	1.99	2.4	0.204	7.31

PLANT	CTAFF	BIO.
LLLL	SIAPP	INLI:

Day Shift Operator	Class:	B Certificate No	o: 4653	Name:	Gregory Hooper
Day Shift Operator	Class:	Certificate N	D:	Name:	
Night Shift Operator	Class:	Certificate N	o:	Name:	
Lead Operator	Class:	C Certificate No	o: <u>8863</u>	Name:	Roger Holsapple

## DAILY SAMPLE RESULTS - PART B Facility: Wedgefield WWTF

Permit Number:

FLA010900

From: April 01, 2011 **Monitoring Period** 

To: April 30, 2011

	Flow (MGD) golf	Flow (MGD) Zone 1	Flow (MGD) Zone 2	Flow (MGD)	Flow (MGD) GW makeup	CBOD5 (mg/L)	TSS (mg/L)		
	course	Zone i	ZORC Z	Zone 3	well	(···· <b>g</b> –)			
Code	50050	50050	50050	50050	50050	80082	00530		
Mon. Site	FLW-2	FLW-3	FLW-4	FLW-5	FLW-6	INF-1	INF-I		
t	0.006	0.00	0.00	0.00	0.00				
2	0.000	0.00	0.00	0.00	0.00		1	 	
3	0.000	0.00	0.00	0.00	0.00		1		
4	0.019	0.00	0.00	0.00	0.00				
5	0.000	0.00	0.00	0.00	0.00				
6	0.000	0.00	0.00	0.00	0.00				<del>                                     </del>
7	0.000	0.00	0.00	0.00	0.00			 <del>-</del>	1
8	0.253	0.00	0.00	0.00	0.00			 	<del>- </del>
9	0.632	0.00	0.00	0.00	0.00		1 1	 	
10	0.700	0.00	0.00	0.00	0.00		<del></del>	 	<u> </u>
11	0.125	0.00	0.00	0.00	0.00		1	 	+
12	0.449	0.00	0.00	0.00	0.00		1	 <del> </del>	+
13	0.673	0.00	0.00	0.00	0.00	221.0	136.0	 	<del> </del>
14	0.814	0.00	0.00	0.00	0.00		1		
15	0.387	0.00	0.00	0.00			+	 	+
16		0.00	0.00	0.00	0.00		<del>- </del>	 <del></del>	<del> </del>
17	0.111	0.00	0.00	0.00	0.00		1	 	+
18	0.615	0.00	0.00	0.00	0.00		<del>-{}</del>	 <u> </u>	<del>                                     </del>
19	0.908	0.00	0.00	0.00	0.00		<del>                                     </del>	 <del></del> .	<del> </del>
20	0.372	0.00	0.00	0.00	0.00		<del></del>	 	<del> </del>
21	0.790	0.00	0.00	0.00	0.00	<del></del>	+	 <del></del>	<del></del>
22	0.615	0.00	0.00	0.00	0.00			 	<del> </del>
23	0.847	0.00	0.00	0.00	0.00			 	<u> </u>
24	0.000	0.00	0.00	0.00	0.00	-		 	<del>                                     </del>
25	0.335	0.00	0.00	0.00	0.00		<del>-  </del>	 	<del> </del>
26	0.320	0.00	0.00	0.00	0.00		<u> </u>	 	ļ
27	0.240	0.00	0.00	0.00	0.00	228.6	100.0	 ·	
28	0.233	0.00	0.00		0.00	238.0	100.0	 	
29	0.394			0.00	0.00			 	
30	0.241	0.00	0.00	0.00	0.00				
	0.060	0.00	0.00	0.00	0.00				
					<u> </u>				
Total	10.139	0.00	0.00	0.00	0.00	459.0	236.0		
Mo. Avg.	0.338	0.00	0.00	0.00	0.00	229.5	118.0		

### PLANT STAFFING:

Day Shift Operator	Class:	В	Certificate No:	4653	Name:	Gregory Hooper
Day Shift Operator	Class:		Certificate No:		Name:	
Night Shift Operator	Class:		Certificate No:		Name:	
Lead Operator	Class:	_ <u>C</u>	Certificate No:	8863	Name:	Roger Holsapple

### DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed m	all this report to: Department of Environment	al Protection, Central District, 3319 Maguire Boulevard Suite	232, Orlando, FL, 32803-	-3767	
PERMITTEE NAM		PERMIT NUMBER	FLA010900		
MAILING ADDRE	ESS: 6608 Walton Way Tempa Florida, 33610	LIMIT:	Final	REPORT:	Monthly
FACILITY:	Wedgefield WWTF	CLASS SIZE:	N/A	GROUP:	Domestic
LOCATION:	3100 Buncroft Boulevard	MONITORING GROUP NUMBER:	R-001		
	Oriendo, FL	MONITORING GROUP DESC:	Public Access Rouse, in	cluding Influent	
COUNTY:	Orange	NO DISCHARGE FROM SITE: MONITORING PERIOD	]		
		From: May 01, 2011	To: May 31, 2011		

Parameter		<u>.</u>	Quantity or Loading Units Quality or Concentration		n Units	Ex. Analysis		Sample Type	
Flow	Sample Measurement	0.293	MGD				0	5 Days/Week	Flow meters and
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Requirement	0.368 (An.Avg.)	MGD					5 Days/Week	Flow meters and totalizers
Flow	Sample Measurement	0.199	MGD				0	5 Days/Week	Flow meters and totalizers
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Requirement	Report (Mo_Avg.)	MGD					5 Days/Week	Flow meters and totalizers
OD, Carbonacoous 5 day, 20C	Sample Measurement			7,7			0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon. Site No. EFA-1	Permit Requirement			20.0 (Ar. Avg.)		ing/L		Every Two Works	8-hour FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement			8.5	9,0	ung/l	0	Every Two Weeks	8-hour FPC
PARM Code #00#2 A Mon.Site No. EFA-1	Permit Requirement			30,0 (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Weeks	8-Isour FPC
Solids, Total Suspended	Sample Measurement			23		mg/l	0	4 Days/Week	Grab
PARM Code 00530 B Mon,Site No. EFB-1	Permit Requirement			5.0 (Max.)		mg/L		4 Days/Week	Grab
pH	Sample Measurement			7.4	7.9	St.	0	5 Days/Week	Grab
PARM Code 00400 A Mon Site No. EFA-1	Permit Requirement			6.0 (Min.)	8.5 (Max.)	ŠU		5 Days/Week	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 property gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE	OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YYMM/DD)
Roger Holsapple	Lead Operator	My Molindi	407-259-6991	2011/06/21

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

FACILITY.

Wedgefield WWT)

R-091

PERMIT NUMBER TLA010900

MONITORING GROUP NUMBER MONITORING PERIOD From: May 01, 2011

To: May 31, 201

Parameter		Quantity or Loading		Units		ality or Concentration	Units	No. Ex.	I requency of Analysis	Sample Type
Coliform, Feeal, % loss than detection	Sample Measurement				88%		PER-	U	4 Days/Week	Grab
PARM Code 51005 A Mon.Site No. EFA-1	l'ermit Requirement				75 (Min.)		PER- CENT	1-	4 Days/Week	(Jrub
Coliforni, Fecal	Sample Measurement				3		#/IDONII.	0	4 Days/Week	Grab
ARM Code 74055 A  Jon Site No. EFA-1	Permit Requirement				25 (Max.)		*: ICOM!		4 Days/Wook	Grab
otal Residual Chlorine (For Disinfection)	Sample Measurement				0.1		mg/l.	0	Continuous	Meter
ARM Code 50060 A Sign.Site No. FFA-1	Perinii Requirement				10 (Min.)		0.6.1		Continuous	Meter
urbidity	Sample Measurement				2.9		Nto	ll l	Continuous	Meter
PARM Code 00070 B Mon.Site No. EFB-1	Permit Requirement				Report (Max.)		NIE		Continuous	Meter
Nitrogen, Nitrate, Total (as N)	Sample Mousurement				0.77		mg/i.	6	Monthly	8-hour FPC
ARM Code 00620 A m.Site No. EFA-1	Permit Requ <del>irem</del> ent				12.0 (Max.)		mg t.		Monthly	R-hour FPC
fow (from groundwater well)	Sample Measurement	0.00		MGD				0	Continuous	Flow meters and
PARM Code 50050 P MonStie No. Fl W-6	Permit Requirement	Report (An Avg )		MGD					Continuous	Flow meters and totalizers
Flow (from groundwnies well)	Sample Measurement	0.00	0.00	MGD				0	Continuous	Flow meters and totalizers
PARM Code 50050 Q Mon.Site No. FLW-6	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo. Avg.)	MGD					Continuous	Flow meters and totalizers
Flow (total to zone 3)	Sample Measurement	0.000		MGD				Ú	Continuous	Flow meters and totalizers
PARM Cndc 50050 R Mon.Site No. FLW-5	Permit Requirement	0.0232 (An.Avg.)		MGD					Continuous	Flow meters and totalizers
Flow (total to rone 3)	Sample Measurement	0.000	0),84(0)	MGD				Ð	Continuous	Flow meters and totalizers
PARM Code 50/050 S Mon.Site No. FT W-5	Permit Requirement	Report (Mo Avg.)	Report (3-Mn Avg.)	MIGE					Conuntions	Flow meters and totalizers
Flow (total to zene 2)	Sample Measurement	0.000		MGD				þ	Continuous	Flow meters and totalizers
PARM Code 50050 T Mon Site No. 11-W-4	Permit Requirement	0:0634 (An.Avg.)		MG,)					Continuous	From meters and totalizers
Flow (total to zene 2)	Sample Measurement	0.000	0.000	Aich				0	Continuous	Flow meters and totalizers
PARM Code 50050 U Mon Site No. FLW-I	Permii Requirement	Report (Mo Avg.)	Report (3-Mo Avg.)	MGO					Continuous	How racters and totalizers

COMMENTS:

LACILITY:

Wedpefield WW1F

8-001

PERMIT NUMBER FEA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: May 01, 2011

To: May 31, 2011

Parameter	Quantity or Loading		Units	Units Quality or Concentration			Units	No. Ex.	t-requency of Analysis	Sample Type	
Flow (total to zone 1)	Sample Measurement	0.000		MGD					0	Continuous	Flow meters an
PARM Code 50050 V Mon.Site No. FLW-3	Permit Requirement	0.0114 (An.Avg.)		MGD						Continuous	Flow meters and totalizers
Flow (total to zone 1)	Sample Measurement	0.000	11,000	MGD					0	Continuous	Flow meters an
PARM Code 50050 W Mon Site No. FLW-3	Permit Requirement	Report (Mo Avg.)	Report (3-Mo, Avg.)	MGD						Continuous	Flow meters and totalizers
Flow (total to golf course)	Sample Measurement	0.193		MGD					10	Continuous	Flow meters and
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	0.270 (An Asg.)		MGD						Continuous	How meters and totalizers
Flow (total to golf course)	Sample Measurement	0.230	0.185	MGD					U	Соптином	Flow meters and totalizers
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	Report (Mo Avg.)	Report (3-Mo.Avg )	MGD						Continuous	Flow meters and totalizers
BOD, Carbonaceous 5 day, 200	Sample Measurement				178.0			mg/L	0	Every Two Weeks	8-hour FPC
ARM Code 80082 G on Site No. INF-1	Permit Requirement				Report (Mo.Avg.)			ng i		Every Iwo Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				182,0			mg/l	0	Every Two Wreks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement				Report (Mo.Avg.)			ing L		I-very Two Weeks	B-hour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement				51,9			Percent	0	Monthly	Calculated
PARM Code 00180 I Mon Site No. Fl W-1	Permit Requirement		<u></u>		Report			Percent		Monthly	Calculated
	Sample Measurement										
	Permit Requirement										
	Sample Measurement	_									
	Permit Requirement										
	Sample Measurement										
	Permit Requirement									-	

¹ Initially, flow is limited to 0.270 MGD AADF. However, the flow may be increased after completion of the second treatment plant and pending the results the required load test. DEP Form 62-620 910(10), Effective November 29, 1994.

### DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period

FLA010900 From: May 01, 201

To: May 31, 2011

Facility: Wedgefield WWTF

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ML)	pi! (Max)	pl! (Min)	TRC (For Disinfect.) (mg/L)	TSS (mg/L)	Turbidity (NFU)	Flow (MGD)	Nitrogen, Nitrate, Total (as N) (mg/L)
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
Mon. Site	EFA-I	EFA-I	EFA-I	EFA-1	EFA-1	EFB-I	EFB-1	F1.W-1	EFA-I
1			7.6	7.6	1.9		1.7	0.203	
2		<1	7.6	7.6	1	2.2	2.0_	0.239	
3		</td <td>7.5</td> <td>7.5</td> <td>1.5</td> <td>1.0</td> <td>1.3</td> <td>0.194</td> <td></td>	7.5	7.5	1.5	1.0	1.3	0.194	
4		<1	7.5	7.5	1.5	1.7	2.0	0.193	
5	<u>,</u>	<i< td=""><td>7.4</td><td>7.4</td><td>1.8</td><td>1.0</td><td>2.5</td><td>0.192</td><td></td></i<>	7.4	7.4	1.8	1.0	2.5	0.192	
6		<u> </u>	7.5	7.5	1.6		2.2	0.199	
7			7.7	7.7	1.6		L.5	0.195	
8			7.7	7.7	1.8		2.2	0.188	ļ
9		3	7.8	7.8	11	1.0	2.7	0.209	
10		<1	7.9	7.9	1	1.0	2.9	0.184	
H	9.0	<1	7,8	7.8	1.7	1.0	2.2	0.189	0.77
12		<1	7.7	7.7	1	1.0	2.0	0.098	
13			7.5	7.5	I		2.6	0.192	
14			7.6	7.6	ı		1.8	0.195	
15		ļ	7.6	7.6	2.2		2.3	0.213	
16		<1	7.5	7.5	1.5	1.1	2.5	0.227	
17		<1	7.7	7.7	1.6	2.3	2.0	0.190	
18 I		<1	7.7	7.7	1.5	1.0	2.9	0.287	
19	_	<1	7.6	7.6	1.4	1.0	2.0	0.175	
20			7.5	7.5	1.2		2.4	0.197	
21			7.7	7.7	1.1		2.5	0.189	
22			7.7	7.7	1		2.3	0.225	
23		<1	7.8	7.8	1.5	1.2	2.5	0.225	
24		3	7.7	7.7	1.6	1.5	2.9	0.205	
25	8.0	<1	7.7	7.7	1.6	1.8	2.0	0.190	
26		<1	7.8	7.8	1.3	1.0	2.0	0.188	
27			7.6	7.6	1.9		1.9	0.201	
28			7.7	7.7	1		2.9	0.199	
29			7.7	7.7	1.6		2.9	0.197	
30			7.7	7.7	2.5		2.5	0.212	
31		<1	7.8	7.8	3	1.6	2.9	0.226	
Total	17.0	13.5	237.3	237.3	47	22.4	71	6.216	0.77
Mo. Avg.	8.5	0.79	7.6	7.6	1.5	1.31	2.3	0.1997	0.77

PI.A	NT	STA	FFI	NG:

Day Shift Operator	Class:	В	Certificate No:	4653	Name:	Gregory Hooper
Day Shift Operator	Class:		Certificate No:		Name:	
Wight Shift Operator	Class:		Certificate No:	<u> </u>	Name:	
Lead Operator	Class:	С	Certificate No:	8863	Name:	Roger Holsapple

### DAILY SAMPLE RESULTS - PART B

Permit Number:

FLA010900

Monitoring Period From: M

From: May 01, 2011 To May 31, 2011

Facility:

Wedgefield WWTF

	Flow (MGD) golf course	Flow (MGD) Zone 1	Flow (MGD) Zone 2	Flow (MGD) Zone 3	Flow (MGD) GW makeup well	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	50050	50050	50050	50050	80082	00530			1
Mon. Site	FLW-2	FLW-3	FLW-4	F1.W-5	FLW-6	INF-1	INF-1			
1	0.219	0.00	0.00	0.00	0.00					
2	0.352	0.00	0.00	0.00	0.00		<u> </u>			
3	0.491	0.00	0,00	0.00	0.00					
4	0.216	0.00	0.00	0.00	0.00					
5	0.318	0.00	0.00	0.00	0.00					
6	0.266	0.00	0.00	0.00	0.00				_	
7	0.050	0.00	0.00	0.00	0.00			-		
8	0.242	0.00	0.00	0.00	0.00					
9	0.376	0.00	0.00	0.00	0.00					
10	0.202	0.00	0.00	0.00	0.00					
11	0.139	0.00	0,00	0.00	0.00	148.0	150.0			<del>-</del>
12	0.194	0.00	0.00	0.00	0.00					
13	0.367	0.00	0.00	0.00	0.00					1
14	0.012	0.00	0.00	0.00	0.00					1
15	0.000	0.00	0.00	0.00	0.00					····
16	0.105	0.00	0.00	0.00	0.00	- · · · · ·				<u> </u>
17	0.134	0.00	0.00	0.00	0.00					<u> </u>
18	0.195	0.00	0.00	0.00	0.00					
19	0.251	0.00	0.00	0.00	0.00					
20	0.228	0.00	0.00	0.00	0.00					
21	0.074	0.00	0.00	0.00	0.00			- , .		† <del></del>
22	0.337	0.00	0.00	0.00	0.00				<del></del>	† · · · · · · ·
23	0.309	0.00	0.00	0.00	0.00	-		""	1,	
24	0.293	0.00	0.00	0.00	0.00					
25	0.245	0.00	0.00	0.00	0.00	208.0	214.0			
26	0.301	0.00	0.00	0.00	0.00				·	
27	0.294	0.00	0.00	0.00	0.00		<b> </b>			
28	0.061	0.00	0.00	0.00	0.00					
29	0.284	0.00	0.00	0.00	0.00					
30	0.367	0.00	0.00	0.00	0.00					
31	0.142	0.00	0.00	0.00	0.00					
lotal	7.064	0.00	0.00	0.00	0.00	356.0	364.0		····	
Mo. Avg.	0.2307	0.00	0.00	0.00	0.00	178.0	182.0			

PLANT	CTAD	CINIO.
LININAT	SIAL	rinu:

### DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail t	his report to: Department of Environmental Protection, Central 1	District, 3319 Maguire Boulevard Suite	232, Ortando, FL, 32803-3767		
PERMITTEE NAME:	Pluris-Wedgefield	PERMIT NUMBER	FLA010900		
MAILING ADDRESS:	Tampa Florida 33610	LIMIT: CLASS SIZE:	Final N/A	REPORT: GROUP:	Monthly Domestic
FACILITY: LOCATION:	Wedgefield WWTF 3100 Bancroft Boulevard	MONITORING GROUP	R-001	arour.	Commade
	Oriando, FL	NUMBER: MONITORING GROUP DESC:	Public Access Reuse, including in	:Buent	
COUNTY:	Orange	NO DISCHARGE FROM SITE: MONITORING PERIOD From: June 01,2011			

Parameter		Quantity or Loading		Units	Qua	Quality or Concentration			Frequency of Analysis	
Flow	Sample Measurement	0.201		MGD			MGD	0	5 Deys/Week	Flow meters and totalizers
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Requirement	0.368 (An.Avg.)		MGD					5 Days/Week	Flow meters and totalizers
Flow	Sample Measurement	0.197		MOD			MOD	0	5 Days/Week	Flow meters and totalizers
PARM Code 50050 1 Mon Site No. PLW-1	Permit Requirement	Report (Mo.Avg.)		MGD					5 Days/Week	Flow meters and totalizers
IOD, Carbonaceous 5 day, 20C	Sample Measurement				7.7		MG/L	0	Every Two Weeks	8-hour FPC
PARM Code \$0082 Y Mon. Site No. EFA-1	Permit Requirement				20.0 (Ал.Аvg.)		mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonensous 5 day, 20C	Sample Measurement				8.5	9.0	MG/L	9	Every Two Weeks	B-hour FPC
PARM Code 80082 A Mon.Site No. EFA-1	Permii Roquirement				30.0 (Mo.Avg.)	60.0 (Max.)	mp/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				4.6		MG/L	0	4 Days/Week	Grab
PARM Code 00530 B Mon Site No. EFB-1	Permit Requirement				5.0 (Max.)		mg/L		4 Days/Week	Grab
рH	Sample Measurement				7.5	7.9	SU	0	5 Days/Week	Grab
PARM Code 00400 A Mon.Site No. EFA-1	Permit Requirement				6.0 (Min.)	8.5 (Max.)	5U		5 Days/Week	Grab

feertify 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 property 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 sware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL E	DECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Roger Holsapple	Lead Operator	Mi Milante	407-259-6991	2011/67/19

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

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

FACILITY:

Wedgefield WWTF

R-001

PERMIT NUMBER: FLA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: June 01,2011 To: June 30,2011

Parameter		Quantity o	or Loading	Units	Qu	ality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal, % less than betection	Sample Measurement				94 %		PER- CENT	0	4 Days/Week	Grab
PARM Code 51005 A Mon,Site No. EFA-1	Permit Requirement				75 (Min.)		PER- CENT		4 Days/Week	Grab
oliform, Fecal	Sample Measurement				2		# 100M1.	0	4 Days/Weak	Grab
ARM Code 74055 A	Permit Requirement				25 (Max.)		#/LOOME	$\vdash$	4 Days/Week	Grab
Mon.Site No. EFA-1  Fotal Residual Chlorine (For	Sample				1.0		m _p /L	0	Continuous	Meter
Disinfection) PARM Code 50060 A	Measurement Permit			<del> </del>	1.0	<del>  </del>	my/L	-	Continuous	Meter
Mon Site No EFA-1	Requirement Sample		<u> </u>	<del>   </del>	(Min.) 2.9	<del> </del>	NTU		Continuous	Meter
PARM Code 00070 B	Measurement Permit			<del>{</del> -	Report	<del> </del>	NTU		Continuous	Meter
Mon.Site No. EFB-1	Requirement	:			(Max.)					<u> </u>
Nitrogen, Nitrate, Total (as N)	Sample Measurement	, <u> </u>		ļ [	3.34		mg/L	°	Monthly	B-hour FPC
PARM Code 00620 A Mon.Site No. EFA-L	Permit Requirement				12.0 (Max.)	<u> </u>	mg·L		Monthry	8-hour FPC
Flow (from groundwater well)	Sample Measurement	0.00		MGD			MOD	0	Continuous	Flow meters a
PARM Code 50050 P Mon. Site No. FLW-6	Permit Requirement	Raport (An.Avg.)		NOD					Continuous	Flow meters a
Flow (from groundwater well)	Sample Measurement	0.00	0.00	MGD			MGD	0	Continuous	Flow meters a
PARM Code 50050 Q	Permit	Report (Mo.Avg.)	Report (3-Mo,Avg.)	MOD		<del>                                     </del>			Continuous	Flow meters a
Mon.Site No. FLW-6 Plow (total to zone 3)	Requirement Sample Measurement	0.00	(3-140.7(4).)	MOD		† <del></del>	MGD	6	Continuous	Flow meters a
PARM Code 50050 R	Permit	0.0232 (An.Avg.)	-	MGD					Cominuous	Flow meters at
Mon.Site No. FLW-5 Flow (total to zone 3)	Requirement Sample	0.00	9.00	MGD			MGD	0	Continuous	Flow meters a
PARM Code 50050 S	Messurement Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MQD					Continuous	Flow meters a
Mon.Site No. FLW-5 Flow (total to zone 2)	Sample	0.00	(3-ind.NVE)	MGD			MGD	0	Continuous	Flow meters a
PARM Code 50050 T	Measurement Permit	0.0634	<del> </del>	Mab	<del></del>				Continuous	Flow meters a
Mon.Site No. FLW-4 Flow (total to zone 2)	Requirement Sample	(An.Avg.) 0.00	0.00	MGD		<del>                                     </del>	MGD	0	Continuous	Flow meters as
PARM Code 50050	Measurement Permit	Report	Report	MGD				$\vdash$	Сопримоня	flow meters as
Mon.Site No. FLW-4	Requirement	(Mo.Avg.)	(3-Mo.Avg.)			<u> </u>		L		totalizers

FACILITY:

Wedgefield WWTF

R-001

PERMIT NUMBER: FLA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: June 01,2011 To: June 30,2011

Parameter			or Loading	Units	Qu	ality or Concentr	ation	Units	No. Ex.	Analysis Continuous Continuous Continuous Continuous Continuous Continuous Continuous Continuous Continuous Continuous Every Two Weeks Every Two Weeks Every Two Weeks Every Two Weeks Every Two Weeks	Sample Type
Flow (total to zone 1)	Sample Measurement	0,00		MGD				MGD	0	Continuous	Flow meters and totalizers
PARM Code \$0050 V Mon.Site No. FLW-3	Permit Requirement	U_0114 (An.Avg.)		MOD						Continuous	Flow maters and totalizers
Flow (total to zone 1)	Sample Measurement	0.00	0.00	MGD				MOD	٥	Continuous	Flow meters and totalizers
PARM Code 50050 W Mon.Site No. FLW-3	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD	<u>.</u>					Continuous	Flow meters and totalizers
Flow (total to golf course)	Sample Messurement	0.195		MOD				MGD	•	Continuous	Flow moters and totalizers
PARM Code \$0050 Mon Site No. FLW-2	Permit Requirement	0.270 (An.Avg.)		MGD	···	<u> </u>				Continuous	Flow meters and totalizers
Flow (total to golf course)	Sample Measurement	0.134	0.234	MGD		,		MCD	•	Continuous	Flow meters and totalizers
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MOD		<u></u>				Continuous	Flow motors and totalizers
BOD, Curboneceous 5 day, 20C	Sample Measurement		<u> </u>		177.1			is.p/L	0		8-hour FPC
PARM Code 80082 G Mon.Site No. INF-I	Permit Requirement				Report (Mo.Avg.)			mg/L			6-hour FPC
Solids, Total Suspended	Sample Measurement				161.0			mg/L	0		8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement				Report (Mo,Avg.)	<u> </u>		ing/L			8-hour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement	<u>.                                    </u>			54.3			Percent	0	Monthly	Calculated
PARM Code 00180 1 Mon. Site No. FLW-1	Permit Requirement				Report			Percent		Monthly	Calculated
	Sample Measurement										
	Permit Requirement										
	Sample Measurement					ļ					
	Permit Requirement							_			
	Sample Measurement										
	Permit Requirement										

Initially, flow is limited to 0.270 MGD AADF. However, the flow may be increased after completion of the second treatment plant and pending the results the required load test. DEP Form 62-620.910(10), Effective November 29, 1994

## Permit Number: Monitoring Period

# DAILY SAMPLE RESULTS - PART B Facility: Wedgefield WWTF

FLA010900 From: June 01,2011 To: June 30,2011

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ML)	pH (Max)	pH (Min)	TRC (For Disinfect.) (mg/L)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Tota (as N) (mg/L)
Code	80082	74055	00400	00400	50060	00070		<u></u>	
Mon. Site	EFA-1	EFA-I	EFA-I	EFA-1	EFA-I	00530 EFB-1	00070 EFB-1	50050 FLW-1	00620
1		<1	7.8	7.0		1.0		PLW-I	EFA-I
2		<1	7.7	7.8	2.3	1.0	2.9	0.198	
3		<1	7.6	7.7	2	1.0	2.4	0.211	<del></del>
4			7.5	7.6	2		1.5	0.211	<u> </u>
5				7.5	1.4		2.1	0.179	
6			7.6	7.6	1		2.9	0.033	
7		<1	7.7	7.7	1	1.0	2.9	0.176	
8	9.0	<1	7.8	7.8	1		2.9	0.185	
9		<1	7.8	7.8		1.0	26	0.197	3.34
10		<1	7.7	7.7	1.6	1.0	2.6	0.179	
11		-	7.7	7.7	1	1.0	2.9	0.201	
12			7.6	7.6	1.3		2.9	0.182	
13		<1	7.7	7.7	1.5		2.9	0.189	
14	<del></del>	٠,	7.7	7.7	2.5	1.0	2.9	0.222	-
15		<1	7.8	7.8	2.5	1.2	2.9	0.159	
16			7.9	7.9	1	1.0	2.9	0.241	
		<1	7.9	7.9	1.8	1.0	2.0	0.190	
17			7.6	7.6	1.6		2.5	0.189	
18			7.7	7.7	1.1		2.9	0.187	
19			7.8	7.8	3		2.9	0.231	
20		<1	7.7	7.7	2.1	1.9	2.9	0.205	
21		<1	7.7	7.7	2,2	1.0	2.1	0.181	
22	8	<1	7.7	7.7	1.6	1.0	2.7	0.193	
23		<1	7.7	7.7	2	4.6	2.5	0.181	
24			7.8	7.8	2.1		2.6	0.193	
25			7.9	7.9	1.6		2.2	0.234	·
26			7.7	7,7	2.9		2.6	0.223	
27		<1	7.7	7,7	1.7	1.0	2.1	0.223	
28		2	7.6	7.6	1.7	1.0	2.9	0.226	
29		<1	7.8	7.8	1.5	1.5			
30		<1	7.7	7.7	2.5	1.0	2.9	0.216	
31			-,,,	- '.'	2.3		2.5	0.267	
Total	17.0	11	232	232	53	24.2	79	5013	334
Mo. Avg.	8.5	0.57	7.72	7.72	1.8	1.27	2.6	5.912	3.34

PLANT STAFFING: Day Shift Operator	Class:	В	Certificate No:	04653	Name:	Gregory Hooper
Day Shift Operator	Class:		Certificate No:		Name:	
Night Shift Operator	Class:		Certificate No:		Name:	
Lead Operator	Class:	С	Certificate No:	8863	Name:	Roger Holsappic

Permit Number: Monitoring Period

DAILY SAMPLE RESULTS - PART B

FLA010900 From: June 01,2011 To: June 30,2011

Facility: Wedgefield WWTF

	Flow (MGD)	Flow (MGD)	Flow (MGD)		Flow (MGD)	CBOD5	Tree (			
,	golf course	Zone 1	Zone 2	(MGD) Zone 3	GW makeup well	(mg/L)	TSS (mg/L)			
Code	50050	50050	50050	50050	50050	80082		ļ		
Mon. Site	FLW-2	FLW-3	FLW-4	FLW-5	FLW-6	INF-I	00530 INF-1	<u> </u>		
1	0.198	0.00	0.00	0.00	0.00	2141-1	1 1/1/2-1			
2	0.120	0.00	0.00	0.00	0.00		<del> </del> -		<del></del>	<del> </del>
3	0.199	0.00	0.00	0.00	0.00			<del> </del> -	<del></del>	
4	0.056	0.00	0.00	0.00	0.00				<del> </del>	<del> </del>
5	0.000	0.00	0.00	0.00	0.00		<del></del> -	<del> </del> -	<del> </del> -	<u> </u>
6	0.396	0.00	0.00	0.00	0.00			<del> </del>	<del> </del>	<del> </del>
7	0.271	0.00	0.00	0.00	0.00			<u> </u>	<del> </del>	ļ
8	0.158	0.00	0.00	0.00	0.00	160.2	196.0		<del> </del>	<del> </del>
9	0.291	0.00	0.00	0.00	0.00				·}	<del> </del>
10	0.130	0.00	0.00	0.00	0.00				┼──	<u> </u>
11	0.187	0.00	0.00	0.00	0.00					
12	0.268	0.00	0.00	0.00	0.00				<del> </del>	<del> </del>
13	0.395	0.00	0.00	0.00	0.00				<del>                                      </del>	
14	0.262	0.00	0.00	0.00	0.00					-
15	0.109	0.00	0.00	0.00	0.00				<del></del>	
16	0.124	0.00	0.00	0.00	0.00					
17	0.086	0.00	0.00	0.00	0.00	<del>-</del>			<del> </del> -	<u> </u>
18	0.209	0.00	0.00	0.00	0.00		·· ·· ·		<del></del>	
19	0.000	0.00	0.00	0.00	0.00				<b></b>	.,
20	0.000	0.00	0.00	0.00	0.00					
21	0.000	0.00	0.00	0.00	0.00					
22	0.365	0.00	0.00	0.00	0.00	194.0	126.0		-	
23	0.000	0.00	0.00	0.00	0.00			<u></u>		
24	0.030	0.00	0.00	0.00	0.00					
25	0.172	0.00	0.00	0.00	0.00					
26	0.000	0.00	0.00	0.00	0.00					
27	0.000	0.00	0.00	0.00	0.00					
28	0.000	0.00	0.00	0.00	0.00					
29	0.000	0.00	0.00	0.00	0.00					
30	0.000	0.00	0.00	0.00	0.00					
31	0.000	0.00	0.00	0.00	0.00					
Total	4.026	0.00	0.00	0.00	0.00	354.2	322.0			-
Mo. Avg.	0.1342	0.00	0.00	0.00	0.00	177.1	161.0	-		

PLANT STAFFING: Day Shift Operator	Class;	В	Certificate No:	04653	Name:	Gregory Hooper	
Day Shift Operator	Class:		Certificate No:		Name:		:
light Shift Operator	Class:		Certificate No:		Name:		
ead Operator	Class:	<u>c</u>	Certificate No:	08863	Name:	Roger Holsapple	

## Florida Department of Environmental Protection

Twin Towers Office Bldg. 2600 Blair Stone Road Tallahassee, Florida 32399-2400

## **GROUND WATER MONITORING REPORT**

Rule 62-522.600(11)

PART I GENERAL	INFORMATION	
(1) Facility Nam	e Wedgefield WWTF	
Address 31	00 Bancroft Blvd.	
City Orta	ndo Florida	Zip_32833
Telephone Nu	mber <u>(407) 259-6991</u>	
(2) The GMS Ide	ntification Number 3048P03712	
(3) DEP Permit N	lumber FLA010900	
(4) Authorized R	epresentative Name Roger Holsappl	le
Address 660	8 Walton Way	
City Tampa	Florida	Zip 33610
Telephone Nu	mber (813) 359-8327	
(5) Type of Disch	arge Domestic Waste	
ertification certify under pens attachments and tr information is true, possibility of fine an	at, based on my inquiry of those indi- accurate, and complete. I am aware	nined and am familiar with the information submitted in this document and all viduals immediately responsible for obtaining the information, I believe that the that there are significant penalties for submitting false information, including the Signature of Owner or Authorized Representative
PART II QUALITY	ASSURANCE REQUIREMENTS	
Sample Organizati	on Advanced E	nvironmental Laboratories
Analytical Lab	NELAC Certification #	E84589
	NELAC Certification #	
<del></del>	ced Environmental Laboratories	
<del></del>	<del></del>	onte Springs Florida 32701
<del></del>	ced Environmental Laboratories  North Lake Blvd. Suite 1016 Altame	onte Springs Florida 32701

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWB-IR* Background Well Name MW-1

Golf Course WAFR # 6006 GMS# 3048A13413 04/26/2011 12:04

Monitoring Period
Was the well purged before sampling?

From: April 2011 To: June 2011 X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N
ater Level Relative to Feet, NOVD	B2545		61.49	Peet	Report	N/A	Field	Quarterly	pump	N
itrate, (as N)	00620		0.053U	mg/l	Report	0.043	IC 300.0	Quarterly	pump	N N
olids, Total Dissolved(TDS)	70295	70296	360	mg/l	Report	10	E160.1	Quarterly	pump	N N
hloride (as CI)	00940		150	mg/l	Report	0.81	IC 300.0	Quarterty	pump	N N
oliform, Fecsi	74055		1.00	#/100/ml	Report	1.0	SM9222D	Quarterly	pump	N N
4	00400	-	4.64	SU	Report	N/A	Field	Quarterly	Pump	N N
urbidity, Lab - Nepholometric	82079		1.9	טדע	Report	0.016	E180.1	Quarterly	brunb	N
ded: November 2009**	_									
dium	00923		92V	mg/L	Report	0.026	SW8466010	Quarterly	pump	N
halomethane, Total	82080	-	0.16U	ug/L	Report	0.60	E524.2	Quarterly	рилир	ĸ

County: Facility Name: Orange County Wedgefield WWTF

FLA010900

Permit Builder MW ID:

MWB-2

Permit Number:

Well Type: Description: Background Well Name MW-2 Golf Course

WAFR # 6005 GMS# 3048A13414

Monitoring Period
Was the well purged before sampling?
GW TOC:70.10

From: April 2011 To: June 2011 X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

04/26/2011 12:34

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Unito	Permit Requirement	Detection Limits	Annlysis Method	Monitoring Frequency	Sampling Equipment Used	Sample Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545		64.79	Feet	Report	N/A	Field	Quarterly	pump	N
Nitrate, (as N)	00620	_	0.053U	mg/l	Report	0.043	IC 300.0	Quarterly	pump	N N
Solids, Total Dissolved(TDS)	70295	70296	75	mg/l	Report	ſO	E160.1	Quarterly:	ршпр	N
Chloride (as CI)	00940	-	14	mg/l	Report	0.81	IC 300.0	Quarterly	pump	N
Coliform, Fecal	74055		1.00	#/100/m1	Report	1.0	\$M9222D	Quarterly	purap	N
oH	00400		4.32	SU	Report	N/A	Field	Quarterly	ритр	
Turbidity, Lab - Nepholometric	82079	**	3.5	עדא	Report	0.016	E180.1	Quarterly	ршпр	N
Added: November 2009**										
sodium	00923	-	10	mg/L	Report	0.026	SW8466010	Quarterly	pump	N
Fribalomethane, Total	82080	-	0.16U	ug/L	Report	0.60	E524.2	Quarterly	pump	N
	<u> </u>									
	<del> </del>									
	1		<del> </del>							

GMS# 3048P03712

**Based on the elevated concentrations COMMENTS AND EXPLANATION: 11/20/2009 ne (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP)

8

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Bullder MW ID:

Well Type: Description: MWB-3 Background

Background Well Name MW-3 Golf Course WAFR # 6004 GMS# 3048A13415 04/26/2011-06/16/2011 11:39-08:23

Date Sample Obtained: Time Sample Obtained:

Monitoring Period Was the well purged before sampling?

From: April 2011 To: June 2011 X Yes ___ No

Parameter	Permit Builder	Other Historic	Sample Measurement	Units	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Sample Filtered (L/F/N
	PARM Code	PARM Code	(Analysis Results)						Ceeu	(DPIN
Water Level Relative to Feet, NGVD	82545		64.78	Feet	Report	N/A	Field	Quarterly	pump	N
Nitrate, (as N)	00620		0.27U	mg/l	Report	0.043	IC 300.0	Quarterly	bmub	N
Solids, Total Dissolved(TDS)	70295	70296	1400- 1500	mg/l	Report	10	E160.J	Quarterly	pump	N
Colorida (m.Cl)	00940		91	mg/l	Report	0.81	IC 300.0	Quarterly	pump	N
Chloride (as Cl)	74055		1.0U	#/100/ml	Report	1.0	SM9222D	Quarterly	pump	N
Coliform, Fecal	00400		6.02	SU	Report	N/A	Field	Quarterly	pump	7
pH Turbidity, Lab - Nepholometric	82079		60	NTU	Report	0.016	E180.1	Quarterly	pump	N
dded: November 2009**										
odlum	00923	-	69	mg/L	Report	0.026	SW8466010	Quarterly	brutb	N
rihalomethane, Total	82080	-	0.16U	ug/L	Report	0.60	E524.2	Quarterly	britab	ĸ
	T-'									

**Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION: 11/20/2009

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS#3048P03712

Permit Builder MW ID:

Well Type: Description: MWI-4 Intermediate
Well Name MW-4

**Golf Course** WAFR # 6003

GMS# 3048A13416

Date Sample Obtained: Time Sample Obtained:

04/26/2011 08:53

Monitoring Period
Was the well purged before sampling?
GWTOC: 67.70

From: April 2011 To. June 2011 X Yes ___ No

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Usite	Permit Requir <del>emen</del> t	Detection Limits	Analysis Method	Monitoring Frequency	Sempling Equipment Used	Samples Filtered (L/F/N)
Vater Level Relative to Feet, NGVD	82545		63.90	Feet	Report	N/A	Field	Quarterly	pump	N
Nitrate, (as N)	00620	_	0.053U	mg/l	Report	0.043	IC 300.0	Quarterly	trimb	N
Solids, Total Dissolved(TDS)	70295	10296	220	mg/l	Report	10	E160.1	Quarterly	brnub	
Chloride (as Cl)	00940		45	mg/l	Report	0.81	IC 300.0	Quarterly	pump	N
Coliform, Fecal	74055	-	1.0U	#/100/mi	Report	1.0	SM9222D	Questerly	pump	N
oH	00400	_	4.66	SU	Report	N/A	Field	Quarterly	pump	N
Turbidity, Leb - Nepholometric	82079	-	90	ทาบ	Report	0.016	E180.1	Quarterly	ритр	N
Added: November 2009**	00923		29	mg/L	Report	0.026	SW\$466010	Quarterly	pump	N
odium rihalomethane, Total	\$2080	-	0.16U	ug/L	Report	0.60	E524.2	Quarterly	brunb	N
			:	7.77						

**Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:

11/20/2009

County: Facility Name: Permit Number: Orange County Wedgefield WWTF

FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWC-6 Compliance Well Name MW-6

Golf Course WAFR # 6001

GMS# 3048A13418 04/26/2011 10:04

Monitoring Period
Was the well purged before sampling?

From: April 2011 To: June 2011 X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Builder PARM Code	Other Historic PARM Code		liniu	Permit Requiremen f	Detection Limin	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545	-	59.69	Feet	Report	N/A	Field	Quarterty	pump	N
Nitrate, (as N)	00620	_	0.053U	mg/l	Report	0.043	IC 300.0	Quarterly	pump	N
Solids, Total Dissolved(TDS)	70295	70296	160	πg/l	Report	10	E160.I	Quarterly	pump	N
Chloride (as Cl)	00940	-	31	mg/i	Report	0.81	IC 300.0	Quarterly	brauth	N
Coliform, Fecal	74055		1. <b>0</b> U	#/1 00/ml	Report	1.0	SM9222D	Querturly	pump	N
Ж	00400	-	5.02	_ su	Report	N/A	Field	Quarterly	branb	N
Turbidity, Lab - Nepholometric	\$2079		38	NTU	Report	0.016	E180,1	Quarterly	pump	N
dded: November 2009**		L			<u> </u>	<u> </u>				
odium	00923	•	26	mg/L	Report	0.026	SW8466010	Quarterly	punp	N
rihalomethane, Total	\$2080		0.16U	ug/L	Report	0.60	E524.2	Quarterly	hritab	N
	<b></b>									
	<del> </del>									
<u> </u>		<del> </del>	<del> </del>	<u> </u>	+		<u> </u>			
<b></b>			<u> </u>	<del></del>	<del>  </del>					
	<u> </u>	<u> </u>								

^{**}Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:
11/20/2009

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWI-7 Intermediate

Intermediate
Well Name MW-7
Golf Course
WAFR # 6000
GMS# 3048A13419
04/26/2011-06/16/2011
09:23-07:54

From: April 2011 To: June 2011 X Yes ___ No Date Sample Obtained: Time Sample Obtained: Monitoring Period
Was the well purged before sampling?

Parameter	Permit Builder PARM Code	Other Historie PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/)
Water Level Relative to Feet, NGVD	82545		64.79	Feet	Report	N/A	Field	Quarterly	pump	N
Nitrate, (as N)	00620		0.59	mg/l	Report	0.043	IC 300.0	Quarterly	brub	N
Solids, Total Dissolved(TDS)	70295	70296	570-670	mg/l	Report	10	E160.1	Quarterly	pump	N
Chloride (Rs C1)	00940		240	mg/l	Report	9.81	IC 300.0	Quarterly	ритр	N
Coliform, Fecal	74055		1.0U	#/100/ml	Report	1.0	SM9222D	Quarterly	pump	N
pH	00400	-	5.42	\$U	Report	N/A	Field	Quarterly	pump	N
Turbidity, Lab - Nepholometric	82079		34	NTU	Report	0.016	E180.1	Quarterly	pump	N
dded: November 2009**										
odium	00923	-	160-180	mg/L	Report	0.026	SW8466010	Quarterly	pump	N
lythalomethane, Total	\$2080	+-	0.16U	ug/L	Report	0.60	E524.2	Quarterty	punp	N
**Bused on the slevated concentrations COMMENTS AND EXPLANATION:	of these oursmitte	s in the influent s	ennles, parameters Sodium en	d Tribalomethe	ine (TTHMs) has	r hom solded	to the Company	ter Monitorina P	len (GWA/B)	

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWC-I Compliance Well Name MW-1

On-Site Irrigation WAFR # 32995 GMS# --

Monitoring Period
Was the well purged before sampling?
GWTOC: 71.53

From: April 2011 To: June 2011 X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

04/26/2011 10:46

Paramoter	Permit Bullder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Umits	Permit Reguirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Semples Flitered (L/F/N)
Water Level Relative to Feet, NGVD	82545	-	63.58	Feet	Report	N/A	Field	Quarterly	DAMOD	N
Nitrate, (as N)	00620		0.053U	mg/l	Report	0.043	JC 300.0	Querterly	pump	N
Solids, Total Dissolved(TDS)	70295	70296	58	mg/l	Report		E160.1	Quarterly	pump	N N
Chloride (as C1)	00940		15	mg/l	Report	0.81	IC 300.0	Querterly	pump	N
Coliform, Feed	74055	_	1.0U	#/100/ml	Report	1.0	SM9222D	Quarterly	bamp	N
pH	00400		4.42	SU	Report	N/A	Field	Quarterly	pump	N
Turbidity, Lab - Nephotometric	82079		23	NTU	Report	0016	E180,1	Quarterly	pump	N
dded: November 2009**										
iodium	00923	-	9.4	mg/L	Report	0.026	SW8466010	Quenterly	brunb	N
Frihalomethane, Total	\$20\$0	-	0.16U	ug/L	Report	0.60	E524.2	Quarterly	pump	N
			······································				<del></del>			
**Based on the elevated concentrations COMMENTS AND EXPLANATION: 11/20/2009	of these paramete	rs in the influent s	amples, parameters Sodium ar	d Tribalometh	ane (TTHMs) he	ve been added t	to the Groundwai	er Monitoring P	lan (GWMP)	

13

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

MWC-2 Well Type: Compliance Description:

Well Name MW-2 On-Site Irrigation

WAFR # 32996

GM8# ...

Monitoring Period
Was the well purged before sampling?
GWTOC: 72.00

From: April 2011 To: June 2011 X Yes ___ No

Date Sample Obtained: Time Sample Obtained

04/26/2011

Other Historic Sample Measurement Units Permit Builder Sempling Equipment Used Permit Detection Analysis Asethod **Parameter** Mostering Samples Requirement Litelts Frequency PARM Code (Analysis Results) Filtered (L/F/N) PARM Cod 63.70 Water Level Relative to Feet, NGVD \$2545 Feet Report NA Field Quarterly Quarterly N թառա 0.053U 00620 0.043 IC 300.0 Nitrate, (as N) πy/l Report N 150 Quarterly репър 70295 70296 Report 10 E160.1 Solids, Total Dissolved(TDS) N 40 purnp 00940 Report mg/l 0.81 IC 300.0 Chloride (# Cl) 1.0U Quarterly #/1 00/ml pump 74055 Report 1.0 SM9222D Coliform, Pecal N 4.76 Quarterly 00400 SU Report N/A Field ρH N 0.65 punp Turbidity, Lab - Nepholometric NTU 82079 Report 0,016 E180.1 N Added: November 2009** Quarterly pump 0.026 SW8466010 00923 35 mg/L Report Sodium N Quarterly pump Tribalomethene, Total 82080 0.16U ug/L Report 0.60 E524.2 N

**Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:

11/20/2009

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWC-3 Compliance Well Name MW-3

On-Site Irrigation WAFR # 32997 GMS# --

Date Sample Obtained: Time Sample Obtained:

04/26/2011 08:07

From: April 2011 To: June 2011 X Yes ____ No

Monitoring Period
Was the well purged before sampling?
GWTOC: 72.26

Parameter	Permit Builder PARM Code	Other Ristoric PARM Code	Sample Mensurement (Analysis Results)	Valte	Permit Requirement	Detection Limits	Analysia Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NOVD	82545		67.26	Peet	Report	N/A	Field	Quarterly	pump	N
Nitrata, (at N)	00620	-	0.053U	fng/l	Report	0.043	IC 300.0	Quarterly	hruib	N .
Solids, Total Dissolved(TDS)	70295	70296	440	mg/l	Report	10	E160.1	Quarterly	pump	N
Chloride (es Cl)	00940	-	200	mg/l	Report	0.81	IC 300.0	Quarterly	brunb	N
Coliform, Feori	74055	-	1.00	#/100/ml	Report	1.0	SM9222D	Quarterly	рипр	N
Ч	00400		5.53	su	Report	N/A	Field	Quarterly	portep	N
Curbidity, Lab - Nepholometric	82079	-	3.5	טדא	Report	0.016	E180.1	Quarterly	ршир	N
Added: November 2009**										
Sodium	00923	-	120V	mg/L	Report	0.026	SW8466010	Querterly	bruth	N
Tribelomethane, Total	82060	-	0.16U	ug/L	Report	0.60	E524,2	Quarterly	pump	N
			,							
									ļ	
	1									

**Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:
11/20/2009

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID: Well Type:

Description:

MWP-I

Piezometer Well Name MWP-1* On-Site Irrigation WAFR # 55881

GMS# --

Monitoring Period

From: April 2011

To: June 2011

Date Sample Obtained: 04/04/2011-05/11/2011-06/08/2011 Time Sample Obtained:

Was the well purged before sampling? Yes X No

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Semple Measurement (Analysis Results)	Unio	Pernakt Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD  I* Month of Quarter	82545	-	67.01	Foet	Report	N/A		Solinat Water Level Meter	
Water Level Relative to Feet, NGVD	82545	1	64.47	Feet	Report	N/A		Solinst Water Level Mater	
Water Level Relative to Feet, NGVD 3rd Month of Quarter	82545	-	63.89	Feet	Report	N/A		Solinet Water Level Meter	
	<del> </del>								

COMMENTS AND EXPLANATION:

* MWP-1 is the well labeled "Well #1" as shown on Sheet C-12 dated 12/1/98
420/2004

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Piezometer Description:

Well Name MWP-2 On-Site Irrigation WAFR # 55883 GMS# --

MWP-2

Monitoring Period

From: April 2011

To: June 2011

Date Sample Obtained:04/04/2011-05/11/2011-06/08/2011 Time Sample Obtained:

Was the well purged before sampling? Yes X No

Water Level Relative to Feet, NGVD 82545 - 63.91 Feet Report N/A Solinst  2 nd Month of Querter Water Level Me  2 nd Month of Querter 6.9val Relative to Feet, NGVD 82545 - 63.61 Feet Report N/A Solinst	Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Unite	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Flittered (L/F/N
Water Level Relative to Feet, NGVD 82545 - 63.91 Feet Report N/A Solinst  2 nd Month of Querter Water Level Relative to Feet, NGVD 82545 - 63.61 Peet Report N/A Solinst  Water Level Relative to Feet, NGVD 82545 - 63.61 Peet Report N/A Water Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet Level Meet		82545			Feet	Report	N/A		Solinat Water Level Meter	
Valuer Level Relative to Feet, NGVD 82545 - 63.61 Feet Report N/A Solimet	Water Level Relative to Feet, NGVD	82545	-	·	Fact	Report	N/A			
	'atter Level Relative to Feet, NGVD	B2545	-	63.61	Pest	Report	N/A			
				····	<u> </u>					
		<u> </u>								
		<del>-</del>			<u> </u>					
					-					

COMMENTS AND EXPLANATION:

MWP-2 is the well labeled "Well #2" as shown on Sheet C-12 dated 12/1/98
420/2004

DEP Form 62-628.910(10), effective November 29, 1994

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# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed stall t	hile report so: Department of Environmental Protection, Cantral D	istrict, 3319 Maguire Boulevard Suite	232, Orlando, FL, 32803-3767		
PERMITTEE NAME: MAILING ADDRESS:		PERMIT NUMBER	FLA010900		
	Tampa Florida, 33610	LIMIT: CLASS SIZE:	Pinel N/A	REPORT: GROUP:	Monthly
FACILITY: LOCATION:	Wedgefield WWTF 3100 Bancroft Boulevard Orlando, FL	MONITORING GROUP NUMBER: MONITORING GROUP DESC:			Domestic
COUNTY:	Orange	NO DISCHARGE FROM SITE: MONITORING PERIOD From: Jely 41,2011	] To: July 31,2011		

Parameter			or Loading	Units	Qua	lity or Concent	ration	Units	No. Ex.	Frequency of Analysia	Sample Type
Flow	Sample Measurement	0.202		MGD					0	5 Days/Week	Flow meters and totalizers
PARM Code 50050 Y Mon-Site No. FLW-1	Permit Requirement	0.368 (An,Avg.)		MGD						5 Days/Week	Plow meters and
Flow	Semple Measurement	0.211		MGD					0	5 Days/Week	Flow meters and totalizers
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)		MGD						5 Days/Week	Flow meters and totalizers
BOD, Carbonaceous 5 day, 200	Measurement				7,7				0	Every Two	3-hour FPC
.RM Code 80082 Y on.Site No. EFA-1	Permit Requirement				20.0 (An.Avg.)			mg/L		Every Two Weeks	8-hour PPC
BOD, Carbonnosous 5 day, 200	Semple Measurement				8.5	9.0		mg/t	•	Every Two	8-bour FPC
PARM Code 80082 A Mon.Site No. EFA-1	Permit Regulrement				30.0 (Mo.Ave.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				2.2			<b>291</b>	•	4 Days/Week	Grab
PARM Code 00530 B Mon. Site No. EFB-1	Pernsit Requirement				5.0 (Max.)			mg/L		4 Days/Wook	Grab
pH	Sample Measurement				7.5	8.0		<b>8</b> U	٠	5 Daya/Week	Grab
PARM Code 00400 A Mon.Site No. BFA-1	Permit Requirement				6.0 (Min.)	8.5 (Max.)		ŝti		5 Days/Wook	Grab

I certify under pensity of law that this document and all stischments were prepared under my direction or supervision in accordance with a system designed to secure that qualified personnel property garber and evaluate the information submitted. Based on my inquiry of the person of persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my improvedge and belief, true, accounts, and complete. I am swere that there are significant penalties for submitting false information, including the possibility of fine and superisonment for knowing violations.

MALOR SERVICE BUILDING	UTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		
MANUEL ITTLE OF PROJECT ALL EXEC	O 11 AR OLLICER OR VO LUCKTERD MORAL	SIGNATURE OF PRINCIPAL EXECUTIVE STRICK OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Roger Hoisepple	Lead Operator	16. Welaste	407-259-6991	2011/08/23
COMMENT AND EXPLANATE	ON OF ANY VIOLATIONS (Reference all uttach	ments here!		<del>-//-</del>

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

MONITORING GROUP NUMBER: MONITORING PERIOD From: July 01.2011

R-001

PERMIT NUMBER: FLA010900

To: July 31,2011

Parameter		Quantity (	or Loading	Units		ality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal, % less than detection	Sumple Measurement				75%		PER- CENT	0	4 Days/Week	Grab
PARM Code 51005 A Mon Site No. FFA-1	Permit Requirement				75 (Min.)		PER- CENT		4 Days/Week	Grab
Coliform, Fecal	Sample Measurement				4.0		MINUMEL.	0	4 Days/Week	Grab
PARM Code 74055 A MonSite No EFA-I	Permit Requirement				25 (Max.)		#/100MI,		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.0		mg/L	0	Continuous	Meter
PARM Code 50060 A Mon.Site No. EFA-)	Pennit Requirement				1.0 (Min.)		mg/l.		Continuous	Meter
Turbidity	Sample Measurement				2.9		NTU	•	Continuom	Meter
PARM Code 00070 B MonSite No. FFB-1	Permii Requirement				Report (Max.)		עווא		Continuous	Meter
Nitrogen, Nitrate, Total (as N)	Sample Measurement				0,43		me/i.	9	Monthly	8-hour FPC
ARM Code 00620 A on Site No. EFA-I	Permut Requirement				12.0 (Max.)		mg/L		Monthly	8-hour FPC
rlow (from groundwater well)	Sample Measurement	0.00		MGD				0	Continuous	l low meters an
PARM Code 50050 P Mon Site No. FLW-6	Permit Requirement	Report (An,Avg.)		MGD					Continuous	Flow meters and totalizers
Flow (from groundwater well)	Sample Measurement	0.00	0.00	MGD				0	Continuous	Flow meters an totalizers
PARM Code 50050 Q Mon.Site No. FLW-6	Permit Requirement	Report (Mo,Avg.)	Report (3-Mo Avg )	MGD					Continuous	Flow meters and totalizers
Flow (total to zone 3)	Sample Measurement	0.000		MGD				0	Continuous	Flow meters and totalizers
PARM Code 50050 R Mon.Site No. FLW-5	Permit Requirement	0.0232 (An,Avg.)		MGD					Continuous	Flow meters and totalizers
Flow (total to zone 3)	Sample Measurement	0.000	0.008	MGD				0	Continuous	l'inw meters and totalizers
PARM Code 50050 S Mon.Site No. FLW-5	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow meters and totalizers
Flow (total to rose 2)	Sample Measurement	0.000		MGD				0	Continuous	Flow meters and totalizers
PARM Code 50050 T Mon.Site No. FLW-4	Permit Requirement	0.0634 (Ап.Ауд.)		MGD					Continuous	Flow meters and totalizers
Flow (total to zone 2)	Sample Measurement	0.000	0.000	MGD				0	Continuous	Flow meters and totalizers
PARM Code 50050 U Mon,Site No. FLW-4	Permit Requirement	Report (Mo Avg.)	Report (3-Mo, Avg.)	MGD					Continuous	Flow meters and maligers

COMMENTS: Flow was going to reuse on the  $12^{\dot{\alpha}}$  of February when NO3 result was 12.12

DEP Form 62-620 910(10), Effective November 29, 1994

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

MONITORING GROUP NUMBER: R-001 MONITORING PERIOD From: July 01,2011 To: July

To: July 31,2011

PERMIT NUMBER: FLA01090d

Parameter		Quantity	or Loading	Units	Qu	ality or Conce	ntration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (total to zone 1)	Sample Measurement	<b>0.08</b> 0		MGP					•	Continuous	Flow meters an
PARM Code 50050 V Mon.Site No. FLW-3	Permit Requirement	0.0114 (An Avg.)		MOD						Continuous	Flow meters and totalizers
Flow (total to zone 1)	Sample Measurement	0.000	0.000	MGD					0	Continuous	Flow meters and
PARM Code 50050 W Mon.Site No. FLW-3	Permit Requirement	Report (Mo Avg.)	Report (3-Me Avg.)	M(iD)						Continuous	Flow meters and totalizers
Flow (total to golf course)	Sample Measurement	0.181		MGD					•	Continuous	Flow meters and totalizers
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	0.270 (Δσ.Δvg.)		MED	-					Continuous	Flow meters and totalizers
Flow (total to golf course)	Sample Measurement	0.092	0.152	MGD					6	Continuous	Flow meters and totalizers
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGU						Continuous	Flow meters and totalizers
BOD, Carbonsceous 5 day, 20C	Sample Measurement				206.5			mg/L		Every Two Weeks	8-boar FPC
RARM Code 80082 G on Site No. INF-1	Permit Requirement	<u></u>			Report (Mo.Avg.)			mg:1.		Every Two Weeks	K-hour FPC
olids, Total Suspended	Sample Measurement			1	192.0	<u> </u>		mg/L	0	Every Two Weeks	8-kour FPC
PARM Code 00530 G Mon.Site No. 3NF-1	Permit Requirement				Report (Mo.Avg.)			mg/l		Every Two Weeks	R-hour FPC
Percent Capacity, (TMADI/ Permitted Capacity) x 100	Sample Measurement		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		54.89			Percent	0	Monthly	Chiculated
PARM Code 00180 I Mon.Site No. FLW-1	Permit Requirement	<u> </u>	ļ <u>.</u>		Report			Percent		Monthly	Calculated
	Sample Measurement										
	Permit Requirement					<u> </u>					
	Sample Measurement									•·	
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

¹ Initially, flow is limited to 0.270 MGD AADI. However, the flow may be sucreased after completion of the second treatment plant and pending the results the required load test DEP Form 62-620.910(10), Effective November 29, 1944.

#### DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period

FLA010900 From: July 01,2011

To: July 31,2011

Facility: Wedgefield WWTF

	CBOD5 (mg/l.)	Fecal Coliform Bacteria (#/100ML)	pH (Max)	pH (Min)	TRC (For Disinfect.) (mg/L)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Tota (as N) (mg/L
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-t	EFB-I	EFB-1	FLW-1	EFA-I
1			7.6	7.6	2		1.6	0.271	
2			7.8	7.8	1		2.1	0.256	
3			7.6	7.6	1.5		2.0	0.241	
4			7.6	7.6	2.2		1.5	0.231	
5		<1	7.6	7.6	2.0	<1	1.6	0.241	
6	8.0	<1	7.7	7.7	2	<1	1,5	0.224	
7		<1	7.7	7.7	1.8	<1	2.5	0.211	
B		<1	7.8	7.8	1.8	1.1	2.4	0,304	
9			7.6	7.6	2.8		1.0	0.317	
10			7.6	7.6	1.4		0.8	0.279	
11		<1	7.6	7.6	1.4	<1	2.9	0.258	
12		<1	8.0	8.0	1	1.6	2.1	0.230	
13		2	7.9	7.9	1.3	<1	1.7	0.229	
14		<1	8.0	8.0	1.3	1.7	2.2	0.210	<u> </u>
15			7.6	7.6	1		2.9	0.207	
16			7.8	7.8	1.3		2.9	0.355	
17			7.7	7.7	1		2.9	0.245	
18		ī	7.7	7.7	1	1.9	2.9	0.289	
19		1	7.8	7.8	1	2.2	2.9	0.234	
20	9.0	<1	7.7	7.7	1	<1	2.0	0.234	
21		4	7,7	7.7	1.4	1.4	2.4	0.221	
22			7.5	7.5	1,6		2.6	0.222	
23			7.6	7.6	1.5		2.4	0.236	
24			7.6	7.6	2.5		2.9	0.266	
25		<1	7.7	7.7	1	1.1	2.9	0,242	
26		<1	7.8	7.8	2.5	<	1.5	0.059	
27		<1	7.6	7.6	1	<1	2.9	0.027	
28		<1	7.9	7.9	1_	<1	2.9	0.024	
29			7.7	7.7	1		2.9	0.036	
30			7.8	7.8	1		2.9	0.145	
31			7.7	7.7	1		2.9	0.006	
Total	17.0	14.0	239	239	45.3	15.5	71.6	6.55	
Mo. Avg.	8.5	0.875	7.7	7,7	1.4	0.968	2.3	0.211	

#### PLANT STAFFING:

Day Shift Operator	Class:		Certificate No:	4653	Name:	Gregory Hooper
Day Shift Operator	Class:		Certificate No:		Name:	
Jight Shift Operator	Class:		Certificate No:		Name:	
Lead Operator	Class:	<u>c</u>	Certificate No:	8863	Name:	Roger Holsapple

## DAILY SAMPLE RESULTS - PART B

Permit Number:

FLA010900

**Monitoring Period** 

From: July 61, 2011

To July 28, 2011

Facility: Wedgefield WWTF

-	Flow (MGD)	Flow (MGD)	Flow (MGD)	Flow (MGD)	Flow (MGD)	CBOD5	TSS (mg/L)			1
j	golf course	Zone 1	Zone 2	Zone 3	GW makeup	(mg/L)	111 (			
					well		:			
Code	50050	50050	50050	50050	50050	80082	00530		<del></del> -	<del>                                     </del>
Mon. Site	FLW-2	FLW-3	FLW-4	FLW-5	FLW-6	INF-1	INF-1			
1	0.000	0.00	0.00	0.00	0.00			**	<del></del>	
. 2	0.000	0.00	0.00	0.00	0.00					<del> </del> -
3	0.000	0.00	0.00	0.00	0.00		† · · · · · · · ·			
4	0.120	0.00	0.00	0.00	0.00					
5	0.000	0.00	0.00	0.00	0.00	<del></del>				
6	0.252	0.00	0.00	0.00	0.00	221.0	162.0			-
7	0.000	0.00	0.00	0.00	0.00	· · · · · · · · · · · · · · · · · · ·				<del> </del>
8	0.000	0.00	0.00	0.00	0.00				·	
9	0.000	0.00	0.00	0.00	0.00					
10	0.000	0.00	0.00	0.00	0.00					
11	0.000	0.00	0.00	0.00	0.00		<del></del>			
12	0.000	0.00	0.00	0.00	0.00					
13	0.164	0.00	0.00	0.00	0.00					
14	0.000	0.00	0.00	0.00	0.00					
15	0.000	0.00	0.00	0.00	0.00		<del>                                     </del>		<del></del>	<u> </u>
16	0.000	0.00	0.00	0.00	0.00				<del></del>	
17	0.000	0.00	0.00	0.00	0.00	<del></del>	<u> </u>		<del></del>	
18	0.000	0.00	0.00	0.00	0.00		<del> </del>		<del></del>	
19	0.000	0.00	0.00	0.00	0.00		<del> </del>		<del></del>	
20	0.000	0.00	0.00	0.00	0.00	192.0	222.0		<del> </del>	
21	0.316	0.00	0.00	0.00	0.00					
22	0.012	0.00	0.00	0.00	0.00		1			
23	0.000	0.00	0.00	0.00	0.00					
24	0.000	0.00	0.00	0.00	0.00		<del> </del>		<del></del>	
25	0.194	0.00	0.00	0.00	0.00					-
26	0.280	0.00	0.00	0.00	0.00	<del></del>				
27	0.263	0.00	0.00	0.00	0.00		<del> </del>			
28	0.017	0.00	0.00	0.00	0.00	**				
29	0.743	0.00	0.00	0.00	0.00					
30	0.000	0.00	0.00	0.00	0.00	<del></del> -				
31	0.494	0.00	0.00	0.00	0.00	·				
Total	2.855	0.00	0.00	0.00	0.00	413.0	384.0			
Mo. Avg.	0.092	0.00	0.00	0.00	0.06	206.5	192.0			
							.,2.0			

PLANT	STAFFING
-------	----------

Day Shift Operator	Class:	В	Certificate No:	4653	Name:	Gregory Hooper
Day Shift Operator	Class:		Certificate No:	<del></del>	Name:	
Night Shift Operator	Class:		Certificate No:		Name:	
Lead Operator	Class:	_ <u>C</u>	Certificate No:	8863	Name:	Roger Holsapple

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed suall this report to: Department of Environmental Protection, Central District, 3319 Magnire Boulevard State 232, Orlando, FL, 32803-3767	
30 1 272, CALEND, PL 32803-3767	

PERMITTEE NAME: Plaris-Wedgefield MAILING ADDRESS 6608 Watton Way Tampa Florida, 33610

Orange

PERMIT NUMBER

FLA010900

REPORT: GROUP:

FACILITY:

Wedgefield WWIF 3100 Bancroft Boulevard

LIMIT: CLASS SIZE:

N/A

LOCATION:

COUNTY:

Oriendo, FL

MONITORING GROUP NUMBER: R-001
MONITORING GROUP DESC: Public Access Reuse, including Influent

NO DISCHARGE FROM SITE: MONITORING PERIOD From: August 61,2011

			•	. val. val	mr 41 '50 f f	To: Augus	131,2011				
Parameter		Quantity or L	oading	Units	Qua	lity or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sumple Typ
Flow	Sample Measurement	0.293		MGD				<del> </del>	0	5 Days/Week	Flow meters a
PARM Code 50050 Y	Permit	0.368		MGD			<del> </del>		_	<u> </u>	totalizers
Mon.Site No. FLW-1	Requirement	(An Avg.)						1	1	5 Days/Week	I low meters o
Flow	Sample Measurement	0.237		MGD					0	5 Days/Week	Flow meters a
PARM Code 50050 1	Permit	Report		MGD			<del> </del>		$\vdash$		totalizers
Mon.Site No. FLW-1	Requirement	(Mo.Avg.)					[	ĺ	1 1	5 Days/Wook	Flow meters
BOD, Carbonaceous 5 day, 20C	Sample Measurement				7.7				0	Every Two	B-hour FP
RM Code 80082 Y	Perma				20.0		<del>                                     </del>		$\vdash \vdash$	Weeks	
on Site No. F.FA-1	Requirement				(An.Avg.)		i	mg/L	!!	Every 1wo	8-hour FPC
BOD, Carbonacrous 5 day, 20C PARM Code R0882 A	Measurement				7.6	8			9	Every Two Weeks	8-hour FP
Mon Site No. EFA-1	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/1.		Every Two Weeks	8-hour FPC
iolida, Total Suspended	Sample Measurement				2.8			mg/1	0	4 Days/Week	Grab
ARM Code 00530 B Mon Site No. EFB-1	Permit Requirement				5.0 (Max.)			ing L		4 Days/Week	Grab
Н	Sample Measurement				7.3	7.8		SU	0	5 Days/Week	Grab
ARM Code 00400 A	Permit		<del></del>	$\neg \neg$	6.0	8.5		SU		5 Days/Week	Grub
Mon Site No. EFA-1	Requirement				(Min.)	(Max.)		30		3 Days/Week	City

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. Besed on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFI	T 05 . 1 T 1/2			on president to the	DWING TROIBINOUS.
THE G TRANSPACE EXECUTIVE OF THE	ER OR AUTHORIZED AUTH	SIGNATURE OF	PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Roger Hoisapple	Lead Operator		Maryel	407-259-6991	2011-09-23
COMMENT AND EXPLANATION OF ANY	VIOLATIONS (Reference all attachment	ts hept	//		

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

#### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

R-001

PERMIT NUMBER: FLA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: August 01,2011

To: August 31,2011

Parameter		Quantity or Loading		Units	Qu	ality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal, % less than detection	Sample Measurement				94%		PER- CENT	0	4 Days/Weck	Grab
PARM Code 51005 A Mon.Site No. EFA-1	Permit Requirement				7.5 (Min.)		PEUR- C'ENT		4 Days/Work	Grah
Coliform, Fecal	Sample Measurement				3		#/100M1.	0	4 Days/Week	Grab
PARM Code 74055 A Mon Site No. EFA-1	Permit Requirement				25 (Max.)		#/100ML		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.0		<b>=g/l</b> .	9	Continuous	Meter
PARM Code 50060 A Mon.Site No. EFA-I	Permit Requirement	•			1.0 (Min.)		mg/L.	П	Continuous	Moter
Turbidity	Sample Measurement				2.9		NTU	0	Continuous	Meter
PARM Code 00070 B Mon.Site No EFB-1	Permit Requirement				Report (Max.)		NTU		Continuous	Moter
Nitrogen, Nitrate, Total (as N)	Sample Measurement				0.62		me/L	0	Monthly	8-hour FPC
ARM Code 00620 A con.Site No. EFA-1	Permit Requirement				12.0 (Max.)		mg/L		Monthly	8-hour FPC
Flow (from groundwater well)	Sample Measurement	0.00		MCD	·			0	Continuous	Flow meters as
PARM Code 50050 P Mon Site No. FLW-6	Permit Requirement	Report (An.Avg.)		MGD					Continuous	Flow meters an
Flow (from groundwater well)	Sample Measurement	0.00	0.00	MGD				0	Continuous	Flow meters ar
PARM Code 50050 Q Mon.Site No. FLW-6	Permst Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow meters an
Flow (total to zone 3)	Sample Measurement	0.900		MGD				•	Continuous	Flow meters as
PARM Code 50050 R Mon-Site No. FLW-5	Permit Requirement	0.0232 (An.Avg.)		MGD					Continuous	Flow meters and totalizers
Flow (total to zone 3)	Sample Measurement	0.000	0.000	MGD				0	Continuous	Flow meters as
PARM Code 50050 S Mon Site No. FLW-5	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD				_	Continuous	Flow meters an
Flow (total to zone 2)	Sample Measurement	8.000		MGD				•	Continuous	Flow meters as
PARM Code 50050 T Mon Site No. FLW-4	Permit Requirement	0.0634 (An.Avg.)		MGD				1	Continuous	Flow meters and
Flow (total to zone 2)	Sample Measurement	0.000	0.000	MGD				0	Continuous	Flow meters as
PARM Code 50050 U Mon-Site No. FLW-4	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD				$\dashv$	Continuous	Flow meters and totalizers

COMMENTS: Flow was going to reuse on the 12th of February when NG3 result was 12.12

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

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

MONITORING GROUP NUMBER: R-001 MONITORING PERIOD From: August 01,2011 To: Au

To: Appart 31,2011

PERMIT NUMBER: FLA010900

					(481 01,201)	lo: Apgar					
Parameter		Quantity	or Loading	Units	Quz	ality or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (total to zone 1)	Sample Measurement	0.000		MGD					Ü	Continuous	Flow meters at totalizers
PARM Code 50050 V Mon.Site No. FLW-3	Permit Requirement	().0114 (An.Avg.)		MGD						Continuous	Flow meters an
Flow (total to zone 1)	Sample Measurement	9,000	0.000	MGD					0	Continuous	l'low meters ar
PARM Code 50050 W Mon.Site No. FLW-3	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo Avg.)	MGD						Continuous	Flow meters and totalizers
Flow (total to golf course)	Sample Measurement	0.164		MGD					•	Continuous	Flow meters no totalizers
PARM Code 5005B Mon Site No. FLW-2	Perma Requirement	0.270 (An.Avg.)		MGD						Continuous	l'low meters and totalizers
Flow (total to golf course)	Sample Measurement	<b>0.187</b>	0.137	MGD					0	Continuous	Flow meters an totalizers
PARM Code 50050 Mon Site No. FLW-2	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo Avg.)	MGD	- · · · · · · · · · · · · · · · · · · ·		<u> </u>			Continuous	Flow meters and totalizers
BOD, Carbonaceous 5 day, 201.	Sample Measurement				194.3			wag/l.		Every Two Weeks	B-hour FPC
PARM Code 80082 G on Site No. 1NF-1	Permit Requirement				Report (Mo Avg.)			mp"L		Every Two Weeks	8-hour FPC
polids, Total Suspended	Sample Measurement				132.0		<u> </u>	mg/L	8	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site Nn. INF-1	Permit Requirement	·			Report (Mo, Avg.)		ļ <u> </u>	mg/i.		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement				59.4			Percont	°	Monthly	Calculated
PARM Code 00180   Mon.Site No. FLW-1	Permit Requirement		<u> </u>		Report		ļ	Percent		Monthly	Calculated
	Sample Measurement						<u> </u>		Ш		
ļ <del></del>	Permit Requirement						<u> </u>				
	Sample Measurement Permit						ļ				
	Requirement										
	Sample Measurement Permit										
	Requirement										

Initially, flow is limited to 0.270 MGD AADF. However, the flow may be increased after completion of the second tremment plant and pending the results the required load test. DEP Form 62-620.910(10), Effective November 29, 1994

# DAILY SAMPLE RESULTS - PART B

To: August 31,2011

Permit Number: Monitoring Period

FLA010900

From: August 01,2011

Facility: Wedgefield WWTF

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ML)	рН (Мах)	pH (Min)	TRC (For Disinfect.) (mg/L)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Tot (as N) (mg/
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
Mon. Site	EFA-1	EFA-1	EFA-I	EFA-1	EFA-1	EFB-1	EFB-1	FLW-1	EFA-1
ī,		<1	7.7	7.7	]	2.8	2.9	0.178	
2		<1	7.6	7.6	1.2	1.0	2.9	0.235	
3	8.0	<1	7.6	7.6	1	1.2	2.9	0.236	0.62
4		<1	7.4	7.4	1.0	1.0	2.9	0.310	-
5			7.6	7.6	1.4		2.9	0.244	
6			7.3	7.3	1.6		2.4	0.246	
7			7.4	7.4	1		2.6	0.229	
8		<)	7.7	7.7	1	1.0	2.9	0.240	
9		<1	7.7	7.7	1.2	1.0	2.6	0.284	
10		<1	7.7	7.7	1,1	1.0	2.0	0.243	
11		<1	7.6	7.6	1.3	1.0	1.8	0.281	
12			7.7	7.7	1.8		2.7	0.234	
13			7.8	7.8	2.5		2.4	0.220	
14			7.8	7.8	3		2,9	0.228	
15		<1	7.7	7.7	2.5	1.2	2.9	0.279	
16		<1	7.6	7.6	1.5	1.3	2.6	0.244	
17	7.0	<]	7.7	7.7	1.5	1.0	1.5	0.228	<del>.</del>
18		<1	7.7	7.7	1,5	1.8	2.4	0.222	·
19			7.8	7.8	1.2		1.8	0.232	
20			7.8	7.8	1.6		2.0	0.215	<del>-</del>
21			7.7	7.7	1.3		1,0	0.242	
22		<1	7.7	7.7	1.2	1.0	0.5	0.247	
23		<1	7.8	7.8		1.0	2.9	0.251	
24		<1	7.6	7.6	1.3	1.0	1.8	0.209	
25		3	7.7	7.7	1.4	1.0	2.7	0.207	
26 27			7.6	7.6	1		2.6	0.227	
			7.4	7.4	1		2.2	0.224	
28			7.6	7.6	1,4		2.6	0.251	
29		<1	7.7	7.7	1.5	1.0	1.3	0.222	
30		<1	7.5	7.5	2.5	1.0	2.0	0.212	
31	8.0	<1	7.3	7.3	1,4	1.0	2.2	0.225	
Total	23	12.0	236.5	236.5	49	19.5	71.8	7.345	0.62
Mo. Avg.	7.6	0.63	7.6	7.6	1.44	1.08	2.3	0.237	0.62

PLA	NI.	ST	413	INC:

Day Shift Operator	Class:	В	Certificate No:	4653	Name:	Gregory Hooper
Day Shift Operator	Class:	<del></del>	Certificate No:		Name:	
Night Shift Operator	Class:		Certificate No:		Name:	
_ead Operator	Class;	С	Certificate No:	8863	Name:	Roger Holsapple

## DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period

FLA010900 From: August 01, 2011

To August 28, 2011

Facility: Wedgefield WWTF

	Flow (MGD) golf course	Flow (MGD) Zone 1	Flow (MGD) Zone 2	Flow (MGD) Zone 3	Flow (MGD) GW makeup well	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	50050	50050	50050	50050	80082	00530			<del></del>
Mon. Site	FLW-2	FLW-3	FLW-4	FLW-5	FLW-6	INF-1	INF-1			
ì	0.381	0.00	0.00	0.00	0.00					
2	0.537	0.00	0.00	0.00	0.00					
3	0.731	0.00	0.00	0.00	0.00	191.0	134.0			
4	0.694	0.00	0.00	0.00	0.00					
5	0.252	0.00	0.00	0.00	0.00					
6	0.000	0.00	0.00	0.00	0.00					
7	0.206	0.00	0.00	0.00	0.00					
8	0.224	0.00	0.00	0.00	0.00					
9	0.000	0.00	0.00	0.00	0.00					
10	0.000	0.00	0.00	0.00	0.00					
11	0.000	0.00	0.00	0.00	0.00					
12	0.056	0.00	0.00	0.00	0.00					
13	0.088	0.00	0.00	0.00	0.00	-	1			
14	0.237	0.00	0.00	0.00	0.00		1		<del></del> -	
15	0.144	0.00	0.00	0.00	0.00		1			
16	0.000	0.00	0.00	0.00	0.00					
17	0.000	0.00	0.00	0.00	0.00	202.0	114,0			
18	0.634	0.00	0.00	0.00	0.00			······································		
19	0.693	0.00	0.00	0.00	0.00					
20	0.000	0.00	0.00	0.00	0.00			-		
21	0.000	0.00	0.00	0.00	0.00					
22	0.266	0.00	0.00	0.00	0.00				· · · · · · · · · · · · · · · · · · ·	
23	0.047	0.00	0.00	0.00	0.00				·	
24	0.000	0.00	0.00	0.00	0.00		<u> </u>	<del></del>		
25	0.023	0.00	0.00	0.00	0.00					-
26	0.000	0.00	0.00	0.00	0.00				l	
27	0.000	0.00	0.00	0.00	0.00	-				
28	0.000	0.00	0.00	0.00	0.00					
29	0.414	0.00	0.00	0.00	0.00					
30	0.001	0.00	0.00	0.00	0.00	<del></del>	<del>   </del>			<b>†</b>
31	0.000	0.00	0.00	0.00	0.00	190.0	148.0			<del> </del>
Total	5.628	0.00	0.00	0.00	0.00	583.0	396.0			
Mo. Avg.	0.187	0.00	0.00	0.00	0.00	194.3	132.0			

DI ANT	CTA	CCD	io.
PLANT	DIA	1111	W.

Day Shift Operator	Class:	В	Certificate No:	4653	Name:	Gregory Hooper
		<del></del>		<del></del>		
Day Shift Operator	Class:		Certificate No:		Name:	
Night Shift Operator	Class:		Certificate No:		Name:	
Lead Operator	Class:	<u>c</u>	Certificate No:	8863	Name:	Roger Holsapple

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

this report to: Department of	Environmental Protection, Central	District, 3319 Magaire Boulevard Suits	: 232, Orlando, FL., 32803-3767		
		PERMIT NUMBER	FLA010900		
Tampa Florida 33610		LIMIT:	Finel	REPORT:	Monthly
Wedgefield WWTF		CLASS SILE.	IVA	GROUP:	Domestic
3100 Beneroft Boulevard		MONITORING GROUP NUMBER:	R-001		
Orlando, FL	DEVISED	MONITORING GROUP DESC:	Public Access Rause, including I	nfluent	
Orange	1-70-1Z	NO DISCHARGE FROM SITE: MONITORING PERIOD From: September 01,2011	]		
	Pluris-Wedgefield  6608 Walton Way Tampe Florida 33610  Wedgefield WWTF 3100 Beneroft Boulevard  Orlando, FL	Pluris-Wedgefield  6608 Walton Way Tampe Florids 33610  Wedgefield WWTF 3100 Beneroft Boulevard  Orlando, FL  REVISED	Pluris-Wedgefield PERMIT NUMBER  6608 Walton Way Tampa Florida 33610  LIMIT: CLASS SIZE:  Wedgefield WWTF 3100 Baneroft Boulevard  Orlando, FL  Crange  REVISED  Crange  NO DISCHARGE FROM SITE: MONITORING PERIOD	Crange  Crange  Limit: Final CLASS SIZE: N/A  Limit: Final CLASS SIZE: N/A  Wedgeflold WWTF  3100 Beneroft Boulevard  Orlando, FL  Crange  REVISED  Crange  NO DISCHARGE FROM SITE: Final N/A  MONITORING GROUP R-001  NUMBER: MONITORING GROUP DESC: Public Access Reuse, including Is SITE: MONITORING PRIOD	Plants-Wedgefield  FERMIT NUMBER  FLA010900  LDMIT: Final REPORT: CLASS SIZE: N/A GROUP:  Wedgefield WWTF 3100 Bancroft Boulevard  Orlando, FL  Crange  REVISED  Orlando, FL  Orlando FL  Orlando FL  ORDUS FROM SITE: MONITORING GROUP DESC: Public Access Rause, including Influent  NO DISCHARGE FROM SITE: MONITORING PERIOD

Parameter		Quantity or Loading		Units Quality or Con		or Concentration Units		Frequency of Analysis	Sample Type
Flow	Sample Mossurement	0.202	MGD			MGD	0	5 Days/Week	Flow maters and totalizers
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Requirement	0.368 (An.Avg.)	MGD				T	5 Days/Week	Flow meters and totalizers
Flow	Sample Measurement	0.215	MGD			MGD	0	5 Days/Week	Flow meters and totalizers
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)	MÕÕ					5 Days/Week	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Meanasment			7.6		MQ/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement			20.0 (An.Ave.)		mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement			7.0	7.0	MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 A Mon Site No. EPA-1	Permit Regulrement			30.0 (Mo.Avg.)	60.0 (Max.)	mg/L		Every Two Works	f-hour PPC
Solida, Total Suspended	Sample Measurement			4.5		MG/L	0	4 Days/Wook	Orab
PARM Code 00530 B Mon.Site No. EFB-1	Perenit Requirement			5.0 (Max.)		mg/L		4 Days/Week	Grab
рH	Sample Measurement			7.6	8.1	8u	0	5 Days/Week	Grab
PARM Code 00400 A Mon.Site No. EFA-1	Permit Requirement			6.0 (Min.)	8.5 (Max.)	รับ		5 Days/Week	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 presented properly gather and evaluate the information submitted. Based on my inquiry of the person or perious who manage the system, or those persons directly responsible for gethering the information, the information, the information, the information, the information, 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 the knowledge and belief, true, accurate, and complete.

NAME/TITLE OF PRINCIPAL EXE	CUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED	AGENT TELEPHONE NO	DATE (YYAMADD)
Roger Holsappie	Lead Operator	14 Holsole	407-259- <del>69</del> 91	2014/01/10
COMMENT AND EXPLANATI	ON OF ANY VIOLATIONS (Reference of street	mante banks		<del>' / /                                 </del>

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

1

# DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

PERMIT NUMBER: PLA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: September 01,2011 To September 30,2011

Parameter		Quantity or Loading		Units		uality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal, % tess than detection	Semple Measurement			<u> </u>	24%		PER- CENT	9	4 Days/Week	Great
PARM Code \$1005 A Mon.Site No. EFA-1	Permit Requirement				75 (Min.)		PER- CENT		4 Days/Week	Grab
Coliform, Fecal	Sample Measurement				3		#/100ML	•	4 Days/Week	Grab
PARM Code 74055 A Mon.Sile No. EFA-1	Permit Regalrement				25 (Max.)		A/100ML		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1,0		mg/L	0	Continuous	Motor
PARM Code 50060 A Mon Site No. EFA-1	Permit Requirement				1.0 (Min.)	1	my/L		Continuous	Motor
Turbidity	Sample Messurement				2.9	†	טזא	Ó	Continuous	Meter
PARM Code 00070 B Mon. Site No. EPB-J	Permit Requirement	-			Report (Max.)		NTU		Continueus	Meter
Nitrogen, Nitrate, Total (as N)	Semple Measurement				5.66		mg/L	ō	Monthly	8-hour FPC
PARM Code 00620 A Mon. Site No. BFA-1	Permit Requirement				12.0 (Max.)		mg/L		Monthly	8-hour PPC
Flow (from groundwater well)	Sample Massurement	0.00		MOD			MGD	0	Continuous	Flow meters an
PARM Code 50050 P Mon.Site No. FLW-6	Permit Requirement	Report (An.Avg.)		MOD					Continuous	Flow meters and totalizers
Flow (from groundwater well)	Sample Measurement	0.00	9.00	MOID	_		MGD	•	Continuous	Flow moters and
PARM Code 50050 Q Mon. Site No. FLW-6	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD	<u>-</u>			7	Continuous	Flow meters and totalizers
Flow (total to zone 3)	Sample Measurement	0.00		MGD			MORD	•	Continuous	Flow meters and
PARM Code 50050 R Mon.Site No. PLW-5	Permit Requirement	0.0232 (An.Avg.)		MGD				1	Continuous	Flow meters and totalizers
Flow (total to zone 3)	Sample Measurement	0.00	8.00	MGD			MOD	•	Continuous	Flow aneters and totalizers
PARM Code 50050 S Mon.Site No. FLW-5	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow meters and totalizers
Flow (total to zone 2)	Sample Measurement	0.00		MOD			MGD	0	Continuous	Flow meters and totalizers
PARM Code 50050 T Mon.Site No. FLW-4	Permit Reguirement	0.0634 (An.Avg.)		MGD					Continuous	Flow meters and totalizars
Flow (total to zone 2)	Sample Measurement	0.00	9.00	MGD			MOD	•	Continuous	Flow meters and totalizers
PARM Code 50050 U Mon.Site No. FLW-4	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD			1		Continuous	Flow meters and totalizers

# DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

MONITORING GROUP NUMBER: MONITORING PERIOD From: September 01,2011 To: September 38,2611

R-001

PERMIT NUMBER: FLA010900

Parameter		Quantity	Quantity or Loading		Qu	Units Quality or Concentration		No.	Frequency of	Sample Typ
low (total to mee 1)	Sample	0.00		MGD		T	MGD	Ex.	Continuous	Flow meters a
	Measurement							"	CONTRACTOR	totalizers
ARM Code 50050 V	Permit	0.0114		MGD				+	Continuous	Flow moters
Ion.Site No. FLW-3	Requirement	(An.Avg.)		:		1		ĺ		lotalizers
low (total to zone 1)	Sample	0.00	0.46	MGD		1	MGD	+	Continuous	
	Measurement			1			""	1	CONTINENT	Flow meters
ARM Code 50050 W	Permit	Report	Report	MGD					Continuous	Flow moters
ton.Site No. FLW-3	Requirement	(Mo.Avg.)	(3-Ma,Avg.)			1		1	Continuous	totalizers
low (somi to golf course)	Sample	0.195		MGD			MGD	0	Continuous	Flow meters a
ARM Cade 50050	Measurement	0.270		MGD		<del></del>		*	-	totellaers
ARM Cage 50050 Agn.Site No. FLW-2	Requirement			MGD					Continuous	Plow meters 4
		(An.Avg.) 8.279		1		ļ		<u> </u>		totalizers
low (notal to golf course)	Sample Measurement	8.279	0.192	MOD		1	MGD		Continuous	Plow maters a
ARM Code 50050	Permit	Report	Report	MOD		<del> </del>		11		totalizors
Mon.Site No. FLW-2	Requirement	(Mo.Avg.)	(3-Mo.Avg.)	MOD					Continuous	Flow meters a
SOD, Carbonaceous 5 day, 20C	Sample	(1910-1917)	(S-WOSAVE)	<del> </del>	222.0					totalizers
30D, C=00	Measurement		i	, ,	422.0	1	mg/L	•	Every Two	8-hour PPC
PARM Code 80082 G	Permit			<del>                                     </del>	Report	<del> </del>		1	Weeks	L
Mon. Sine No. INF-1	Requirement			1	(Mo.Avg.)	ļ.	mg/L	1	Every Two	8-hour FPC
solids, Total Suspended	Sample			<del></del>	162.0	<del> </del>		<del>  _  </del>	Weeks	
	Measurement		1			i I	mg/L	0	Every Two	8-hour FPC
ARM Code 00530 G	Permit				Report		mg/L		Weeks	2.7
Mon. Site No. INF-1	Requirement			l 1	(Mo.Avg.)	1 1		} I	Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/	Sample				69.05		Percent	-	Monthly	- X-1
Permitted Capacity) x 100	Measurement					i i	1	1 "	MOREMA	Calculated
PARM Code 00180 1	Permit			1	Report		Percent	<del>                                     </del>	Monthly	Calculated
Mon.Site No. FLW-1	Requirement							1 1	monuny	Carculated
	Sample							<del></del>		
	Measurement							1 1		
	Permit			1 1						
	Requirement			<b></b>				1 1		
	Sample							1		
	Measurement Perroit			$\vdash$						
	Requirement									
	Sample					<del> </del>				
	Measurement									
	Permit			+		<del>                                     </del>				
	Requirement									

¹ Initially, flow is limited to 0.270 MGD AADF. However, the flow may be increased after completion of the second treatment plant and pending the results the required load test. DEP Form 62-620.910(10), Effective November 29, 1994

## DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period

FLA010900 From: September 01,2911 To: September 30,2011

Facility: Wedgefield WWTF

\[ \]	CBOD5 (mg/L)	Focal Coliform Bacteria (#/100ML)	pH (Max)	płi (Min)	TRC (For Disinfect.) (mg/L)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrogon, Nitrate, Total (as N) (mg/L)
Code	\$00 <b>8</b> 2	74055	00400	00400	50060	00530	00070	50050	00620
Mon. Site	EFA-I	EFA-1	EFA-1	EFA-1	EFA-I	EFB-I	EFB-1	FLW-I	EFA-1
1		<1	7.7	7.7	1.3		2.6	0.235	
2			7.8	7.8	1.4		1.8	0.229	
3			7.8	7,3	1.0		2.1	0.197	
4			7.7	7.7	1.4		2.6	0.229	
5			7.6	7.6	1.2		1.8	0.206	
6		3	7.7	7.7	1.0	1.0	2.9	0.255	
7	7.0	<1	7.6	7.6	1.1	4.5	2.9	0.295	5.66
8		<1	7.8	7.8	1.0	2.1	23	0,300	<u> </u>
9		<1	7.9	7.9	2.0	1.4	1.7	0.299	]
10			8.1	8.1	1.7		1.3	0.298	
11			8.0	8.0	1.0	<u> </u>	1.8	0.213	
12		<1	8.0	8.0	13	2.8	2.3	0.245	
13		<1	7.7	7.7	1.5	1.1	2.2	0.196	ļ
14		<1	7.8	7.8	1.0	1.1	2.4	0.211	
15		<1	7.6	7.6	1.0	1.3	2.0	0.190	
16			7.7	7.7	1.0		1.6	0.202	
17			7.9	7.9	1.4		2.6	0.193	
18			2.1	8.1	1.2		2.8	0.239	
19		<1	7.9	7.9	1.3	1.6	2.5	0.256	
20		<1	7.9	7.9	1.0	3.6	2.6	0.190	1.
21		<l< td=""><td>7.7</td><td>7,7</td><td>1.0</td><td>1.0</td><td>2.9</td><td>0.003</td><td></td></l<>	7.7	7,7	1.0	1.0	2.9	0.003	
22		</td <td>7.8</td> <td>7.8</td> <td>1.0</td> <td>2.1</td> <td>2.9</td> <td>0.196</td> <td></td>	7.8	7.8	1.0	2.1	2.9	0.196	
23		<u> </u>	7.6	7.6	13		2.9	0.198	
24			7.7	7.7	1.0		2.9	0.194	
25			7.7	7.7	1.0		2.9	0.156	
26		<1	7.6	7.6	1.3	1.0	13	0.215	
27		<1	7.8	7.8	1.9	1.6	1.5	0.211	
28	7.0	<1	7.8	7,8	2.2	2.1	2.3	0.210	
29		্ব	7.8	7.8	1.4	1.0	2.6	0.201	
30			7.7	7.7	1.0		2.9	0.189	
31									
Total	14.0	11	223.5	223.5	38	30.3	70	6.453	5.66
Mo. Avg.	7.0	0.65	7.78	7.78	1.3	1.78	2.3	0.215	5.66

PLANT STAFFING: Day Shift Operator	Class:		Certificate No:		Nume:	
Day Shift Operator	Class:		Certificate No:		Name:	
Night Shift Operator	Class:	<del></del>	Certificate No:		Name:	
Lead Operator	Class:	, C	Certificate No:	<b>88</b> 63	Name:	Roser Hokumnie

## DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period

FLA010900

From: December \$1,2011 To: December 31,2011

Facility: Wedgefield WWTF

	Flow (MGD) golf course	Flow (MGD) Zone 1	Flow (MGD) Zone 2	Flow (MGD) Zone 3	Flow (MGD) GW makeup well	CBOD5 (mg/L)	TSS (mg/L)			
Code	50050	50050	50050	50050	50050	80082	00530		<del> </del>	1
Mon. Site	FLW-2	FLW-3	FLW-4	FLW-5	FLW-6	INF-1	INF-1		1	1
l	0.671	0.00	0.00	0.00	0.00					
2	0.699	0.00	0.00	0.00	0.00				1	
3	0.706	0.00	0.00	0.00	0.00					
4	0.740	0.00	0.00	0.00	0.00					<del>                                     </del>
5	0.716	0.00	0.00	0.00	0.00		<del>                                     </del>		1	
6	0.701	0.00	0.00	0.00	0.00	· · · · · · · · · · · · · · · · · · ·	<del></del>		-	<del>                                     </del>
7	0.726	0.00	0.00	0.00	0.00	235.0	170.0	***	<del> </del>	<del></del>
8	0.196	0.00	0.00	0.00	0.00				<del> </del>	+
9	0.000	0.00	0.00	0.00	0.00	-	<del> </del>		<del> </del>	<u> </u>
10	0.000	0.00	0.00	0.00	0.00	·	╁		<del> </del>	+
11	0.000	0.00	0.00	0.00	0.00		<del> </del>		<del>                                     </del>	<del> </del>
12	0.214	0.00	0.00	0.00	0.00	<del></del>	<del> </del>		<del> </del>	<del> </del>
13	0.000	0.00	0.00	0.00	0.00	<del></del>	<del>                                     </del>		<del></del>	<del>- </del>
14	0.000	0.00	0.00	0.00	0.00		<del> </del>	<del></del>	<del>- </del> -	
15	0.670	0.00	0.00	0.00	0.00	<del></del>	<del>                                     </del>		<del>                                     </del>	ļ
16		0.00	0.00	0.00	0.00		<del> </del>		ļ <u>.</u>	
17	0.421	0.00	0.00	0.00	0.00		<del>                                     </del>	<del></del>	<u> </u>	
81	0.000	0.00	0.00	0.00	0.00		<del>                                     </del>	·		<u> </u>
19		0.00	0.00	0.00	0.00	<del></del>	<del> </del> -	<del> </del>		<u> </u>
20	0.264	0.00	0.00	0.00	0.00		ļ			
21	0.134	0.00	0.00	0.00	0.00	<del> </del>				
22	0.302	0.00	0.00	0.00	0.00					
23	0.047	0.00	0.00	0.00		<del></del>				
24	0.218	0.00	0.00	0.00	0.00					
25	0.000	0.00	0.00	0.00	0.00					1
26	0.000	0.00	0.00		0.00					
27	0.000	0.00	0.00	0.00	0.00					
28	0.158	0.00		0.00	0.00					
29	0.587	0.00	0.00	0.00	0.00	209.0	154.0			
30	0.464	0.00		0.00	0.00			<del></del>		
31	0.000	0.00	0.00	0.00	0.00					
Total			0.00	0.00	0.00					
Mo. Ave.	8.930	0.00	0.00	0.00	0.00	444.0	324.0			
W. ATE	0.297	0.00	0.00	0.00	0.00	222.0	162.0			

PLANT STAFFING:				
Day Shift Operator	Class;	Certificate No:	Name:	
Day Chia Channel	-	<del></del>	<del></del>	
Day Shift Operator	Class:	Certificate No:		
Night Shift Operator			Name:	<del></del>
- B Opulator	Class:	Certificate No:	Name:	
ead Operator	Class:	C 0.75		
-		C Certificate No:	08863 Name:	Posse University
				Roger Hoisapple

# Florida Department of Environmental Protection

Twin Towers Office Bldg. 2600 Blair Stone Road Tallahassee, Florida 32399-2400

# **GROUND WATER MONITORING REPORT**

Rule 62-522.600(11)

(1)	Facility Nam	e Wedgefield WWTF	
	Address 310	0 Bancroft Blvd.	
	City Orla	ndo Florida	Zip 32833
	Telephone Nu	mber <u>(407) 259-6991</u>	
(2)	The GMS Ide	ntification Number 3048P03712	
(3)	DEP Permit i	lumber FLA010900	
(4)	Authorized R	epresentative Name Roger Hoisapp	pie
• •	Address 660	6 Walton Way	
	City Tampa	Florida	Zip 33610
	Telephone No	rmber (813) 359-8327	
(5)	Type of Disci	nerge Domestic Waste	
<b>(6)</b>	Method of Dis	charge Golf Course / Sprayfield In	rigation
atta info pos	echments and to ermation is true, saibility of fine a	nat, based on my inquiry of those ind	smined and am familiar with the information submitted in this document and all dividuals immediately responsible for obtaining the information, I believe that the e that there are significant penalties for submitting false information, including the Signature of Owner or Authorized Representative
	RT II QUALITY	ASSURANCE REQUIREMENTS	Environmental Laboratories
	alytical Lab	NELAC Certification #	E84589
		NELAC Certification #	
Lat	Name Advan	ced Environmental Laboratories	
		. North Lake Blvd. Suite 1016 Altern	nonte Springs Florida 32701
Pho	one Number ( <u>4</u>		Shinder Mine Arial

Printed 4/15/2004

PART I GENERAL INFORMATION

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID: Well Type:

MWB-1R* Background Well Name MW-1

**Golf Course** WAFR # 6006 GMS# 3048A13413

Monitoring Period
Was the wall purged before sampling?

From: July 2011 To September 2011 X Yes ___ No

Description:

Date Sample Obtained: Time Sample Obtained:

07/27/2011 11:56

Parameter	Permit Builder PARM Code	Other Himorle PARM Code	Measurement (Analysis Results)	Unite	Permit Réquirement	Detection Limits	Analysis Method	Moultoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N
Water Level Relative to Feet, NOVD	82545	_	62.22	Post	Report	N/A	Field	Quarterly	pwnp	N
Nitrate, (en N)	00620	_	0.053U	mg/l	Report	0.043	IC 300.0	Quarterly	pump	N
Solids, Total Dissolved(TDS)	70295	70296	400	mg/t	Report	10	E160.1	Quarterly	рисцр	N
Chloride (as Cl)	00940	-	130	mg/l	Report	0.81	IC 300.0	Quarterly	pump	N
Coliform, Feesi	74055	_	1. <b>0</b> Ū	#/100/mi	Report	1.0	SM9222D	Quentry	ришф	N
	00400		4.61	8U	Report	N/A	Field	Quarterly	pump	N
Turbidity, Lab - Napholometric	B2079		2.4	עדע	Report	0.016	E180.1	Quarterly	риспр	N
Added: November 2009**										
lodium	00923	-	85	mg/L	Report	0.026	8W8466010	Quarterly	beento	N
Fibelometume, Total	\$2080	-	0.45U	ug/L	Report	0.60	E524.2	Quarterly	bremb	N
	ļ	ļ		ļ	-					
<del>,</del>		ļ								<del></del>
		<u> </u>								

^{*}Original well MWB-1 was damaged and replaced by MWB-1R on 06/08/2007. The WAPR ID remains the same

**Bened on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Tribalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP)

11/20/2009

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description:

MWB-2 Background Well Name MW-2

**Golf Course** WAFR # 6005 GMS# 3048A13414

07/27/2011-09/20/2011 12:34-11:33

Monitoring Period From: July 2011 To September 2011
Was the well purped before sampling? X Yes ___ No
GW TOC:70.10 Date Sample Obtained: Time Sample Obtained;

Para moter	Permit Builder PARM Code	Other Historic PARM Code	Sample Messurement (Analysis Results)	Valu	Permit Requirement	Detection Limits	Azziyala Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545	-	64.85	Fect	Report	N/A	Field	Querterly	pump	N
Nitrate, (sa N)	00620		0.039U	mg/l	Report	0.043	IC 300,0	Quarterly	bramb	N
Solida, Total Dissolved(TDS)	70295	70296	170	mg/l	Report	10	E160.1	Quarterly	brimb	N
Chiloride (na Cl)	00940		16	mg/l	Report	0.81	IC 300.0	Quarterly	pump	N
Colifform, Fecal	74055		1.0U	#/100/ml	Report	1.0	SM9222D	Quarterly	branb	N
4	00400		4.45	รบ	Report	N/A	Field	Quarterly	brimb	N
Turbidity, Lab - Nepholometric	\$2079		0.15	NTU	Report	0.016	E180.1	Quarterly	pump	И
Added: November 2009**										
Sodiem	00923		11	mg/L	Report	0.026	SW3466010	Quarterly	brand	N
Tribalomethane, Total	\$2080	_	0.16U	ug/L	Report	0.60	E524.2	Quarterly	puitip	N
	<u> </u>									

**Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Tribalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP)

COMMENTS AND EXPLANATION: First sample on 07/27/2011 was NOT taken due to the home owner refusing access to the well.

There was a resample on 09/20/2011 with results in the report above

11/20/2009

County: Facility Name: Pennit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWB-3 Background Well Name MW-3

Golf Course WAFR # 6004 GMS# 3048A13415 7/27/2011-9/20/2011 11:26-11:55

Monitoring Period

From: July 2011 To September 2011

Date Sample Obtained:

Peremeter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Sample Plitere (L/F/N
Water Level Relative to Feet, NGVD	B2545	-	66.51	Fest	Report	N/A	Field	Quarterly	рипър	Z
	00620	-	0.27U	mg/l	Report	0.043	IÇ 300.0	Quarterly	римр	N
Nitrate, (as N) Solids, Total Dissolved(TDS)	70295	70296	1400/1500	mg/l	Report	10	E160.1	Querterly	besut	N
	00940	-	81	zng/l	Report	0.81	IC 300.0	Quarterly	þæmþ	N
Chloride (m Cl)	74055		1.00	#/100/m3	Report	1.0	SM9222D	Quarterly	Ьяпар	N
oliform, Fecal	00400	_	6.04	SU	Report	N/A	Field	Quarterly	brunb	N
pH Turbidity, Lab - Nephotometric	82079	_	45	עדא	Report	0.016	£180.1	Quarterty	Ьтиф	N
Added: November 2009**										
Sodium	00923	_	69	mg/L	Report	0.026	SW8466010	Quarterly	bourb	א
Trihelomethene, Total	\$20\$0		0.45U	ug/L	Report	0.60	E524.2	Quarterly	pump	N
1141										

eters Sodium and Trihalomethane (TTHMs) have been added to the Grounds **Based on the elevated concentrations of these par COMMENTS AND EXPLANATION: 11/20/2009

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWI-4 Intermediate Well Name MW-4

Golf Course **WAFR # 6003** 

Monitoring Period
Was the well purged before sampling?
GWTOC: 67.70

From: July 2011 To September 2011 X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

GMS# 3048A13416 7/27/2011-9/20/2011 09:54-09:48

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Anniysis Method	Monitoring Frequency	Sempling Equipment Uned	Semples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545	-	65.1	Feet	Report	N/A	Field	Quarterly	ршкр	N
Nitrate, (as N)	00620		0.053U	mg/l	Report	G.043	IC 300.0	Quarterly	brrurb	N
Solide, Total Dissolved(TDS)	70295	70296	230	mg/l	Report	10	E160.j	Quarterly	hrumb	N
Chloride (as Cl)	00940		59	ang/l	Report	0.81	IC 300.0	Quarterly	birmb	N
Coliform, Fecal	74055	_	160/1.0U	#/100/ml	Report	1.0	SM9222D	Quarterly	beruib	И
A	00400	_	5.31	su	Report	N/A	Field	Quarterly	pemp	N
Turbidity, Lab - Nepholometric	82079		13	עזא	Report	0.016	E180.1	Quarterly	hemb	N
Added: November 2009**				. ,						
Sodium	00923		36	mg/L	Report	0.026	SW8466010	Quarterly:	haugp	И
Trihelomethene, Total	E2080	-	0.45U	ug/L	Report	0.60	E524,2	Quarterly	Puttip	N
		T			1					

**Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:
11/20/2009

County: Facility Name: Permit Number: Orange County Wedgefield WWTF

GMS# 3048P03712

Permit Builder MW ID:

MWC-6

FLA010900

Well Type: Description:

Compliance Well Name MW-6

**Golf Course** WAFR # 6001 GMS# 3048A1341\$

7/27/2011-9/20/20|1 10:48-10:32

From: July 2011 To September 2011 X Yes ___ No Monitoring Period
Was the well purged before sampling?
GWTOC: 65.04

Date Sample Obtained: Time Sample Obtained:

Other Historic Sample Measurement Units Permit Detection Analysis Method Parameter Monitoring Samples Frequency (Analysia Results) Filtered (L/F/N) PARM Code PARM Cod 61.58 Water Level Relative to Feet, NGVD **#2545** Feet Report N/A Field Quarterly pump N 0.053U 00620 0.043 IC 300.0 Niterate, (as N)_ N 190 PURE 70296 Report Solids, Total Dissolved(TDS) 70295 mg/l 10 E160.1 N punp Chloride (as Cl) 00940 rus/i Report 0.81 IC 300.0 N 43/ pump Coliform, Fecal 74055 #/100/mjl Report 1.0 SM9222D N 5,12 Quarterly pump 00400 UZ N/A Report Pield ρH N 12 bamb NTU Turbidity, Lab - Nepholometric \$2079 Report 0.016 E180.1 N Added: November 2009** Quarterly passip 00923 Report 27 mg/L 0.026 SW8466010 N Quarterly 0.45U ug/L Report PUETO 82080 0.60 E524.2 Tribelomethme, Total N

**Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:

11/20/2009

County: Facility Name: Pounit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Wall Type: Description: MWI-7 Intermediate Well Name MW-7

Golf Course WAFR # 6000

Date Sample Obtained: Time Sample Obtained:

GMS# 3048A13419 7/27/2011-9/20/2011 10:23-10:12 From: July 2011 To September 2011 X Yes ___ No Monitoring Period
Was the well purged before sampling?
GWTOC:68.70

Parameter	Permit Belider PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N
fator Level Relative to Fost, NOVD	82545	- 1	65.88	Feet	Report	N/A	Field	Quarterly	Pump	N
Harate, (as N)	00620	_	0.27U	mg/l	Report	0.043	IC 300.0	Quarterly	þmæð	N
olide, Total Dissolved(TDS)	70295	70296	760/960	mg/l	Report	10	E160.1	Quarterly	ptientp	N
hioride (es Cl)	00940	. ]	290/400	mg/l	Report	0.81	€C 300.0	Quarterty	bruth	N
viliform, Fecal	74055		190/1.0U	#/100/ml	Report	1.0	8M9222D	Querterly	brieds	N
1	00400	_	5.38	su	Report	N/A	Field	Quarterly	bruab	N
Turbidity, Lab - Nepholometric	<b>82079</b>	-	16	NTU	Report	0.016	E180.1	Quarterly	ример	N
dded: November 2009**										
odium	00923	-	190/240	mg/L	Report	0.026	SW8466010	Quarterly	penip	N
-thelomethme, Total	82080	-	0.45U	ug/L	Report	0.60	B524.2	Quarterty	brinib	N
	+ -	<u> </u>								
	Ţ					ve been added				

County: Pacility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWC-1 Compliance Well Name MW-1

On-Site Irrigation WAFR # 32995 GMS# --

Monitoring Period
Was the well purged before sampling?

From: July 2011 To September 2011 X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

7/27/2011 07:49

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Menitoring Frequency	Sampling Equipment Used	Sample Filtered (L/F/N)
ater Level Relative to Feet, NGVD	82545		65.45	Feet	Report	N/A	Field	Quarterly	purop	N
krate, (as N)	00620	-	0.053U	mg/l	Report	0.043	IC 300.0	Quarterly	braut	N
olide, Total Dissolved(TDS)	70295	70296	86	mg/l	Report	10	E)60.1	Quarterly	hrmb	N
hjoride (as Cl)	00940	-	9.4	mg/l	Report	0.81	IC 300,0	Quarterly	pump	N
oliform, Fecal	74055	_	1.0U	#/100/mJ	Report	1.0	3M9222D	Quarterly	berodo	N
·	00400	_	4.72	SU	Report	N/A	Field	Quarterly	brut	N
Furbidity, Lab - Nepholometric	82079	-	29	NTU	Report	0.016	E180.1	Quarterly	pump	N
dded: November 2009**										
odium	00923	-	7.6	mg/L	Report	0.026	SW\$466010	Quarterly	brumb	N
rihelomethans, Total	82080		0.45U	ug/L	Report	0.60	E524.2	Quarterly	bomb	N
				<del> </del> -						
	+									
**Based on the elevated concentrations COMMENTS AND EXPLANATION:	of these paramet	ers in the influent	samples, parameters Sodium a	nd Tribulometh	ane (TTHMs) ha	we been added	to the Groundwai	ter Monitoring P	lan (GWMP)	

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID;

Well Type: Description: MWC-2 Compliance Well Name MW-2

On-Site Irrigation WAFR # 32996

GMS# --

From: July 2011 To September 2011

7/27/2011 08:21

Monitoring Period
Was the well purpod before sampling?
GWTOC: 72.00

X Yes __ No

Date Sample Obtained: Time Sample Obtained:

Other Historic Sample Measurement Unite Semples Filtered (L/F/N) Permit Detection Analysis Method Permit Bullder Monitoring Sampling Frequency Equipment Used PARM Code (Annlysis Results) PARM Cod 64.87 B2545 Foot Report N/A Field Water Level Relative to Fast, NOVD Quarterly Quarterly pump 0.053U 00620 mg/i Report 0.043 IC 300.0 N Nitrate, (as N) 130 рилир l0 70295 70296 ms/l Report B160.1 N Solids, Total Dissolved(TDS) 3.9 Quarterly pump 0.81 IC 300.0 00940 mg/l Report N Chiloride (as Cl) 1.0U Quarterly pump #/100/ml Report 1.0 SM9222D 74055 N oliform, Fecal 5.19 PUED su N/A Field 00400 Report 16 Quarterly NTU 82079 Report 0.016 E180.1 Turbidity, Lab - Nepholometric N dded: November 2009** Quarterly brind mg/L 0.026 SW8466010 00923 4.5 Report N وساله E524.2 pump ug L Report 0.60 B2080 0.45U N Fribelomethane, Total

achesed on the elevated concentrations of these parameters in the influent samples, parameters Sodiam and Tribalomechane (TTPIMs) have been added to the Groundwater Monitoring Plan (GWMP)

COMMENTS AND EXPLANATION:

11/20/2009

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWC-3 Compliance Well Name MW-3

On-Site Irrigation WAFR # 32997 GMS# --

Date Sample Obtained: Time Sample Obtained:

7/27/2011 09:00

Monisoring Period
Wes the well purged before sampling?
GWTOC: 72.26 Prom: July 2011 To September 2011 X Yes ___ No

Parents Other Minterio Sample

Parameter	Permit Builder	Other Historic PARM Code	Sample Measarement	Units	Permit Requirement	Detection Limits	Analysis Method	Menitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N)
	PARM Code		(Analysis Results)		<u>L</u>					
Water Level Relative to Fost, NOVD	82545		69.00	Pest	Report	N/A	Field	Quarterly	pump	N
Nitrate, (as N)	00620		0.053U	nag/l	Report	0.043	IC 300.0	Quarterly	PARTID	N
Solids, Total Dissolved(TDS)	70295	70296	430	mg/i	Report	10	E160.(	Quarterly	deimed	N
Chioride (as CI)	00940		140	mg/l	Report	0.81	IC 300.0	Quarterly	brittib	N
oliform, Fecel	74055		1.0U	#/100/ml	Report	1.0	\$M9222D	Quarterly	pump	N
.н	00400		5.55	SU	Report	N/A	Pield	Quarterly	Pump	Ň
Turbidity, Lab - Nepholometric	82079	_	3.5	NTU	Report	0.016	P180,1	Quarterly	pump	N
Added: November 2009**					l				L	
Sodium	00923	-	98	mg/L	Report	0.026	SW8466010	Quarterly	braub	N
Tribalomethene, Total	22060	-	0.45U	ug/L	Report	0.60	E524.2	Quarterly	braide	N
										· · · · · ·
									1	
									1	

**Bened on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:

11/20/2009

County: Facility Name: Permits Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWP-1 Piezometer

Well Name MWP-1* On-Site Irrigation WAFR # 55881 GMS# --

**Monitoring Period** 

From: July 2011 To September 2011

__ Yes XNo Was the well purged before sampling?

Date Sample Obtained: 7/6/11-8/17/11-9/14/11 Time Sample Obtained:

Parameter	Permit Ballder PARM Code	Other Historic PARM Code	Mensurement (Analysis Results)	Unin	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Somples Filtered (L/F/N)
Water Level Relative to Feet, NOVD  1* Month of Quarter	82545	-	64.61	Feex	Report	N/A		Solinat Water Level Meter	
Water Level Relative to Fost, NGVD Month of Quarter	<b>22545</b>	-	67.50	Feet	Report	N/A		Solimat Water Level Mater	
Water Level Relative to Feet, NGVD 3 rd Month of Quarter	82545	-	66.77	Feat	Report	N/A		Solinst Water Level Meter	

COMMENTS AND EXPLANATION:

MWP-1 is the well labeled "Well #1" as shown on Sheet C-12 dated 12/1/98
4/20/2004

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Wall Type: Description: MWP-2 Piezometer

Well Name MWP-2 On-Site Irrigation WAFR # 55883

GMS# --

Monitoring Period

From July 2011 To September 2011

Was the well purged before sampling?

__ Yes X No

Date Sample Obtained: 7/6/11-9/17/11-9/14/11 Time Sample Obtained:

Parnmeter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Usite	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Bamples Filtered (L/F/N)
Water Level Relative to Feet, NGVD  1* Month of Quarter	B2545		65.02	Foci	Report	N/A		Solinst Water Level Meter	
Water Level Relative to Feet, NGVD	B2545		66.58	Feet	Report	N/A		Solimat Water Level Meter	
/ater Level Relative to Feet, NGVD	82545		65.25	Foet	Report	N/A		Solinst Water Level Meter	
				<u> </u>					
	_								

COMMENTS AND EXPLANATION:

* MWP-2 is the well labeled "Well #2" as shown on Sheet C-12 dated 12/1/98
4/20/2004

DEF Form 63-620.910(10), afficaine November 29, 1994

17

#### INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT

Read these instructions are well as the SUPPLEMENTAL INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT before completing the DMR. Hard copies and/or electronic capies 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 shall be mailed to the address printed on the DMR by the 28° of the mouth 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 facilities may have one or more Part A's for reporting effluent or reclaimed water data. All domestic wastewater 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 raw data are different.

CODE	DESCRIPTION/INSTRUCTIONS
ANC	Analysis not conducted.
DRY	Dry Well
FLD	Plood diseaser.
IFS .	Insufficient flow for sampling.
LS	Lost sample.
MNR	Monitoring not required this period.

CODE	DESCRIPTION/INSTRUCTIONS
NOD OPS OTH SEF	No disoberge from/to site.  Operations were shandown so no sample could be taken.  Other. Please exter an explanation of why monitoring data were not available.  Sampling equipment failure.

When reporting analytical results that full below a isboratory's reported method detection limits or practical quantification limits, the following instructions should be used:

- Results greater than or equal to the PQL shall be reported as the measured quantity.

  Results less than the PQL and greater than or equal to the MDL shall be reported as the isboratory's MDL value. These values shall be desired equal to the MDL when necessary to calculate an average for that parameter and when desermining describing everpliance with paramit limits.

  Results less than the MDL shall be reported by energing a less than sign ("<") followed by the isboratory's MDL value, e.g. < 0.001. A value of one-half the MDL or one-half the efficient limit, whichever is lower, shall be used for that eample when necessary to calculate an average for that parameter. Values less than the MDL are considered to demonstrate compliance with an efficient limit ation.

#### PART A -DISCHARGE MONITORING REPORT (DMR)

Part A of the DNR is comprised of one or more sections, each leaving its own header information. Facility information is preprinted in the beader as well as the monitoring group number, whether the limits and monitoring ultraments are interior or final, and the required submitted frequency (e.g. monthly, annually, quarterly, etc.). Submit Part A based on the required reporting frequency in the header and the instructions shown in the permit. The owing should be completed by the permittee or authorized representative:

No Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data or codes to be entered for all of the parameters on the DMR for the entire monitoring group number; however, if the monitoring group isolates other security isolates other security isolates other security isolates. It is not seen to monitoring period (i.e. the south, the quarter, the year, etc.) during which the data on this report were collected and analyzed. Sample Measurement: Before filling in sample measurements in the table, check to see that the data collected correspond to the limit indicated on the DMR (i.e. interim or final) and that the data correspond to the monitoring group number in the header. Enter the data or calculated results for each parameter on this row in the non-shaded area above the limit. Be sare the result being entered corresponds to the appropriate statistical base code (e.g. against everage, monthly everage, single 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 Amelysis: The shaded erose in this column contain the minimum number of times the measurement is required to be made according to the permit. Enter the actual number of times the measurement was made in the space shove the steeded eros.

spect above the she South Trees

space above the shaded area.

Sample Type: The shaded areas in this column contain the type of sample (e.g. grab, composite, continuous) required by the permit. Enter the actual sample type that was taken in the space above the shaded area.

Sample Type: The shaded areas in this column contains with Rule 62-620-305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

Comment and Explanation of Any Violations: Use this area to explain any exceedances, any upset or by-pass events, or other items which require explanation. If more space is needed, reference all attachments in this area.

#### PART B. DAILY SAMPLE RESULTS

Mandeoring Period: Eater the month, day, and year for the first and lest day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

Delty Mandtoring Results: Transfer all analytical data from your Beclity's laboratory or a contract laboratory's data sheets for all day(s) that samples were collected. Record the data in the units indicated. Table 1 in Chapter 62150, 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 susmerical results onto Part B of the DMR, only the following data
entitifier codes should be used and an explanation growted where appropriate

CODE	DESCRIPTION/INSTRUCTIONS
-2	The compound was ensigned for but not detected.
A	Value reported is the mean (average) of two or more determinations.
7	Estimated value, value not accurate.
Q	Sample held beyond the actual holding time.
	Laboratory analysis was from an interpersal or suproperty progress amonto.

Add the re

Laboratory analysis was from an empreserved or improperty preserved stempes.

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Laboratory analysis was from an empreserved or improperty preserved stempes. Plant Staffing: List the name, certificate ma

#### PART B - GROUND WATER MONITORING REPORT

Monitoring Period: Enter the morth, 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 date on this report were collected and analyzed. Date Shample Obtained: Enter the time the sample was taken.

It has been purposed to results of the makysis. If the result was below the minimum detection limit, indicate that.

Detection Limits Record the detection timits of the makysis. If the result was below the minimum detection limit, indicate that.

Detection Limits Record the detection timits of the makysis. If the result was below the minimum detection limit, indicate the makysis indicate the makysis indicate the makysis indicate the method same conditions and the detection limits of the makysis indicate the method same conditions and the detection limits of the makysis indicate the method same conditions and the detection limits of the makysis indicate the method same conditions are conditions to the method same conditions and the method same conditions are conditions of the method in the detail the details are conditions of the method in the event there are quantions concerning this report. Enter the date when the report is signed.

Commenced and Explanation: Use this space to make any commences on or explanations of results that are unsupported. If more space is needed, reference all attachments in this area.

#### ECIAL INSTRUCTIONS FOR LIMITED WIT WEATHER DISCHARGES

clow (Limsted Wet Weather Discharge): Enter the measured average flow rate during the period of discharge or divide gallons discharged by duration of discharge (converted into days). Record in million gallons per day (MOD)

(MGD).
Flow (Upgaresam): Ensur the average flow rate in the receiving stream upstream from the point of discharge for the period of flistbarge. The average flow rate can be calculated based on two measurements are to be made at the start and one made at the end of the discharge period. Measurements are to be made at the spatroam gauging station described in the permit.

Actual Bireaum Dilution Ratio: To calculate the Actual Stream Dilution Ratio, divide the average apstream flow rate by the average discharge flow rate. Enter the Actual Stream Dilution Ratio accerate to the meanest 0.1.

No. of Days the SDF is greater than the Stream Dilution Ratio on any day of discharge, compare the minimum Stream Dilution Factor (SDF) from the permit to the calculated Stream Dilution Ratio. On Part B of the DMR, enter an asteriak.

Dilution Ratio.

Dilution Ratio.

CBODs, Easter the everage CBODs, of the reclaimed water discharged during the period shown in cluration of discharge.

TKN: Enter the average TKN of the reclaimed water discharged during the period shown in cluration of discharge.

TKN: Enter the average TKN of the reclaimed water discharged during the period shown in cluration of discharge.

Actual Radefall: Enter the average TKN of the reclaimed water discharged during the period shown in cluration of discharge.

Actual Radefall: Enter the average ratefall on Part A. The cumulative rainfall to date for this calendar year and the actual storal moment of train, in schools, this has been recorded since Jeanary in the contains year favoring the month for which this DMR contains date.

Radefall: During Average Radefall: Year: On Part A, enter the total monthly rainfall during the average rainfall year and the cumulative rainfall for the average rainfall year. The cumulative rainfall for the average rainfall year in the monust of rain, in lackse, which field during the swenge rainfall year from Jeanary during the monust for which this DMR contains date.

Reason for Discharge: Attach to the DMR a brief explanation of the factors contributing to the need to activate the limited wet weather discharge was activated discharge.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of	f Farrimannestal Protection Central District 2210	Manufacture of Culturation Co.	****

PERMITTEE NAME: Piuris-Wedgefield MAILING ADDRESS: 6608 Welton Way Tempe Floride, 33610

FACILITY:

COUNTY:

LOCATION:

Orange

Wedgefield WWTF 3100 Beneroft Boulevard Orlando, PL

PERMIT NUMBER

LIMIT: CLASS SIZE: FLA010900 Pinel N/A

REPORT: GROUP:

MONITORING GROUP NUMBER: R-001 MONITORING GROUP DESC: Public A Public Access Rouse, including Influent

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: October 01,2011

To: October 31,2011

Parameter	ļ <u>.</u>	Quantity or L	oading Unit	Qu	ality or Concentre	ation Unit	s No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0.206	MGD				0	5 Days/Week	Flow meters and totalizers
PARM Code 50050 Y Mon.Site No. FLW-I	Permit Requirement	0.368 (An.Avg.)	MGD				1	5 Days/Week	Flow meters and totalizors
Flow	Semple Measurement	0.262	MGD				0	5 Days/Week	Flow meters and totalizers
PARM Code 50050 I Mon.Site No. FLW-I	Permit Requirement	Report (Mo.Avg.)	MGD					5 Days/Weck	Flow meters and totalizers
OD, Carbonaceous 5 day, 20C	Sample Measurement			7.8			•	Every Two Weeks	8-hour FPC
ARM Code 80062 Y Mon.Site No. EFA-1	Permit Requirement			20.0 (An.Avg.)		mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement			9,0	3.0	mg/l	0	Every Two Weeks	8-hour FPC
PARM Code 80082 A Mon.Size No. EFA-1	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	194/1.		Every Two Works	8-hour FPC
Solids, Total Suspended	Semple Measurement			3.0		lgo	•	4 Days/Week	Grab
PARM Code 00530 B Mon.Site No. EFB-1	Permit Requirement			5.0 (Max.)		mg/L		4 Days/Week	Grab
PH	Sample Measurement			7.2	LI I	BEJ	•	5 Days/Week	Grab
PARM Code 00400 A Mon.Site No. EFA-1	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU.		5 Days/Wook	Grande

I certify under pensity 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 property gather and evaluate the influentation submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the influentation submitted is, to the best of my knowledge and belief, true, accounts, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFF	CER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Roger Holsepple	Lead Operator	M. Welmber	407-259-6991	2011/11/21

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

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

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

FACILITY: LOCATION:

COUNTY:

PERMITTEE NAME: Pluris-Wedgefield MAILING ADDRESS: 6608 Walton Way

Tempe Florida, 33610

Orange

Wedgefield WWTF 3100 Bancroft Boulevard

Orlando, FL

LIMIT: CLASS SIZE:

PERMIT NUMBER

Final N/A

FLA010900

REPORT: GROUP:

Monthly Domestic

MONITORING GROUP NUMBER: R-001 MONITORING GROUP DESC: Public Access Reuse, including Influent

NO DISCHARGE FROM SITE: MONITORING PERIOD
From: October 91,2011

To: October 31,2011

Parameter		Quantity	Quantity or Loading Units Qui		Qua	ulity or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0.206		MGD					0	5 Days/Week	Flow meters and
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Requirement	0.368 (An.Avg.)		MGD						5 Days/Work	Flow meters and totalizers
Flow	Sample Measurement	0,262		MGD					0	5 Days/Week	Flow meters and
PARM Code 50050 I Mon.Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)	_	MGD						5 Dwys/Week	Flow meters and totalizers
OD, Carbonaceous 5 day, 20C	Sample Measurement				7.8				0	Every Two Weeks	8-hour FPC
RM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement				20.0 (An.Avg.)			mug/L		Every Two Weeks	8-hour FPC
BOD, Cerboneceous 5 day, 20C	Sample Measurement				9,0	9.0		mg/l	0	Every Two Weeks	8-hour FPC
PARM Code 80082 A Mon. Site No. EFA-1	Permit Reguirement				30.0 (Mo.Avg.)	60.0 (Max.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				3.0			mg/l	0	4 Days/Week	Grab
PARM Code 00530 B Mon. Site No. EFB-1	Permit Requirement				5.0 (Max.)			mg/L		4 Days/Week	Grab
pН	Sample Measurement				7.2	8.0		SU	•	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

l certify under penalty of law that this document and all stachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXEC	JTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Roger Holsappie	Lead Operator		407-259-6991	2011/11/21

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

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

R-001

PERMIT NUMBER: FLA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: October 01,2011

To: October 31,2011

Parameter		Quantity	or Loading	Units		ality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal, % less than detection	Sumple Measurement			<u></u>	34%		PER- CENT	0	4 Days/Week	Grab
PARM Code 51005 A Mon Site No. El A-1	Permit Requirement	·			75 (Min.)		PER- CENT		4 Days/Week	Cirab
Coliform, Fecal	Sample Measurement				3	I	#/IOOM1.	0	4 Days/Week	Grab
PARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement		_		25 (Max.)		#/100MI.		4 Days/Work	(irab
Total Residual Chlorine (For Disinfection)	Sample Measurement				0.7		mg/l.	0	Continuous	Meter
PARM Code 50060 A Mon.Site No. EFA-I	Permit Requirement				1.0 (Min.)		nus/L		Continuous	Meter
Turbidity	Sample Measurement				2,9		NTU	0	Costineous	Meter
PARM Code 00070 B Mon.Site No. EFB-1	Permit Requirement				Report (Max.)		ווא	$\sqcap$	Continuous	Meter
Nitrogen, Narate, Total (as N)	Sample Measurement				3,96		mg/l.	٥	Monthly	8-hour FPC
ARM Code 00620 A	Permit Requirement				12.0 (Max.)		mpL		Monthly	8-hour FPC
Flow (from groundwater well)	Sample Measurement	0.00		MGD				۰	Continuous	Flow meters as totalizers
PARM Code 50050 P Mon.Site No. FLW-6	Permit Requirement	Report (An.Avg.)		MGD					Continuous	Flow meters an totalizers
Flow (from groundwater well)	Sample Measurement	0.00	90.0	MGD				•	Continuous	Flow meters as
PARM Code 50050 Q Mon.Site No. FLW-6	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow moters an totalizers
Flow (total to zone 3)	Sample Measurement	0,000		MGD				0	Continuous	Finw meters as totalizers
PARM Code 50050 R Mon.Site No. FLW-5	Permit Requirement	0.0232 (An.Avg.)		MGD					Continuous	Flow meters an totalizers
Flow (total to zone 3)	Sample Measurement	0.000	0.090	MGD				0	Continuous	Flow meters an
PARM Code 50050 S Mon.Site No. FLW-5	Permit Requirement	Report (Mo Avy.)	Report (3-Mo, Avg.)	MGD					Continuous	Flow meters an
Flow (total to zone 2)	Sample Measurement	0.000		MGD				•	Contleuous	Flow meters an totalizers
PARM Code 50050 T Mon.Site No FLW-4	Permit Requirement	0 0634 (An.Avg.)		MGD					Continuous	Flow meters an totalizers
Flow (total to zone 2)	Sample Measurement	9.800	0.000	MGD				0	Continuous	Flow meters an totalizers
PARM Code 50050 U Mon. Site No. FLW-4	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo,Avg.)	MGD					Continuous	Flow meters and totalizers

COMMENTS: Flow was going to reuse on the 12th of February when NO3 result was 12.12

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

MONITORING GROUP NUMBER: R-001 MONITORING PERIOD From: October 01,2011 To: Oct

PERMIT NUMBER: FLA010900

To: October 31,2011

Parameter	Quantity or Loadin		or Loading	Units	Qu	ality or Concentrati	ion Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (total to zone 1)	Sample Measurement	0,000		MGD				•	Continuous	Flow meters appeared totalizers
PARM Code 50050 V Mon.Site No. FLW-3	Permit Requirement	0.0114 (An.Avg.)		MGD					Continuous	Flow meters and totalizers
Flow (total to zone 1)	Sample Measurement	9.000	9.000	MGD				0	Continuous	Flow meters and totalizers
PARM Code 50050 W Mon.Site No. FLW-3	Permit Requirement	Report (Mo,Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow meters and totalizers
Flow (total to golf course)	Sample Measurement	0.198		MGD				0	Современя	Flow meters and totalizers
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	0.270 (An.Avg.)		MGD					Continuous	Flow meters and totalizers
Flow (total to golf course)	Sample Measurement	0.228	0.181	MGB				0	Continuous	Flow meters und totalizers
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo Avg.)	MGĐ					Continuous	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement			<u> </u>	201.0		mg/L	0	Every Two Weeks	B-hour FPC
RM Code 80082 G in Site No. INF+1	Permit Requirement				Report (Mo.Avg.)		mg/l-		Every Two Weeks	4-hour FPC
Solids, Total Suspended	Sample Measurement				160.0		mg/L	•	Every Two Weeks	8-hour FPC
PARM Code 00530 G More Site No. INF-1	Permit Requirement				Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement				64.6	ļ	Percent	0	Monthly	Calculated
PARM Code 00180 I Mon.Site No. FLW-I	Permit Requirement			1	Report		Percent		Monthly	Calculated
	Sample Measurement									<u></u>
L	Permit Requirement									
	Sample Measurement					<u> </u>				
	Pennit Roquirement									
	Sample Measurement									
	Permit Requirement									

¹ Initially, flow is limited to 0.270 MOD AADF. However, the flow may be increased after completion of the second treatment plant and pending the results the required load test. DEP Form 62-620.910(10), Effective November 29, 1994

## DAILY SAMPLE RESULTS - PART B

Permit Number: **Monitoring Period**  FLA010900

From: October 01,2011

To: October 31,2011

Facility: Wedgefield WWTF

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ML)	pH (Max)	pH (Min)	TRC (For Disinfect.) (mg/L)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Tota (as N) (mg/L
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-I	EFB-I	EFB-I	FLW-1	EFA-1
1			7.7	7.7	1.5		2.2	0.197	
2			7.6	7.6	l		2.9	0,209	
3		<1	7.8	7.8	1.4	1.3	2.1	0.224	
4		<1	7.7	7.7	1.0	1.7	2.9	0.162	
5		<1	7.6	7.6	1.3	3.0	2.9	0.079	
6		<)	7.7	7.7	1.3	1.0	2.9	0.100	
7			7.4	7.4	2.8		1.2	0.218	
8			7.8	7.8	1.4		2.3	0.234	
9			7.8	7.8	1		2.9	0.304	
10			7.8	7.8	1	_	2.9	0.000	
11		<1	7.7	7.7	2.2	1.0	2.5	0.328	
12	9.0	<1	7.8	7.8	1.4	1.0	1.2	0.339	3.96
13		3	7.8	7.8	1.4	1.0	1.3	0.267	
14		<1	7.9	7.9	1.2	1.4	2.2	0.381	
15			8.0	8.0	1		1.8	0.343	
16			7.9	7.9	1		2.2	0.389	
17		<1	7.8	7.8	1.2	1.0	1.8	0.354	
18		<1	7.6	7.6	2.1	1.0			
19		<1	7.5	7.5	1.8	1.0	2.5	0.302	
20	<del></del>	<1	7,6	7.6	2.6	1.0	2.5 2.5	0.358	
21			7.7	7.7	1.4		1.6	0.336	
22			7.5	7.5	1.4		2.4	0.303	
23			7.6	7.6	1.3		2,4	0.322	
24		<1	7.7	7.7	1.3	1.0	2.7	0.359	
25		<1	7.8	7.8	1.6	1.0	2.7	0.311	
26	9.0	<1	7.4	7.4	2.5	1.0	2.3		
27		<1	7.3	7.3	2.6	1.0		0.231	
28			7.2	7.2	2.5		2.2	0.203	
29			7.4	7.4	1.7			0.214	
30			7.4	7.4	1.8		1.6	0.218	
31		<1	7.3	7.3	2	1.0	1.8	0.227	
Total	18.0	13	236.8	236.8	49.7	20.4	2.3 69.9	0.247	3.96
Mo. Avg.	9.0	0.64	7.63	7.63	1.60	1,2	2.25	8.116 0.261	3.96

Day Shift Operator	Class:	Certificate No:	Name:	
Day Shift Operator	Class:	Certificate No:	Name:	
light Shift Operator	Class:	Certificate No:	Name:	
Lead Operator	Class:	C Certificate No:	8863 Name:	Roger Holsapple

## DAILY SAMPLE RESULTS - PART B

To October 28, 2011

Permit Number: Monitoring Period

FLA010900

From: October 01, 2011

Facility: Wedgefield WWTF

	Flow (MGD) golf course	Flow (MGD) Zone 1	Flow (MGD) Zone 2	Flow (MGD) Zone 3	Flow (MGD) GW makeup well	CBOD5 (mg/L.)	TSS (mg/l.)			
Code	50050	50050	50050	50050	50050	80082	00530			
Ion. Site		FLW-3	FLW-4	FLW-5	FLW-6	INF-1	INF-1			<u> </u>
1	0.308	0.00	0.00	0.00	0.00					
2	0.231	0.00	0.00	0.00	0.00					
3	0.262	0.00	0.00	0.00	0.00					
4	0.000	0.00	0.00	0.00	0.00					<u> </u>
5	0.569	0.00	0.00	0.00	0.00					
6	0.753	0.00	0.00	0.00	0.00					
7	0.183	0.00	0.00	0.00	0.00					
8	0.000	0.00	0.00	0.00	0.00					
9	0.000	0.00	0.00	0.00	0.00					
10	0.000	0.00	0.00	0.00	0.00					
l1	0.004	0.00	0.00	0.00	0.00			· · · · · · · · · · · · · · · · · · ·		
12	0.000	0.00	0.00	0.00	0.00	207.0	106.0	•		
13	0.000	0.00	0.00	0.00	0.00					
14	0.000	0.00	0.00	0.00	0.00				1	
15	0.000	0.00	0.00	0.00	0.00					
16	0.173	0.00	0.00	0.00	0.00			<del></del>		
17	0.285	0.00	0.00	0.00	0.00					1
18	0.000	0.00	0.00	0.00	0.00					
19	0.000	0.00	0.00	0.00	0.00	<del></del>				
20	0.007	0.00	0.00	0.00	0.00					
21	0.617	0.00	0.00	0.00	0.00		1			
22	0.397	0.00	0.00	0.00	0.00					
23	0.172	0.00	0.00	0.00	0.00					
24	0.139	0.00	0.00	0.00	0.00					
25	0.465	0.00	0.00	0.00	0.00				<del></del>	
26	0.747	0.00	0.00	0.00	0.00	195.0	214.0	<del></del>		
27	0.775	0.00	0.00	0.00	0.00	<u> </u>				
28	0.829	0.00	0.00	0.00	0.00					
29	0.790	0.00	0.00	0.00	0.00				1	<b></b>
30	0.768	0.00	0.00	0.00	0.00					
31	0.696	0.00	0.00	0.00	0.00				T	
Total	9.170	0.00	0.00	0.00	0.00	402.0	320.0			
Mo. Avg		0.00	0.00	0.00	0.00	201.0	160.0		<del>-</del>	

Day Shift Operator	Class:		Certificate No:		Name:	
Day Shift Operator	Class:		Certificate No:		Name:	
Night Shift Operator	Class:		Certificate No:		Name:	
Lead Operator	Class:	c	Certificate No:	8863	Name:	Roger Holsapple

## 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

COUNTY:

PERMITTEE NAME: Phiris-Wedgefield MAILING ADDRESS: 6608 Walton Way Tampa Florida, 33610

Wedgefield WWTF 3100 Bencroft Boulevard Oriendo, FL FACILITY: LOCATION:

Orange

PERMIT NUMBER

LIMIT: CLASS SIZE:

FLA010900 Final

REPORT: GROUP:

MONITORING GROUP NUMBER: R-001 MONITORING GROUP DESC: Public

Public Access Rouse, including Influent

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: Nevember 01,2011

To: November 30,2011

Parameter		Quantity or Loadi	ng Units	Qua	dity or Concentratio	n Units	No. Ex.	Frequency of Analysis	Sumple Type
Flow	Sample Measurement	0.287	MGD				•	5 Days/Week	Flow meters and totalizers
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Requirement	0,368 (An.Avg.)	MGD					5 Days/Weck	Flow meters and totalizers
Flow	Sample Mensarement	0.217	MGD				0	5 Days/Week	Flow meters an totalizers
PARM Code 50050 I Mon, Site No. FLW-1	Permit Requirement	Report (Mo.Avg.)	MOD					5 Days/Week	Flow meters and totalizers
OD, Carbonageous 5 day, 20C	Sample Measurement			7.8			•	Every Two Weels	8-boar FPC
RM Code 80082 Y  Mon.Site No. EFA-1	Permit Requirement			20.0 (An.Avg.)		mg-L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20C	Sample Mossurement			8.5	9	uigñ	9	Every Two Weetin	8-keer FPC
PARM Code 80082 A Mon, Site No. EFA-1	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	Hag√L.		Every Two Weeks	8-bour FPC
Solide, Total Suspended	Sample Measurement			1.5		mg/t	•	4 Days/Week	Greb
PARM Code 00530 B Mon.Site No. EFB-1	Permit Reguirement			5.0 (Max.)		may'L		4 Days/Week	Grab
pH	Semple Moasurement			7.5	112	BU DU	•	5 Days/Week	Grah
PARM Code 00400 A Mon. Site No. EFA-1	Permit Requirement			6.0 (Min.)	8.5 (Max.)	su su		5 Days/Week	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 property 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 panalties for submitting false information, including the possibility of fine and imprisonment for knowling violations.

ı	NAME/TITLE	OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YYMMOD)
١	Roger H	iolsappie Load Operator	14 Holy de	407-259-6991	2011/12/16

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

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

R-001

PERMIT NUMBER: FLA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: November 81,2011

To: November 30,2011

Parameter		Quantity of	r Loading	Units	Qu	ality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
cliform, Fecal, % less than	Sample Measurement				94%		PER- CENT	0	4 Days/Week	Greb
ARM Code 51005 A	Permit Requirement				75 (Min.)		PER- CENT		4 Days/Wook	Grab
Coliform, Fecal	Sample Measurement				1		W100MIL	0	4 Days/Week	Grab
ARM Code 74055 A	Permit Requirement				25 (Max.)		#/100ML		4 Days/Vinck	Grab
otal Residual Chlorine (For Disinfection)	Sample Measurement				1.9		ang/L	•	Continuous	Meter
ARM Code 50060 A Aon, Site No. EFA-1	Permit Requirement				1.0 (Min.)		mş/L		Continuous	Meter
Furbidity	Sample Measurement				2.9		UIN	0	Continues	Meter
ARM Code 00070 B	Permit Requirement				Report (Max.)		UTM		Continuous	Meter
litrogen, Nitrate, Total (as N)	Semple Measurement				0.13		mg/L	•	Monthly	8-hour FPC
Ann.Site No. EFA-1	Permit Requirement				12.0 (Max.)		mg/L		Monthly	8-hour FPC
low (from groundwater well)	Sample Measurement	04.0		MGD				•	Continuous	Flow meters an totalizers
PARM Code 50050 P Mon.Site No. FLW-6	Permit Requirement	Report (An.Avg.)		MĞD					Continuous	Flow meters and totalizers
low (from groundwater well)	Sumple Measurement	0.00	0.00	MGD				•	Contlavens	Flow meters an totalizers
PARM Code 50050 Q Mon.Site No. FLW-6	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD					Continuous	Flow meters and totalizers
Flow (total to zone 3)	Sample Measurement	0.000		MGD				0	Continuous	Flow meters and
PARM Code 50050 R Mgn,Site No. FLW-5	Permit Requirement	0.6232 (An.Avg.)		MGD					Continuous	Flow meters and totalizers
Flow (total to zone 3)	Sample Measurement	6.900	0.000	MGD				•	Continuous	Flow meters and totalizers
PARM Code 50050 S Mon.Site No. FLW-5	Permit Requirement	Report (Mo,Avg.)	Report (3-Mo.Avg.)	MGD				П	Continuous	Flow meters and totalizers
Flow (total to zone 2)	Semple Measurement	0.000		MGD				•	Centinuous	Flow meters car totalizers
PARM Code 50050 T Mon, Site No. FLW-4	Permit Requirement	0.0634 (An.Avg.)		MGD				$\Box$	Continuous	Flow meters and totalizers
Flow (total to zone 2)	Sample Measurement	0.000	0.000	MGD				0	Сонбавова	Flow meters and totalizers
PARM Code 50050 U Mon,Site No. FLW-4	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MOD					Continuous	Flow meters and totalizers

COMMENTS:

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

MONITORING GROUP NUMBER: R-001 MONITORING PERIOD From: November 01,2011 Te: No

PERMIT NUMBER: FLA010900

					CEDEI VI,1011		Der 30,2011				
Parameter		Quantity or Loading		Units Qualit		lity or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sample Type
Plow (total to zone 1)	Semple Measurement	9.000		MGD					0	Continuous	Plow meters a
PARM Code 50050 V Mon.Site No. FLW-3	Permit Requirement	0.0114 (Ал.А <b>vg.</b> )		MGD						Continuous	Flow meters at
Flow (total to zone 1)	Sample Measurement	0.000	0.000	MGD			]		8	Continuous	Flow meters at
PARM Code 50050 W Mon.Site No. FLW-3	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MOD				<del></del>	1	Continuous	Flow meters an
Flow (total to golf course)1	Sample Measurement	0.223		MGD					•	Continuous	Flow meters as
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	0.270 (An Avg.)		MGD			1		1-1	Continuous	Flow meters and totalizers
Flow (total to golf course)	Sample Measurement	0.345	0.319	MGD					•	Continuous	Flow meters na totalizere
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD						Continuous	Flow meters and totalizers
BOD, Carbonaceous 5 day, 20C	Sample Manuscrement				194.5			eg/l.	•	Every Two	8-bour PPC
.RM Code 80082 G an.Site No. INF-1	Permit Requirement				Roport (Mo.Avg.)			nujr/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Semple Measurement				215.0			mg/L	•	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INT-1	Pormit Requirement				Report (Mo,Avg.)			mg/L		Every Two Works	8-hour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100	Sample Measurement				62.7			Percent	٠	Menthly	Calculated
PARM Code 00180 1 Mon.Site No. FLW-t	Permit Requirement				Report			Percent		Monthly	Calculated
	Sample Measurement										
	Pormit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement								$\neg$		

¹ Initially, flow is limited to 0.270 MGD AADF. However, the flow may be increased after completion of the second treatment plant and pending the results the required load test. DEP Form 62-620.910(10), Effective November 29, 1994

## DAILY SAMPLE RESULTS - PART B

Monitoring Period

FLA010900

From: November 01,2011To: November 30,2011

Facility: Wedgefield WWTF

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100MIL)	pH (Max)	рН (Міл)	TRC (For Disinfect.) (mg/L)	TSS (mg/L)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Total (as N) (mg/L)
Code	80082	74055	60400	00400	50060	00530	00070	50050	00620
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-I	EFB-1	EFB-1	FLW-1	EFA-1
1		<1	7.6	7.6	2,3	1.0	1.9	0,268	
2		<1	7.8	7.8	2.4	1.5	2.2	0.231	
3		<1	8.2	8.2	2.7	1.2	2.2	0.213	
4			8.0	8.0	2.0		2.2	0.220	
5			7.9	7.9	1.2		2.3	0.218	
6			8.1	8.1	2		2.6	0.251	
7		<1	7.8	7.8	2,2	1.0	1.9	0.237	
8		<1	7.9	7.9	2	1.0	1.8	0.210	
9	9.0	<1	8.1	8.1	2.2	1.0	1.8	0.209	8.13
10		<1	8.2	8.2	2.1	1.0	2.0	0.201	
11			8.0	8.0	1		1.8	0.202	
13		<del> </del>	7.9	7.9	1.3		2.3	0.191	
14		<1	8.0	8.0	1.5		2.9	0.226	
15			7.6	7.6	2.2	1.0	1.8	0.244	
16		1	7.8	7.8	1.5	1.0	1.9	0.227	
		<1	7.5	7.5	2	1,0	1.9	0.200	
17		<1	7.6	7.6	1.6	1.0	1.7	0.216	
<b>(</b>			7.6	7.6	1.5		1,6	0.195	
19			7.7	7.7	1.3		2,2	0.208	
20	8.0	<1	7.9	7.9	1.5	1.0	2.3	0.222	
22	8.0	<1	7.6	7.6	1.5	1,0	2.0	0.226	
23		<1 <1	7.8	7.8	1.8	1.0	1.9	0.218	
24			7.7	7.7	1.8	1.0	2.0	0.214	
25			7.5	7.5	1.4		1.8	0.224	
26	<del></del>		7.6	7.6	2		2.9	0.229	
27			7.6	7.6	2		2.8	0.200	
28		<i< td=""><td>7.8</td><td>7.8</td><td>2</td><td></td><td>2.9</td><td>0.220</td><td></td></i<>	7.8	7.8	2		2.9	0.220	
29		<1	7,7	7.7	2.2	1.0	2.2	0.224	
30		< <u>l</u>	7.6	7.6	2.5	1.0	2.0	0.201	
31	<del></del>		7.7	7.7	1.7	1.0	2.8	0.170	
Total	17	9							
Mo. Avg.	8.5	0.52	233.8	233.8	55	18.7	65	6.515	8.13
PLANT STA		·	7.8	7,8	1.8	1.1	2.2	0.2172	8.13
Day Shift O		Class: Class:		Certificate No:		Nam			
ight Shift Operator		Class:	************			Nam	ie:		
мі Орега <u>н</u>				Certificate No:		New Year	ie:		·
Uponida	-	Class:	<u>c</u> (	Certificate No:	8863	Nam	c: Roger	Holsapple	

## DAILY SAMPLE RESULTS - PART B

Permit Number.

FLA010900

Facility: Wedgefield WWTF

From: November 01,2011To November 30,2011 **Monitoring Period** 

	Flow (MGD) golf course	Flow (MGD) Zone 1	Flow (MGD) Zone 2	Flow (MGD) Zone 3	Flow (MGD) GW makeup well	CBOD5 (mg/L)	TSS (mg/L)	;	
Code	50050	50050	50050	50050	50050	80082	00530		 
Mon. Site	FLW-2	FLW-3	FLW-4	FLW-5	FLW-6	INF-1	INF-1		
1	0.711	0.00	0.00	0.00	0.00				
2	0.708	0.00	0.00	0,00	0.00				
3	0.103	0.00	0.00	0.00	0.00				 
4	0.097	0.00	0.00	0.00	0.00				 
5	0.054	0.00	0.00	0.00	0.00				
6	0.532	0.00	0.00	0.00	0.00				 
7	0.651	0.00	0.00	0.00	0.00				<del></del>
8	0.481	0.00	0.00	0.00	0.00				
9	0.807	0.00	0.00	0.00	0.00	191.0	240.0	<del>_</del>	
10	0.098	0.00	0.00	0.00	0.00		1		
11	0.004	0.00	0.00	0.00	0.00	<del></del>		~	 
12	0.374	0.00	0.00	0.00	0.00		1		 
13	0.269	0.00	0.00	0.00	0.00		<del></del>		
14	0.000	0.00	0.00	0.00	0.00		<del>  </del>		 <del></del>
15	0.255	0.00	0.00	0.00	0.00		<del>                                     </del>		· · ·
16	0.000	0.00	0.00	0.00	0.00		<del>                                     </del>		 
17	0.446	0.00	0.00	0.00	0.00	<del></del>	<del>   </del>		 <del></del>
18	0.952	0.00	0.00	0.00	0.00		<del>  </del>		<del> </del>
19	0.822	0.00	0.00	0.00	0.00	<del></del>	<del> </del>	<del></del>	 
20	0.517	0.00	0.00	0.00	0.00		<del>                                     </del>		 
21	0.365	0.00	0.00	0.00	0.00	198.0	190.0		 <del></del>
22	0.508	0.00	0.00	0.00	0.00				 
23	0.514	0.00	0.00	0.00	0.00		<del>├</del> }		 
24	0.216	0.00	0.00	0.00	0.00		<del> </del>		 
25	0.367	0.00	0.00	0.00	0.00		<del> </del>		 
26	0.412	0.00	0.00	0.00	0.00		<del>  </del>		 
27	0.035	0.00	0.00	0.00	0.00	· · · · · · · · · · · · · · · · · · ·	<b> </b>  -		 
28	0.252	0.00	0.00	0.00	0.00				 
29	0.000	0.00	0.00	0.00	0.00				 
30	0.404	0.00	0.00	0.00	0.00	····			 
31									 
Total	10.954	0.00	0.00	0.00	0.00	200.0			
Vio. Avg.	0.3651	0.00	0.00	0.00	0.00	389.0 194.5	430.0 215.0		

Day Shift Operator	Class:	 Certificate No:		Name:	
Day Shift Operator	Class.	 Certificate No:	••	Name:	man in the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the secon
Night Shift Operator	Class:	 Certificate No:		Name:	
Lead Operator	Class:	 Certificate No:	8863	Name:	Roger Holsapple

#### DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mell this report to: Department of Environmental Protection, Central District, 3319 Magnire Boulevard Suite 232, Orlando, FL, 32803-3767 PERMIT NUMBER PERMITTEE NAME: Pluris-Wedgefield MAILING ADDRESS: 6608 Walton Way Tampa Florida 33610 FLA010900 LIMIT: CLASS SIZE: Final N/A REPORT: GROUP: FACILITY: LOCATION: Wedgefield WWTF 3100 Bencroft Boulevard MONITORING GROUP NUMBER: MONITORING GROUP DESC: R-001 Public Access Reuse, including Influent Orlando, FL NO DISCHARGE FROM COUNTY: Orange SITE: MONITORING PERIOD From: December 91,2011 To: December 31,2011

Parameter		Quantity or Loading		Units	Qual	lity or Concentr	ation	Units	No. Ex.	X. Analysis	Sample Type
Flow	Sample Measurement	0.200		MGD				MGD	•	5 Days/Wesk	Flow meters and totalizers
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Requirement	0.368 (An.Avg.)		MGD						5 Days/Wook	Flow meters and totalizers
Flow	Sample Measurement	0.197		MGD				MOD	0	5 Days/Week	Flow snators and totalizers
PARM Code 50050 1 ion, Site No. FLW-I	Permit Requirement	Report (Mo.Avg.)		MÖD						5 Days/Week	Flow meters and totalizers
OD, Carbonaccous 5 day, 20C	Sample Measurement				7.8			MG/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Requirement				20.0 (An.Avg.)			#ø/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				7.5	7.8		MG/L	•	Every Two Weeks	8-hour FPC
PARM Code 80082 A Mon.Site No. EFA-1	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Mex.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				3.2			MG/L	9	4 Days/Week	Grab
PARM Code 00330 B Mon.Size No. EFB-1	Permit Requirement				5.0 (Max.)			mg/L		4 Deys/Weck	Grab
рН	Sample Measurament				7.4	8.2		SU	•	5 Days/Week	Grab
PARM Code 00400 A Mon.Site No. EFA-)	Permit Requirement				6.0 (Mkn.)	8.5 (Max.)		SU		5 Deys/Week	Cirab

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 knowledge violations.

NAME/TITLE OF PAINCIPAL EXE	CUTIVE OFFICER OR AUTHORIZED AGENT	BIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MEM/DD)
Roger Holsspple	Lead Operator	Milletople	407-25 <del>9-699</del> 1	2012/01/18

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

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

1

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

R-001

PERMIT NUMBER, FLA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: December 01,20101 To: December 31,2011

Parameter		Quantity or Loading		Units	Qu	Units	Ex. And	Frequency of Analysis	Sample Type	
Coliform, Fecal, % less than detection	Sample Measurement				100%		PBR- CENT	0	4 Days/Work	Grab
PARM Code 51905 A Mon.Site No. EFA-1	Permit Requirement				75 (Min.)		PER- CENT		4 Days/Week	Grab
Coliform, Fecal	Sample Measurement				0.5		#/100MIL	0	4 Days/Week	Grab
PARM Code 74055 A Mon.Site No. EFA-1	Permit Requirement				25 (Max.)		#/100ML		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement		_		1.0		me/L	0	Continuous	Meter
PARM Code 50060 A Mon.Sine No. EFA-1	Permit	•			1.0		##L		Continuous	Meter
Turbidity	Requirement Sample				(Min.) 2.9	<del>                                     </del>	NTU		Continuous	Meter
PARM Code 00070 B	Measurement Permit				Report		עזא		Continuous	Moter
Mon.Site No. EFB-1 Nitrogen, Nitrate, Total (as N)	Requirement Sample		· · · · · · · · · · · · · · · · · · ·		(Mex.) 7.44	<del> </del>	mg/L	0	Monthly	8-hour FPC
RM Code 00620 A	Megaurement Permit				12.0	<del>                                     </del>	mg/L		Monthly	8-hour FPC
on.Site No. EFA-1 Flow (from groundwater well)	Requirement Sample	D. <b>0</b> 0		MGD	(Max.)	<del> </del>	MGD	0	Continuous	Flow moters and
PARM Code 50050 P	Measurement Permit	Report		MOD	·	<del>  </del>	-	$\vdash$	Continuous	Flow moters and
Mon.Site No. FLW-6 Flow (from groundwater well)	Regulrement Sample	(An.Avg.) 0,00	0.00	MGD			MGD	0	Continuous	Flow meters and
PARM Coile 50050 Q Mon.Site No. FLW-6	Measurement Permit	Report	Report	MGD		<del>                                     </del>			Continuous	Flow meters and
Flow (total to zone 3)	Requirement Sample Measurement	(Mo.Avg.) 0.00	(3-Mo.Avg.)	MCID		<del> </del>	MGD	Ö	Continuous	totalizers Flow meters and
PARM Code 50050 R Mon,Site No. FLW-5	Permit Requirement	0.0232 (An.Avg.)		MOD					Continuous	Flow meters and
Flow (total to zone 3)	Sample Measurement	0.00	0.00	MGD			MGD	0	Continuous	Flow mesers and totalizers
PARM Code 50050 S Mon, Site No. PLW-3	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD			<del>                                     </del>		Continuous	Flow meters and
Flow (total to zone 2)	Saraple Measurement	0.00	, , , , , , , , , , , , , , , , , , , ,	MOD		<u> </u>	MGD	0	Continuous	Flow meters and
PARM Code 50050 T Mon.Site No. FLW-4	Permit Requirement	0.0634 (An.Avg.)		MGD				-	Continuous	Flow maters and
Flow (total to zone 2)	Sample Measurement	0.00	0.00	MGD			MGD	0	Continuous	Flow meters and
PARM Code 50050 U Mon.Site No. FLW-4	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo Avg.)	MOD		<del></del>		$\dashv$	Continuous	Flow meters and totalizers

#### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Wedgefield WWTF

R-001

PERMIT NUMBER: FLA010900

MONITORING GROUP NUMBER: MONITORING PERIOD From: December 91,2011 To: December 31,2011

Parameter	Quantity or Loading		Units	Qu	ality or Concer	tration	Units	No. Ex.	Frequency of Analysis	Sample Type	
Flow (total to zone 1)	Sample Measurement	0.00		MGD				MGD	0	Continuous	Flow meters an
PARM Code 50050 V Mon.Site No. FLW-3	Permit Requirement	0.0114 (An.Avg.)		MOD						Continuous	Flow meters an totalizers
Flow (total to zone 1)	Sample Measurement	0.00	0.00	MGD				MGD	0	Continuous	Flow meters an totalizers
PARM Code 50050 W Mon.Site No. FLW-3	Permit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MGD						Continuous	Flow meters an totalizers
Flow (total to golf course)	Sample Measurement	9.218		MGD				MGD	•	Continuous	Flow meters an totalizers
PARM Code 50050 Mon.Site No. FLW-2	Permit Requirement	0.270 (An.Avg.)		MGD		<u> </u>				Continuous	Flow meters an totalizers
Flow (total to golf course)	Sample Measurement	0.166	0,275	MGD		<u> </u>		MGD	0	Continuous	Flow meters an totalizers
PARM Code 50050 Mon.Site No. FLW-2	Pennit Requirement	Report (Mo.Avg.)	Report (3-Mo.Avg.)	MCD		ļ				Continuous	Flow meters an totalizers
BOD, Carbonaceous 5 day, 20C	Sample Measurement				213,5			mg/L	•	Every Two Weeks	8-hour FPC
ARM Code 80062 G Mon.Site No. INF-I	Permit Requirement				Report (Mo.Avg.)			nug/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				128.0			mg/L	•	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Requirement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-bour FPC
Percent Capacity, (TMADF/ Permitted Capacity) x 100 PARM Code 00180 1	Sample Measurement Permit		ļ		61.1	<u> </u>		Percent	°	Monthly	Calculated
Mon.Site No. FLW-I	Requirement				Report	ļ		Percent		Monthly	Calculated
	Sample Measurement Permit				<del> </del>	<u> </u>					
<u></u>	Requirement Sample			<u> </u>		ļ					
	Measurement Promit						<u> </u>				
	Requirement Semple			<b></b>							
	Measurement Permit						ļ				
	Requirement										

Initially, flow is limited to 0.270 MGD AADF. However, the flow may be increased after completion of the second treatment plant and pending the results the required load test. DEP Form 62-620,910(10), Effective November 29, 1994

## DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period FLA010900

From: December 01,2011 To: December 31,2011

Facility:

Wedgefield WWTF

	CBOD5 (mg/l.)	Fecal Coliform Bacteria (#/100ML)	рН (Мах)	pl I (Min)	TRC (For Disinfect.) (mg/L.)	TSS (mg/1.)	Turbidity (NTU)	Flow (MGD)	Nitrogen, Nitrate, Total (as N) (mg/L)
Code	80082	74055	00400	00400	50060	00530	00070	50050	00620
Mon. Site.	EFA-1	EFA-I	EFA-1	EFA-I	EFA-I	EFB-1	EFB-1	FLW-1	EFA-1
1		<1	7.6	7.6	1.6	1.0	2.3	0.119	
2			7.7	7.7	3.7		1.5	0.147	
3			7.6	7.6	1.0		2.7	0.134	
4			7.9	7.9	1.0		2.0	0.143	
5		<1	7,8	7.8	2.0	1.0	2.5	0,108	
6		<1	7.5	7.5	1.0	1.3	1.6	0.166	
7		<1	7.6	7.6	1.0	1.0	2.0	0.237	
8		<1	7.7	7.7	1.0	1.4	1.7	0.180	
9		ļ. <u></u>	7.9	7.9	1.7		2.6	0.183	
10			8.0	8.0	1.0		1.7	0.218	
11			8.0	8.0	1.0		1.3	0.228	
12	7.0	<1	7.7	7.7	1.0	1.2	1.3	0.240	7.44
13		<1	7.6	7.6	1.3	1.0	1.1	0.201	
14		<1	7.8	7.8	1.2	1.5	2.0	0.205	
15		<1	7.9	7.9	1.2	3.2	1.5	0.203	
16			8.1	8.1	1.9		2.4	0.215	<u> </u>
17			8,2	8.2	1.0		1.3	0.202	
18			8.0	8.0	1.7		2,1	0.210	
19	6.0	<1	7,4	7,4	2.3	2.0	1.5	0.219	
20		<1	7.5	7.5	1.0	1.0	1.0	0.202	
21		<1	7.6	7.6	1.5	1.1	2.0	0.211	
22		<1	7.5	7.5	1.3	1.0	2.1	0.206	
23			7,7	7.7	1.0		2.3	0.206	
24			7.6	7.6	1.0		2.2	0.221	
25			7.7	7.7	1.6		2.0	0.242	
26			7.6	7.6	1.4		2.7	0.212	
27		<1	7.7	7.7	1,4	1.0	2.3	0.225	
28		<1	7.5	7.5	1.6	1.0	2.9	0.223	
29		<1	7.8	7.8	1.5	1,0	2.6	0.211	
30	_	<1	7.6	7.6	2.4	1.2	1.5	0.213	
31			7.7	7.7	2.3		1.8	0.212	
Total	13.0	8.5	240	240	46	21.9	60	6.142	7.44
Mo. Avg.	7.5	0.5	7.7	7.7	1,4	1.28	2.0	0.197	7,44

PLANT STAFFING: Day Shift Operator	Class:	C	Certificate No:	14752	Name:	Edison Lugo
Day Shift Operator	Class:		Certificate No:		Name:	
Night Shift Operator	Class:		Certificate No:		Name:	
Lead Operator	Class:	<u>C</u>	Certificate No:	8863	Name:	Roger Holsapple

## DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period FLA010900

From: December 01,2011 To: December 31,2011

Facility: Wedgefield WWTF

	Flow (MGD) golf	Flow (MGD) Zone 1	Flow (MGD) Zone 2	Flow (MGD)	Flow (MGD) GW makeup	CBOD5 (mg/L)	TSS (mg/l.)			
	course	Zone	Zone 2	Zone 3	well	(mg/L)				
Code	50050	50050	50050	50050	59050	K(K)82	00530	<del> </del>		
Mon. Site	FLW-2	FLW-3	FLW-4	FLW-5	FLW-6	INF-1	INF-1			
ı	0.800	0.00	0.00	0.00	0.00					
2	0.266	0.00	0.00	0.00	0.00					
3	0.340	0.00	0.00	0.00	0.00					
4	0.256	0.00	0.00	0.00	0.00		1			
5	0.156	0.00	0.00	0.00	0.00		1		_	
6	0.224	0.00	0.00	0.00	0.00			1		
7	0.000	0.00	0.00	0.00	0.00	210.0	124.0			
8	0.127	0.00	0.00	0.00	0.00					
9	0.210	0.00	0.00	0.00	0.00					
10	0.187	0.00	0.00	0.00	0.00		+	┪		<del></del>
11	0.152	0.00	0.00	0.00	0.00		1			
12	0.191	0.00	0.00	0.00	0.00		+	<del>                                     </del>	<del></del>	
13	0.000	0.00	0.00	0.00	0.00	<del></del>	<del>                                     </del>	<del> </del>		
14	0.159	0.00	0.00	0.00	0.00			+		
15	0.136	0.00	0.00	0.00	0.00			<del></del>	<del></del>	<del></del>
16	0.089	0.00	0.00	0.00	0.00		<del>- </del>	<del>                                     </del>		
17	0.000	0.00	0.00	0.00	0.00		<del> </del>	<del> </del> -	<del></del>	· <u> </u>
18	0.214	0.00	0.00	0.00	0.00		<del> </del>	<del>                                     </del>	<del>-  </del>	
19	0.201	0.00	0.00	0.00	0.00	217.0	132.0	<del>                                     </del>		
20	0.000	0.00	0.00	0.00	0.00		+	<del> </del>		
21	0.199	0.00	0.00	0.00	0.00	··				
22		0.00	0.00	0.00	0,00		<del> </del>	<del>                                     </del>		
23	0.089	0.00	0.00	0.00	0.00		<del> </del>	<u> </u>	_	
24	0.159	0.00	0.00	0.00	0.00		<del> </del>	<del> </del>		
25	0.354	0.00	0.00	0.00	0.00		<del> </del>	<del></del>		
26	0.104	0.00	0.00	0.00	0.00	<del></del>	<u> </u>	ļ		
27	0.043	0.00	0.00	0.00	0.00		<del></del>	<b> </b>		
28	0.089	0.00	0.00	0.00	0.00	·· · · · · · · · · · · · · · · · · · ·	<del> </del> -			
29	0.099	0.00	0.00	0.00	0.00			ļ		
30	0.000	0.00	0.00	0.00						
31	0.151	0.00	0.00		0.00					
Total	0.093			0.00	0.00					
Mo. Avg.	5.088	0.00	0.00	0.00	0.00	427.0	256.0			
nvg.	0.166	0.00	0.00	0.00	0.00	213.5	128.0			
LANT STA Pay Shift O		Class:		Certificate No:	14752	N	ame; Edis	on Lugo		•
ay Shift O	perator	Class.		Certificate No:			 ame:		<del></del>	<del></del>
light Shift	Operator	Class:		Certificate No:			ame:			
ead Operat										

## Florida Department of Environmental Protection

Twin Towers Office Bldg. 2600 Blair Stone Road Tallahaesec, Florida 32399-2400

# GROUND WATER MONITORING REPORT Rule 62-522.600(11)

PART I GENERAL INFORMA	ATION	
(1) Facility Name Wedge	field WWTF	
Address 3100 Bancro	ift Blvd.	
City Orlando Flori	ida	Zip 32833
Telephone Number	407) 259-6991	
(2) The GMS Identification	Number 3048P03712	
(3) DEP Permit Number	FLA010900	
(4) Authorized Representa	ative Name Roger Holsapple	
Address 6608 Walton	Way	
City Tampa Florida		Zip 33610
Telephone Number	(813) 359-8327	
(5) Type of Discharge Do	mestic Waste	
3) Method of Discharge G	Solf Course / Spray field Imig	ation
attachments and that, based information is true, accurate possibility of fine and imprise	d on my inquiry of those indivi , and complete. I am aware t	ned and am familiar with the information submitted in this document and all duals immediately responsible for obtaining the information, I believe that the hat there are significant penalties for adbmitting false information, including the
		Signature of Owner or Authorized Representative
PART II QUALITY ASSURA		
Sample Organization	<del> </del>	rironmental Laboratories
Analytical Lab	NELAC Certification #	E84589
	NELAC Certification #	
Lab Name Advanced Envir		
<del></del>	ake Blvd. Suite 1016 Altamon	te Springs Florida 32701
Phone Number (407) 937-1	594	
Printed 4/15/2004		

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010990

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWB-IR* Background

Well Name MW-1 Golf Course WAFR # 6006

GMS# 3048A13413

Monitoring Period
Was the well purged before sampling?

From: October 2011 To: December 2011 X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

11/07/2011 11:56

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Unito	Permit Regulrement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N
Water Level Relative to Feet, NGVI)	82545	_	61.87	Feet	Report	N/A	Field	Quarterly	ритр	N
Nitrate, (as N)	00620		0.094U	my/l	Report	0.043	IC 300.0	Quarterly	ритр	N
Solids, Total Dissolved(TDS)	70295	70296	390	mg/l	Report	10	E160.1	Quarterly	punsp	N
Chloride (as Cl)	00940		150	mg/l	Report	0.81	IC 300.0	Quarterly	рилър	N
oliform, Focal	74055		1.0U	#/100/ml	Report	1.0	SM9222D	Quarterly	britib	N.
н	00400		4.81	SU	Report	N/A	Field	Quarterly	punip	
Turbidity, Lab - Nepholometric	82079	~	1,5	NTU	Report	0.016	E180.1	Quarterly	pump	N
Added: Nevember 2009**							<u></u>		<u> </u>	
odium	00923		86	mg/L	Report	0.026	SW#466010	Quarterly	pump	N
rihalomethane, Total	82080		0.45U	ug/l.	Report	0.60	E524.2	Quarterly	pump	N
										···
								100		

^{*}Original well MWB-1 was damaged and replaced by MWB-1R on 06/08/2007. The WAFR ID remains the same

**Placed on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Tribalomethane (FTIIMs) have been added to the Groundwater Monitoring Plan (GWMP)

COMMENTS AND EXPLANATION:
11/20/2009

County: Facility Nume: Permit Number: **Orange County** Wedgefield WWTF

FLA010900

GMS# 3048P03712

Pennit Builder MW ID.

Well Type: Description: MWB-2 Background

Well Name MW-2 **Golf Course** 

WAFR # 6005 GMS# 3048A13414

Monitoring Period

Date Sample Obtained: Time Sample Obtained:

11/07/2011

12:34

Was the well purged before sampling? GW TOC:70.10

From: October 2011 To: December 2011 X Yes ___ No

Other Historic Parameter Permit Sample Unita Permit Sampling Equipment Used Detection Analysia Method Sample: Filtered Monitoring Builder Frequency PARM Code (L/F/N) PARM Cod (Analysis Results) 66.16 82545 Water Level Relative to Feet, NGVD Feet N/A Report Field Quarterly N րսութ 0.094U Quarterly DUTTE 00620 Nitrate, (as N) mg/l Report 0.043 IC 300.0 N 62 Quarterly pump Solids, Total Dissolved(TDS) 70295 70296 mg/l Report 10 E1601 Ν 17 punip 00940 Chloride (as Cl) 0.81 nıg/l Report IC 300.0 N 1.0U Quarterly pump 74055 #/100/ml Soliform, Fecal Report 1.0 SM9222D N 4.16 Quarterly 00400 SU N/A Report Field N 0.15 Quarterly PUMP שוא 82079 Turbidity, Lab - Nepholometric Report 0.016 E180.1 N Added: November 2009** Quarterly pump 00923 dium mg/L Report 0.026 SW8466010 10 Ν Quarterly рипр Trihalomethane, Total 82080 0.45U սց/Լ Report 0.60 E524.2 N

^{**}Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Tribalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION: 11/20/2009

Facility Name:

**Orange County** Wedgefield WWTF FLA010900

Permit Builder MW ID:

MWB-3

Permit Number:

GMS# 3048P03712

Well Type: Description:

Background Well Name MW-3

Golf Course WAFR # 6004 GMS# 3048A13415 11/07/2011-12/22/2011 11:26-09:05

Monitoring Period Was the well purged before sampling?

From: October 2011 To: December 2011 X Yes ____ No

Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Mensurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Sample Filtere (L/F/N
Water Level Relative to Feet, NGVD	82545		65.9	Foct	Report	N/A	Tield	Quarterly	pump	N
Nitrate, (as N)	00620	**	0.261	mg/l	Report	0.043	IC' 300.0	Quarterly	ритр	N
Solids, Total Dissolved(TDS)	70295	70296	1200/1300	mg/l	Report	10	E160.1	Quarterly	pump	N
Chloride (as CI)	00940	_	110	mg/l	Report	0.81	IC 300.0	Quarterly	brimb	N
oliform, Fecal	74055	·	1.0U	#/100/ml	Report	1.0	SM9222D	Quarterly	pump	N
Но	00400		6.09	SU	Report	N/A	Field	Quarterly	pump	N.
Turbidity, Lab - Nepholometric	82079		60	NTU	Report	0.016	E180,1	Quarterly	brusb	N
dded: November 2009**	<u> </u>									
odium	00923		56	mg/L	Report	0.026	SW8466010	Quarterly	pump	N
ribalomethune, Total	82080	+-	0.45U	ug/l.	Report	0.60	E524.2	Quarterly	punip	N
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**Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:
11/20/2009

County: Facility Name Permit Number: Orange County Wedgefield WWTF

FLA010900 GMS# 3048P03712 Permit Builder MW ID:

Well Type: Description: MWI-4 Intermediate Well Name MW-4 Golf Course

WAFR # 6003 GMS# 3048A13416 11/07/2011 09:54

Monitoring Period
Was the well purged before sampling?

From October 2011 To: December 2011 X Yes ____ No

Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requiremen t	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Sample: Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545	-	64.58	Feet	Report	N/A	Field	Quarterly	punip	N
Nitrate, (as N)	00620	**	0.094U	mg/l	Report	0.043	IC 300.0	Quarterly	финтр	N
Solids, Total Dissolved(TDS)	70295	70296	210	mg/l	Report	10	E160,1	Quarterly	briumb	
Chloride (as Cl)	00940	-	58	mg/l	Report	18.0	1C 300.0	Querterly	pump	
≪oliform, Fecal	74055		t.oU	#/100/ml	Report	1.0	SM9222D	Quarterly	pump	N
.1	00400		5.85	<b>S</b> U	Report	N/A	Field	Quarterly	рштр	N
Turbidity, Lab - Nepholometric	82079		21	NTU	Report	0.016	E180.1	Quarterly	pump	N
Added: November 2009**										
iodium	00923	_	31	mg/L	Report	0.026	SW8466010	Quarterly	pump	N
Frihalomethane, Total	82080	_	0.45U	ug/L	Report	0,60	E524.2	Quarterly	bruth	N
						<del></del>				·
								<del></del>		

^{**}Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Tribalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:

11/20/2009

County: Facility Name: Permit Number: Orange County Wedgefield WWTF

FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type Description: MWC-6 Compliance

Well Name MW-6

Golf Course WAFR # 6001 GMS# 3048A13418 11/07/2011 10:48

Monitoring Period Was the well purged before sampling? GWTOC: 65.04

From: October 2011 To: December 2011 X Yes ___ No Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requiremen t	Detection 1 Imits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545		61.03	Feet	Report	N/A	Field	Quarterly	ритр	N
Nitrate, (as N)	00620		0.094U	mg/l	Report	0.043	IC 300.0	Quarterly	pump	N
Solids, Total Dissolved(TDS)	70295	70296	160	mg/l	Report	10	E160.1	Quarterly	brurb	N
Chloride (as Cl)	00940	-	38	mg/l	Report	0.81	IC 300.0	Quarterly	pump	N
™aliform, Fecal	74055	-	1.0U	#/100/m1	Report	1.0	SM9222D	Quartorly	pump	N
.н	00400	-	5,14	SŲ	Кероп	N/A	Field	Quarterly	brimb	N -
Turbidity, Lab - Nepholometric	82079	-	2.2	NTU	Report	0.016	E180.1	Quarterly	pump	N'
Added: Nevember 2009**	<u> </u>									
Sodium	00923	_	17	mg/l,	Report	0.026	SW8466010	Quarterly	pump	N
Trihalomethane, Total	82080		0.45U	ug/1.	Report	0.60	E524.2	Quarterly	ритф	N
	<u> </u>				1					
		<u> </u>								

^{*}Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHMs) have been added to the Groundwater Munituring Plan (GWMP) COMMENTS AND EXPLANATION:
11/20/2009

County Facility Name. Permit Number. Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID.

MW1-7 Well Type: Intermediate Description:

Well Name MW-7 Golf Course

WAFR # 6000 GMS# 3048A13419 11/07/2011-12/22/2011 10:23-08:39

Monitoring Period
Was the well purged before sampling?
GWTOC:68.70

From: October 2011 To: December 2011 X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

Parameter	PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	linits	Permit Requirement	Detection Limits	Analysia Method	Monitoring Frequency	Sampling Equipment Used	Samples Fixtered (1/F/N
Water Level Relative to Feet, NGVD	82545		65.89	Feet	Report	N/A	Field	Quarterly	pump	N
Nitrate, (as N)	00620	_	0.701	mg/l	Report	0.043	IC 300.0	Quarterly	pump	N
Solida, Total Dissolved(TDS)	70295	70296	710 710	mg/l	Report	10	E160.1	Quarterly	pump	N
('hloride (as C1)	00940	_	300/260	mg/l	Report	0.81	IC 300.0	Quarterly	pump	N
Cnliform, Fecal	74055		1.0U	#/100/m1	Report	1.0	SM9222D	Quarterly	pump	N
А	00400		5.28	SU	Keport	N/A	Field	Quarterly	pump	N
Turbidity, Lab - Nepholometric	\$2079	_	20	וזדא	Report	8 016	E180.1	Quarterly	pump	N
Added: November 2009**					<u> </u>					<u> </u>
Sodium	00923	-	170	mg/L	Report	0.026	SW8466010	Quarterly	pump	N
Trihalomethane, Total	82080		0.45U	ug/L	Report	0.60	E524.2	Quarterly	pump	N
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^{**}Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHMs) have been added to the Groundwater Montoring Plan (GWMP) COMMENTS AND EXPLANATION:
11/20/2009

County: Facility Name: Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type Description: MWC-I Compliance

Well Name MW-1

On-Site Irrigation WAFR # 32995 GMS# --

Trom: October 2011 To: December 2011

11/07/2011

Monitoring Period Was the well purged before sampling? GWTOC: 71.53

X Yes ___ No

Date Sample Obtained: Time Sample Obtained:

07:49

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	l-nits	Permit Requirement	Detection Limits	Analysia Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVI)	82545		65.47	Feet	Report	N/A	Field	Quarterly	pump	N
Nitrate, (as N)	00620		0.131	mg1	Report	0.043	IC 300.0	Quarterly	pump	N
Solids, Total Dissolved(TDS)	70295	70296	68	mg/l	Report	10	E160.1	Quarterly:	pump	N
Chloride (as Cl)	00940		16	mg/l	Report	0.81	IC 300.0	Quarterly	- Ծառի	N
nliform, Fecal	74055		υ <b>ο</b> υ	#/100/ml	Report	1.0	SM9222D	Quarterly	pump	N
1	00400		5.2	SU	Report	N/A	Field	Quarterly	pump	N
Turbidity, Lab - Nepholometric	82079		6.2	NTU:	Report	0 016	E180 1	Quarterly:	breuth	N_
idded: November 2009**	<u></u>			<u> </u>						
Sodium	00923	-	6.2	mg/l.	Report	0.026	SW8466010	Quarterly	թսուր	N
rihalomethane, Total	82080	-	0.45U	ug/L	Report	0,60	H524.2	Quarterly	punip	N

^{**}Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTHMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:
11/20/2009

County: Facility Name. Permit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWC-2 Compliance

Well Name MW-2 On-Site Irrigation WAFR # 32996

GMS# ---

Monitoring Period
Was the well purged before sampling?
GWTOC: 72.00

From: October 2011 To December 2011 X Yes ____ No

11/07/2011

Date Sample Obtained: Time Sample Obtained:

08:21

Parameter	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Results)	Cnits	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N
Water Level Relative to Feet, NGVD	R2545	-	64.71	Feet	Report	N/A	Field	Quarterly	purm	N
Nitrate, (as N)	00620		0.094U	mg/l	Report	0.043	IC 300.0	Quarterly	pump	N
Solids, Total Dissolved(TDS)	70295	70296	150	mg/l	Report	10	E160.1	Quarterly	рипр	N
Chloride (as CI)	00940		18	mg/l	Report	0.81	101 300.0	Quarterly	pump	N
liform, Fecal	74055		1.0U	#/100/ml	Report	1.0	SM9222D	Quarterly	pump	N
A	00400		5.58	st	Report	N/A	Field	Quarterly	brutib	N
Turbidity, Lab - Nepholometric	82079		16	NTU	Report	0.016	E180 I	Quarterly	punip	N
Added: November 2009**										
iodium	00923	- 1	9.2	my/L	Report	0.026	SW8466010	Quarterly	bnumb	N
rinsiomethane, Total	82080		0.45U	u <b>g/</b> 1.	Report	0.60	E524.2	Quarterly	brunb	N
	<u> </u>									

^{**}Based on the elevated concentrations of these parameters in the influent samples, parameters Sodium and Trihalomethane (TTIEMs) have been added to the Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:
11/20/2009

County, Facility Name: Permit Number: Orange County Wedgefield WWTF

FLA010900

GMS# 3048P03712

Permit Builder MW ID:

Well Type: Description: MWC-3

Compliance Well Name MW-3 On-Site Irrigation

WAFR # 32997

GMS# --

From: October 2011 To: December 2011 X Yes ___ No Monitoring Period
Was the well purged before sampling?
GWTOC: 72,26 Date Sample Obtained: Time Sample Obtained; 11/07/2011 09:08

Parometer	Permit Builder PARM Code	Other Historic PARM Code	Sample Measurement (Analysis Respits)	l'alts	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N
Water Level Relative to Feet, NGVD	82545		68.95	Feet	Report	N/A	Field	Quarterly	pump	N
Citrate, (as N)	00620		0.094U	mg/l	Report	0.043	IC 300.0	Quarterly	pump	<u> </u>
iolids, Total Dissolved(TDS)	70295	70296	350	mg/l	Report	10	E160.1	Quarterly	pump	N
Thloride (as CI)	00940		140	mg/t	Report	0,81	K* 300.0	Quarterly	pump	N
oliform, Fecal	74055		1.00	#/100/ml	Report	1.0	5M9222D	Quarterly	Sumb	N N
	00400		5.58	SU	Report	NiA	Field	Quarterly	pump	Ni Ni
Furbidity, Lah - Nepholometric	82079		6.6	NTU	Report	0.016	E180.1	Quarterly	рипър	N
ided: November 2009**										
ndium	00923	**	80	mg/t.	Report	0.026	SW8466010	Quarterly	pump	N
ihalomethane, Total	82080	~	0.45U	ug/l.	Report	0.60	E:524,2	Quarterly	pump	N
	<u> </u>									
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County. Facility Name. Pernsit Number: Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Permit Builder MW ID: Well Type:

Piezonieter

Description:

Well Name MWP-1*

On-Site Irrigation WAFR # 55881

GMS# --

MWP-I

Monitoring Period

From: October 2011

To: December 2011

Date Sample Obtained: 10/12/11-11/9/11-12/8/11 Time Sample Obtained:

Was the well purged before sampling? ___ Yes X No Sampling Equipment Liped Parameter Other Historic Sample Units Permit Detection Analysis Method Samples Filtered (L/F/N) Builder Measurement Requirement Limits PARM Code PARM Code Analysis Results) 67.70 Water Level Relative to Feet, NGVD 82545 Report N/A N/A Solinst N I" Month of Quarter Water Level Meter 59.77 Water Level Relative to Feet, NGVD 82545 Feet Report N/A N/A N Solmst Month of Quarter Water Level Meter 66.30 Water Level Relative to Feet, NGVD Feet Report N/A N/A Solinti N Water Level Meter 3[™] Month of Quarter

DET Form 62-620 910(10), officially this ember  $2^{o}$ ,  $i^{a\phi_0}$ 

COMMENTS AND EXPLANATION:
* MWP-1 is the well labeled "Well #1" as shown on Sheet C-12 dated 12/1/98

^{4/20/2004} 

County: Facility Name: Permit Number: Orange County Wedgefield WWTF

FLA010900

GMS# 3048P03712

Pennit Builder MW ID Well Type:

Piez

Description:

MWP-2 Piezometer

Well Name MWP-2 On-Site Irrigation WAFR # 55883

GMS# --

Monitoring Period

Was the well purged before sampling?

From: October 2011

To: December 2011

Date Sample Obtained: 1/12/11-11/9/11-12/8/11 Time Sample Obtained:

Sampling Equipment Used Samples Filtered (L/F/N) Permit Balider Parameter Other Illatoric Sample Measurement Units Permit Detection Limits Analysis Method Requirement PARM Code (Analysis Results) PARM Cude 66.40 Water Level Relative to Feet, NGVD 82545 Feet N/A Solinst I" Month of Quarter Water Level Meter 66.34 82545 Feet N/A Water Level Relative to Feet, NGVD **Report** N/A N Solinst 2nd Month of Quarter 65.38 ater Level Relative to Feet, NGVD 82545 N/A N/A N Solinst Water Level Meter 'Month of Quarter

COMMENTS AND EXPLANATION:

DEP Form 62-820 DICK LOL effective November 29, 1994

MWP-2 is the well labeled "Well #2" as shown on Sheet C-12 dated 12/1/98 47202004

#### 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 completing the DMR. Hard copies and/or electro Read these instrictions as were as the soft-timestate instructions for complete in full and typed or printed in mk. A signed, original DMR shall be mailed to the address printed on the DMR shall be mailed to the address printed on the DMR shall not be submitted before the end of 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 or reclaimed water data. All domestic wastewater 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 raw data are different.

CODE	DESCRIPTION/INSTRUCTIONS
ANC	Analysis not conducted.
DRY	Dry Well
FLD	Flood disaster.
IFS	Insufficient flow for sampling.
LS	Lost sample.
MNR	Monitoring not required this period.

CODE	DESCRIPTION/INSTRUCTIONS
NOD OPS OTH SEF	No discharge from/to site.  Operations were shutdown so no sample could be taken  Other. Please enter an explanation of why monitoring data were not available.  Sampling equipment failure.

When reporting analytical results that fall below a laboratory's reported method detection limits or practical quantification limits, the following instructions should be used:

- 1. Results greater then or equal to the PQL shall be reported as the measured quantity.

  2. Results less than the PQL and greater than or equal to the MDL shall be reported as the laboratory's MDL value. These values shall be deemed equal to the MDL when necessary to calculate an average for that parameter and when determining compliance with permit limits.

  3. Results less than the MDL shall be reported by entering a less than sign ("<") followed by the laboratory's MDL value, e.g. < 0.001. A value of one-half the MDL or one-half the effluent limit, whichever is lower, shall be used for that sample when necessary to calculate an average for that parameter. Values less than the MDL are considered to demonstrate compliance with an effluent limit, whichever is lower, shall be

#### PART A -DISCHARGE MONITORING REPORT (DMR)

act A of the DMR is comprised of one or more sections, each having its own header information. Facility information is preprinted in the header as well as the monitoring group number, whether the limits and monitoring irements are interim or final, and the required submittal frequency (e.g. monthly, annually, quarterly, etc.). Submit Part A based on the required reporting frequency in the header and the instructions shown in the permit. The Javing should be completed by the permittee or authorized representative:

No Discharge From Site: Chock this box if no discharge occurs and, as a result, there are no data or codes to be entered for all of the parameters on the DMR for the entire monitoring group number; however, if the monitoring group includes other monitoring locations (e.g., influent sampling), the "NOD" code should be used to individually denote those parameters for which there was no discharge.

Mostloring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

Sample Measurement: Before filling in sample measurements in the table, check to see that the data collected correspond to the limit indicated on the DMR (i.e. interim or final) and that the data correspond to the monitoring group number in the header. Enter the data or calculated results for each parameter on this row in the non-shaded area above the limit. Be sure the result being entered corresponds to the appropriate statistical base code (e.g. group runner in the means, the same of the contract of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of

snace shove the shaded area

Sample Type: The shaded areas in this column contain the type of sample (e.g. grab, composite, continuous) required by the permit. Enter the actual sample type that was taken in the space above the shaded area.

Signature: This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

Comment and Explanation of Any Violations: Use this area to explain any exceedances, any upset or by-pass events, or other items which require explanation. If more space is needed, reference all netachments in this area.

#### 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 were collected and analyzed.

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 data in the units indicated Table 1 in Chapter 62160. F.A.C., comains a complete list of all the data qualifier codes that your laboratory may use when reporting analytical results. However, when transferring numerical results onto Part B of the DMR, only the following data junifier codes should be used and an explanation provided where appropriate.

CODE	DESCRIPTION/INSTRUCTIONS
~	The compound was analyzed for but not detected.
<u> </u>	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 ungreserved 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 fast day of the monttoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed. Date Sample Obtained: Enter the date the sample was taken. Also, check whether or not the well was purged before sampling. 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

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

Detection Limits: Record the detection limits of the insurance memore 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 isboratory (L), filtered in field (F), or unfiltered (N).

Signature: This report must be signed in accordance with Rule 62-602-305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

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 area.

#### CIAL INSTRUCTIONS FOR LIMITED WET WEATHER DISCHARGES

exity (Limited Wet Weather Discharge): Enter the measured average flow rate during the period of discharge or divide gallons discharged by duration of discharge (converted into days). Record in million gallons per day

(NOSA). 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 based on two measurements; one made at the start

Flow (Upstream): Enter the average flow rate in the receiving stream upstream from the point of uncompeted to the period of discharge flow rate in the receiving stream upstream gauging station described in the period. Measurements are to be made at the upstream gauging station described in the period. Actual Stream Dilution Ratio To calculate the Actual Stream Dilution Ratio To calculate the Actual Stream Dilution Ratio (or actual Stream Dilution Ratio), divide the average upstream flow rate by the average discharge flow rate. Enter the Actual Stream Dilution Ratio. On Part B of the DMR, enter an asterisk (%) 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 Stream Dilution Factor was greater than the Stream. Dilution Ratio.

CBODs: Enter the average CBOD, of the reclaimed water discharged during the period shown in duration of discharge

CBODs: Enter the average CBOD, of the reclaimed water discharged during the period shown in duration of discharge.

TKN: Enter the average TKN of the reclaimed water discharge during the period shown in duration of discharge.

Actual Rainfall: Enter the actual rainfall for such day or Pert B. Enter the actual cumulative rainfall to date for this calendar year and the actual total monthly rainfall on Part A. The cumulative rainfall to date for this calendar year is the total amount of rain, in inches, that has been recorded since January 1 of the current year through the month for which this DMR contains data.

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 cumulative rainfall for the average rainfall year is 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 ducharge was activated since January 1 of the current year.

Resson for Discharge: Attach to the DMR a brief explanation of the factors contributing to the need to activate the limited wet weather discharge

Pluris Wedgefield, Inc.

Docket No.: 120152-WS

**Orange County** 

25-30.440 (5) INSPECTION REPORTS

Test Year Ended December 31, 2011

# State of Florida Department of Environmental Protection Central District

## WATER TREATMENT PLANT COMPLIANCE REPORT

Plant Name PLURIS-WEDGEFIELD	County Orange	PWS ID # 348	0149			
Plant Location 20751 SR 520, Orlando, FL 32833		Phone(40	7)568-2112			
Owner Name Pluris-Wedgefield, Inc.; Attn: Maurice Ga	Phone(21	4)220-3414				
Owner Address 2100 McKinney Avenue, Suite 1550, Dal	las, TX 75201					
Contact Person Ron Kramer	Title Regional Manager	Phone(35	<u>2)617-2231</u>			
Email Address rkramer@utilitypartnersllc.com						
This Inspection Date 11/2/11 Last C.I. Date 4/16/09	Last Survey Date 6/10/	<u>10</u>				
PWS TYPE: Community	CHLORINATION (D	isinfection)Type:	Gas ⊠Hypo			
• • • • • • • • • • • • • • • • • • • •	Make Stenner Capacity 10 gpd					
PLANT CATEGORY & CLASS: (3C)	Chlorine Feed Rate 100%					
MAX-DAY DESIGN CAPACITY: 1.037 MGD	Chlorine Residuals: Pla	Chlorine Residuals: Plant 2.2+ Remote 1.44				
TREATMENT PROCESSES IN USE						
Hypochlorination, Corrosion Control, Ion Exchange	STORAGE FACILITIES					
Softening, MIEX		(G) Ground (C) Clearwell (E) Elevated (B) Bladder (H) Hydropneumatic / flow-through				
	Tank Type/Number	G G	H H			
SERVICE AREA CHARACTERISTICS						
Subdivision	Capacity (gal)	350,000	12,000			
Food Service: Yes No N/A	Gravity Drain	Yes	Yes			
Number of Service Connections 1.598  Population Served 5,593 Basis Operator	By-Pass Piping	Yes	Yes			
Topulation Served 5,575 Dasis Operator	Protected Openings	Yes	Yes			
OPERATION & MAINTENANCE	<u> </u>					
O&M Log: Yes No Location WTP	Sight Glass or	Yes	Yes			
	Level Indicator PRV/ARV	N/A	DDX			
CERTIFIED OPERATOR: Not Required			PRV			
Operator(s) & Certification Class-Number:	Pressure Gauge	N/A	Yes			
Roger Holsapple C-7436; John Coffee C-6614	On/Off Pressure	N/A	50/60			
Greg Hooper C-8178	Access Secured	Yes	Yes			
RAW WATER SOURCE		<u></u>				
Number of Wells 2	Access Manhole	Yes	Yes			
Standby Power Source: Not Required	Tank Sample Tap	Discharge piping	On tank			
6' X 6' X 4" Concrete Pad: Yes	Location					
Well Casing Sanitary Seal: Yes						
Raw Water Sampling Tap: Yes	ION EXCHANGE PR	COCESS				
Above Ground Check Valve: Yes	Make: Culligan Hl Fl		3-2800			
Security: Yes Other Sanitary Hazards: None Observed	Capacity: 25 tons (40					
Other Sanitary Hazards: None Observed	Backwash Effluent Des		er plant			
AQUA-MAG	Comments:					
Make Stenner Capacity 10 gpd						
Comments: In use for corrosion control ION EXCHANGE PROCESS						
OTHER	Make: MIEX					
OTHER Flow Managing Davis of Flow Managing	Capacity: (2) 500 gpm					
Flow Measuring Device: Flow Meter  Meter Size & Type: (2) Water Specialties	Comments: Treatment	process is functioni	ng as			
Meter Size & Type: (2) Water Specialties Cross-Connections: Unknown	intended.					
Orong ConnectionsOnknown						

PWS ID#	3480149
Date	11/2/11

## **COMMENTS/REMINDERS:**

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.]

- 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.]

Inspector Jakies Jamis	Title Env. Specialist I	Date 11/8/11
Establish	_	
Approved by	Title Env. Supervisor II	Date11/8/11

## FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

## WASTEWATER COMPLIANCE INSPECTION REPORT

			Ŧ	ACI	LI	TY AND INSPECT	ION	INFORMATION	@	- Optional
Name and Physical Location of Facility				у		WAFR ID:		County	Entry	Date/Time
Pluris Wedgefield, Inc.					FLA010900			Orange	9/27	//2011 10:21:00 AM
3100	Bancroft	Blvd						Phone	<b>⊚</b> Es	tit Date/Time
Orlan	ido, FL 3	2833 -	4011					(949) 454-7104	9/27	7/2011 12:14:00 PM
Nume(:	s) of Field R	cpresenta	tives(s)	•	Tu	le	Emuil		Phone	
Roge	er Holsap	ple			Le	ead Operator				
Name	and Address	of Perm	ittee or De	signated	Repre	sentative Title		Phone @ Operator Certification #		Operator Certification #
Maur	rice W G	allarda				Presid	lent	(949) 454-7104		
2600	Comme	ce cen	tre Driv	e		Email				
Lake	Forest, F	L 926	30							
Inspec	Inspection Type C E I Samples Taken(Y/N); N @ Sample iD#: Samples Split (Y/N); N			mples Split (Y/N): N						
ΧD	omestic	_ :	Industr	ial		Were Photos Taken(Y/N): Y		@ Log book Volume : eIP		@ Page
IC NE		Non-C STORDED nit pliance	ince; NC complian	ce Crite	of Co aria S	TY COMPLIANCE compliance; SC = Significant of should be Reviewed when OutsELF MONITORING PROGRAM 3. Laboratory 4. Sampling 5.+Records & Reports	ut of Co	mpliance; NA = Not Applica	ible; N	s Marked by a "  EFFLUENT/DISPOSAL  9. ◆Effluent Quality  10. ◆Effluent Disposal  11. Residuals/Sludge  12. Groundwater
Status:	···				In-	Compliance X	Out-Of-	Compliance Signi	ficant-(	Out-Of-Compliance
	mended Act									
Name(s) and Signature(s) of Inspector(s)  District Office/Phone Number  Central District (407) 893-3313  William Hesser						Date November 28, 2011				
@ Signature of Reviewer							Distr	ict Office/Phone Number		Date
David Smicherko David Smilute					hale	Cer	stral District (407) 893-33	313	November 29, 2011	
Single	Single Event Violation Cedes(a):									

#### INSPECTION SUMMARY

Facility Name: Pluris Wedgefield, Inc.

Facility ID: FLA010900 Inspection Type: CEI

Date: 9/27/2011 12:14:00 PM

#### **FACILITY BACKGROUND:**

Address: 3100 Bancroft Blvd, Orlando, FL 32833 - 4011, Orange County

Permit Information: Wastewater Permit issued: 1/29/2010, and expires: 1/28/2015

Treatment Summary: Twin Contact Stabilization Ring Steel Stp's, 2 Filters w/Eff to Golf Course

Permitted Capacity: 0.368

1. Permit: IN COMPLIANCE

1.1 Observation: A copy of the permit was on-site and available to plant personnel.

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: IN COMPLIANCE

4.1 Observation: Please see specific comments

- Sample points are appropriate, and are as described in the permit.
- Influent samples are manually composited from grab samples according to calculations from flow data.
- Effluent is sampled via an ISCO 3710 automatic sampler set to pull eight-hour, flow-proportioned samples. The sampler
  was not operating at the time of the inspection. Aliquots are meeting the required 100 mL minimum volume
  requirement. The effluent sampler was 2.5 degrees C at the time of the inspection.
- Inline instruments are checked daily against field instruments. All data is appropriately logged.
- The calibration of the field turbidity meter is checked daily. The standards are verified quarterly by the contract laboratory. All data is appropriately logged.
- The calibration of the field residual chlorine meter is checked daily with gel standards. Gel standards are verified quarterly against primary standards by the contract laboratory. All data is appropriately logged.
- The field pH meter is calibrated daily; buffers (4.0, 7.0, 10.0) are within appropriate use dates. All data is appropriately logged.
- The sample refrigerator was 5.0 degrees C at the time of the inspection. All compliance thermometers are checked daily
  and the results are logged.
- Temperature measurement devices are routinely checked against a (NIST) certified thermometer.
- Alarm set points for diversion from reuse are as described in the current Operating Protocol.

#### 5. Records and Reports: OUT OF COMPLIANCE

- 5.1 Observation: Please see specific comments
  - A bound logbook with pre-numbered pages was on-site and contained excellent entries.
  - · Facility operation and maintenance manuals were on-site and current.
  - Sludge hauling records are retained on-site.
  - Operator certifications were on-site for Roger Holsapple C8863; and <u>Ted Burleson C13794</u>.
  - Operations and Maintenance manuals were on-site.

#### INSPECTION FINDINGS

- Effluent quality data is maintained on-site for at least three years.
- · Current laboratory certification on-site for Tri Tech Laboratories (E83294).
- Giardia and Cryptosporidium monitoring has not been conducted within the past five years as required by Permit
  Condition I.A.9. The most recent pathogen monitoring report was submitted in April, 2005.
- The most recent Effluent Analysis Report was submitted on August 25, 2010 for the year ending December 31, 2009 (no new non-domestic dischargers added). The permit was renewed in 2010.
- The most recent Annual Reuse Report was submitted on February 11, 2011 for the period ending September 30, 2010.
- A current Operating Protocol dated January, 2009 was available on-site.
- Spills and malfunctions have been reported properly.

#### 6. Facility Site Review: OUT OF COMPLIANCE

- 6.1 Observation: General The facility grounds were secured properly.
- 6.2 Observation: General The facility grounds were clean and well maintained.
- 6.3 Observation: Backflow Prevention A reduced pressure zone backflow prevention device was in place on the potable water supply line, and appeared well maintained.
- 6.4 Observation: AerationBasins/Act.Sludge The contents in the aeration chambers appeared to be well mixed.
- 6.5 Observation: AlternatePower An alternative power source is available at the WWTF. The on-site generator is exercised weekly, and records of the tests are retained on-site.
- 6.9 Observation: Blowers/Motors The blowers were operational at the time of the inspection. Blowers appeared well-maintained.
- 6.10 Observation: Clarifiers The weirs in the west plant appeared clean and level. Some floating solids present. The weirs in the east plant were providing very uneven flow, with some possible short-circuiting apparent. The surface of the east clarifier was covered with floating solids.
- 6.11 Observation: Digesters The tank contents in the aerobic digester were well mixed. No odors observed.
- 6.12 Observation: Disinfection The chlorine contact chambers were providing a minimum contact time of 15 minutes. Floating covers are present on the CCCs to prevent algae growth and reduce chlorine usage.
- 6.13 Observation: Filtration No problems or deficiencies noted. Cloth filters and sand filters appeared well maintained.
- 6.14 Observation: Headworks Screening and grit are being collected in suitable containers. Screening and grit are being disposed of at a Class I landfill. A record of disposal for the screenings and grit collected at the headworks was available for review.
- 6.17 Observation: Headworks There were no excessive odors emanating from the headworks at the time of the inspection.
- 6.18 Observation: SurgeTanks No problems or deficiencies noted.

#### 7. Flow Measurement: IN COMPLIANCE

- 7.1 Observation: The flow measurement devices appeared to be installed properly. The primary effluent flow measuring device is a 90-degree v-notch weir. No staff gauge is present. The secondary effluent flow measuring device is an ISCO3010 ultrasonic. Most recent calibration July 2, 2011 by Mophuv Service.
- 7.2 Observation: The golf course irrigation meter is a McCrometer closed channel flow meter. Most recent calibration August 12, 2011 by FRWA.

#### 8. Operation and Maintenance: IN COMPLIANCE

8.1 Observation: General - The facility appeared to be operated and maintained in accordance with the description in the Permit.

#### 9. Effinent Quality: NOT EVALUATED

9.1 Observation: No observations were recorded.

#### 10. Effluent Disposal: IN COMPLIANCE

#### **INSPECTION FINDINGS**

- The on-site storage reclaimed water storage pond appeared well maintained with more than three feet of available freeboard. All pumps and piping appeared adequately maintained.
- The reject storage pond appeared well maintained with more than three feet of available freeboard.
- 11. Residuals/Sludge: IN COMPLIANCE
  - 11.1 Observation: General No problems or deficiencies were observed. Contract with Shelley's.
- 12. Groundwater Quality: OUT OF COMPLIANCE
  - 12.1 Observation: A review of the groundwater files for this facility indicates the following deficiencies:
    - The pH measurements were not provided for all well locations for the second quarter of 2010. Please provide a summary table of the information.
    - The nitrate and total dissolved solids (TDS) results for groundwater samples from well MWC-2 at the plant site do not appear to be reported correctly with the nitrate results at 84 mg/L and the TDS result at 0.043 mg/L. Please report the corrected results.
    - A groundwater elevation was not reported for well MW-IR for the third quarter of 2010. Please report this
      groundwater elevation.
    - Top of casing and ground surface elevations were not provided for piezometers P-1 and P-2. Please provide this information.
- 13. Other: NOT EVALUATED
  - 13.1 Observation: No observations were recorded.

@ = Optional

Significant-Out-Of-Compliance

### FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

### WASTEWATER COMPLIANCE INSPECTION REPORT

FACILITY AND INSPECTION INFORMATION

Entry Date/Time Name and Physical Location of Facility WAFR ID: County 11/10/2011 10:28:00 AM FLA010900 Pluris Wedgefield, Inc. **Orange** @ Exit Date/Time Phone 3100 Bancroft Blvd (949) 454-7104 11/10/2011 10:51:00 AM Orlando, FL 32833 - 4011 Name(s) of Field Representatives(s) Title Email Name and Address of Permittee or Designated Representative @ Operator Certification# Maurice W Gallarda President (949) 454-7104

Inspection Type	R	1		Samples Taken(Y/N): N	@ Sample iD#:	Samples Split (Y/N); N
X Domestic	_ 1	Indust	riai	Were Photos Takes(Y/N): Y	@ Log book Volume : elP	@ Page

Emost

2600 Commercecentre Drive Lake Forest, FL 92630

Facility and/or Order Compliance

#### FACILITY COMPLIANCE AREAS EVALUATED IC = In Compliance; NC = Out of Compliance; SC = Significant out of Compliance; NA = Not Applicable; NE = Not Evaluated EFFLUENT/DISPOSAL NE NE 3. Laboratory NE 6. Facility Site Review NC 9. **Effluent Quality** 1. +Permit 4. Sampling 7. Flow Measurement IO. +Effluent Disposal NA NE NE IC 2. +Compliance Schedules 5. ♦ Records & Reports NC NE 8. Operation & NE 11. Residuals/Sludge Maintenance 12. Groundwater NE NA 14. Other; NE 13. ♦SSO Survey

Recommended Actions: Noncompliance Letter								
Name(s) and Signature(s) of Inspector(s)  William Hesser	District Office/Phone Number Central District (407) 893-3313	November 28, 2011						
@ Signature of Reviewer  David Smicherko David Smidule.	District Office/Phone Number Central District (407) 893-3313	Date November 29, 2011						

_ In-Compliance

X Out-Of-Compliance

	 	 <del></del>
Single Event Violation Codes(s):		

#### INSPECTION SUMMARY

Facility Name: Pluris Wedgefield, Inc.

Facility ID: FLA010900 Inspection Type: RI

Date: 11/10/2011 10:51:00 AM

#### **FACILITY BACKGROUND:**

Address: 3100 Bancroft Blvd, Orlando, FL 32833 - 4011, Orange County

Permit Information: Wastewater Permit issued: 1/29/2010, and expires: 1/28/2015

Treatment Summary: Twin Contact Stabilization Ring Steel Stp's, 2 Filters w/Eff to Golf Course

Permitted Capacity: 0.368

1. Permit: NOT EVALUATED

2. Compliance Schedules: NOT APPLICABLE

Laboratory: NOT EVALUATED
 Sampling: NOT EVALUATED

5. Records and Reports: OUT OF COMPLIANCE

- Discharge Monitoring Reports (DMRs) were reviewed from July, 2010 through September, 2011 with the following record keeping deficiencies observed:
  - January, 2011: Total Suspended Solids, Maximum (TSS Max.) at EFB-1 (R-001) reported at 6.4 milligrams per liter (mg/L) which exceeded the permitted limit of 5.0 mg/L. This exceedance was not reported to the Department within 24 hours of discovery as required by the permit.
  - February, 2011: TSS Max. at EFB-1 (R-001) reported at 7.1 mg/L which exceeded the permitted limit of 5.0 mg/L. This exceedance was not reported to the Department within 24 hours of discovery as required by the permit.
- 6. Facility Site Review: NOT EVALUATED
- 7. Flow Measurement: NOT EVALUATED8. Operation and Maintenance: NOT EVALUATED
- 9. Effluent Quality: OUT OF COMPLIANCE
  - 9.1 Observation: Discharge Monitoring Reports (DMRs) were reviewed from July, 2010 through September, 2011 with the following effluent quality deficiencies observed:
    - January, 2011: Total Suspended Solids, Maximum (TSS Max.) at EFB-1 (R-001) reported at 6.4 milligrams per liter (mg/L) which exceeded the permitted fimit of 5.0 mg/L. This exceedance was attributed to possible laboratory error. Turbidity at the time of the sample was 1.7 NTU.
    - February, 2011: TSS Max. at EFB-1 (R-001) reported at 7.1 mg/L which exceeded the permitted limit of
       5.0 mg/L. This exceedance was attributed to the sample being collected during a filter backwash cycle.
- 10. Effluent Disposal: IN COMPLIANCE
  - 10.1 Observation: Reuse All plastic reclaimed water piping, pipelines, valves, outlets, and other appurtenances were color-coded Pantone Purple. Warning signs were posted at the golf course.
- 11. Residuals/Sludge: NOT EVALUATED
- 12. Groundwater Quality: NOT EVALUATED

Pluris Wedgefield, Inc.

Docket No.: 120152-WS

**Orange County** 

25-30.440 (6) PERMITS

Test Year Ended December 31, 2011



# 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

### STATE OF FLORIDA DOMESTIC WASTEWATER FACILITY PERMIT

PERMITTEE:

Pluris Wedgefield, Inc.

**RESPONSIBLE OFFICIAL:** 

Maurice W. Gallarda 2600 Commercentre Drive Lake Forest, CA 92630 (949) 454-7104

PERMIT NUMBER: FILE NUMBER:

FLA010900-005

FLA010900-005-DW2P

ISSUANCE DATE: EXPIRATION DATE:

January 29, 2010 January 27, 2015

#### FACILITY:

Wedgefield WWTF 3100 Bancroft Blvd Orlando, FL 32833-4011

Orange County

Latitude: 28°30' 7.91" N Longitude: 81°4' 48.03" 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.). This permit does not constitute authorization to discharge wastewater other than as expressly stated in this permit. The above named permittee is hereby authorized to operate the facilities in accordance with the documents attached hereto and specifically described as follows:

#### WASTEWATER TREATMENT:

An existing 0.40 million gallon per day (MGD) annual average daily flow (AADF) design capacity (limited to 0.330 MGD permitted capacity) contact stabilization activated sludge domestic wastewater treatment plant consisting of flow equalization, influent screening, contact aeration, re-acration, secondary clarification, chemical feed facilities, two multimedia filters, one Aqua-Disk membrane filter (0.500 mgd capacity) followed by twin chlorine contact tanks, a flow measuring tank, chlorine residual and turbidity analyzer and recorders, motorized diversion valves, and aerobic digestion of residuals.

Also, a 0.92+ acre, 2.15 million gallon reject storage/percolation pond with pump-back provisions to return reject water to the plant headworks for additional treatment, and a 5+ acre, 7.18 million gallon lined wet weather storage pond.

#### **REUSE OR DISPOSAL:**

Land Application R-001: An existing 0.330 MGD annual average daily flow permitted capacity slow-rate public access system. R-001 is a reuse system, which consists of the following:

- a) Wedgefield Golf Course having area of 120 +/- acres and capacity of 0.270 MGD AADF located approximately at latitude 28°30' 31" N, longitude 81°6' 44" W
- b) Zone 1 having area of 5.07 acres and capacity of 0.0096 MGD located approximately at latitude 28°30' 8" N, longitude 81°4' 49" W

c) Zone 2 having area of 16.36 acres and capacity of 0.0309 MGD located approximately at latitude 28°30' 8" N, longitude 81°4' 49" W

d) Zone 3 having area of 10.34 acres capacity of 0.0195 MGD located approximately at latitude 28°30' 8" N, longitude 81°4' 49" W

IN ACCORDANCE WITH: The limitations, monitoring requirements, and other conditions set forth in this cover sheet and Part I through Part IX on pages 1 through 21 of this permit.

FACILITY:

PERMITTEE: Pluris Wedgefield, Inc. Wedgefield WWTF

PERMIT NUMBER: **EXPIRATION DATE:**  FLA010900-005 January 27, 2015

#### 1. RECLAIMED WATER AND EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS

#### A. Reuse and Land Application Systems

During the period beginning on the issuance date and lasting through the expiration date of this permit, the permittee is authorized to direct reclaimed water
to Reuse System R-001. Such reclaimed water shall be limited and monitored by the permittee as specified below and reported in accordance with condition

			Re	claimed Water Limitations	Monitoring Requirements			
Parameter	Units	Max/Min	Limit	Statistical Basis	Frequency of Analysis	Sample Type	Monitoring Site Number	Notes
Flow (Total through Plant)	MGD	Max Max	0,330 Report	Annual Average Monthly Average	5 Days/Week	Recording Flow Meter with Totalizer	FLW-I	Sec 1.A.3
Flow (Total to Golf Course)	MGD	Max Max	0.270 Report	Annual Average Monthly Average	Continuous	Recording Flow Meter with Totalizer	FLW-2	
Flow (Total to Zone 1)	MGD	Max Max	0,0096 Report	Annual Average Monthly Average	Continuous	Recording Flow Meter with Totalizer	FLW-3	
Flow (Total to Zone 2)	MGD	Max Max	0.0309 Report	Annual Average Monthly Average	Continuous	Recording Flow Meter with Totalizer	FLW-4	
Flow (Total to Zone 3)	MGD	Max Max	0.0195 Report	Annual Average Monthly Average	Continuous	Recording Flow Meter with Totalizer	FLW-5	
Flow (from groundwater well)	MGD	Max Max	Report Report	Annual Average Monthly Average	Continuous	Recording Flow Meter with Totalizer	FLW-6	
BOD, Carbonaceous 5 day. 20C	mg/L	Max Max Max Max	20.0 30.0 45.0 60.0	Annual Average Monthly Average Weekly Average Single Sample	Bi-weekly; every 2 weeks	8-hr FPC	EFA-I	
Solids, Total Suspended	mg/L	Max	5.0	Single Sample	4 Days/Week	Grab	EFB-1	
рН	s.u.	Min Max	6.0 8.5	Single Sample Single Sample	5 Days/Week	Grab	EFA-1	
Coliform, Fecal	#/100mL	Max	25	Single Sample	4 Days/Week	Grab	EFA-1	
Coliform, Fecal, % less than detection	регсепі	Min	75	Monthly Total	4 Days/Week	Calculated	EFA-1	See I.A.4
Chlorine, Total Residual (For Disinfection)	mg/L	Min	1.0	Single Sample	Continuous	Meler	EFA-1	See I.A.5 and I.A.8

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			Reclaimed Water Limitations		Monitoring Requirements				
Parameter	Units	Max/Min	Limit	Statistical Basis	Frequency of Analysis	Sample Type	Monitoring Site Number	Notes	
Титьіdіtу	NTU	Max	Report	Single Sample	Continuous	Meter	EFB-1	See I.A.6	
Nitrogen, Nitrate, Total (as N)	mg/L	Max	12.0	Single Sample	Monthly	8-hr FPC	EFA-1	and I.A.8 Sec I.A.10	
Giardia	cysts/100L	Max	Report	Single Sample	Every 5 years	Grab	EFA-I	Sec I.A.9	
Cryptosporidium	oocysts/100L	Мах	Report	Single Sample	Every 5 years	Grab	EFA-1	Sec I.A.9	

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

Monitoring Site Number	Description of Monitoring Site	
FLW-1	Master flow meter at chlorination tank	
FLW-2	Flow meter in line to golf course	
FLW-3	Flow meter in line to Zone 1	
FLW-4	Flow meter in line to Zone 2	
FLW-5	Flow meter in line to Zone 3	
FLW-6	Flow meter on groundwater makeup well	
EFA-1	Discharge from chlorination tanks	
EFB-1	After filtration and before disinfection	

- 3. A recording flow meter with totalizer shall be utilized to measure flow and calibrated at least once every 12 months. [62-601.200(17) and .500(6)]
- 4. To report the "% less than detection," count the number of fecal coliform observations that were less than detection, divide by the total number of fecal coliform observations in the month, and multiply by 100% (round to the nearest integer). [62-600.440(5)(f)]
- 5. The minimum total chlorine residual shall be limited as described in the approved operating protocol, such that the permit limitation for fecal coliform bacteria will be achieved. In no case shall the total chlorine residual be less than 1.0 mg/L. [62-600.440(5)(b); 62-610.460(2); and 62-610.463(2)]
- 6. The maximum turbidity shall be limited as described in the approved operating protocol, such that the permit limitations for total suspended solids and fecal coliform will be achieved. [62-610.463(2)]
- 7. The treatment facilities shall be operated in accordance with all approved operating protocols. Only reclaimed water that meets the criteria established in the approved operating protocol(s) may be released to system storage or to the reuse system. Reclaimed water that fails to meet the criteria in the approved operating protocol(s) shall be directed to reject storage for subsequent additional treatment or disinfection [62-610.320(6) and 62-610.463(2)]
- 8. Instruments for continuous on-line monitoring of total residual chlorine and turbidity shall be equipped with an automated data logging or recording device. [62-610.463(2)]
- 9. Intervals between sampling for Giardia and Cryptosporidium shall not exceed five years, [62-610.463(4)]
- 10. Nitrate nitrogen (NO₃) concentration in the water discharged to the reject water storage/percolation pond shall not exceed 12.0 mg/L, or as required to comply with Rule 62-610.510, F.A.C., and sampling shall only be required when the flow is diverted to the reject/percolation pond.

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B. Other Limitations and Monitoring and Reporting Requirements

1. During the period beginning on the issuance date and fasting through the expiration date of this permit, the treatment facility shall be limited and monitored by the permittee as specified below and reported in accordance with condition I.B.8.:

				Limitations	Mor	itoring Requirements		
Parameter	Units	Max/Min	Limit	Statistical Basis	Frequency of Analysis	Sample Type	Monitoring Site Number	Notes
Flow (Total through plant)	MGD	Max Max Max	0.330 Report Report	Annual Average Monthly Average Quarterly Average	5 Days/Week	Recording Flow Meter with Totalizer	FLW-1	See I.B.4
Percent Capacity, (TMADF/Permitted Capacity) x 100	percent	Max	Report	Monthly Average	Monthly	Calculated	FLW-1	
BOD, Carbonaccous 5 day, 20C (Influent)	mg/L	Max	Report	Single Sample	Bi-weekly; every 2 weeks	8-hr FPC	INF-I	Sec I.B.3
Solids, Total Suspended (Influent)	mg/L	Max	Report	Single Sample	Bi-weekly; every 2 weeks	8-hr FPC	INF-1	Sec I.B.3

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2. Samples shall be taken at the monitoring site locations listed in Permit Condition I.B.1, and as described below:

Monitoring Site Number	Description of Monitoring Site
FLW-1	Master flow meter at chlorination tank
INF-1	Influent to surge tank or influent sample box

- 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. A recording flow meter with totalizer shall be utilized to measure flow and calibrated at least once every 12 months. [62-601.200(17) and .500(6)]
- 5. Sampling results for giardia and cryptosporidium shall be reported on DEP Form 62-610.300(4)(a)4, Pathogen Monitoring, which is attached to this permit. This form shall be submitted to the Department's Central District Office and to DEP's Reuse Coordinator in Tallahassee. [62-610.300(4)(a)]
- 6. The sample collection, analytical test methods and method detection limits (MDLs) applicable to this permit shall be conducted using a sufficiently sensitive method to ensure compliance with applicable water quality standards and effluent limitations and shall be in accordance with Rule 62-4.246, Chapters 62-160 and 62-601, F.A.C., and 40 CFR 136, as appropriate. The list of Department established analytical methods, and corresponding MDLs (method detection limits) and PQLs (practical quantitation limits), which is titled "FAC 62-4 MDL/PQL Table (April 26, 2006)" is available at http://www.dep.state.fl.us/labs/library/index.htm. The MDLs and PQLs as described in this list shall constitute the minimum acceptable MDL/PQL values and the Department shall not accept results for which the laboratory's MDLs or PQLs are greater than those described above unless alternate MDLs and/or PQLs have been specifically approved by the Department for this permit. Any method included in the list may be used for reporting as long as it meets the following requirements:
  - a. The laboratory's reported MDL and PQL values for the particular method must be equal or less than the corresponding method values specified in the Department's approved MDL and PQL list;
  - b. The laboratory reported MDL for the specific parameter is less than or equal to the permit limit or the applicable water quality criteria, if any, stated in Chapter 62-302, F.A.C. Parameters that are listed as "report only" in the permit shall use methods that provide an MDL, which is equal to or less than the applicable water quality criteria stated in 62-302, F.A.C.; and
  - c. If the MDLs for all methods available in the approved list are above the stated permit limit or applicable water quality criteria for that parameter, then the method with the lowest stated MDL shall be used.

When the analytical results are below method detection or practical quantitation limits, the permittee shall report the actual laboratory MDL and/or PQL values for the analyses that were performed following the instructions on the applicable discharge monitoring report.

Where necessary, the permittee may request approval of alternate methods or for alternative MDLs or PQLs for any approved analytical method. Approval of alternate laboratory MDLs or PQLs are not necessary if the laboratory reported MDLs and PQLs are less than or equal to the permit limit or the applicable water quality criteria, if any, stated in Chapter 62-302, F.A.C. Approval of an analytical method not included in the above-referenced list is not necessary if the analytical method is approved in accordance with 40 CFR 136 or deemed acceptable by the Department. [62-4.246, 62-160]

- 7. 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)]
- 8. 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 Discharge Monitoring Reports (DMRs) in accordance with the

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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 on DMR	Monitoring Period	Due Date
Monthly or Toxicity	first day of month - last day of month	28th day of following month
Quarterly	January 1 - March 31	April 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 30	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.13. by the twenty-eighth (28th) of the month following the month of operation.

[62-620.610(18)][62-601.300(1),(2), and (3)]

- 9. During the period of operation authorized by this permit, reclaimed water or effluent shall be monitored annually for the primary and secondary drinking water standards contained in Chapter 62-550, F.A.C., (except for asbestos, color, odor, and corrosivity). These monitoring results shall be reported to the Department annually on the DMR. During years when a permit is not renewed, a certification stating that no new non-domestic wastewater dischargers have been added to the collection system since the last reclaimed water or effluent analysis was conducted may be submitted in lieu of the report. The annual reclaimed water or effluent analysis report or the certification shall be completed and submitted in a timely manner so as to be received by the Department's Central District Office by June 28 of each year. Approved analytical methods identified in Rule 62-620.100(3)(j), F.A.C., shall be used for the analysis. If no method is included for a parameter, methods specified in Chapter 62-550, F.A.C., shall be used. [62-601.300(4)][62-601.500(3)][62-610.300(4)]
- 10. The permittee shall submit an Annual Reuse Report using DEP Form 62-610.300(4)(a)2. on or before January 1 of each year. [62-610.870(3)]
- 11. Operating protocol(s) shall be reviewed and updated periodically to ensure continuous compliance with the minimum treatment and disinfection requirements. Updated operating protocols shall be submitted to the Department's Central District Office for review and approval upon revision of the operating protocol(s) and with each permit application. [62-610.320(6) and 62-610.463(2)]
- 12. The permittee shall maintain an inventory of storage systems. The inventory shall be submitted to the Department's Central District Office at least 30 days before reclaimed water will be introduced into any new storage system. The inventory of storage systems shall be attached to the annual submittal of the Annual Reuse Report. [62-610.464(5)]
- 13. 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, Orange County EPD and the Department's Central District Office at the address specified below:

Florida Department of Environmental Protection Central District Office 3319 Maguire Blvd Suite 232 Orlando, Florida 32803-3767

Phone Number - (407)894-7555

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FAX Number – (850) 412-0496 (All FAX copies and e-mails shall be followed by original copies.)

[62-620.305]

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

#### II. RESIDUALS MANAGEMENT REQUIREMENTS

- 1. The method of residuals use or disposal by this facility is transport to Shelley's Environmental Systems Inc. or disposal in a Class I or II solid waste landfill. Transportation of the residuals to an alternative residuals management facility does not require a permit modification. However, use of an alternative residuals management facility requires the submittal of a copy of the agreement pursuant to Rule 62-640.880(1)(c), F.A.C., along with a written notification to the Department at least 30 days before transport of the residuals. [62-620,320(6),62-640.880(1)]
- 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 disposal facility, 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 the requirements of 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)
- 4. 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
- Management Facility or Treatment Facility 5. Signature of Responsible Party at Residuals Management Facility or Treatment 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

#### A. Construction Requirements

1. Section Construction Requirements is not applicable to this facility.

#### **B.** Operational Requirements

- 1. For the Part III Public Access system, all ground water quality criteria specified in Chapter 62-520, F.A.C., shall be met at the edge of the zone of discharge. For major users of reclaimed water (i.e., using 0.1 MGD or more), the zone of discharge shall extend horizontally 100 feet from the application site or to user's site property line, whichever is less, and vertically to the base of the surficial aquifer. For other users, the zone of discharge shall extend horizontally to the boundary of the general service area identified in the attached map and vertically to the base of the surficial aquifer. [62-520.200(26)] [62-520.465]
- 2. The ground water minimum criteria specified in Rule 62-520.400 F.A.C., shall be met within the zone of discharge. [62-520.400 and 62-520.420(4)]
- 3. During the period of operation authorized by this permit, the permittee shall sample ground water in accordance with this permit and the approved ground water monitoring plan prepared in accordance with Rule 62-520.600, F.A.C. [62-520.600][62-610.463]
- 4. The following monitoring wells shall be sampled quarterly. Sampling must be reasonably spaced to be representative of potentially changing conditions.

Facility MW Name	Permit Builder MW ID*	WAFR ID/#	GMS#	Well Type	Depth (Feet)	Aquifer Monitored	New or Existing
R001- Go	of Course Irrig	ation					
MW-1	MWB-1R*	6006	3048A13413	Background	15	Surficial	Existing
MW-2	MWB-2	6005	3048A13414	Background	15	Surficial	Existing
MW-3	MWB-3	6004	3048A13415	Background	15	Surficial	Existing
MW-4	MWI-4	6003	3048A13416	Intermediate	17.5	Surficial	Existing
MW-6	MWC-6	6001	3048A13418	Compliance	17.5	Surficial	Existing
MW-7	MWI-7	6000	3048A13419	Intermediate	19.5	Surficial	Existing
R001- Or	-Site Irrigation	n					
MWC-1	MWC-1	32995		Compliance	12.93	Surficial	Existing
MWC-2	MWC-2	32996		Compliance	13.8	Surficial	Existing
MWC-3	MWC-3	32997		Compliance	13.77	Surficial	Existing

^{*} Original well MWB-1 (WAFR ID # 6006) was damaged and replaced by MWB-1R on 06/08/2007. The WAFR ID remains same. MWB = Background Well; MWC = Compliance Well

[62-520.600][62-610.463]

5. The following parameters shall be analyzed for each of the monitoring well(s) identified in Permit Condition(s) III. B. 4:

Parameter	Compliance Well Limit	Units	Sample Type	Monitoring Frequency
Water Level Relative to Feet, NGVD	Report	Feet	In Situ	Quarterly
Nitrogen, Nitrate, Total (as N)	10	mg/L	Grab	Quarterly
Solids, Total Dissolved (TDS)	500	mg/L	Grab	Quarterly

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Parameter	Compliance Well Limit	Units	Sample Type	Monitoring Frequency
Chloride (as Cl)	250	mg/L	Grab	Quarterly
Sodium	160	mg/L	Grab	Quarterly
Coliform, Fecal	4	#/100ML	Grab	Quarterly
pH	6.5-8.5	SU	Grab	Quarterly
Turbidity, Field - Nepholometric	Report	NTU	Grab	Quarterly
Added; November 2009**			· · · · · · · · · · · · · · · · · · ·	
Sodium	160	mg/L	Grab	Quarterly
Trihalomethane, Total	80	ug/L	Grab	Quarterly

^{**} Based on the elevated concentrations of parameters Sodium and Trihalomethane, Total (TTHMs) in the effluent samples, these parameters have been added to the Groundwater Monitoring Plan (GWMP) for the duration of 12-quarters. If these parameters are not detected above the MCL in the groundwater for this period, the facility can request in writing to the Department to delete these parameters from the GWMP.

[62-520.600(11)(b)] [62-601.300(3), 62-601.700, and Figure 3 of 62-601][62-601.300(6)] [62-520.300(9)]

The following piezometers and staff gauges shall be read for water levels monthly. The results of water level monitoring shall be submitted with the quarterly monitoring well reports.

Facility MW Name	Permit Builder MW ID	1 1 1		r WAFR Monitoring Depth Aquifer				New or Existing
Piezomete	rs*				-			
MWP-1	MWP-1	55881	Piezometer	30	Surficial	Existing		
MWP-2	MWP-2	55883	Piezometer	30	Surficial	Existing		
Staff Gau	ges**							
SG-1			Staff Gauge	N/A	Surficial	Existing		
SG-2			Staff Gauge	N/A	Surficial	Existing		
SG-3			Staff Gauge	N/A	Surficial	Existing		

[•] Piezometers located near the bay head.

- 7. If the concentration for any constituent listed in Permit Condition III. B. 5, in the natural background quality of the ground water is greater than the stated maximum, or in the case of pH is also less than the minimum, the representative natural background quality shall be the prevailing standard. [62-520.420(2)]
- 8. In accordance with Part D of Form 62-620.910(10), water levels shall be recorded before evacuating wells for sample collection. Elevation references shall include the top of the well casing and land surface at each well site (Feet, NGVD) at a precision of plus or minus 0.01 foot. [62-520.600(11)(C)] [62-610.463(3)(a)]
- 9. Ground water monitoring wells shall be purged prior to sampling to obtain representative samples. [62-601.700(5)] [62-160.210]
- Analyses shall be conducted on unfiltered samples, unless filtered samples have been approved by the Department's Central District, Ground Water Section as being more representative of ground water conditions. [62-520.310(5)]
- 11. Ground water monitoring parameters shall be analyzed in accordance with Chapter 62-601, F.A.C. [62-620.610(18)]
- 12. Ground water monitoring test results shall be submitted on Part D of Form 62-620.910(10). A completed Certification Page shall accompany each quarter of monitoring data. For reuse or land application projects, the quarterly ground water monitoring results shall be submitted with the DMR as shown in the following schedule. [62-522.600(10) and (11)(b)] [62-601.300(3), 62.601.700, and Figure 3 of 62-601] [62-620.610(18)]

^{**}Staff Gauges are not included in the Permit Builder naming system and do not have WAFR IDs.

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SAMPLE PERIOD	REPORT DUE DATE
January - March	April 28
April - June	July 28
July - September	October 28
October - December	January 28

- 13. If any monitoring well becomes damaged or cannot be sampled for some reason, the permittee shall notify the Department's Central District, Ground Water Section immediately and a written report shall follow within seven days detailing the circumstances and remedial measures taken or proposed. Repair or replacement of monitoring wells shall be approved in advance by the Department's Central District, Ground Water Section. [62-520.600][62-4.070(3)]
- 14. The Permittee shall provide verbal notice to the Department's Central District, Ground Water Section as soon as practical after discovery of a sinkhole within an area for the management or application of wastewater, wastewater residuals (sludges), or reclaimed water. The Permittee shall immediately implement measures appropriate to control the entry of contaminants, and shall detail these measures to the Department's Central District, Ground Water Section in a written report within 7 days of the sinkhole discovery. [62-4.070(3)]
- 15. The permitted reuse capacity at the onsite irrigation (three-spray field areas totals 32-acres) has been limited to 60,000 gallons per day (GPD). However, in the future, if the permittee wishes to increase the reuse capacity more than 60,000 gpd, a comprehensive hydraulic load test will be required with the immediate effect for the duration of at least one year for justifying the requested higher reuse capacity.

#### IV. ADDITIONAL REUSE AND LAND APPLICATION REQUIREMENTS

#### A. Part III Public Access System(s)

1. Use of reclaimed water is authorized within the general service area identified in the attached map. The following uses of reclaimed water are authorized within this general service area:

Golf Courses

[62-620.630(10)(d)]

2. This reuse system includes the following major user(s) of reclaimed water (i.e., using 0.1 MGD or more) and general service area(s):

Site Number	User Name	User Type	Capacity(MGD	Acreag e
PAA-001A	Wedgefield Golf Course	Golf Courses	0.270	120
PAA-001B	Zone 1	General Service Area	0.0096	5.07
PAA-001C	Zone 2	General Service Area	0.0309	16.36
PAA-001D	Zone 3	General Service Area	0.0195	10.34
·		Total	0.330	151.77

[62-610.800(5)][62-620.630(10)(b)]

- 3. New major users of reclaimed water (i.e., using 0.1 MGD or more) may be added to the reuse system using the general permit described in Rule 62-610.890, F.A.C., if the requirements in this rule are complied with.

  Application for use of this general permit shall be made using Form 62-610.300(4)(a)1. [62-610.890]
- 4. Cross-connections to the potable water system are prohibited. [62-610.469(7)]
- 5. A cross-connection control program shall be implemented and/or remain in effect within the areas where reclaimed water will be provided for use. [62-610.469(7)]

6. The permittee shall conduct inspections within the reclaimed water service area to verify proper connections, to minimize illegal cross-connections, and to verify the proper use of reclaimed water. Inspections are required when a customer first connects to the reuse distribution system. Subsequent inspections are required as specified in the cross-connection control and inspection program. [62-610.469(7)(h)]

- 7. If a cross-connection between the potable and reclaimed water systems is discovered, the permittee shall:
  - a. Immediately discontinue potable water and/or reclaimed water service to the affected area,
  - b. If the potable water system is contaminated, clear the potable water lines.
  - c. Eliminate the cross-connection.
  - d. Test the affected area for other possible cross-connections.
  - Within 24 hours, notify the Department's Central District Office's domestic wastewater and drinking water programs.
  - f. Within 5 days of discovery of a cross-connection, submit a written report to the Department's Central District Office detailing: a description of the cross-connection, how the cross-connection was discovered, the exact date and time of discovery, approximate time that the cross-connection existed, the location, the cause, steps taken to eliminate the cross-connection, whether reclaimed water was consumed, and reports of possible illness, whether the drinking water system was contaminated and the steps taken to clear the drinking water system, when the cross-connection was eliminated, plan of action for testing for other possible cross-connections in the area, and an evaluation of the cross-connection control and inspection program to ensure that future cross-connections do not occur.

[62-555.350(3) and 62-555.360][62-620.610(20)]

- 8. Maximum obtainable separation of reclaimed water lines and potable water lines shall be provided and the minimum separation distances specified in Rule 62-610.469(7), F.A.C., shall be provided. Reuse facilities shall be color coded or marked. Underground piping which is not manufactured of metal or concrete shall be color coded using Pantone Purple 522C using light stable colorants. Underground metal and concrete pipe shall be color coded or marked using purple as the predominant color. [62-610.469(7)]
- 9. In constructing reclaimed water distribution piping, the permittee shall maintain a 75-foot setback distance from a reclaimed water transmission facility to public water supply wells. No setback distances are required to other potable water supply wells or to any nonpotable water supply wells. [62-610.471(3)]
- 10. A setback distance of 75 feet shall be maintained between the edge of the wetted area and potable water supply wells, unless the utility adopts and enforces an ordinance prohibiting potable water supply wells within the reuse service area. No setback distances are required to any nonpotable water supply well, to any surface water, to any developed areas, or to any private swimming pools, hot tubs, spas, saunas, picnic tables, barbecue pits, or barbecue grills. [62-610.471(1), (2), (5), and (7)]
- 11. Reclaimed water shall not be used to fill swimming pools, hot tubs, or wading pools. [62-610.469(4)]
- 12. Low trajectory nozzles, or other means to minimize aerosol formation shall be used within 100 feet from outdoor public eating, drinking, or bathing facilities. [62-610.471(6)]
- 13. A setback distance of 100 feet shall be maintained from indoor aesthetic features using reclaimed water to adjacent indoor public eating and drinking facilities. [62-610.471(8)]
- 14. The public shall be notified of the use of reclaimed water. This shall be accomplished by posting of advisory signs in areas where reuse is practiced, notes on scorecards, or other methods. [62-610.468(2)]
- 15. All new advisory signs and labels on vaults, service boxes, or compartments that house hose bibbs along with all labels on hose bibbs, valves, and outlets shall bear the words "do not drink" and "no beber" along with the equivalent standard international symbol. In addition to the words "do not drink" and "no beber," advisory

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signs posted at storage ponds and decorative water features shall also bear the words "do not swim" and "no nadar" along with the equivalent standard international symbols. Existing advisory signs and labels shall be retrofitted, modified, or replaced in order to comply with the revised wording requirements. For existing advisory signs and labels this retrofit, modification, or replacement shall occur within 365 days after the date of this permit. For labels on existing vaults, service boxes, or compartments housing hose bibbs this retrofit, modification, or replacement shall occur within 730 days after the date of this permit. [62-610.468, 62-610.469]

- 16. The permittee shall ensure that users of reclaimed water are informed about the origin, nature, and characteristics of reclaimed water; the manner in which reclaimed water can be safely used; and limitations on the use of reclaimed water. Notification is required at the time of initial connection to the reclaimed water distribution system and annually after the reuse system is placed into operation. A description of on-going public notification activities shall be included in the Annual Reuse Report. [62-610.468(6)]
- 17. Routine aquatic weed control and regular maintenance of storage pond embankments and access areas are required. [62-610.414(8)]
- 18. Overflows from emergency discharge facilities on storage ponds shall be reported as abnormal events in accordance with Permit Condition IX.20. [62-610.800(9)]

#### V. OPERATION AND MAINTENANCE REQUIREMENTS

#### A. Staffing 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 6 hours/day for 7 days/week. The lead/chief 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/chief operator class for 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)]

#### B. Capacity Analysis Report and Operation and Maintenance Performance Report Requirements

- 1. 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)]
- 2. 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)]

### C. Recordkeeping Requirements

- 1. The permittee shall maintain the following records and make them available for inspection at the following address: 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, including, if applicable, a copy of the laboratory certification showing the certification number of the laboratory, for at least three years from the date the sample or measurement was taken;
  - b. Copies of all reports required by the permit for at least three years from the date the report was prepared;

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- c. Records of all data, including reports and documents, used to complete the application for the permit for at least three years from the date the application was filed;
- d. Monitoring information, including a copy of the laboratory certification showing the laboratory certification number, related to the residuals use and disposal activities for the time period set forth in Chapter 62-640, F.A.C., for at least three years from the date of sampling or measurement;
- e. A copy of the current permit;
- f. A copy of the current operation and maintenance manual as required by Chapter 62-600, F.A.C.;
- g. A copy of any required 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 license 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, including any preventive maintenance or repairs made or requested; results of tests performed and samples taken, unless documented on a laboratory sheet; and notation of any notification or reporting completed in accordance with Rule 62-602.650(3), F.A.C. 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, 62-602.650]

#### VI. SCHEDULES

1. If the permittee wishes to continue operation of this wastewater facility after the expiration date of this permit, the permittee shall submit an application for renewal no later than one-hundred and eighty days (180) prior to the expiration date of this permit. Application shall be made 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. [62-620.335(1) and (2)]

#### VII. INDUSTRIAL PRETREATMENT PROGRAM REQUIREMENTS

1. This facility is not required to have a pretreatment program at this time. [62-625.500]

#### VIII. OTHER SPECIFIC CONDITIONS

1. The permittee shall comply with all conditions and requirements for reuse contained in their consumptive use permit issued by the Water Management District, if such requirements are consistent with Department rules. [62-610.800(10)]

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2. 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)]

- 3. 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)]
- 4. Collection/transmission system overflows shall be reported to the Department in accordance with Permit Condition 1X. 20. [62-604.550] [62-620.610(20)]
- 5. 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
  - Which may cause excessive corrosion or other deterioration of wastewater facilities due to chemical action or pH levels; or
  - c. Which are solid or viscous and obstruct flow or otherwise interfere with wastewater facility operations or treatment; or
  - d. Which result in the wastewater temperature at the introduction of the treatment plant exceeding 40°C or otherwise inhibiting treatment; or
  - Which result in the presence of toxic gases, vapors, or fumes that may cause worker health and safety problems.

[62-604.130(5)]

- 6. The treatment facility, storage ponds for Part II systems, rapid infiltration basins, and/or infiltration trenches shall be enclosed with a fence or otherwise provided with features to discourage the entry of animals and unauthorized persons. [62-600.400(2)(b)]
- 7. 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)]
- 8. Where required by Chapter 471 or Chapter 492, F.S., applicable portions of reports that must be submitted under this permit shall be signed and sealed by a professional engineer or a professional geologist, as appropriate. [62-620.310(4)]
- 9. The permittee shall provide verbal notice to the Department's Central District Office as soon as practical after discovery of a sinkhole or other karst feature within an area for the management or application of wastewater, wastewater residuals (sludges), or reclaimed water. The permittee shall immediately implement measures appropriate to control the entry of contaminants, and shall detail these measures to the Department's Central District Office in a written report within 7 days of the sinkhole discovery. [62-620.320(6)]

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)]
- This permit is valid only for the specific processes and operations applied for and indicated in the approved drawings or exhibits. Any unauthorized deviations from the approved drawings, exhibits, specifications, or conditions of this permit constitutes grounds for revocation and enforcement action by the Department. [62-620.610(2)]
- 3. As provided in Subsection 403.087(6), F.S., the issuance of this permit does not convey any vested rights or any exclusive privileges. Neither does it authorize any injury to public or private property or any invasion of personal rights, nor authorize any infringement of federal, state, or local laws or regulations. This permit is not a waiver of or approval of any other Department permit or authorization that may be required for other aspects of the total project which are not addressed in this permit. [62-620.610(3)]
- 4. This permit conveys no title to land or water, does not constitute state recognition or acknowledgment of title, and does not constitute authority for the use of submerged lands unless herein provided and the necessary title or leasehold interests have been obtained from the State. Only the Trustees of the Internal Improvement Trust Fund may express State opinion as to title. [62-620.610(4)]
- 5. This permit does not relieve the permittee from liability and penalties for harm or injury to human health or welfare, animal or plant life, or property caused by the construction or operation of this permitted source; nor does it allow the permittee to cause pollution in contravention of Florida Statutes and Department rules, unless specifically authorized by an order from the Department. The permittee shall take all reasonable steps to minimize or prevent any discharge, reuse of reclaimed water, or residuals use or disposal in violation of this permit which has a reasonable likelihood of adversely affecting human health or the environment. It shall not be a defense for a permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of this permit. [62-620.610(5)]
- 6. If the permittee wishes to continue an activity regulated by this permit after its expiration date, the permittee shall apply for and obtain a new permit. [62-620.610(6)]
- 7. The permittee shall at all times properly operate and maintain the facility and systems of treatment and control, and related appurtenances, that are installed and used by the permittee to achieve compliance with the conditions of this permit. This provision includes the operation of backup or auxiliary facilities or similar systems when necessary to maintain or achieve compliance with the conditions of the permit. [62-620.610(7)]
- 8. This permit may be modified, revoked and reissued, or terminated for cause. The filing of a request by the permittee for a permit revision, revocation and reissuance, or termination, or a notification of planned changes or anticipated noncompliance does not stay any permit condition. [62-620.610(8)]

9. The permittee, by accepting this permit, specifically agrees to allow authorized Department personnel, including an authorized representative of the Department and authorized EPA personnel, when applicable, upon presentation of credentials or other documents as may be required by law, and at reasonable times, depending upon the nature of the concern being investigated, to:

- a. Enter upon the permittee's premises where a regulated facility, system, or activity is located or conducted, or where records shall be kept under the conditions of this permit;
- b. Have access to and copy any records that shall be kept under the conditions of this permit;
- c. Inspect the facilities, equipment, practices, or operations regulated or required under this permit; and
- d. Sample or monitor any substances or parameters at any location necessary to assure compliance with this permit or Department rules.

[62-620.610(9)]

- 10. In accepting this permit, the permittee understands and agrees that all records, notes, monitoring data, and other information relating to the construction or operation of this permitted source which are submitted to the Department may be used by the Department as evidence in any enforcement case involving the permitted source arising under the Florida Statutes or Department rules, except as such use is proscribed by Section 403.111, F.S., or Rule 62-620.302, F.A.C. 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 or activity and shall specify what steps will be taken to safeguard public health and safety during and following inactivation or abandonment. [62-620.610(15)]

16. The permittee shall apply for a revision to the Department permit in accordance with Rules 62-620.300, F.A.C., and the Department of Environmental Protection Guide to Permitting Wastewater Facilities or Activities Under Chapter 62-620, F.A.C., 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), F.A.C., 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 and Chapters 62-160, 62-601, and 62-610, 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.
  - 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's Central District Office 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.

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- a. The following shall be included as information which must be reported within 24 hours under this condition:
  - (1) Any unanticipated bypass which causes any reclaimed water or effluent to exceed any permit limitation or results in an unpermitted discharge,
  - (2) Any upset which causes any reclaimed water or the effluent to exceed any limitation in the permit,
  - (3) Violation of a maximum daily discharge limitation for any of the pollutants specifically listed in the permit for such notice, and
  - (4) Any unauthorized discharge to surface or ground waters.
- b. Oral reports as required by this subsection shall be provided as follows:
  - (1) For unauthorized releases or spills of treated or untreated wastewater reported pursuant to subparagraph (a)4. that are in excess of 1,000 gallons per incident, or where information indicates that public health or the environment will be endangered, oral reports shall be provided to the 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);
    - (c) Estimated amount of the discharge;
    - (f) Location or address of the discharge;
    - (g) Source and cause of the discharge;
    - (h) Whether the discharge was contained on-site, and cleanup actions taken to date;
    - (i) Description of area affected by the discharge, including name of water body affected, if any; and
    - (j) Other persons or agencies contacted.
  - (2) Oral reports, not otherwise required to be provided pursuant to subparagraph b.1 above, shall be provided to the Department's Central District Office 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's Central District Office 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., IX.18., or IX.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" means the intentional diversion of waste streams from any portion of a treatment works.
  - b. Bypass is prohibited, and the Department may take enforcement action against a permittee for bypass, unless the permittee affirmatively demonstrates that:
    - (1) Bypass was unavoidable to prevent loss of life, personal injury, or severe property damage; and
    - (2) There were no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment downtime. This condition is not satisfied if adequate back-up equipment should have been installed in the exercise of reasonable engineering judgment to prevent a bypass which occurred during normal periods of equipment downtime or preventive maintenance; and
    - (3) The permittee submitted notices as required under Permit Condition IX.22.b. of this permit.

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- c. 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.
- d. 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 1X.22.a.1. through 3. of this permit.
- e. 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. "Upset" means an exceptional incident in which there is unintentional and temporary noncompliance with technology-based effluent limitations because of factors beyond the reasonable control of the permittee.
  - An upset does not include noncompliance caused by operational error, improperly designed treatment facilities, inadequate treatment facilities, lack of preventive maintenance, careless or improper operation.
  - (2) An upset constitutes an affirmative defense to an action brought for noncompliance with technology based permit effluent limitations if the requirements of upset provisions of Rule 62-620.610, F.A.C., are met.
- b. 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.
- In any enforcement proceeding, the burden of proof for establishing the occurrence of an upset rests with the permittee.
- d. 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

Mishane C. Ferail

Christianne C. Ferraro, P.E. Program Administrator

Water Facilities

Date: January 29, 2010

Attachment(s): Discharge Monitoring Report Monitor Well Completion Report



### Florida Department of Environmental Protection

Twin Towers Office Bldg., 2600 Blair Stone Road, Tallahassee, Florida 32399-2400

#### **PATHOGEN MONITORING**

#### Part 1 - Instructions

- Completion of this report is required by Rules 62-610.463(4), 62-610.472(3)(d), 62-610.525(13), 62-610.568(11), 62-610.568(12), and 62-610.652(6)(c), F.A.C., for all domestic wastewater facilities that provide reclaimed water to certain types of reuse activities. The schedule for sampling and reporting shall be in accordance with the permit for the facility. If a schedule for sampling or re-sampling is not included in the permit, the following schedule shall apply:
  - a. Routine Sampling:

If sampling is required once every two years, this report shall be submitted on or before November 28 of each even numbered year (2006, 2008, 2010, etc.).

If sampling is required once every five years, this report shall be submitted with the application for permit renewal.

If sampling is required quarterly, this report shall be submitted on or before February 28, May 28, August 28, and November 28 of each year.

b. Subsequent Re-Sampling:

If subsequent re-sampling is required by Item 9 in Part I of this form, this form shall be submitted for the subsequent re-sampling(s) in accordance with the schedule established in Item 9 in Part I of this form.

- 2. Submit one copy of this form and a copy of the laboratory's final report for the analysis of *Giardia* and *Cryptosporidium* to each of the following two addresses:
  - a. The appropriate DEP district office (attention Domestic Wastewater Program). Addresses for the DEP district offices are available at www.dep.state.fl.us/secretary/dist/default.htm.
  - b. DEP Water Reuse Coordinator
     Mail Station 3540
     2600 Blair Stone Road
     Tallahassee, Florida 32399-2400
- 3. Please type or print legibly.
- 4. In Part II, Items 7 through 12 need to be completed only if this is the first submittal of this report, if the information in Items 7 through 12 has changed since the last submittal, or if the information in any of these questions has not been previously provided.
- 5. Part III is to be used when sampling for *Giardia* and *Cryptosporidium* at the treatment plant. Part III is also to be used when sampling for *Giardia* and *Cryptosporidium* in a supplemental water supply (see Rule 62-610.472, F.A.C.).

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- 6. For each sample, record the sample volume obtained in liters.
- 7. For Giardia, record the concentrations in cysts per 100 liters. For Cryptosporidium, record the concentrations in occysts per 100 liters. Sufficient sample volumes shall be collected and processed such that the detection limit is no greater than 5 cysts or occysts per 100 liters. Detection levels on the order of 1 cyst or occyst per 100 liters are recommended. If an observation is less than the detection limit, make an entry in the form "<2" (where 2 per 100 liters is the detection limit in this example). The actual detection limit will be dictated by the volumes of sample obtained, filtered, and processed. Do NOT record nondetectable values as zero.</p>
- 8. EPA Method 1623 or other approved methods for reclaimed water or nonpotable waters, adjusted appropriately to accommodate the detection limit requirements, shall be used. Methods previously allowed for EPA's Information Collection Rule (ICR) shall not be used. The full requirements of the approved method, including quality assurance and quality control, are to be met. Quality assurance and sampling requirements in Chapter 62-160, F.A.C., shall apply.

Two concentrations of Giardia and Cryptosporidium shall be recorded on Part III of this form:

- a. Total cysts and oocysts shall be enumerated using EPA Method 1623 or other approved methods.
- b. Potentially viable cysts and oocysts shall be enumerated using the DAPI staining technique contained in EPA Method 1623 or similar enumeration techniques included in other approved methods. Cysts and oocysts that are stained DAPI positive or show internal structure by D.I.C. shall be considered as being potentially viable. If the laboratory reports separate values for DAPI positive and for cysts or oocysts having internal structure, the larger of the two concentrations will be reported as being potentially viable.
- 9. If the number of potentially viable cysts of *Giardia* reported exceeds 5 per 100 liters, a subsequent sample shall be taken and analyzed using EPA Method 1623 or other approved methods and reported using this form. If the number of potentially viable oocysts of *Cryptosporidium* reported exceeds 22 per 100 liters, a subsequent sample shall be taken and analyzed using EPA Method 1623 or other approved methods and reported using this form. This subsequent sample shall be collected within 90 days of the date the initial sample was taken, analyzed for both *Giardia* and *Cryptosporidium*, and the results of the subsequent analysis shall be submitted to DEP using this form within 60 days of sample collection.
- 10. Rule 62-160.300, F.A.C., requires that all laboratories generating environmental data for submission to the DEP shall hold certification from the Department of Health's (DOH) Environmental Laboratory Certification Program (ELCP). Certification by the ELCP for analysis of Giardia and Cryptosporidium using EPA Method 1623 for non-potable waters is required. If other approved methods are used, certification by the ELCP is required for the specific method and for the test matrix. Lists of certified laboratories can be found at www.dep.state.fl.us/labs/cgi-bin/aams/index.asp
- 11. Samples shall be collected during peak flow periods (normally between the hours of 8:00 a.m. and 6:00 p.m.).
- 12. Recognizing that concentrations of these pathogens generally increase during the late summer through fall period, it is recommended that utilities sample during the August through October time period.
- 13. If the wastewater treatment facility uses chlorination for disinfection, samples obtained for analysis of *Giardia* and *Cryptosporidium* shall be dechlorinated.
- 14. When sampling at the treatment facility, obtain a grab sample for total suspended solids (TSS) that is representative of the water leaving the filters at the treatment facility during the period when pathogen

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- samples are being obtained. In addition, record the highest turbidity and the lowest total chlorine residual observed during the period when pathogen samples are being obtained.
- 15. When sampling a supplemental water supply, obtain a grab sample for total suspended solids (TSS) that is representative of the surface water or treated stormwater as it is added to the reclaimed water system. This TSS sample shall be taken during the period when pathogen samples are being obtained. In addition, record the lowest total chlorine residual observed during the period when pathogen samples are being obtained.

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## Part II - General Information

1.	DEP wastewater facility identification number: FLA010900
	Wastewater facility name: Wedgefield WWTF
	Permittee name: Pluris Wedgefield, Inc.
2.	Person completing this form:
	Name:
	Telephone: ()
	Email address:
3.	Sampling and analysis:
	Date samples were taken:
	Organization collecting the samples:
	Was the sample dechlorinated in the field? ☐ Yes ☐ No
	Was the sample refrigerated or kept on ice during shipment to the laboratory?   Yes  No
	Date samples delivered to laboratory:
	Date analytical work was done:
	Laboratory doing the analysis:
	Laboratory's DOH Identification Number:
	Approved method used:
	☐ EPA Method 1623
	Other approved method:
	Contact person at the laboratory:
	Email address of the lab contact person:
4.	s this the first time that this form has been submitted for the facility?
	Yes [Please complete Questions 7 through 16.]
	No [Proceed to Question 5.]
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5.	<ol> <li>Is this a report of "subsequent re-sampling" reconcentrations of potentially viable cysts or on</li> </ol>	
	No [Proceed to Question 6.]	
	Yes [Attach a descripti facilities since the time of the previou	ion of any facility or operational changes made to the treatment is sampling and proceed to Question 6.]
6.	6. Has the information requested in Questions 7 th form?	hrough 12 (below) changed since the last submittal of this
	Yes [Please complete Questions 7 thr	ough 16.]
	No [Proceed to Questions 7 through 12.]	ons 13 through 16 of Part II of this form. You do not need to
7.	7. Type of secondary treatment system:	
	Conventional activated sludge	Extended aeration
	Contact stabilization	Biological nutrient removal (such as Bardenpho)
	Other:	
8.	Does this treatment facility nitrify (convert am	monia nitrogen to nitrate)?
9.	9. Filter type:	
	Deep bed, single media	Deep bed, multiple media
	Shallow bed, automatic backwash	Upflow (including Dynasand)
	Slow rate sand filter	☐ Diatomaceous earth filter
	Fabric filter	Cartridge filter
	Membranes (microfiltration, ultrafiltra	ation, membrane bioreactor, reverse osmosis)
	Other:	
10.	10. Filter Media (complete for each type of media	provided):
	Top layer of media: Media ty	уре:
	Effective	e size: mm
	Uniform	ity coefficient:
		th:inches

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	whodie layer of media:	Media type:	
		Effective size:	mm
		Uniformity coefficient:	
		Bed depth:	inches
	Bottom layer of media:	Media type:	
		Effective size:	mm
		Uniformity coefficient:	
		Bed depth:	inches
11. Filter!	oackwash water:		
	Backwash water is return	ned to the headworks of the treatment plant.	
	Backwash water is return	ned to the aeration basin.	
12. Disinf	Other. Please describe: ection system:		
	Chlorination, gas	☐ Hypochlorite	
	Chlorine dioxide	Chlorination, other	
	Ultraviolet	Ozone	
	Other:		
13. Is chic	orine added before the filters'	No Yes Dose:	mg/L
	g the period that samples we chemical to enhance filtration	e taken, did you add a coagulant, coagula ??	int aid, polyelectrolyte, o
	☐ No		
	Yes. Please list the ch	emicals being added and their dose.	
	Chemical 1 - Name: _		Dose: mg/I
	Chemical 2 - Name: _		Dose: mg/I
	Chemical 3 - Name		
15. Waste		ted capacity:MG	

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## PART III - PATHOGEN MONITORING REPORT

FACILITY ID: FLA010900

FACILITY NAME: Wedgefield WWTF
FACILITY ADDRESS: 3100 Bancroft Blvd, Orlando, FL 32833-4011

PERMITTEE NAME: Pluris Wedgefield, Inc.
MAILING ADDRESS: 2600 Commercentre Dr., Lake Forest, CA 92630

DATE OF SAMPLING:

	Quantity or Lo	ading	Quality or Concentration		
<u>Parameter</u>	Sample Measurement	Units	Sample Measurement	Units	
Treatment Plant: After Filter Monitoring Site No. El'B-1		2.65			
Turbidity PARM Code 00070	S. 20 1 1 20 40 40 10			NTU	
TSS PARM Code 00530				mg/L	
Treatment Plant: After Disinfection Monitoring Site No. EFA-I				No. of the second	
Total Chlorine Residual PARM Code 50060				mg/L	
Volume Collected PARM Code 71994		Liters			
Giardia, total count * PARM Code GIARD			_	total cysts/100 L	
Giardia, potentially viable cysts * PARM Code VGIAR				potentially viable cysts/100 L	
Cryptosporidium, total count * PARM Code CRYPT				total occysts/100 L	
Cryptosporidium, potentially viable occysts PARM Code VCRYP				potentially viable oocysts/100 L	
Supplemental Water Supply (surface water or stormwater): After Treatment & Disinfection Monitoring Site No.					
TSS PARM Code 00530				mg/L	
Total Chlorine Residual PARM Code 50060				mg/L	
Volume Collected PARM Code 71994		Liters			
Giardia (total count) * PARM Code GIARD		1.00%		total cysts/100 L	
Giardia, potentially viable cysts * PARM Code VGIAR				potentially viable cysts/100 L	
Cryptosporidium, total count * PARM Code CRYPT				total oocysts/100 L	
Cryptosporidium, potentially viable oocysis * PARM Code VCRYP				potentially viable oocysts/100 L	

^{*} Data entries must be made for both total and potentially viable cysts and oocysts.

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### **PART IV - CERTIFICATION**

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based upon 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 Principle Executive Officer or Authorized Agent (Type or Print)	Signature of Principle Executive Officer or Authorized Agent	Telephone No.	Date (YY/MM/DD)
	Email Address	<u> </u>	<u> </u>

DEP Form 62-610.300(4)(a)4 March 9, 2006

		DEPARTMENT OF ENVIRON								
Vhen Completed mail th	ils report in: Department	of Environmental Protection, Doines	itic Wastewater Section	MS 3540, 2600 Blair St	ne Rond, Tallahassee, FL	37399-2400				
PERMITTEE NAME MAILING ADDRESS:	MAILING ADDRESS: 2600 Commercentre Dr Lake Forest, CA 92630  FACILITY: Wedgefield WWTF		PERMIT NUMBE	PERMIT NUMBER		Ft A010900-005-DW2P				
FACILITY;			CLASS SIZE: MONITORING G	ROUPNUMBER	Final N/A RWS-A		EPORT: ROGRAM	t [.]	Annually Domestic	
LOCATION:			RE-SUBMITTED	MONITORING GROUP DESCRIPTION: RE-SUBMITTED DMR: NO DISCHARGE FROM 5ITE.		ater or Efflue	nt Analysi	is.		
COUNTY: OFFICE:	Orange Central District		MONITORING P	ERIOD From		Fo				
Parameter		Quantity or Frading	Units	Quality or Con	centration	Units	No Ex	Frequency of Analysis	Sample Type	
ntimony, Total Recovers	hble Sample Measurement					7 '				
ARM Code 01268 P Ion, Site No. RWS-A	Permit Requirement			Report Max.)		ugfL	1 " †	Annually	24-lir FPC	
rsenic, Total Recoverabl	e Sample Measurement									
ARM Code 00978 P Ion. Site No. RWS-A	Pennit Requirement			Report Max.)		ug/L		Annually	24-hr FPC	
erium, Total Recoverab	Measurement				1					
ARM Code 01009 P Ion, Site <u>No. RWS-A</u> ervilium, Total Recover	Permit Requirement			Report (Max.)		ng/L		Annually	24-hr FPC	
AKM Code 00998 P	Sample Measurement Permit			Report		α <b>μ/</b> L	4-4	Annually	24-hr FPC	
on Site No RWS-A	Requirement			(Max.)			$\perp \perp$	Annually	24-nr PPC	
ARM Code 01113 P	Measurement Permu			Кероп		ug/L		Annually	24-hr FPC	
lon, Site No. RWS-A homium, Total Recover	Requirement rable Sample Measurement			[Мая ]		-	+		<del> </del>	
ARM Code 01118 P Ion, Site No. RWS-A	Permit Requirement			Report (Max.)		ug/L		Annually	24-hr FPC	
he information submitted	<ol> <li>Based on my inquiry of</li> </ol>	d all attachments were prepared unde the person or persons who manage t I am aware that there are significant	he system, or those pers	ons directly responsible fo	or gathering the informati	on, the inform	tation sub	mitted is, to the	best of my	
	_	OR AUTHORIZED AGENT		NCIPAL EXECUTIVE OFF		•		PHONE NO	DATE (yy/mm/dd	
· · · · · · · · · · · · · · · · · · ·										
COMMENT AND EXPL	ANATION OF ANY VIC	LATIONS (Reference all attachmen	rs here):		<del>-</del>					

FACILITY: Wedgefield WWTF		MONITORING GROUP NUMBER: MONITORING PERIOD	RWS-A From:		PERMIT NUMBER FLA010900-005-DW21*			
Parameter		Duentity or Loading	Units	Quality or Concentration	Units No.	Frequency of Analysis	Sample Type	
	Sample Measurement		<del></del>					
ARM Code 78248 P	Perinit Requirement		Report (Max )		uy\L	Annualty	Grab	
luoride, Total (as F)	Sample Measurement							
ARM Code 00951 P	Permit Requirement		Report (Max.)		ing/L	Annually	24-hr FPC	
ead. Total Recoverable	Sample Measurement							
PARM Code 01114 P	Permit Requirement		Report (Max.)		wa/L	Annually	24-hr FPC	
Mercury Total Recoverable	Sample Measurement						24-hr FPC	
PARM Code 71901 P Mon Site No. RWS-A	Permit Requirement		Report (Max.)		1-WL	Annually	24-117-7-	
Nickel, Total Recoverable	Sample Measurement						24-bi FPC	
PARM Code 01074 P Mon Site No. RWS-A	Permit Requirement		Kepon (Max.)		υ <b>η/</b> Ι.	Annually	2948 110	
Nitrogen, Nitrate, Total (as N)	Sample Measurement					Annually	24-hr FPC	
PARM Code 00620 P Mon. Site No. RWS-A	Permit Requirement		Report (Max			Annually		
Nitrogen, Nitrite, Total (as N)	Sample Measurement				mg/L	Annually	24-hî FPC	
PARM Code 00615 P Mon. Site No. RWS-A	Permit Requirement		Repor (Max			- Children		
Nitrate plus Nitrate, Total I del (as. N)	Measurement				- ing/i.	Annually	24-hr PPC	
PARM Code 00630 P Mon. Sile No. RWS-A	Pennil Requirement		Repor (Max					
Selenium, Total Recoverable	Sample Measurement					Annually	24-hr FPC	
PARM Code 00981 P Mon. Site No. RWS-A	Permit Requirement		Repor (Max					
Sodium, Total Recoverable	Sample Measurement		Repor		<del>   </del> <del> </del>	Annually	24-hr FPC	
PARM Code 00923 P Mon. Site No. RWS-A	Permit Requirement		(Max.					

### DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY

Wedgefield WWTF

MONITURING GROUP

NUMBER:
MONITORING PERIOD

From:

RWS-A

PERMIT NUMBER FLA010900-005-DW2P

Parameter		Quantity or Loading	Units	Quality o	r Concentration		No Frequency of Analysis	Sample Type
Thallium, Total Recoverable	Sumple				[	- 1 1		
PARM Code (10982 P	Measurement	·	<b>⊣</b> 1	N				24-hr FPC
Mon Site No RWS-A	Requirement			Report (Max.)		ug∕t.	Annually	24-07 FFC
1.1-dichloroethylene	Sample							
1,1 -dicinoroctinying	Measurement				Į.	1 1	Į	
PARM Code 34501 P	Permit		1 -1-	Ksport		11g/L	Appually	Grab
Mon. Site No. RWS-A	Requirement		1 1	(Mex.)		"	, 2,,,,,,,,,	<b>4</b>
,I,I-trichluroethane	Sample	<del></del>	1 -			- 1 - 1	<del> </del>	
	Mensutement	ŀ	1 1					
PARM Code 34506 P	Permit			Report		ug/i.	Annually	Grab
Mon Site No. RWS-A	Requirement			(Max )				
1.1.2-trichloroethane	Sample							
	Measurement		· 1					
PARM Code 34511 P	Permet		7 -7	Report		7	Annually	(trab
Mon Sile No RWS-A	Requirement		1	(Max.)				
,2 dichlospethane	Sample							
	Measurement	. 1 _	_1 1					L
PARM Code 32103 P	Permit			Report	,   '	ug/L	Annually	Grab
Mon. Site No. RWS-A	Requirement	<u></u>		(Max.)		L L		L
1,2-dichloropropane	Sample							
	Measurement		i L					
PARM Code 34541 P	Permit		1 1	Report	·	rg.L	Atmostly	Citab
Mon Site No. RWS-A	Requirement			(Max )				
1,2,4-trichlerobenzene	Sample			_		1 -1		1
	Measurement							
PARM Code 34551 P	Permu	1	l i	Report		ug/L	Annually	Grab
Mon, Site No. RWS-A	Requirement	<del>-</del>	1 1	(Max.)				<u>.</u>
Benzene	Sample	1	1					1
	Measurement					·		4
PARM Code 34030 P	Permut		1 1	Report	1	սք,1,	Annually	Grah
Mon Site No RWS-A	Requirement		1 1	(Max )				<b>4</b>
Carbon tetrachkinde	Sample	<u>l</u>				1 i		
	Measurement		1 1		<b>⊢</b>	1 . 4		Grah
PARM Code 32102 P	Permit	ļ.		Report		ug/L	Annually	Urae
Mon. Site No. RWS-A	Requirement			(Max.)		<b></b>		
Cis-1,2-dichloroethene	Sample			i				
PARM Code 81686 P	Measuroment	<u>.</u>	-				Annually	Grah
Mon Sile No. RWS-A	Permit			Report		[ "" [	Annuality	(77807
MOR SHE IND. ILMS-N	Requirement	1	1	(Max.)		لئے ا		ــــــــــــــــــــــــــــــــــــــ

FACILITY: Wedgefield WWTF			MONITORING GROUP RWS-A NUMBER: MONITORING PERIOD From:		PERMIT NUMBER: FLA010900-005-DW2P				
Parameter		Quantity or Landing	Units		Quality or Concentration	Units	No Ex.	Frequency of Analysis	Sample Lype
Dichloromethane (methylene chloride)	Sample Measurement								<del>-</del> -
PARM Code 03821 P	Permit		<del></del>	Report		ug/L	-	Annually	Grab
Mon. Site No. RWS-A Ethylbenzene	Requirement Sample	<del></del>	<del></del>	(Max.)	<del> </del>	+	+		
'ARM Code 34371 P	Permit			Report	<del></del>	ug/L	<del> </del>	Annually	Grab
Mon. Site No. RWS-A Monochilorobeazone	Requirement Sample			(Max )					
PARM Code 34031 P	Measurement Permit			Report	<del></del>	ug/L	-	Annualiy —	Grab -
Mon Site No. RWS-A .2-dichlorobenzene	Requirement Sample		<del>- </del>  -	(Max.)			+		
ARM Code 34536 P	Measurenieni Permit			Report	<del></del>	ug/L		Annually	Grab
Mon Site No. RWS-A I,4-dichlurobenzene	Requirement Sample		<del></del>	(Max)		<b></b>	$\dashv$		
PARM Code 34571 P	Mersurement Pennit		1 1	Report	<del></del>	ug/L		Annually	····Grab —
Mon, Site No. RWS-A Styrene, Lotal	Requirement Sample	<del></del>	<del></del>	(Max.)					- <del></del>
PARM Code 77128 P	Measurement Permit	-		Report	-	ug/L		Annually	Grab
Mon. Site No. RWS-A Tetrachloroethylene	Requirement Sample		<del></del>	(Max )	<b>_</b>	<del></del> -		ļ	
PARM Code 34475 P	Measurement Permit	-		Report	+ +	bug/L		Annually	Grab
Mon. Site No. RWS-A Tolusne	Requirement Sample		+ + +	(Max)	<del>-  </del>	<del></del>	╁		
PARM Code 34010 P	Measurement Permit		<del></del>	Report		ug/L	+	Annually	(irab
Mon. Site No. RWS-A 1,2-trans-dichloroethylcae	Requirement Sample			(Max)			┿	<u> </u>	
PARM Cude 34546 P	Measurement Permit			Report	-	Vg/L		Annually	Grab
Mon. Site No. RWS-A Trichloroethylend	Requirement Sample			(Max.)					
PARM Code 39180 P	Measurement			Report	+ +		4	Annually	Grab
Mon. Site No. RWS-A	Requirement			(Max )		400		Aprically	Grab

FACILITY: Wedgefield WWTF MONITORING OROUP PERMIT NUMBER: FLA010900-005-DW2P NUMBER: MONITORING PERIOD From: 10: No. Frequency of Ex Analysis Quantity or Loading Quality or Concentration Units Sample Type Parameter Units Vinyl chloride Sample Memorement PARM Code 39175 P Mon Site No RWS-A Xylenes Annually Grab Requirement (Max) Memurement PARM Code 81551 P Mon Site No. RWS-A 2.3,7,8-tetrachlorodibenzo-p-diox Ğrab Requirement (Max.) Sample Measurement PARM Code 34675 P Mon. Site No. RWS-A 2,4-dichlorophenoxystesic scid ιιμ∕L. Report (Max.) 24-hr FPC Annually Requiren Measuremen PARM Code 19730 P Mon. Site No. RWS-A Silvex Kepart ng/L 24-hr FPC Annually Requirement Sample (Max) Measurement PARM Code 39760 P Mon Site No RWS-A Alachior Report (Max.) ug/L Annually 24-hr FPC Requirement Sample Measurement PARM Code 39161 P Mon, Site No. RWS-A Alrazino Report (Max ) Permit Annually 24-hr FPC Requirement Sample Measurement PARM Code 39033 P Mon. Site No. RWS-A (Max ) ug/L 24-hr FPC Annually Requirement Вепиона)рутене

Sample Measurement Permit

Requirement Sample Measurement

Permit Requirement

Requirement

PARM Code 34247 P Mon. Site No RWS-A Carbofuran

PARM Code 81405 P Mon. Site No. RWS-A Chlordane (tech mix. and metabolites)

PARM Code 39350 P Man Site No RWS-A

5

Report (Max.)

Report (Max.)

Report (Max.) ug/L

ug/L

24-lir FPC

24-hr FPC

24-br FPC

Annually

FACILITY

Wedgefield WWTF

MONITORING GROUP NUMBER, MONITORING PERIOD From

RWS A

PERMIT NUMBER FLA010900-005-DW2P

			MONITORING PE	RIOD From	To:		
Parameter	] ]	Quantity or Loading	Units	Quality of Concentration	Units No.	Frequency of Analysis	Sample Type
Dalapon	Sample		<b></b>			Anatysis	·
·	Measurement	i	<b>i</b> i		1 1		1
PARM Code 38432 P	Permil	-1		epoit	118/L	Annually	24-by FPC
Mon. Site No. RWS-A	Requirement			Max )	"	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Bis(2-ethylhexyl)adipate	Sample		· · · · · · · · · · · · · · · · · · ·			<del></del>	1
	Measurement		1 1	1 1			
PARM Code 77903 P	Permit 7	1 -	- 1 R	eport	ng/L	Annually	24-hr EPC
Mon Site No RWS-A	Kequirement			Misc.)	1	1 /	
Bis (2-ethyllicxyl) phthainte	Sample				<del>                                      </del>	-	
	Measurement	į.		1 1	1 1		
PARM Code 39100 P	Permit		1 ! R	cport	ugit	Appually	24-br Fi°C
Mon. Site No. RWS-A	Regunement			Max)	1 492	(All All All All All All All All All All	
Dibromochloropropane (DBCP)	Sample		1	——————————————————————————————————————		<del></del>	1 —
	Measurement		1 1		1 1		
PARM Code \$2625 P	Permit	<u> </u>	-   a	eport	1 ար 一	Annually	Grab
MOR SHE NO. RWS-A	Requirement	ĺ		Max)	""	//,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Dinoseb	Sample		<u> </u>			<del>                                      </del>	<del></del> -
	Меаниетелі			i l	1 1	1	
PARM Code 30191 P	Permit	<del>-</del>	1 1 1	teport	ug/t,	Annualiy	24-hr FPC
Mon Site No. RWS-A	Requirement			Max.)	""	Alumenty	29-411-17-0
Diquit	Sænple				<del></del>	<del></del>	
	Measurement	ļ		1			
PARM Code 04443 P	l'ermet			tepori		Annually	24-hr FPC
Mon. Site No. RWS A	Requirement			Max.)	"	/M	24-10-1
Endothall	Sample	_				· <del></del> · · ·	
	Measurement			1		-	
PARM Cude 38926 P	Permit			eport	1,1/1	Atmually	24-br FPC
Mon. Site No. RWS-A	Requirement	- 1		Max.)	"•-	,,	
Endrin	Sample	<del></del>	1 7 "				†
	Measurement	1		1 1	i l	i	
PARM Code 39390 P	Permit	· <del>-  </del>	i i k	cport	ug/L	Annualty	24-hr FPC
Mon, Site No. RWS-A	Requirement			Max.)		7,1247	4.7.1
Ethylene dibroniide (1,2-	Sample		'	······································	<del></del>	·	
dibromuethane)	Measurement		i i	i i	i		
PARM Code 77651 P	Permit			Leport	10g/L	Annually	24-br J PC
Mon. Site No RWS-A	Requirement			Max )	1 ***	/	
Glyphosate	Sample		<b>⊣</b>			<del> </del>	<del> </del>
.,	Measurement						
PARM Code 79743 P	Permit			teport	mgil	Amuslly	24-hr FPC
Mon. Site No RWS-A	Requirement			Max)	""	/5////	

FACILITY: V	Vedgelield WWTF		MONITORING GROUP NUMBER: MONITORING PERIOD	RWS-A	PERMIT I To	NUMBER, FLA010900-0	XDS-DW2IP
			MONITORING PERIOD	,	10.	· · - ·	
Parametes		Quantity or Loading	Units	Quality or Concentration	Units	No. Frequency of Ex Analysis	Sample Type
Hepinchiar	Sample						1
	Memurement			<u> </u>	<del></del> -		<del> </del>
PARM Code 39410 P Mon Site No. RWS-A	Pennil Requirement		Report (Marc)		ug/l.	Annually	24-hr FPC
Heptachter epoxide	Sample						
stichaction charine	Measurement	1	1 1			<u> </u>	
PARM Code 39420 P	Permit		Report		- Var.	Annually	24-hr FPC -
Mon. Site No. RWS-A	Requirement		(Max )			Activally	2440117
i iexachiorobenzene	Sample						<del></del> -
······	Measurement						
PARM Code 39700 P	Permit		Report		սքի.	Annually	24-hr FPC
Mon. Site No. RWS-A	Requirement	ĺ	(Max)	Į į	7"	/ / / / / / / / / / / / / / / / / / / /	1
Hexachtorocyclopentadiene						<del></del> -	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Measurement	i i	i i	1 1	ľ.		1
PARM Code 34386 P	Permit		Report			Annually	24-hr FPC
Mon. Site No. RWS-A	Requirement		(Max)				
Gamma BHC (Lindans)	Sample						
	Measurement		1 1				
PARM Code 39782 P	Permit	-1	Report		Jugu	Annually	24-hr FPC
Mon. Site No. RWS-A	Requirement		(Max.)				
Methoxychlor	Sample						1
	Measurement		L	I I .	1		
PARM Code 39480 P	Permit		Report		wg/L	Annually	24-hr FPC
Mon Site No. RWS-A	Requirement		(Max.)				
Oxamyl (vydate)	Sample		1 1				ì
	Measurement						
PARM Code 38865 P	Permil	1	Report	- {	ug∕t.	Annualty	74-tir FPC
Mon Sile No RWS-A	Requirement		(Max.)				L
Pentachlorophenol	Sample						ŀ
	Measurement		<b></b>				
PARM Code 39032 P	Permit		Report	i	ug/L	Annually	24-hr FPC
Mon. Site No. RWS-A	Requirement		(Max.)				
Picloram	Sample		1 1				
	Measurement		<del></del>				
PARM Code 39729 P	Permit		Report	l l	ng/L	Annualty	24-hr FPC
Mon. Site No. RWS-A	Requirement		(Max.)				
Polychlorinated Biphenyls			1	l i			i
	Measurement					Щ	
PARM Code 39516 P	Permit		Keport		<b>≡g/</b> 1.	Annually	24-hr FPC
Mon Site No. RWS-A	Requirement		(Max )			, i .	<u> </u>

FACILITY. Wedgefield WW1F MONITORING GROUP RWS-A PERMIT NUMBER, FLA010900-005-DW2P NUMBER MONITORING PERIOD From: _ Ŧo. Quality or Concentration Parameter Quantity or Loading Units (Inds Frequency of Sample Type Analysis Sample Measurement Permit Superine PARM Code 39055 P Mon, Site No. RWS-A Report (Max.) up/l. Annually 24-hr FPC Requirement Sansple Toxaphene Measurement Permit Requirement Sample Measurement PARM Code 39400 If Mon. Site No. RWS-A Transformethane, Total by Report (Max.) ug/L 24-hi FPC Trinstometiane, 1000 by summation
PARM Code 82080 P
Mon Site No RWS-A
Radium 226 + Radium 228, Total Report (Max ) mg/L Annually Grab Pennit Measurement PARM Code 11503 P Mon Site No RWS-A Alpha, Gross Particle Activity Pennu (Max.) pt/L 24-hr FPC Requirement Sample Measurement PARM Code 80045 P Mon. Site No. RWS-A Aluminum, Total Recoverable pC'vI 24-hr FPC Permit Requirement Report (Max ) Annually Sample Measurement PARM Code (ILLOA P Mon. Site No. RWS-A Annually 24-hr FPC ምዜ"L Permit Requirement (Max ) Chloride (as Ch Measuremen PARM Code 00940 P Permit Report (Max.) mg/l. Annually 24-br FPC Mon. Site No. RWS-A fron, Total Recoverable Requirement Sample Measura PARM Code 00980 P Mon. Site No. RWS-A Copper, Total Recoverable 24-hi FPC Report (Max.) en p/l Annually Requirement Sample Measurement PARM Code 01119 P Mon Site No RWS-A Manganese, Total Recoverable ug/L Annually Report (Max )

Requirement Sumple Measurement

Requirement

PARM Code 11123 P Mon. Site No. RWS-A

Report (Max.)

Annually

24-hr FPC

FACILITY:	FACILITY: Wedgefield WWTF			MONITORING GROUP KWS-A NUMBER: MONITORING PERIOD From			PERMIT NUMBER: FLA010900-005-DW2P			
Parameter		Quartity or Loading	Units		Quality of Concentration	Units	No. Ex	Frequency of Analysis	Sample Type	
Silver, Total Recoverable	Sample Measurement									
PARM Code 01079 P	Permit			Report	1	ug/L	1	Amually	24-hr FPC	
Mon. Site No. RWS-A Sulfate, Total	Requirement Sample	A		(Max.)	<b>⊣</b>		<b></b>			
Surane, renai	Measurement				1		1 1			
PARM Code 00945 P	Permit			Report	<b>⊣</b> -1	- mg/1.	} <del>-</del>	Annually	24-hi FPC	
Mon. Site No RWS-A	Requirement			(Max.)						
Zinc, Total Recoverable	Sample Measurement		-   -							
PARM Code 01094 P	Permit			Kepon	<del></del>	- ug/L	<del>   </del>	Annually	24-lir FPC	
Mon. Site No. RWS-A	Requirement			(Max.)				,		
pH	Sample Messurement									
PARM Code 00400 P	Permit			Report			-	Annually	Grab	
Mon. Site No. RWS-A	Requirement			(Max.)	i	••	1 1	Annually	Cirate	
Solids, Total Dissolved (T	(126) Santiple									
PARM Code 70295 P	Measurement						<del>-</del>		ļ	
Mon. Site No. RWS-A	Requirement		-   -	Report (Max.)		ing/L	1 1	Annually	24-hr FPC	
Loaming Agents	Sample						1		-	
	Measurement			. <u> </u>	-					
PARM Code 01288 P Mon Site No RWS-A	Permii Requirement			Report (Max.)	1	ing/L		Annually	24-hr FPC	
MON THE 140 K 42-2	Kequiterinin		<del></del>	(IVIAL.)				~ <b>~</b> .		
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### DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

MAILING ADDRESS.	Plans Wedgefield, Inc 2600 Commercente Dr		PERMIT NUMBER	t	FE.A010900-003-D	DW2P E	Expiration Date:	January 27, 2015
	Lake Forest, CA 92630		LIMIT: CLASS SIZE		Final N/A		REPORT: PROGRAM	Monthly Domestic
FACILITY- LOCATION:			MONITORING GROUP NUMBER: R-001 MONITORING GROUP DESCRIPTION Public Access Reclaims RE-SUBMITTED DMR			lmmed Water, in	ncluding Influent	
COUNTY:	Orange		NO DISCHARGE MONITORING PE			Τp		
OFFICE:	Central District		MONTORINGF	KKAD FIGUR		'° -		
Parameter		Quantity or Loading	Units	Quality or Con	centration	Units	No. Frequency of	Sumple Type
ow(Total through Plant)	Sample	1	-  +	- · 1	J		Ex.   Analysis	<del></del>
· · · · · · · · · · · · · · · · · · ·	Measurement	_ 1		į	1	1		
ARM Code 50050 Y	Permit	0 130	MGD				5 Days/Wee	k   How Totalize
on Site No FLW-I	Requirement	(An Avg )	<u> </u>					
ow( Fotal through plant)	Sample Measurement							
ARM Code 50050 L	Permit	0 330	MGD			[	3 Davs/Wee	k Flow Totalize
ton, Site No. FLW-I	Requirement	(An A <u>vg.)</u>						
low(Total through Plant)	Sample Measurement							
ARM Code 50050 P	Permit	Report	MGD	<del></del>	· <del></del>		5 Days/Wcc	k Flow Totaliza
don. Site No. FLW-1	Requirement	(Mo Avg )			i		1 1 1 1 1 1 1 1 1 1	
low(Total to tielf Course,	Sample Measurement		<u> </u>					
ARM Code 50050 O	Permit	0 270	MGB (	<del></del>			Continuous	Flow Totalize
ton Site No. FLW-2	Requirement	(An.Avg.)				ı		1,000,000,000
low(Total to Golf Course	) Sample Measurement							
ARM Code 50050 R	Permit	Report	MGD	1			Continuous	Flow Totalise
Inn. Site No. F1.W-2	Requirement	(Mo Ave )			l	_		_
low(Total to Zonc 1)	Sample Measurement							
ARM Code 50050 S	Permit	0 0096	MGD				Continuous	Flow Totalize
AOR Site No FLW-3	Requirement	(All Avg.)	<u> </u>		_	]		

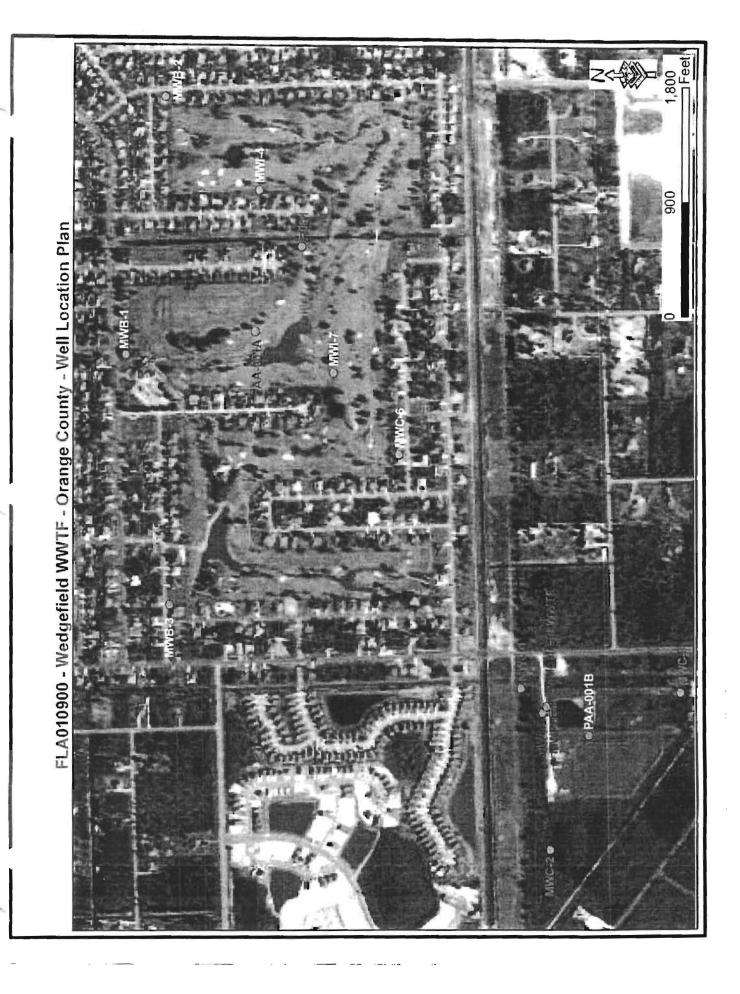
MONITORING GROUP R 00: NUMBER: MONITORING PERIOD From PERMIT NUMBER FLA010900-005-DW2P Wedgefield WWTF R 001 FACILITY. ___To Quality or Concentration Units No. Frequency of Ex Analysis Sample Type Units Parameter -----

Messurement Continuous Flow Total	
IPARM Cole 50050 T Permit   Report   Mass	IZEI
Mon Site No. FLW-1 Requirement (Mo.Avg.)	
Flowr Total to Zone 2) Sample	
Measurement	
PARM Code 50010 U Permit 0 0309 MGD Continuous Flow Tota	LEET
Mon. Site No. FLW-4 Requirement (An Avg.)	··{
Flow(1 oral to Zone 2) Sample	- {
Measurement	
PARM Code 50050 V Permit Report MGD Continuous +low Tota	izer
May Site No FLW-1 Requirement (Mo.Avg.)	
Flow Total to Zone 3) Sample	
Mesturement	
PARM Code 50050 W Permit 0 0195 MGD Continuous Flow Tot	IIZET
Mun. Site No. FLW-S Requirement (An Avg.)	_
Flow(Total to Zonte 3) Sample	- 1
Measurement	
PARM Code 50050 W Permit Report Milit	112CF
Mon. Site Nu. FLW-5 Requirement (Mo.Avg.)	4
Flowifrom groundwater well) Sample	ŀ
Measurement	
PARM Code 50050 W Prunt Report MGD Cortanuous Flow Tot	Hitei
Mpn Site No F1 W-6 Requirement (An Avg.)	
Flow(from groundwater well) Sample	- 1
Measurement	
PARM Code 50050 W Permit Report Mility Continues Flow Tot	1126
Mon. Site No. FI W-6 Requirement (Mo. Avg.)	
BOD, Carbonaccous 5 day, 20C Sample	- 1
Mensurement 200 mg/L Bi-meekly, every 8-hr F	<i>-</i> ,⊢
IPAKM Code XXXX Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	~
Mon. Site No. EFA-1 Requirement (An.Avg.) weeks	
BOD, Carbonaceous Siday, 200. Sonrate	i
Measurement 500 A50 VIG mpl. Bi-weekly every 5-hr F	$\sim$ $-1$
IPARM Code 80082 A IPEINIL I 90.0	~
Myn Site No. EFA-1 Requirement (Max.) (Wk Avg.) (Mo Avg.) 2 weeks	
Sulids, Total Suspended Sample	
Messurement	
PARM Code 00530 B Permit 4 Days/Week Gra	· [
Mon. Site No. EFB-1 Requirement (Max.)	

FACILITY: Wedge	field WWTF			NUMBER:	ING GROUP ING PERIOD	R-001	то		NUME	DER, FLA010900-0	15-DW2P
Parameter		Quantity o	r Loading	Units		Quality or Conce	ntration	Units	No.	Frequency of Analysis	Sample Type
pH-I	Sample							- <del></del> -	Ç.A.	~//ai/ya <u>/3</u>	
	Measurement										
PARM Code 00400 A	Permit		-		60		8.5	10	1	5 Days/Week	Grab
Mon Site No. EFA-1	Requirement				(Min.)		(Max.)	Į.		,	•
Coliform, Fecal	Sample	I						1	<b></b>		
	Measurement	1		1							
PARM Code 74055 A	Pennit						25	#/100ml.	<b>†</b>	4 Days/Week	Grab
Mon. Site No. EFA-1	Requirement					ľ	(Max.)	1		,	11120
Coliform, Fecal, % less than	Sample						<b>-</b>	1	<del> </del>		
detection	Measurement										
PARM Code 51005 A	l'enni!			1 "	75			percent	+	4 Days/Week	Calculated
Mon Site No. EFA-1	Requirement	i			(Mo Total)				1	1 LABYS WEEK	Calculated
Chlorine, Total Residual(For	Sample		<del></del>		<b>3</b> ,	·			1	1 -	
Disinfection)	Measurement	1						!	ŀ		
PARM Code 50060 A	Permit				10			m _B /L		Continuous	Meier
Moir Site No. EFA-1	Requirement	i			(Min.)				i .	Communica	INICIEI
Turbidity	Sample			<b>→</b> · · ·				† ·	<del></del>		
	Mensurement						!	l .	1		
PARM Code 00070 B	Permit						Keport	עזא -	<del>├</del>	C	
Mon. Site No. EFB-1	Requirement			1 1			(Maux)	1	1	Continuous	Meter
Nitrogen, Nitrate, Total (as N)	Sample						- Country	ļ	<del></del>		
The second second second second	Measurement							1	1		
PARM Code 00620 A	Permi									1	
Mon Site No. EFA-1	Requirement						120	mg/L	1	Monthly	8-hr FPC
Flow(Total through plant)	Sample			<del></del>			_(Max)	<b></b>			
- ow( total (month biant)	Measurement	i		1 1				1	1	j	
PARM Code 50050 W	Permit	Report	Report	MGD			_		-		
Mon Site No FLW-I	Requirement	(Ma Avg.)	(Q) Avg.)	MOD					1	5 Days/Week	Flow Totalizer
Percent Capacity, (TMADF/	Sample	(AND WAR)	(ALVAR)								
Permitted Capacity) x 100	Measurement								1		
PARM Code 00180 P	Permit		+	<b>-</b>   -					-		
Mon Site No CAL-1							Report	percent		Monthly	Calculated
BOD, Carbonaceous 5 day.	Requirement Sample						(Mo Avg.)	L		L	
20C(Influent)											
PARM Code 80082 P	Measurement	-						<u> </u>	I		
Mon. Site No INF-I	Permit						Keport	mg/L		Bi-weekly; every	8-hr FPC
	Requirement						(Max.)			2 wteks	
Solids, Total Suspended(Influent											
724 1224 124 124 124 124 124 124 124 124	Mensurement			_					1		
PARM Code 00530 P	Permit						Report	mg/L	T	Bi-weekly, every	8-hr FPC
Mon. Size No. INF-I	Requirement			1		1	(Max.)	1	1	2 weeks	

### DAILY SAMPLE RESULTS - PART B

Permit Number: FLA010900-005-DW2P Facility: Wedgefield WWTF Monitoring Period From: To: Chlorine, Total Coliform, Fecal Residual #/100ml. BOD, Nitrogen, Nitrate, Total Solids, Total Turbidity Flow Flow Carbonaceous 5 Suspended NTU MGD MGD mg/l. day, 20C (as N) mg/l. mø/L mg/L Code Mon. Site 80082 EFA-1 50060 EFA-1 74055 EFA-1 00400 EFA-1 00620 00530 50050 FLW-1 00070 50050 EFA-1 EFB-1 EFB-I TLW-2 2 3 4 5 6 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: ... Evening Shift Operator Class: _ Certificate No: Name: **light Shift Operator** Class: Certificate No: Name: Lead Operator Class: Certificate No: Name:



# DAILY SAMPLE RESULTS - PART B Facility: Wedgefield WWTF

Permit Number:

FLA010900-005-DW2P

Monitorii	ng Period	From:		To:	<del></del>				
	Flow MGD	Flow MGD	Flow MGD	Flow MGD	BOD, Carbonaceous 5 day, 20C mg/L	Solids, Total Suspended mg/L			
Code	50050	50050	50050	50050	80082	00520		<u> </u>	
Mon. Site	FLW-3	FLW-4	FLW-5	FLW-6	INF-1	00530 INF-1		<del>  -</del>	<del>                                     </del>
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27									
28						-			
29									
30									
31									
Total									
Mo. Avg.									
PLANT STA Day Shift Op	FFING:	Class:	Certificate	: No:	Nam	c:			
Evening Shift	1 Operator	Class:	Certificate		Nam	-			
light Shift O		Class:	Certificate		Nam				
Lead Operato		Class:	Certificate		——— Nam	<u> </u>			

## Florida Department of Environmental Protection

Twin Towers Office Bidg. 2600 Blair Stone Road Tallahassee, Florida 32399-2400

# **GROUND WATER MONITORING REPORT**

Rule 62-522.600(11)

### PART I GENERAL INFORMATION

(1)	Facility Name_Wed	gefield WWTF - Orange Cou	nty
	Address		
			Zip
	Telephone Number _		
(2)	The GMS Identification	on Number 3048P03712	
(3)	DEP Permit Number	FLA010900	
(4)			
	Telephone Number (	)	
(5)			
(6)			
atta info pos	chments and that, base rmation is true, accurat sibility of fine and impri	ed on my inquiry of those individite, and complete. I am aware the	ed and am familiar with the information submitted in this document and all uals immediately responsible for obtaining the information, I believe that the at there are significant penalties for submitting false information, including the
			Signature of Owner or Authorized Representative
	RT II QUALITY ASSUR	RANCE REQUIREMENTS	
	Nytical Lab	NELAC Certification #	
בו נרב	nysoar cab	NELAC Certification #	
lab	Name		
	20/2009		

County Escility Name Permit Number	Orange County Wedgefield WWTF FLA010900	GMS# 3048P03712	Pennit Builder MW ID Well Type: Description	MWB-1R* Background Well Name MW-1 Gulf Course WAFR # 6006
Monitoring Period  Was the well purged before sampling?	Lion. _ Yes No	To:	Date Sample Obtained. Time Sample Obtained.	GMS# 3048A1341

Parameter -	Permit Builder PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N
Water Level Relative to Feet, NGVI)	82546		Feet	Report			Chianterly		
Nitrate, (ns N)	00620		m <u>g/l.</u>	Report			Quarterly		
iolids, Total Dissolved(TDS)	70295		mg/L	Report			Quarterly		
Chloride (as Cl)	00940		mg/L	Report			Quarterly		
oliform, Fecal	74055		#/100ml.	Report			Quarterly		
Н	00400		su	Report	. , <u></u>		Quarterly		
Furbidity, Lab - Nepholometric	22079		NTU	Report			Quarterly		L
Added: November 2009**									
sudium	00923		ing/L	Report			Quarterly		]
Trihalomethane, Total	82080		ug/L_	Repurt			Quarterly		
		****	ļ						
		_ · · <del></del>	ļ <u> </u>						
		· · · · · · · · · · · · · · · · · · ·					····		
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Original well MWR-1 was demaged and replaced by MWB-1R on 06/06/2007. The WAFR ID remains the same.

Bused on the elevated concentrations of these parameters in the efficient samples, parameters to a parameter of the parameters of the efficient samples, parameters on a parameter of the parameter of the parameter of the parameter of the efficient samples of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the parameter of the

COMMENTS AND EXPLANATION 11/20/2009

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DEP Form 62-620 910(10), Effective November 29, 1994

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County. Facility Name. Perrnit Number:	Orange County Wedgefield WWTF FLA010900	GMS# 3048P03712	Permit Builder MW ID. Well Type: Description	MWB-2 Background Well Name MW-2 Goff Course WAFR # 6005 GMS# 3048A13414
Monitoring Period  Was the well purged before sampling?	From:	То	Date Sample Obtained: Time Sample Obtained	

Parameter	Permit Builder PARM Code	Sample Megsurement (Anglysis Results)	Unics	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGV()	82545		Feet	Report			Quarterly		
Nitrate, (as N)	00620		mg/L	Report			Quarterly		
Solids, Total Dissolved(TDS)	70295		mg/L	Keport			Quarterly		<u></u>
Chloride (as CI)	_ 00940		ing/L	Report			Quarterly		
Coliforni, Fecal	74055		#/100inL	Report _	<u> </u>	<u>-</u>	Quarterly		<u> </u>
pH	00400		su	Report			Quarterly		<u> </u>
Turbidity, Lab - Nepholometric	82079		NTU	Report			Quarterly		
Added: Navember 2009**	-, <del>-</del>			, –			. —		
Sodium	00923		m <u>y/L</u>	Report			Quarterly		
Teshadossacihane, Total	87080		ug/1	Report			Chunterly		
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	<b>↓</b>							<u> </u>	
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^{**} Based on the elevated concentrations of these parameters in the effluent samples, parameters Sodium and Total Trihalomethane (THMs) have been added to the current Groundwater Monitoring Plan (GWMP). COMMENTS AND EXPLANATION.
11/20/2009

County, Facility Name: Permit Number	Orange Cou Wedgefield FLA010900	WWTF	# 3048P03	712		Permit Builder MW ID, Well Type: Description:	MWB-3 Background Well Name Golf Court WAFR#6	e MW-3 se
Monitoring Period Was the well purged before sampling?	From Yes 1	No				Date Sample Obtained Time Sample Obtained	GMS# 304	
Parameter	Permit	Sample Measurement	Links	Permit	Detection Limits	Aunlysis Method	Monitoring	Sampling

Parameter	Permit Builder PARM Code	Sample Measurement (Analysis Results)	tialis	Permit Requirement	Descetion Limits	Auniysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD	82545		Feet	Report			Quarterly		
Nitrate, (as N)	99620		nig/L	Report			Quarterly		
Solids, Total Dissolved(LDS)	70295		mg/L	Report			Quarterly		
Chloride (as CI)	00940		ng/L	Report			Quarterly		
Coliform, Fecal	74055		#/100mL	Report			Quarterly		
P!!	00400		SU	Report		<u> </u>	Quarterly	L	l
Furbidity, Lab - Nepholometric	82070		NTU	Report		J	Quarterly	Ī	<u> </u>
Added: November 2009**									
Sodrum	00923		ing/L	Report			Quarterly		J
Tribalomethane, Total	\$2080		ug/1.	Report			Quarterly		l <u></u>
	<u> </u>	L		<b></b> _					
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* Haved on the elevated concentrations of these parameters in the effluent samples, parameters Sodium and Total Trihalomethane (TTHMs) have been added to the current Groundwater Monitoring Plan (GWMP). COMMENTS AND EXPLANATION.

11/20/2009

County: Facility Name, Fermit Number, Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Pernnt Builder MW ID: Well Type:

Well Type: Description. MWI-4 Intermediate Well Name MW-4 Golf Course WAFR # 6003 GMS# 3048 \(\Lambda\) 13416

Monitoring Period
Was the well purged before sampling?

Date Sample Obtained: Time Sample Obtained:

Parameter	Permit Builder FARM Code	Sample Mensurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Munitoring Frequency	Sampling Equipment Used	Samples Fittered (IJF/N)
Water Level Relative to Feet, NGVD	82545		Feet	Repon			Quarterly		
Nitrate, (as N)	00620		mg/L	Report			Quicterly		<u> </u>
Solids, Total Dissolved(TDS)	70295		mg/l, _	Report			Quarterly		
Chloride (as Cl)	00940	,,,_,,,	n <u>z/l,</u>	Report			Quarterly		l
Coliform, Fecal	74055		#/100mL	Report			Querterly		<b></b>
рН	00400	·	SU	Report			Quarterly		
Turbidity, Lab - Nepholometric	R2079		ทาบ	Керия	<u></u>		Quarterly	<u> </u>	<u> </u>
Added; November 2009**	<u> </u>			· · · · · · · · · · · · · · · · · · ·					, . <del></del>
Sodium	00923		ing/L	Report			Quarterly		L
Tribalomediane, Total	820 <b>8</b> 0		0 <u>2/L</u>	Report	<u> </u>		Quarterly		ļ <u> </u>
	<u> </u>			ļ					ļ
	<b>↓</b>								ļ. <u></u>
	<b> </b>								
	<b>↓</b>		_	L				ļ <u> </u>	L
									L

^{**} Based on the clevated concentrations of these parameters in the effluent samples, parameters Sodium and Total Trihakomethane (TTHMs) have been added to the current Groundwater Monituring Plan (GWMP) CUMMENTS AND EXPLANATION
11/20/2009

Quarterly

County Facility Name Permit Number:  Monitoring Period Was the well purged before sampling?	Orange Co Wedgefield FLA010900 From	WWTF GMS	# 30481403	712		Pernit Builder MW ID- Well Type Description  Date Sample Obtained: Time Sample Obtained,	MWC-6 Complianc Well Name Golf Cour: WAFR # 6 GMS# 304	: MW-6 : 001	
Parseneter	Permit Builder PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Stonitoring Frequency	Sampling Equipment Used	Sample: Filtered (17
Water Level Relative to Feet, NGVD	82545		Feet	Report			Quarterly	_	
Nitrate, (as N)	00620		mg/L	10			Quarterly		]
Solids, Total Dissolved; (DS)	70295		ω <u>ε/1.</u>	500			Quarterly		
Chloride (as CI)	00940		n10/1.	250			Quarterly		
Coliform, Fecal	74055		#/100m <u>L</u>				Quarterly		

Turbidity, Lah - Nepholometric 82079 NIU Added; November 2009** 00923 mg/l. 160 Quarterly I rehalomethane, Total 820R0 ug/L ķ0 Quarterly

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^{**} Dased on the elevated concentrations of these parameters in the effluent samples, parameters Socium and Total Tribalomethane (TTHMs) have been added to the current Groundwater Monitoring Plan (GWMP). COMMENTS AND EXPLANATION:
11739/2009

l'arameter	Permit Builder PARM Code	Sample Measurement (Analysis Results)	1)mita	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment distd	Samples Filtered (1./F/N)
Water Level Relative to Feet, NGVI)	82545		Feet	Report			Quarterly		
Nitrate, (as N)	00620		mg/L	Report			Quarterly		
Solids, Total Dissolved(TDS)	70295		mg/t.	Report			Quarterly		
Chloride (as Cl)	00940		mg/L	Report			Quarterly		
Coliform, Fecal	74055		#/100m1.	Report			Quarterly		<u> </u>
ott	00400		รบ	Report		<u></u>	Quarterly	<u></u>	
Furbidity, Lab - Nepholometric	82079		NTU _	Report			Quarterly	J	J
Added: November 2009**		_ <del></del> _		<u> </u>	, <u></u>	,			
Sodium	00921		treg/L	Report		<u> </u>	Quarterly		
Tribalomethane, Total	82080		ug/l.	Report			Quarterly		
	<u> </u>								

^{**} Based on the elevated concentrations of these parameters in the effluent samples, parameters Sodium and Total Tribalomethane (TTHMs) have been added to the current Groundwater Monitoring Plan (GWMP). COMMENTS AND EXPLANATION: 11/20/2009

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Facility Name: Pennil Number:

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Orange County Wedgefield WWTF FLA010900

GMS# 3048P03712

Pennit Builder MW ID Well Type. Description

MWC-1 Compliance Well Name MW-1 On-Site Irrigation WAFR # 32995

Date Sample Obtained: Time Sample Obtained: From. ___ Yes __ No Monitoring Period
Was the well purged before sampling?

Parameter	Permit Builder PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Montenring Frequency	Sampling Equipment Used	Samples Filtered (L/F/N
fater Level Relative to Feet, NGVD	82545		Feet	Report			Quarterly		
itrate, (as N)	09620		my/L	10			Quarterly	·	
olids Total Dissolved(TDS)	70295		mg/L	SUU	l		Quarterly	ļ. ———	}
	00940		n₁g/L.	250		L	Quarterly		ļ
hloride (as CI) oliform, Fecal	74055		#/100mL	4			Quarterly	<u> </u>	
H	00400		şu	6.5-8.5	J	ļ	Quarterly	<b></b>	
urbidity, Lab - Nepholometric	82079		NIU	Report	1		Quarterly	J	J
dded: Navember 2009**				, <del></del>	· ———	1	1	1	
odium	00923		rng/L	160	ļ <u></u>		Quarterly	<b>┤</b>	1
Tribatomethane, Total	82080		ug/L	80	<del> </del>		Quarterly	<del> </del>	
	<del> </del>		ļ -—-		<del> </del>		1		
	1 -		1 —						
	-		<b>1</b>						
				7		have been added to the cu			

** Based on the clevated concentrations of these parameters in the effluent samples, parameters Sodium and Total Tributomethane (TTHMs) have been added to the current Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION:
11/20/2009

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County. Facility Name. Petinit Number.	Orange Co Wedgefield FLA010900	gefield WWTF				Permit Builder MW (f) Well Type Description:	MWC-2 Compliance Well Name MW-2 On-Site Irrigation WAFR # 32996				
Monitoring Period Was the well purged before sampling?	From: Ÿes	No Tu				Date Sample Obtained: Time Sample Obtained.					
Parameter	Permit Buitder PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Fillered (L/F/N)		
Water Level Relative to Feet, NGVD	82545		Feet	Keport			Quarterly				
Natrate, (8: N)	00620		ing/L	10			Quarterly				
Solids, Total Dissolved(TDS)	70295	- <del></del>	mg/L	500			Quarterly				
Chloride (as CI)	00940		_mg/L	250			Quarterly				
Coliforn, Fecal	74055		#/100ml.	_4		İ	Quarterly				
<u>он</u>	00400		SU	65-85		<b></b>	Quarterly				
Turbidity, I ah - Nepholometric	82079		NTU	Report	L	J	Quarterly				
Added; November 2009**	,	<u></u>									
Sodium	00923		nig/L	160		1	Quarterly		[		

** Based on the clevated concentrations of these p AND EXPLANATION: 11/2@2009 ers in the effluent samples, parameters Sodium and Total Tribalomethane (TTHMs) have been added to the current Groundwater Monitoring Plan (GWMP). COMMENTS

DEP Form 62-620 910(10), Effective November 29, 1994

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Lacility Name: Permit Number; Orange County Wedgefield WWTF PLA010900

GMS# 3048P03712

Well Type Description MWC-3 Compliance Well Name MW-3 On-Site Irrigation WAFR # 32997

Monitoring Period From:
Was the well purged before sampling/ Yes ____ No

)

Date Sample Obtained Time Sample Obtained

Parameter	Permil Builder PARM Code	Sample Measurement (Analysis Results)	L'nits	Permit Requirement	Detection Limits	Aunlysis Method	Monitoring Frequency	Sampling Equipment Used	Samples Fillered (L/F/N)
Water Level Relative to Feet, NGVD	82545		Feet	Repost			Chuarterly		
Nitrate, (as N)	00620		nny'L	10			Quarterly		
Solids, Total Dissolved(TDS)	70295		mg/L	500			Quarterly		ļ
Chloride (as Cl)	00940		ing/L	250			Quarterly		
Coliform, Fecal	74055		#/100mt	4			Quarterly		<del> </del>
рН	00409		SU	65-85			Quarterly		ļ. ———
Turhidity, Lab - Nepholometric	<b>#2079</b>		NTU	Report			Quarterly		<u></u>
Added; November 2009**				,	,	, <del>-</del>	·		1 <del></del>
Sodium	00923		rug/l.	160			Quarterly		
Tribalomethane, Total	82080			80		<u></u>	Quarterly		<del></del>
	L.,		<b>↓</b>	ļ. <b>.</b>					<u>-</u>
			ļ <u></u>						
	J		ł	ļ		<u> </u>		·	<del>-</del>
			ļ					<del></del>	<del> </del>
			1				<u></u>		

** Based on the elevated concentrations of these parameters in the effluent samples, parameters Sodium and Total Tribaliumethane (TTHMs) have been added to the current Groundwater Monitoring Plan (GWMP) COMMENTS AND EXPLANATION: 11/20/2009

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		GROUND WA	ATER MO	NITORING	WELL REPOR	RT - PART D		
County, Facility Name. Permit Number.	Orange Co Wedgefield FLA01090	WWTF	GMS# 3048P03712			Permit Builder MW ID: Well Type: Description.	MWP-1 Piezomeler Well Name MV On-Site Irrigat WAFR # 55881	ion
Monitoring Period Was the well purged before sampling?	Frum Yes	No Ter				Date Sample Obtained: Fime Sample Obtained.	==	
l'àrameter	Permit Builder PARM Code	Sample Measurement (Analysis Results)	1) nies	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to Feet, NGVD  I* Month of Quarter	82545		Feet	Report				
Water Level Relative to Feel, NGVD 2 nd Month of Quarter	<b>#2545</b>		Feel	Report				
Water Level Relative to Feet, NGVD 3 rd Month of Quarter	82545		Fect	Report				
							-	
								-
	<del> </del>	-	1 .					

COMMENTS AND EXPLANATION 11/20/2009

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County: actifity Name: Permu Number	Orange County Wedgefield WWTF FLA010900 GMS# 3048P03712				Permit Builder MW ID. Well Type; Description.	MWP-2 Piezometer Well Name MWP-2 On-Site Irrigation WAFR # 55883		
Monitoring Period Was the well purged before sampling?	FromYes	To:	<del></del> ·			Date Sample Obtained: Time Sample Obtained.		
Parameter	Permit Builder PARM Code	Sample Measurement (Analysis Results)	Units	Permit Requirement	Detection Limits	Analysis Method	Sampling Equipment Used	Sumplea Filtered (L/F/N)
Vater Level Relative to Feet, NGVD  Month of Quarter	82545		Feet	Report				
Vater Level Relative to Feet, NGVD  Month of Quarter	H2545		Fect	Report				
Vater Level Relative to Feet, NGVD  Month of Quarter	B2545		Feet	Report				
			_					
			-	-				
	-	<u> </u>	+-	+		<del></del>	<del> </del>	

DEP Form 62-620 910(10), Effective November 29, 1994

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#### INSTRUCTIONS FOR COMPLETING THE WAS LEWATER DISCHARGE MONITORING REPORT

Read these instructions as well as the SUPPLEMENTAL INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT before completing the DMR. Hard copies and/or electron 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 shall be mailed to the address printed on the DMR shall be mailed to the address printed on the DMR.

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 or reclaimed water data. All domestic wastewater 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 raw data are different.

CODE ANC DRY HLD IFS LS MNR	DESCRIPTION/INSTRUCTIONS  Analysis not conducted. Dry Well Fload dissate: Insufficient flow for sampling. Lost sample Monitoring not required this period.		CODE NOD OPS OTR SEF	DESCRIPTIONS  No discharge from/to site. Operations were shutdown so no sample could be taken. Other. Please enter an explanation of why monitoring data were not available. Sampling equipment failure.	
-----------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------	--	----------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--

When reporting analytical results that fall below a laboratory's reported method detection lumits or practical quantification limits, the following instructions should be used

- 1. Results greater than or equal to the PQL shall be reported as the measured quantity.

  2. Results less than the PQL and greater than or equal to the MDL shall be reported as the laboratory's MDL value. These values shall be deemed equal to the MDL, when necessary to calculate an average for that parameter and when determining compliance with permit limits.

  3. Results less than the MDL shall be reported by entering a less than sign ("<") followed by the laboratory's MDL value, e.g. < 0.001. A value of one-half the MDL or one-half the effluent limit, whichever is lower, shall be used for that sample when necessary to calculate an average for that parameter. Values less than the MDL are considered to demonstrate compliance with an effluent limitstion.

#### PART A -DISCHARGE MONITORING REPORT (DMR)

Pair A of the DMR is comprised of one or more sections, each having its own header information. Facility information is preprinted in the header as well as the monitoring group number, whether the limits and monitoring requirements are interim or final, and the required submittal frequency (e.g. monthly, annually, quarterly, etc.). Submit Pair A based on the required reporting frequency in the header and the instructions shown in the permit. The 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 monitoring group number; however, if the monitoring proup includes other monitoring [proup includes other monitoring [proup includes other monitoring place] includes other monitoring period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed. Sample Measurement: Before filling in sample measurements in the rable, cleek to see that the data collected correspond to the limit indicated on the DMR (i.e. interim or final) and that the data correspond to the monitoring group number in the heads. 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 corresponds to the appropriate statistical base code in granted normal numbers. annual 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 (or 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 number of times the incasurement was made in the

space above the shaded area.

space above the shaded area.

Sample Type: The shaded area in this column contain the type of sample ic.g. grab, corriposite, continuous) required by the permit. Enter the actual sample type that was taken in the space above the shaded area.

Signatures: This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

Comment and Explanation of Any Violations: Use this area to explain any exceedances, any upset or by-pass events, or other items which require explanation. If more space is needed, reference all attachments in this area.

#### 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 were collected and analyzed.

Dally Monitoring Results: Transfer all analyseal data from your facility's laboratory or a contract laboratory's data sheets for all day(s) that samples were collected. Record the data in the units indicated. Table 1 in Chapter 62160, 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 onto Part B of the DMR, only the following data
qualifier codes should be used as explanation provinced where appropriate.

CODE	DESCRIPTION/INSTRUCTIONS
	The compound was enalyzed for but not detected.
A	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.

Laboratory analysis was from an unpreserved or emptoperty 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. He additional sheets as necessary.

#### PART D - GROUND WATER MONITORING REPORT

Monitoring Period: Exter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed. Date Sample Obtained: Enter the date the sample was taken. Also, check whether or not the well was purged before sampling.

Time Sample Obtained: Finer 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 analysical methods used.

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

Analysis Method: Indicate the analytical method used. Record the niethod number from Chapter 62-160 or Chapter 62-601, F.A.C. or from other sources.

Sampling Equipment Bed: Indicate the procedure used to collect the sample (e.g. airlift, bucker/builer, centrifugal pump, etc.).

Sampling Equipment Bed: Indicate whether the sample obtained was filtered by laboratory (L), filtered in field (F), or unfiltered 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 the official may be reached in the event there are 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 area.

#### 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 (converted into days). Record in million gallons, per day

(Mitt).
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 hased on two measurements, one made at the start and one made at the end of the discharge period. Measurements are to be made at the upstream gauging station described in the period.
Actual Stream Diffusion Ratio: To calculate the Actual Stream Diffusion Ratio is calculated the Actual Stream Diffusion Ratio is calculated the Actual Stream Diffusion Ratio is not accurate to the nearest 0.1.
No. of Days the SDF Stream Diffusion Ratio: For each day of discharge, compare the minimum of hector (SDF) from the period to the calculated Stream Diffusion Ratio. OP Part B of the DMR, and up the days with an "6" and record the total number of days the Stream Diffusion Ratio. CHOD; Fater the average CHOD, of the reclaimed water discharged during the period shown in duration of discharge

CHOD;: Foter the average CROD; of the reclaimed water discharged during the period shown in duration of discharge.

I.K.Y. Enter the average TKN of the reclaimed water discharged during the period shown in duration of discharge.

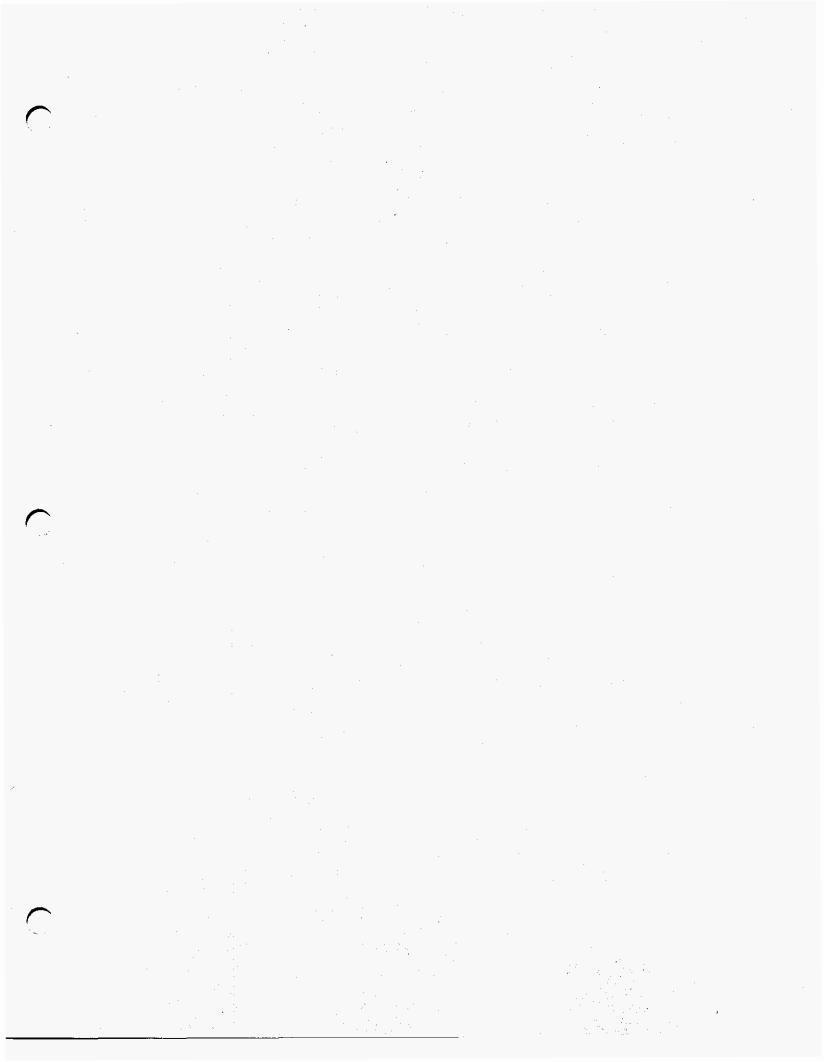
Actual Rainfall: Enter the average TKN of the reclaimed water discharged during the period shown in duration of discharge.

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. The cumulative rainfall to date for this calendar year is the total amount of rain, in soches, 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 cumulative rainfall year is the amount of rain, in index, which fell during the average rainfall year from January through the month for which this DMR contains data.

No. of Days LWWB Activated During Calendar Year: Enter the cumulative number of days that the limited wet weather discharge was activated since January 1 of the current year.

Reason for Discharge: Attach to the DMR a brief explanation of the factors contributing to the need to activate the limited wet weather discharge.





# APPLICATION FOR A SPECIFIC PERMIT TO CONSTRUCT PWS COMPONENTS

See page 4 for instructions.

	General Project Information					
A. 1	Name of Project: Wedgefield Water Treatment Plant Improvements	·				
В. <u>ї</u>	Description of Project and Its Purpose: This project consists of adding two 500 gpm, 1.44 MGD (1,000 gpm total) Magnetic Ion Exchange (MIEX) units, a transfer pump station, a 1,000 gpm high service pump, and a new electrical building. The MIEX units					
	will effectively treat the DOC, hydrogen sulfide, and total hardness in the	row water Th	new electric	ar building.	Ine MILEA un	ILS Abo
	capacity of the plant to 1.152 MGD, with the raw water limiting.	iaw water. III	e proposed	modification	is will increase	tne
	espacity of the plant to 3.152 Web, with the law water minimig.					
	A			·		
_						
-						
C. Į	Does project create a "new system" as described under subsection 62-555.	.525(1), F.A.C	C.? □Yes, a	and a comple	eted copy of Fo	orm
6 D. I	62-555.900(20), New Water System Capacity Development Financial and Location of Project	Managerial C	Operations P	lan, is attach	ied. ⊠No.	
1	County Where Project Located: Orange					
2	2. Description of Project Location: The plant is located on Mansfield Street	et in the Wed	gefield subo	livision.		
		·			····	
3	B. Latitude and Longitude of Each New Treatment Plant and Each New R	law Water So	urce (attach	additional sl	heets if necessa	ary):
	Name of New Treatment Plant or Raw Water Source		atitude		Longitude	*
		•		"N °	,	"W
		•	1	"N o	,	"W
		•	1	"N º	•	"W
		•		"N °	T .	"W
		0	<u> </u>	"N °	- · · · · · · · · · · · · · · · · · · ·	"W
	Estimate of Cost to Construct Project: N/A	<del></del>				
r. E	Estimate of Dates for Starting and Completing Construction of Project: Se	ptember 2007	<u> </u>		- <del></del>	
$G^{-}$	Applicant	<del></del>				
	PWS/Company Name: Wedgefield Utilities, Inc.		DINOTA	<u> </u>	14.000.10	
	PWS Type: S Community Non-Transient Non-Community			ication No.:		
_	Contact Person: Patrick Flynn				Consecutive	
1						
- 1		Contact Pers	on's little: R	egional Dire	ector	
	Contact Person's Mailing Address: 200 Weathersfield Avenue		on's litle: R			
(	Contact Person's Mailing Address: 200 Weathersfield Avenue City: Altamonte Springs	State: FL		Zip Code:	32714	
0	Contact Person's Mailing Address: 200 Weathersfield Avenue City: Altamonte Springs Contact Person's Telephone Number: 4078691919			Zip Code:	32714	
0	Contact Person's Mailing Address: 200 Weathersfield Avenue City: Altamonte Springs Contact Person's Telephone Number: 4078691919 Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com	State: FL Contact Pers		Zip Code:	32714	
0	Contact Person's Mailing Address: 200 Weathersfield Avenue City: Altamonte Springs Contact Person's Telephone Number: 4078691919 Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com This information is required only if the applicant is a public water syste	State: FL Contact Pers		Zip Code:	32714	
н. <u>Р</u>	Contact Person's Mailing Address: 200 Weathersfield Avenue City: Altamonte Springs Contact Person's Telephone Number: 4078691919 Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com This information is required only if the applicant is a public water syste Public Water System (PWS) Supplying Water to Project	State: FL Contact Pers m (PWS).	on's Fax Nu	Zip Code: mber: 40786	32714 596961	
н. Р Т	Contact Person's Mailing Address: 200 Weathersfield Avenue City: Altamonte Springs Contact Person's Telephone Number: 4078691919 Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com  This information is required only if the applicant is a public water syste Public Water System (PWS) Supplying Water to Project PWS Name: Wedgefield WTP	State: FL Contact Pers m (PWS).	on's Fax Nu	Zip Code: mber: 40786	32714 596961 3480149	
H. P	Contact Person's Mailing Address: 200 Weathersfield Avenue City: Altamonte Springs Contact Person's Telephone Number: 4078691919 Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com This information is required only if the applicant is a public water syste Public Water System (PWS) Supplying Water to Project PWS Name: Wedgefield WTP PWS Type:  Community	State: FL Contact Pers m (PWS).	on's Fax Nu	Zip Code: mber: 40786	32714 596961	/e
H. P	Contact Person's Mailing Address: 200 Weathersfield Avenue City: Altamonte Springs Contact Person's Telephone Number: 4078691919 Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com This information is required only if the applicant is a public water syste Public Water System (PWS) Supplying Water to Project PWS Name: Wedgefield WTP PWS Type: Community Non-Transient Non-Community PWS Owner: Wedgefield Utilities, Inc.	State: FL Contact Pers m (PWS).	on's Fax Nu PWS Identif	Zip Code: mber: 40786 ication No.:	32714 596961 3480149	/e
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I. P. II	Contact Person's Mailing Address: 200 Weathersfield Avenue City: Altamonte Springs Contact Person's Telephone Number: 4078691919 Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com This information is required only if the applicant is a public water syste Public Water System (PWS) Supplying Water to Project PWS Name: Wedgefield WTP PWS Type: Community Non-Transient Non-Community PWS Owner: Wedgefield Utilities, Inc. Contact Person: Patrick Flynn Contact Person's Mailing Address: 200 Weathersfield Avenue	State: FL Contact Pers m (PWS).	on's Fax Nu PWS Identif ent Non-Con on's Title: R	Zip Code: mber: 40786 fication No.: nmunity egional Dire	32714 596961 3480149 Consecutive	/e

#### APPLICATION FOR A SPECIFIC PERMIT TO CONSTRUCT PWS COMPONENTS Project Name: Wedgefield Water Treatment Plant Improvements | Applicant: Wedgefield Utilities, Inc. I. Public Water System (PWS) that Will Own Project After It Is Placed into Permanent Operation PWS Name: Wedgefield WTP PWS Identification No.: * 3480149 PWS Type:* □ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive PWS Owner: Wedgefield Utilities, Inc. Contact Person: Patrick Flynn Contact Person's Title: Regional Director Contact Person's Mailing Address: 200 Weathersfield Avenue City: Altamonte Springs State: FL Zip Code: 32714 Contact Person's Telephone Number: 4078691919 Contact Person's Fax Number: 4078696961 Contact Person's E-Mail Address: p.c.flynn@utilitiesinc-usa.com This information is required only if the owner/operator is an existing PWS. J. Professional Engineer(s) or Other Person(s) in Responsible Charge of Designing Project* Company Name: CPH Engineers, Inc. Designer(s): Stephen N. Romano Title(s) of Designer(s): Project Manager Qualifications of Designer(s): ☑ Professional Engineer(s) Licensed in Florida – License Number(s): 57579 Public Officer(s) Employed by State, County, Municipal, or Other Governmental Unit of State ☐ Plumbing Contractor(s) Licensed in Florida – License Number(s):^ Mailing Address of Designer(s): 101 North Woodland Boulevard, Suite 600 City: Deland State: FL Zip Code: 32720 Telephone Number of Designer(s): 3867364142 Fax Number of Designer(s): 3867368412 E-Mail Address(es) of Designer(s): sromano@cphengineers.com Except as noted in paragraphs 62-555.520(3)(a) and (b), F.A.C., projects shall be designed under the responsible charge of one or more professional engineers licensed in Florida. Attach a detailed construction cost estimate showing that the cost to construct this project is \$10,000 or less. ^ Attach documentation showing that this project will be installed by the plumbing contractor(s) designing this project, documentation showing that this project involves a public water system serving a single property and fewer than 250 fixture units, and a detailed construction cost estimate showing that the cost to construct this project is \$50,000 or less. H. Certifications A. Certification by Applicant I am duly authorized to sign this application on behalf of the applicant identified in Part I.G of this application. I certify that, to the best of my knowledge and belief, this project complies with Chapter 62-555, F.A.C., and provides assurance of compliance with Chapter 62-550, F.A.C. I also certify that construction of this project has not begun yet. Patrick Flynn Regional Director Signature and Date Printed or Typed Name Title B. Certification by PWS Supplying Water to Project I am duly authorized to sign this application on behalf of the PWS identified in Part I.H of this application. I certify that said PWS will supply the water necessary to meet the design water demands for this project. I certify that, to the best of my knowledge and belief, said PWS's connection to this project will not cause said PWS to be, or contribute to said PWS being, in noncompliance with Chapter 62-550 or 62-555, F.A.C. I also certify that said PWS has reviewed the preliminary design report or drawings, specifications, and design data for this project and that said PWS considers the connection(s) between this project and said PWS acceptable as designed. Name(s) of Water Treatment Plant(s) to Which this Project Will Be Connected: _

DEP Form 82-555.900(1) Effective August 28, 2003

Signature and Date

♠ Total Maximum Day Flow at Plant(s) as Recorded on Monthly Operating Reports During Past 12 Months, gpd: 836,000

Patrick Flynn

Printed or Typed Name

Regional Director

Title

■ Total Permitted Maximum Day Operating Capacity of Plant(s), gpd: <u>576,000</u>

APPLICATION FOR A SPECIFIC PERM	MIT TO CONSTRUCT PWS COMPONENTS
Project Name: Wedgefield Water Treatment Plant Improvemen	ts Applicant: Wedgefield Utilities, Inc.
C. Certification by PWS that Will Own Project After It Is Placed	d into Permanent Operation
will own this project after it is placed into permanent operation report or drawings, specifications, and design data for this project.	PWS identified in Part I.I of this application. I certify that said PWS on. I also certify that said PWS has reviewed the preliminary design oject and that said PWS considers this project acceptable as designed.  rick Flynn Regional Director
	rick Flynn Regional Director  nted or Typed Name Title
D. Certification by Professional Engineer(s) in Responsible Cha	
	am in responsible charge of preparing the preliminary design report or ertify that, to the best of my knowledge and belief, the design of this assurance of compliance with Chapter 62-550, F.A.C.  Signature, Seal, and Date:
Magnos	
Printed/Typed Name: Stephen N. Romano	Printed/Typed Name:
License Number: 57579 Portion of Engineering Document(s) for Which Responsible	License Number: Portion of Engineering Document(s) for Which Responsible:
Entire Project	Portion of Engineering Document(s) for which Responsible:
Signature, Seal, and Date:	Signature, Seal, and Date:
Printed/Typed Name:	Printed/Tuned Name:
License Number:	Printed/Typed Name: License Number:
Portion of Engineering Document(s) for Which Responsible	Portion of Engineering Document(s) for Which Responsible:

Except as noted in paragraphs 62-555.520(3)(a) and (b), F.A.C., projects shall be designed under the responsible charge of one or more professional engineers (PEs) licensed in Florida. If this project is being designed under the responsible charge of one or more PEs licensed in Florida, Part II.D of this application shall be completed by the PE(s) in responsible charge. If this project is not being designed under the responsible charge of one or more PEs licensed in Florida, Part II.D does not have to be completed.

### APPLICATION FOR A SPECIFIC PERMIT TO CONSTRUCT PWS COMPONENTS

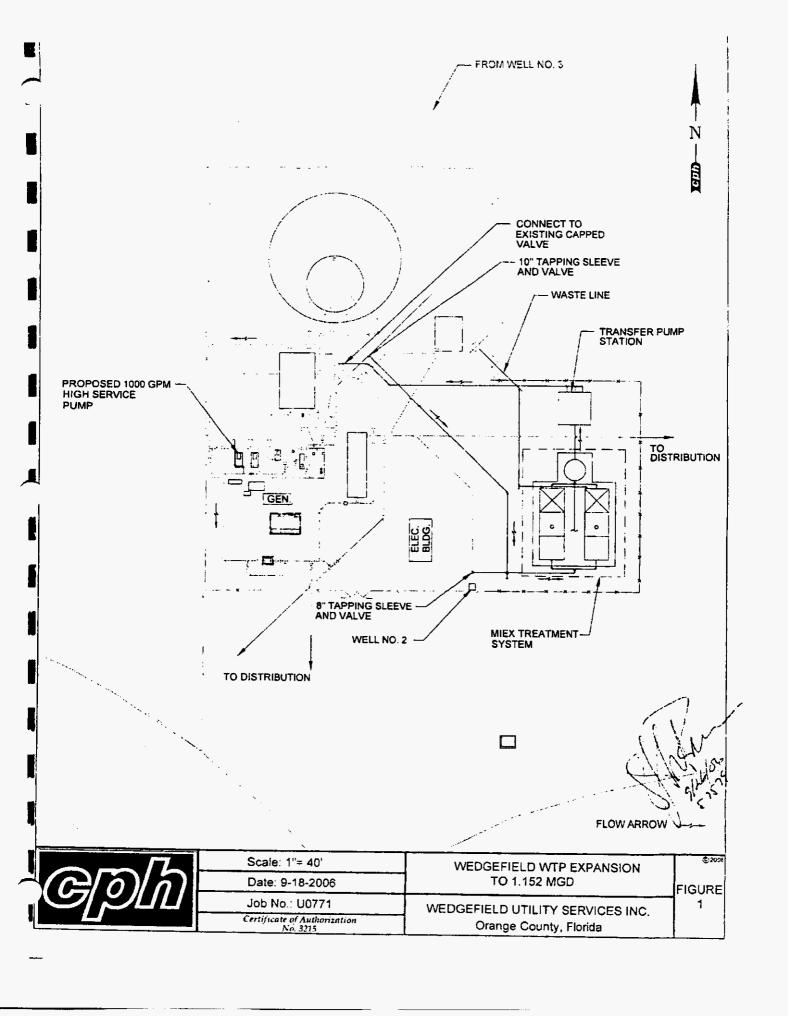
INSTRUCTIONS: This application shall be completed and submitted by persons proposing to construct or alter public water system components unless such proposed construction or alteration is permitted under the Department of Environmental Protection's (DEP's) "General Permit for Construction of Water Main Extensions for Public Water Systems," in which case Form 62-555.900(7) is to be completed and submitted, or under the DEP's "General Permit for Construction of Lead or Copper Corrosion Control, or Iron or Manganese Sequestration, Treatment Facilities for Small or Medium Public Water Systems." in which case Form 62-555.900(18) is to be completed and submitted. Complete and submit one copy of this application to the appropriate DEP District Office or Approved County Health Department (ACHD) along with payment of the proper application processing fee and one copy of the following information:

- either a preliminary design report or drawings, specifications, and design data (the preliminary design report or drawings, specifications, and design data shall contain all pertinent information required under subsection 62-555.520(4), F.A.C.); and
- the Florida Public Service Commission (FPSC) certificate of authorization to provide water service if the project involves construction of a new public water system subject to the jurisdiction of the FPSC.

All information provided on this application shall be typed or printed in ink. Application processing fees are listed in paragraph 62-4.050(4)(n), F.A.C. Checks for application processing fees shall be made payable to the Department of Environmental Protection or to the appropriate ACHD. Preliminary design reports, drawings, specifications, and design data prepared under the responsible charge of one or more professional engineers licensed in Florida shall be signed, sealed, and dated by the professional engineer(s) in responsible charge. NOTE THAT A SEPARATE APPLICATION AND A SEPARATE APPLICATION PROCESSING FEE ARE REQUIRED FOR EACH NON-CONTIGUOUS PROJECT.*

* Non-contiguous projects are projects that are neither interconnected nor located nearby one another (i.e., on the same site, on adjacent streets, or in the same neighborhood).

DEP Form 62-555 900(1) Effective August 28, 2003







101 North Woodland Boulevard Suite 600 DeLand, Florida 32720

> Phone: 386.736.4142 Fax: 386.736.8412

www.cphengineers.com

May 30, 2007

Mr. Richard Lott, P.G., P.E.
Drinking Water Program Manager
Florida Department of Environmental Protection
3319 Maguire Blvd, Suite 232
Orlando, FL 32803

RE:

Wedgefield Water Treatment Plant Re-Rating

CPH Project No: U0771

Dear Mr. Lott:

Wedgefield Utilities, Inc. is proposing to re-rate their water treatment plant capacity from 0.576 MGD to 1.152 MGD. This increase will be accomplished by using the raw water sources as the limiting component. The Utility is currently in the construction process for the addition of the two (2) 500 gpm MIEX units, the addition of a 1,000 gpm high service pump, and all other associated work for the expansion. Attached to this letter is a re-rating report detailing each limiting component, a specific permit application to construct PWS components, and a check for \$6,000.00.

Should you have any questions concerning the proposed re-rating, please do not hesitate to call us. Thank you for your assistance.

Sincerely,

CPH ENGINEERS, INC.

Wade Wood, E.I. Project Manager

Car

Bryan Gongre, Regional Manager Patrick Flynn, Regional Director

WEOVEFIELD WIT EXPANSEN

FILE# 649.6.1

Engineers · Surveyors · Architects (AA26000926) · Planners · Landscape Architects · Environmental Scientists · Construction Management



# APPLICATION FOR A SPECIFIC PERMIT TO CONSTRUCT PWS COMPONENTS

See page 4 for instructions.

	General Project Information					
А. І	Name of Project: Wedgefield Water Treatment Plant Re-Rating	<del></del> -				
В. і	B. Description of Project and Its Purpose: To Re-Rate the limiting component of the Wedgefield Water Treatment Plant				t Plant	
				_	·	
					·	
-						
-			<del></del>			
•					·	
•						
C. 1	Does project creute a "new system" as described under subsection 62-555.	525(1), F.A.	C.? □Yes.	and a comp	leted copy of F	orm
(	62-555.900(20), New Water System Capacity Development Financial and	Managerial	Operations P	lan, is attac	hed. No.	
D. I	Location of Project	•	•	•		
	County Where Project Located: Orange					
3	2. Description of Project Location: The plant is located on Mansfield Stre	et in the We	dgefield sub	division.		
		<del></del>				
			<del></del> -			
		-				·
3	3. Latitude and Longitude of Each New Treatment Plant and Each New R	aw Water So		additional		saгу):
	Name of New Treatment Plant or Raw Water Source		Latitude		Longitude	
		0	<del></del>	"N °		"W
		-	<del></del> -	14		_"W
			<del></del> -	14		"W
			<del>;</del> -	"N "		"W
<b>T</b> 72 1	Entire of Cost to Construct Project, N/A			14		- VV
E. 1	Estimate of Cost to Construct Project: N/A  Estimate of Dates for Starting and Completing Construction of Project: N/A	Δ			·	
1. 1	Estimate of Dates for Starting and Completing Constitution of Froject. 14.	<u> </u>				
$\mathbf{G}$ .	Applicant					
Ŭ.	PWS/Company Name: Wedgefield Utilities, Inc.		PWS Ident	ification No	.:* 3480149	
İ	PWS Type:	☐ Trans			☐ Consecutive	e
Ì	Contact Person: Patrick Flynn		rson's Title:			
-	Contact Person's Mailing Address: 200 Weathersfield Avenue					
[	City: Altamonte Springs	State: FL		Zip Code	: 32714	
	Contact Person's Telephone Number: 4078691919	Contact Pe	rson's Fax N	umber: 407	8696961	
[	Contact Person's E-Mail Address: pcflynn@uiwater.com				<del></del>	
1	<ul> <li>This information is required only if the applicant is a public water syste</li> </ul>	m (PWS).				
<b>H</b> . ]	Public Water System (PWS) Supplying Water to Project		<u></u>			
	PWS Name: Wedgefield WTP		PWS Ident			
	PWS Type: Community Non-Transient Non-Community	Trans	ient Non-Co	nununity	Consecut	live
ŀ	PWS Owner: Wedgefield Utilities, Inc.	G	1- 75'-1	N '	·	
	Contact Person: Patrick Flynn	Contact Pe	rson's Title:	Regional D	rector	
	Contact Person's Mailing Address: 200 Weathersfield Avenue	Ctota: T7	<del></del>	7:- C	de: 22714	
	City: Altamonte Springs Contact Person's Telephone Number: 4078691919	State: FL	rson's Fax N		de: 32714	
ŀ	Contact Person's E-Mail Address: pcflynn@uiwater.com	Contact Pe	ISUN'S PAX N	шпоег: 407	0070701	
L	Comact reison's E-ivian Address, penyingquiwater.com					

APPLICATION FOR A SPECIFIC P	ERMIT TO CO	<b>DNSTRUCT PV</b>	NS COMPON	ENTS _	
Project Name: Wedgefield Water Treatment Plant Re-Rat		nt: Wedgefield Utili			
I. Public Water System (PWS) that Will Own Project After	r It Is Placed into	Permanent Oneratio	n		
PWS Name: Wedgefield WTP					
PWS Type: Community Non-Transient	Non-Community		n-Community	Consecutive	
PWS Owner: Wedgefield Utilities, Inc.	.,		Community	Constant	
Contact Person: Patrick Flynn		Contact Person's T	itle: Regional Dir	ector	
Contact Person's Mailing Address: 200 Weathersfield	Avenue				
City: Altamonte Springs		State: FL	Zip Cod	e: 32714	
Contact Person's Telephone Number: 4078691919		Contact Person's F			
Contact Person's E-Mail Address: pcflynn@uiwater.co					
* This information is required only if the owner/operate					
J. Professional Engineer(s) or Other Person(s) in Responsi	ble Charge of Des	igning Project*			
Company Name: CPH Engineers, Inc.					
Designer(s): Stephen N. Romano		Title(s) of Designe	r(s): Project Man	Ager	
Qualifications of Designer(s):	\$7 1 / S ##	530			
Professional Engineer(s) Licensed in Florida – Lice			B		
☐ Public Officer(s) Employed by State, County, Muni		vernmental Unit of	State'		
Plumbing Contractor(s) Licensed in Florida – Licen		·^^			
Mailing Address of Designer(s): 101 North Woodland City: Deland	Boulevard, Suite		12' 0 1	22520	
Telephone Number of Designer(s): 3867364142		State: FL Fax Number of De		e: 32720	
E-Mail Address(es) of Designer(s): sromano@cphengi	neers com	Fax Number of De	signer(s): 380/30	8412	
Deviati Address(es) of Designer(s), stomatio@epilengi	necrs.com				
* Except as noted in paragraphs 62-555.520(3)(a) and	(b) F.A.C. project	ts shall be designed	under the respon	sible charge of one	
or more professional engineers licensed in Florida.	(0), 2., 2			sione enter go ay one	
[†] Attach a detailed construction cost estimate showing	that the cost to co	nstruct this project i	s \$10,000 or less.		
^ Attach documentation showing that this project will b	e installed by the	olumbing contractor	r(s) designing this	project,	
documentation showing that this project involves a pr	ublic water system	serving a single pro	perty and fewer t	han 250 fixture	
units, and a detailed construction cost estimate show	ing th <mark>at the</mark> cost to	construct this proje	ect is \$50,000 or l	<b>₹\$</b> 5.	
II. Certifications					
A. Certification by Applicant					
l am duly authorized to sign this application on behalf o	feha applicant ida	atified in Daw I C of	Tthis annihostion	Laurificthat to the	
best of my knowledge and belief, this project complies	i the applicant for	SFAC and prov	ides application.	compliance with	
Chapter 62-550, F.A.C. I also certify that construction			ides assurance of	compnance with	
	or and project mas	<u>nor</u> begun yet.			
1 1/10 5/3/07	Patrick Flynn		Regional Direc	tor	
Signature and Date	Printed or Type	Name	Title		
	21-110-01-07-00				
B. Certification by PWS Supplying Water to Project					
I am duly authorized to sign this application on behalf of	f the PWS identifi	ed in Part I.H of this	application. I ce	rtify that said PWS	
will supply the water necessary to meet the design water					
belief, said PWS's connection to this project will not can					
with Chapter 62-550 or 62-555, F.A.C. I also certify the					
specifications, and design data for this project and that s	said PWS consider	s the connection(s)	between this proje	ct and said PWS	
acceptable as designed.					
<ul> <li>Name(s) of Water Treatment Plant(s) to Which this</li> </ul>	Project Will Be C	onnected:			
<ul> <li>Total Permitted Maximum Day Operating Capacity</li> </ul>				- <u> </u>	
• Total Maximum Day Flow at Plant(s) as Recorded on Monthly Operating Reports During Past 12 Months, gpd: 902,000					
			· · · · · · · · · · · · · · · · · · ·		
Detertal Slum 5/3/07	n				
	Patrick Flynn	1.1	Regional Direc	tor	
Signature and Date	Printed or Type	i Name	Title		

## APPLICATION FOR A SPECIFIC PERMIT TO CONSTRUCT PWS COMPONENTS Project Name: Wedgefield Water Treatment Plant Re-Rating Applicant: Wedgefield Utilities, Inc. C. Certification by PWS that Will Own Project After It Is Placed into Permanent Operation I am duly authorized to sign this application on behalf of the PWS identified in Part I.I of this application. I certify that said PWS will own this project after it is placed into permanent operation. I also certify that said PWS has reviewed the preliminary design report or drawings, specifications, and design data for this project and that said PWS considers this project acceptable as designed. Patrick Flynn Regional Director Printed or Typed Name Signature and Date Title D. Certification by Professional Engineer(s) in Responsible Charge of Designing Project* I, the undersigned professional engineer licensed in Florida, am in responsible charge of preparing the preliminary design report or drawings, specifications, and design data for this project. I certify that, to the best of my knowledge and belief, the design of this project complies with Chapter 62-555, F.A.C., and provides assurance of compliance with Chapter 62-550, F.A.C. Signature, Seal, and Date: Signature, Seal, and Date: Printed/Typed Name: Stephen N. Romano Printed/Typed Name: License Number: 57579 License Number: Portion of Engineering Document(s) for Which Responsible: Portion of Engineering Document(s) for Which Responsible: **Entire Project** Signature, Seal, and Date: Signature, Seal, and Date:

Printed/Typed Name:

Portion of Engineering Document(s) for Which Responsible:

License Number:

Printed/Typed Name:

Portion of Engineering Document(s) for Which Responsible:

License Number:

^{*} Except as noted in paragraphs 62-555.520(3)(a) and (b), F.A.C., projects shall be designed under the responsible charge of one or more professional engineers (PEs) licensed in Florida. If this project is being designed under the responsible charge of one or more PEs licensed in Florida, Part II.D of this application shall be completed by the PE(s) in responsible charge. If this project is not being designed under the responsible charge of one or more PEs licensed in Florida, Part II.D does not have to be completed.

#### APPLICATION FOR A SPECIFIC PERMIT TO CONSTRUCT PWS COMPONENTS

INSTRUCTIONS: This application shall be completed and submitted by persons proposing to construct or alter public water system components unless such proposed construction or alteration is permitted under the Department of Environmental Protection's (DEP's) "General Permit for Construction of Water Main Extensions for Public Water Systems," in which case Form 62-555.900(7) is to be completed and submitted, or under the DEP's "General Permit for Construction of Lead or Copper Corrosion Control, or Iron or Manganese Sequestration, Treatment Facilities for Small or Medium Public Water Systems," in which case Form 62-555.900(18) is to be completed and submitted. Complete and submit one copy of this application to the appropriate DEP District Office or Approved County Health Department (ACHD) along with payment of the proper application processing fee and one copy of the following information:

- either a preliminary design report or drawings, specifications, and design data (the preliminary design report or drawings, specifications, and design data shall contain all pertinent information required under subsection 62-555.520(4), F.A.C.); and
- the Florida Public Service Commission (FPSC) certificate of authorization to provide water service if the project involves construction of a new public water system subject to the jurisdiction of the FPSC.

All information provided on this application shall be typed or printed in ink. Application processing fees are listed in paragraph 62-4.050(4)(n), F.A.C. Checks for application processing fees shall be made payable to the Department of Environmental Protection or to the appropriate ACHD. Preliminary design reports, drawings, specifications, and design data prepared under the responsible charge of one or more professional engineers licensed in Florida shall be signed, sealed, and dated by the professional engineer(s) in responsible charge. NOTE THAT A SEPARATE APPLICATION AND A SEPARATE APPLICATION PROCESSING FEE ARE REQUIRED FOR EACH NON-CONTIGUOUS PROJECT.*

* Non-contiguous projects are projects that are neither interconnected nor located nearby one another (i.e., on the same site, on adjacent streets, or in the same neighborhood).

## WEDGEFIELD UTILITIES, INC. WATER SYSTEM

RE-RATING REPORT PWS ID No. 3480149 ORANGE COUNTY, FLORIDA

May 2007

CPH Engineers, Inc.
101 North Woodland Boulevard, Suite 600
DeLand, Florida 32720

Phone: (386) 736-4142 Fax: (386) 736-8412 CPH Job No.: U0771

Andrew States

#### **PURPOSE**

This re-rating report is being prepared to increase the rated capacity of the Wedgefield Water Treatment Plant. The Plant has experienced flows over their current rated capacity recently. Currently the Utility has a construction permit through the Department for the installation of two (2) 500 gpm MIEX units, a transfer pump station, and the addition of a 1,000 gpm high service pump, FDEP Permit No. WC48-0080718-009. The intention of this report is to change the limiting component of the Wedgefield Water Treatment Plant from the existing ion-exchange units (0.576 MGD) to the raw water sources (1.152 MGD).

By Rule it states that the total well capacity with the largest producing well out of operation shall equal at least the design average daily water demand. The Wedgefield Water Treatment Plant contains two (2) raw water sources, Well No. 2 and Well No. 3. Well No. 2 has a capacity of 400 gpm (0.576 MGD), while Well No. 3 has a capacity of 600 gpm (0.864 MGD). Taking the largest well (600 gpm) out of operation leaves only the 400 gpm well. The 400 gpm well can produce an average daily demand of 0.576 MGD. Using a typical FDEP max day peaking factor of 2.0 generates a max day water demand of 1.152 MGD. It is our contention that this is the limiting component of the Facility.

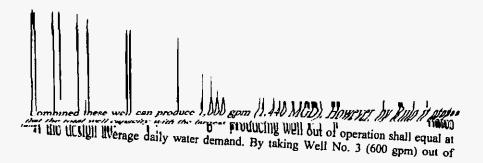
#### **EXISTING CONDITIONS**

Wedgefield Utilities, Inc. owns and operates the Wedgefield Water Treatment Plant located on Mansfield Street in the Wedgefield Subdivision. The Plant operates under PWS Identification Number 3480149. The Plant currently serves approximately 1,560 customers, primarily residential users.

Currently, the Wedgefield Water Treatment Plant has a permitted capcity of 0.576 MGD. The current components of the water treatment plant include raw water sources, aeration, ground staorge, chemical addition, ion-exchange (softening), and high service pumping. When the current construction is completed, the components of the water treatment plant will be raw water sources, magnetic ion-exchange (MIEX), ground stoarge, ion-exchange (softening), chemical addition, and high service pumping.

#### Raw Water Sources

The Wedgefield Water Treatment Plant contains two (2) raw water sources. Both sources are ground water supply wells. Well No. 2 has a total depth of 440 feet with an 8-inch casing. This well has a permitted capacity of 400 gpm (0.576 MGD). Well No. 3 has a total depth of 430 feet and a 10-inch casing. This well has a permitted capacity of 600 gpm (0.864 MGD).



operation, leaves only the 400 gpm well. At 400 gpm the well can produce an average daily water demand of 0.576 MGD. Using a typical FDEP max day peaking factor of 2.0, the Facility can be rated for 1.152 MGD, taking the largest well out of operation.

Table 1: Raw Water Sources

Well Sites	Capacity (gpm)	Capacity (MGD)
2	400	0.576
3 600		0.864
Total		1.440
Total Max Day Out of Operation	with Largest Well on	1.152

#### Magnetic Ion-Exchange

The proposed magnetic ion-exchange (MIEX) units will be constructed under the current FDEP construction permit number WC48-0080718-009. The proposed MIEX unit will have a rated capacity of 1,000 gpm (1.440 MGD). This process will effectively remove the organics found in the raw water. This process will also effectively remove the hydrogen sulfide from the raw water. By effectively removing the organics and the hydroen sulfide from the raw water, the Utility can potentially remove the ammoniation system and the cascade aerator. The abandonment of these two processes is included in the current construction permit WC48-0080718-009.

Table 2: MIEX

Jalt water	Capacity (gpm)	Capacity (MGD)
1	500	0.720
2	500	0.720
Total		1.440

The transfer pump station will receive the treated water from both MIEX units. The treated water will then be pumped through both ion-exchange units for softening treatment. The transfer pump station will contain three (3) 600 gpm pumps at 51 TDH. Taking one pump out of operation, generates a pumping capacity of 1,200 gpm (1.728 MGD), exceeding the treatment capacity of the MIEX units.

#### Ion-Exchange (Softening)

Currently, the Wedgefield Water Treatment Plant utilizes two (2) ion-exchange units for hardness removal. Each vessel has a capacity of 400 gpm each. However, each unit only operates 22.5 hours per day due to the regeneration process for the internal bedding. Basing the treatment capacity on 22.5 hours formulates an ion-exchange capacity of 0.540 MGD each, 1.080 MGD total considering a 100% softened water.

However, the Utility does not use these units to treat (soften) 100 percent of the finished water. The utility utilizes an 80% bypass on these units, increasing the effective capacity

to 5.40 MGD. Furthermore, softening is not a required treatment process by the Department and therefore should not be taken into consideration in determining the capacity of the Plant.

Table 3: Ion-Exchange

Unit .	Capacity (gpm)	Capacity (MGD)
1	400	0.540
2	400	0.540
Total	<u></u>	1.080
Total Including	Bypass	5.400

#### **Ground Storage and Areation**

The Wedgefield Water Treatment Plant contains one (1) ground storage tank with a cascade aerator on top. The ground storage tank is separated into an inner and outer tank. The inner tank has a capacity of 71,000 gallons and the outer tank has a capacity of 279,000 gallons. The modifications proposed in the current construction permit will allow the Utility to utilize the entire volume of 350,000 gallons for finished water storage. A total finished water volume of 350,000 gallons generates a storage capacity of 1.40 MGD.

Capacity = Finished Water Volume (0.350 MG) x 4 = 1.40 MGD

The cascade aerator located on top of the ground storage tank has a capacity of 2,000 gpm, which exceeds the combined pumping capacity of the raw water sources. However, as part of the current construction, the MIEX units should effectively remove the hydrogen sulfide from the raw water, thus making the cascade aerator unnecessary. Nonetheless the Utility will maintain their existing cascade aerator until the MIEX is cleared for service and proves it can remove the hydrogen sulfide to the permitted requirements.

Table 4: Storage and Aeration

TANK No.	VOLUME (MG)	AERATION CAPACITY
1	0.350 (MG)	2,000 (gpm)
TOTAL	1.40 MGD	2.880 MGD

#### High Service Pumping

The Wedgefield Water Treatment Plant contains three (3) high service pumps, 300 gpm, 600 gpm, and 2,000 gpm, generating a total pumping capacity of 2,900 gpm (4.176 MGD). By Rule, the system must be capable of meeting at least the systems max day water demand with the largest pump out of service.

Therefore, under the current construction permit, the Utility is proposing to install a 1,000 gpm high service pump. Taking the largest pump (2,000 gpm) out of operation the Plant

can generate 1,900 gpm of finished water. Using a typical FDEP max day peaking factor of 2.0 generates a permitted max day capacity for high service pumping of 1.368 MGD.

Table 5: High Service Pumps

Pump No.	Capacity (gpm)	Capacity (MGD)		
1	300	0.432		
2	600	0.864		
3	2,000	2.880		
4	1,000	1,440		
Total	3,900	5.616		
Permitted Capacity	1,900	1.368		

#### **CONCLUSION**

The plant capacity was calculated based on FDEP criteria to determine the limiting components. The possible limiting components consist of wells (raw water sources), MIEX, aeration, high service pumps, and throughput plus storage. The plant capacities are calculated according to the following calculations:

Raw Water (MGD) = Well Pumping Rates (gpm) * 1440

Aeration (MGD) = Sum of Aerator Capacities (gpm) * 1440

Throughput plus Storage (MGD) = [((Lesser of Aeration/Well capacity (gpm))*240 minutes) + Storage (gallons)] * 3 /1,000,000

High Service Pumping (MGD) = [(High Service Pumping capacity (gpm) / 2] *1440

As shown in Table 6, the raw water sources are the limiting component at the Wedgefield Water Treatment Plant. Basing the limiting component of the Wedgefield Water Treatment Plant on the raw water capacity generates an average daily water demand of 0.576 MGD and a permitted max day capacity of 1.152 MGD.

Table 6: Wedgefield WTP Limiting Factors

Component	Capacity	Capacity (MGD)		
Raw Water Sources	1,000 gpm	1.440		
¹ Raw Water Sources	400 gpm	1.152		
MIEX	1,000 gpm	1.440		
Aeration	2,000 gpm	2.880		
Storage	0.350 MGD	1.400		
² Throughput plus Storage	1,229	1.770		
³ High Service Pumping	1,900	1.368		

1-Taking the largest well out of operation

2-Throughput plus Storage was calculated using the well capacity and MIEX capacity, both 1,000 gpm

3-Taking the largest pump out of operation



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> Phone: 386.736.4142 Fax: 386.736.8412

www.cphengineers.com

July 23, 2007

Mr. Emmitt Taylor Growth Management Department Orange County 201 S. Rosalind Ave, 1st Floor Orlando, FL 32802

RE: Wedgefield Water Treatment Plant Improvements

CPH Project No: U0771 Permit Number B06905321

Dear Mr. Taylor:

Enclosed is the revision to the previously permitted MIEX Unit at Wedgefield Water Treatment Plant (Permit Number B06905321). Based on the final Manufacturers Shop Drawings, the previously submitted structural drawing (S102) did not correctly depict the overall layout of the concrete slab for the MIEX unit. The layout and the dimensions in S102 did not reflect the concrete slab illustrated in the submitted overall site plan, Sheet 4, which correctly depicted the required concrete slab. Please see the attached revised structural drawing, S102 that correctly illustrates the proposed concrete slab for the MIEX unit. All calculations for impervious area were correctly calculated based upon the overall site plan, and not the previously submitted structural drawing S102, and therefore are still valid.

Should you have any questions concerning the Revised Application, please do not hesitate to call us. Thank you for your assistance.

Sincerely, CPH ENGINEERS, INC.

Erin Reed, P.E. Project Manager

Cc: Bryan Gongre, Regional Manager

Orange County Building Division 201 South Rosalind Avenue Reply To: Post Office Box 2687 - Orlando, Florida 32802-2687 Phone: 407-836-5550 - Inspections ONLY: 407-836-2825



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	WOAN TO AND SUBSCRIBED BEFORE ME	THIS 234 DAY OF 1	uhy	, 20 67			
NOTARY PUBLIC, ORANGE COUNTY, FLORIDA	were fapon	<u>)                                    </u>	NO	TARY PUBLIC , OF	NANGE COUN	TY, FLORIDA	

Para mas información, favor communicarse al Departamento de Building al número 407-836-5550. Gracias.

43-15 (Rev. 5/03)

### **Building Permit Application Information**

Owner's Name Wegdefield Utilities, Inc.	
Owner's Address 200 Weathersfield Avenue, Altam	onte Springs, FL 32714
Fee Simple Titleholder's Name (If other than owner's)	
Fee Simple Titleholder's Address (If other than owner's)	
City State	Zıp Code
Contractor's Name	
Contractor's Address	
CatyState	Ztp Code
Job Name Wedgefield Water Treatment Plant Ex	«paneion
Job Address 0 Mansfield Street	SUITE/UNIT
City Orlando State FL	Zip Code 32833
Bonding Company Name	
Bonding Company Address	
CityState	Zip Code
Architoc/Engineer's Name	
Architect/Engineer's Address	
Mortgage Lendor's Name	
Mortgage Leader's Address	
Application is hereby made to obtain a permit to do the work and installations a issuance of a permit and that all work will be performed to meet the standards of a permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, POO OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurateful construction and zoning.  ##ARNING TO OBTIER: Your failure to record a Notice of Commune count may reasonably thing your lauder or an approxy highes vectoring your Notice of Commune constitution.	Il laws regulating construction in this jurisdiction. I understand that a separate LS, MECIANICAL ETC.  The and that all work will be done in compliance with all applicable laws to the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the c
Jan Din	
Signature Stelly C	Signature
The foregoing tenuments was acknowledged before use this 67 25 61	The foregoing instrument was acknowledged before me this////
by Partick C. Flynn who is personally known to me and who produced	by who is personally known to me and who produced
as idemification and who	as identification and who
did not take an oath.	and not take an outh.
Notary as to Owner	Notary as to Cont.
Commission No. DOYSOZ31	Commission No.
Since of FL County or Servinde	State of FL County of
My Communication expires: 711212007	My Commission expires:
(SLAL) ANN M. RAPONI  NOTARY PUBLIC: STATE OF PLORIDA  COMMISSION # DO450231  EXPIRES 7/12/2009  BONDED THRU 1-888-NOTARY:  Certificate of Co	(SEAL)
Contractor's State Certification or Registration No.	Contractor's Certificate of Competency No.
Application Approved by	
43-15 (Rev. 5/03)	

ORIGINAL PERMIT ISSUED: February 12, 2008 TRANSFER PROCESS DATE: January 21, 2010

PROJECT NAME: Wedgefield Utilities Inc

#### A PERMIT AUTHORIZING:

The District authorizes, as limited by the attached permit conditions, the use of 244.55 million gallons per year (mgy) (0.670 million gallons per day (mgd) average) of groundwater from the Floridan aquifer to supply an estimated population of 5,062 in 2013 with water for household, commercial/industrial, common area landscape irrigation, essential, water utility and unaccounted type uses.

#### LOCATION:

Site:

Wedgefield Utilities Inc

Orange County

Section(s):

1

Township(s):

238

Range(s):

32E

#### ISSUED TO:

Pluris Wedgefield Inc 2600 Commercentre Dr Lake Forest, CA 92630

Permittee agrees to hold and save the St. Johns River Water Management District and its successors harmless from any and all damages, claims, or liabilities which may arise from permit issuance. Said application, including all maps and specifications attached thereto, is by reference made a part hereof.

This permit does not convey to permittee any property rights nor any rights or privileges other than those specified herein, nor relieve the permittee from complying with any law, regulation or requirement affecting the rights of other bodies or agencies. All structures and works installed by permittee hereunder shall remain the property of the permittee.

This permit may be revoked, modified or transferred at any time pursuant to the appropriate provisions of Chapter 373, Florida Statutes and 40C-1, Florida Administrative Code.

#### PERMIT IS CONDITIONED UPON:

See conditions on attached "Exhibit A", dated February 12, 2008

AUTHORIZED BY:

St. Johns River Water Management District Department of Resource Management

Bv:

Harold A. Wilkening I

Director

By:

Kirby B. Green,

Executive Director

# "EXHIBIT A" CONDITIONS FOR ISSUANCE OF PERMIT NUMBER 3302 PLURIS WEDGEFIELD INC DATED FEBRUARY 12, 2008

- District authorized staff, upon proper identification, will have permission to enter, inspect, and observe permitted and related facilities in order to determine compliance with the approved plans, specifications, and conditions of this permit.
- 2. Nothing in this permit should be construed to limit the authority of the St. Johns River Water Management District to declare a water shortage and issue orders pursuant to Section 373.175, Florida Statutes, or to formulate a plan for implementation during periods of water shortage, pursuant to Section 373.246, Florida Statutes. In the event a water shortage is declared by the District Governing Board, the permittee must adhere to the water shortage restrictions as specified by the District, even though the specified water shortage restrictions may be inconsistent with the terms and conditions of this permit.
- 3. Prior to the construction, modification, or abandonment of a well, the permittee must obtain a Water Well Construction Permit from the St. Johns River Water Management District, or the appropriate local government pursuant to Chapter 40C-3, Florida Administrative Code. Construction, modification, or abandonment of a well will require modification of the consumptive use permit when such construction, modification, or abandonment is other than that specified and described on the consumptive use permit application form.
- 4. Leaking or inoperative well casings, valves, or controls must be repaired or replaced as required to eliminate the leak or make the system fully operational.
- 5. Off-site land uses existing at the time of permit application may not be significantly adversely impacted as a result of the consumptive use. If unanticipated significant adverse impacts occur, the District shall revoke the permit in whole or in part to curtail or abate the adverse impacts, unless the impacts can be mitigated by the permittee.
- 6. The District must be notified, in writing, within 30 days of any sale, conveyance, or other transfer of a well or facility from which the permitted consumptive use is made or with in 30 days of any transfer of ownership or control of the real property at which the permitted consumptive use is located. All transfers of ownership or transfers of permits are subject to the provisions of section 40C-1.612.
- 7. A District issued identification tag shall be prominently displayed at each withdrawal site by permanently affixing such tag to the pump, headgate, valve, or other withdrawal facility as provided by Section 40C-2.401, Florida Administrative Code. Permittee shall notify the District in the event that a replacement tag is needed.
- 8. If the permittee does not serve a new projected demand located within the service area upon which the annual allocation was calculated, the annual allocation will be subject to modification by the District.
- Irrigation of agricultural crops is prohibited between the hours of 10:00 a.m. and 4:00 p.m., except as follows:
  - (a) Irrigation using a micro-irrigation system is allowed anytime.
  - (b) The use of reclaimed water for irrigation is allowed anytime provided appropriate signs are placed on the property to inform the general public and District enforcement personnel of such use. Such signs must be in accordance with local restrictions.

- (c) The use of recycled water from wet detention treatment ponds to irrigate agricultural crops is allowed anytime provided the ponds are not augmented from any ground or offsite surface water sources.
- (d) Irrigation of, or in preparation for planting, new agricultural crops is allowed any time of day for one SO day period provided irrigation is limited to the amount necessary for crop establishment.
- (e) Chemigation and fertigation are allowed at any time of day one time per week, and anytime during the normal 4:00 p.m. to 10:00 a.m. irrigation hours.
- (f) Watering in of chemicals, including insecticides, pesticides, fertilizers, fungicides, and herbicides when required by law, the manufacturer or best management practices is allowed anytime within 24 hours of application.
- (g) Irrigation systems may be operated anytime for maintenance and repair purposes not to exceed ten minutes per hour per zone.
- (h) Irrigation of agricultural crops by seepage system which regulate off-site discharges through the use of water control structures is allowed anytime, provided the discharge does not overtop the control structure by more than one-half inch, the structure is well maintained, and there is no discharge between 1:00 p.m. and 7:00 p.m. unless associated with a storm event.
- (i) The use of water to protect agricultural crops from frost or freeze damage is allowed when freezing temperatures or frost are predicted by an official weather forecasting service.
- (j) The use of water to protect agricultural crops from heat stress damage is allowed anytime, provided the watering does not exceed ten minutes per hour per zone or one twenty minute period per day, whichever is applicable.
- (k) Irrigation of agricultural crops by traveling volume guns which require manual repositioning is allowed anytime.
- 10. The permittee shall meter all service connections.
- 11. All submittals made to demonstrate compliance with this permit must have the CUP number 3302 clearly labeled on the submittal.
- 12. This permit will expire on February 12, 2013.
- 13. The maximum annual ground water withdrawals from the Floridan aquifer system from Well 2 (District GRS ID 19120), Well 3 (District GRS ID 19121) and Well 4 (District GRS ID 39800) for household, commercial/industrial, common area landscape irrigation, essential, water utility, and unaccounted for type uses must not exceed: 198.56 million gallons (0.544 million gallons per day average) in 2007, 206.23 million gallons (0.565 million gallons per day average) in 2008, 213.89 million gallons (0.586 million gallons per day average) in 2010, 229.22 million gallons (0.628 million gallons per day average) in 2011, 236.89 million gallons (0.649 million gallons per day average) in 2012, and 244.55 million gallons (0.670 million gallons per day average) in 2013.
- 14. The permittee must maintain all flow meters. In case of failure or breakdown of any meter, the District must be notified in writing within 5 days of its discovery. A defective meter must be repaired or replaced within 30 days of its discovery.
- 15. Well 2 (District GRS ID 19120) and Well 3 (District GRS ID 19121), as listed on the application, must continue to use in-line totalizing flow meters to monitor water use. These flow meters must maintain 95% accuracy, be verifiable and be installed according to the manufacturer's specifications.

- 16. Well 4 (District GRS ID 39800), as listed on the application shall be equipped with in-line totalizing flow meter prior to use. The flow meter must maintain 95% accuracy, be verifiable and be installed according to the manufacturer's specifications.
- 17. Within 30 days of determining if the currently inactive Well 4 (District ID 39800) will be utilized, the applicant must provide written notification to the District stating future use intentions. If Well 4 (District GRS ID 39800) is found to be of no use to the applicant, the well must be properly plugged and abandoned conforming to the requirements under Rule 40C-3, F.A.C.
- 18. Legal uses of water at the time of the permit application may not be interfered with as a result of the consumptive use. If interference occurs, the District may revoke the permit in whole or in part to abate the interference unless otherwise mitigated by the permittee. In those cases, where other permit holders are identified by the District as also contributing to the adverse impact, the permittee may choose to mitigate in a cooperative effort with these permittees. The permittee must submit a mitigation plan to the District for approval prior to implementing such mitigation.
- 19. Documentation of proper meter installation (photograph and manufacturer specifications) all meters shall be provided to the District within 30 days of meter installation.
- 20. The permittee must have the flowmeters checked for accuracy every 3 years within 30 days of the anniversary date of permit issuance, and recalibrated if the difference between the actual flow and the meter reading is greater than 5%. District Form No. EN-51 must be submitted to the District within 10 days of the inspection/calibration.
- 21. Total withdrawals from Well 2 (District GRS ID 19120), Well 3 (District GRS ID 19121) and Well 4 (District GRS ID 39800), as listed on the application, must be recorded continuously, totaled monthly, and reported to the District at least every six months from the initiation of the monitoring using Form EN-50. The reporting dates each year will be as follows for the duration of the permit:

Reporting Period F
January - June
July - December

Report Due Date

July 31 January 31

- 22. The permittee must conduct a detailed water audit for calendar years 2009 and 2012 and submit it to the District by February 1 5th of the following year. All water uses given in the audit must be for the previous calendar year and documentation provided on how the amounts were metered or determined. If the water audit shows that the system losses and unaccounted for water utility uses exceed 10%, a leak detection and repair program must be implemented.
- 23. The permittee must continue to implement the updated Water Conservation Plan submitted to the District on April 6, 2007, in accordance with the schedules contained therein. An annual report must be submitted to the District no later than February 15th of each year for the duration of the permit that summarizes the specific steps performed to encourage water conservation during the previous calendar year as documented in the Water Conservation Plan.
- 24. If, in any year, the actual volume of water withdrawn by the permittee equals 95 percent or more of the amount of water allocated for use by this permit, then the permittee shall submit a report to the District that explains why the withdrawal of water by the permittee equals 95 percent or more of the amount allocated for in this permit. The report shall evaluate the effect of the following on the volume of water withdrawn by the permittee:

- a) Climatic shortfalls (drought);
- b) Greater than anticipated growth in the permittee's service area:
- c) Unanticipated expansion of permittee's service area;
- d) Inefficient usage within the service area;
- e) Other factors that account for the withdrawal volume equaling 95 percent or more of the allocation.

The report must include a breakdown of the population currently being served by the permittee, an updated projection of anticipated population that will be served for the following year, an evaluation as to whether the permittee anticipates whether it will be able to meet the water needs of the revised projected population without violating the allocations set forth in this permit, and a corrective action plan setting actions that the permittee intends to take if the evaluation indicates that allocations will be exceeded during the following year. The report must be submitted to the District by February 15th of the year following the year wherein the permittee experienced withdrawals of water that equals 95 percent or more of the amount of water allocated for use by this permit.

- 25. If unanticipated interference to an existing legal use has resulted due to the proposed withdrawal of water, the District may revoke the permit in part or in whole to curtail or abate the interference unless the interference can be mitigated by the permittee. Mitigation may include installation of a new pump or motor, providing new electrical wiring, connection with the existing water supply system or other appropriate measures.
- 26. All available lower quality sources of water including reclaimed water, surface water and storm water must be distributed for use, or used by the utility in place of higher quality water sources when deemed feasible pursuant to District rules and applicable state law.
- 27. The permittee shall implement the reuse of reclaimed water to the maximum extent when technically, economically, and environmentally feasible. The goal shall be to maximize the direct use of all available reclaimed water to meet the irrigation needs of customers within its service area.
- 28. The permittee shall submit an annual reuse report to the District by February 28th of each year that demonstrates compliance with the requirements of this permit condition during the previous calendar year. The report and supplemental information shall include the following:
  - a) Description of the activities that have occurred during the previous year to further implement the reuse of reclaimed water;
  - b) Description of the status of all the permittee's reuse projects; and
  - c) Total quantity of reclaimed water flows generated and the amount distributed by the permittee, quantity of reclaimed water provided to customers or other entities for use in meeting irrigation demands, acreage irrigated with reclaimed water, and quantity of reclaimed water used to recharge the aquifer.
- 29. No later than April 9, 2009, permittee shall identify viable, potential water supply partners including those that could provide alternative water supplies or partner with the permittee in the development of alternative water supplies. In addition, permittee shall identify potential water supply projects that could be implemented with these partners to secure the quantities of water necessary to meet permittees projected demands through 2025 without unacceptable impacts to water resources and related natural systems. Permittee shall contact these potential partners to determine the viability of developing partnership agreements with them for the identified potential water supply projects. A written description of the potential partners and projects along with a description of the contacts between permittee and the potential partners and the viability of the development of partnership agreements shall be submitted to the District also no later than April 9, 2009.

The report shall be submitted electronically via email to the District at compliancesupport@sjrwmd.com. The report submitted must contain the permit number and condition number in the subject line.

- 30. No later than April 9, 2010, permittee shall prepare and submit to the District for review, a comprehensive written report of an evaluation of the technologic, economic, and environmental feasibility of implementing the identified viable projects and partnerships. The evaluations reported shall be performed to acceptable professional standards.
- 31. No later than October 9, 2010, permittee shall identify the project(s) and partnership(s) that it proposes to implement to secure the quantities of water necessary to meet permittee's projected demands through 2025 without unacceptable impacts to water resources and related natural systems.
- 32. No later than April 9, 2011, permittee shall provide the District with firm evidence that it has developed the necessary partnership agreement(s) for implementation of the project(s) of choice.
- 33. No later than October 9, 2011, permittee shall have scheduled a pre-application conference with District staff to discuss the development of a consumptive use permit application for the identified project(s).
- 34. No later than October 9, 2012, permittee and/or its partner(s) shall submit a consumptive use permit application for implementation of the identified project(s).
- 35. The permittee¿s consumptive use shall not adversely impact wetlands, lakes, and spring flows or contribute to a violation of minimum flows and levels adopted in Chapter 40C-8, F.A.C., except as authorized by a SJRWMD-approved minimum flow or level (MFL) recovery strategy. If unanticipated significant adverse impacts occur, the SJRWMD shall revoke the permit in whole or in part to curtail or abate the adverse impacts, unless the impacts are mitigated by the permittee pursuant to a District-approved plan.
- 36. The permittee must collect and have analyzed a water sample from Floridan aquifer Well 2 (District ID 19120) in May and October of each year for the permit duration. Each sample must be analyzed for the following:

Field temperature

Sodium

Field pH

Sulfate Total Iron

Bicarbonate

Total Alkalinity

Calcium Carbonate

**Total Dissolved Solids** 

Chloride

Total Hardness (by calculation)

Magnesium

Specific Conductance

Potassium

#### Sample Collection

Samples must be collected in accordance with the Florida Department of Environmental Protection's (FDEP) standard operating procedures (SOP), DEP-SOP-001/01, DEP Quality Assurance Rule, 62-1 60, F.A.C.

Prior to sample collection a minimum of 3-5 casing volumes must be removed from each well. The well must be purged in accordance with DEP-SOP-001/01 and well purging must be documented using the Groundwater Sampling Log form found in the referenced FDEP SOP. Samples must be stored on ice immediately after collection, and remain on ice until received by the laboratory. It is recommended that sample duplicates be taken to allow for laboratory errors or data loss and these samples be stored by the laboratory

for a minimum of 60 days to ensure backup sample availability should re-analyses be required.

#### Quality Assurance

All water quality analyses must be performed by a laboratory certified by the Florida Department of Health (FDOH) and the National Environmental Laboratory Accreditation Conference (NELAC). All laboratory analyses must be by methods for which the laboratory has FDOH certification. All laboratory analyses must be completed within EPA holding times. If the data is lost or a laboratory error occurs and the EPA holding time for the analysis has expired, the Permittee must resample the well within 15 days of notification from the laboratory that a loss or laboratory error has occurred. With the exception of pH, laboratory analyses utilizing selective ion electrodes are not acceptable due to the inadequate sensitivity of these methods. Analyses utilizing test kits typically used for field screening (e.g., Hach and LaMotte) are also not acceptable for the same reason.

All major ion analyses must be checked for anion-cation balance and should balance within 5%. If the anion-cation balance does not balance within 5%, the permittee must review the data and include in the report submitted to the District a discussion of the cause or explanation of the imbalance.

#### Reports

A report must be submitted to the District with in 30 days of receipt of data analysis from the laboratory to include:

- a) Well sampling log
- b) Chain of custody forms
- c) Data report in approved format

All data must be submitted to the District in a District approved electronic format consistent with FDOH and NELAC laboratory reporting requirements.

37. If the District determines that unacceptable saline water intrusion or salt-water interface migration is occurring as a result of the withdrawals authorized by this permit, the District shall revoke the permit in whole or in part to curtail or abate the saline water intrusion.



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

January 21, 2010

Maurice W Gallarda Pluris Wedgefield Inc 2600 Commercentre Dr Lake Forest, CA 92630

SUBJECT:

Consumptive Use Permit Number 3302

Wedgefield Utilities Inc.

Dear Sir/Madam:

Enclosed is your permit as authorized by the Executive Director of St. Johns River Water Management District on February 12, 2008.

The District has received a copy of the Warranty Deed naming Pluris Wedgefield, inc as the owner of the parcel of property formerly owned by Wedgefield Utilities Inc.

The above referenced permit is hereby transferred to Pluris Wedgefield Inc as the new permit holder, you are required to comply with all the conditions as noted in the permit. If you have any questions concerning the conditions of your permit, please contact James Lemine, Hydrologist IV, 407-659-5912.

Permit issuance does not relieve you from the responsibility of obtaining permits from any federal, state and/or local agencies asserting concurrent jurisdiction over this work.

The enclosed permit is a legal document and should be kept with your other important records. Please read the permit and conditions carefully since the referenced conditions may require submittal of additional information. All information submitted as compliance with permit conditions must be submitted to the nearest District Service Center and should include the above referenced permit number.

Sincerely,

Robert Presley

Robert Presley, Director Division of Regulatory Information Management

Enclosures: Permit, Conditions for Issuance, Compliance Forms, Map, Well Tags

cc: District Permit File

- GOVERNING BOARD -

Susan N. Hughes, CHARMAN

W. Loonard Wood, vice CHARWAII Horsey "Herky" Huffman, Secretive Hens G. Tanzler III, Theyougan

Douglas C. Bournique VERO READIA

Michael Ertel OVIEDO

Maryam H. Ghyabi CÂVIONO BEACH

Richard G. Harnann

Acon N. Jumper

**Docket No.: 120152-WS** 

**Orange County** 

25-30.440 (7) NOTICES

Pluris Wedgefield, Inc. acquired the assets at the end of October, 2009. Pluris Wedgefield, Inc., does not have any notices prior to its ownership. Pluris Wedgefield, Inc., is providing notices covering the years 2010, 2011 and 2012.

Test Year Ended December 31, 2011



## 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

September 14, 2010

PLURIS WEDGEFIELD INC 2600 COMMERCENTRE DRIVE LAKE FOREST CA 92630 OCD-C-WW-10-0656

**ATTENTION** 

MAURICE W GALLARDA PRESIDENT

> Orange County - DW Wedgefield WWTF Wastewater Facility - Permit No. FLA010900 Noncompliance Letter

Dear Mr. Gallarda:

On June 3, 2010, Department personnel conducted a routine inspection of the above-referenced facility. In addition, Reconnaissance Inspections (RIs) were conducted on July 19, 2010 and August 18, 2010. Copies of the inspection reports are attached for your review. Please note the ground water items listed below which need to be addressed:

- Ground water elevations were not reported for well MW-1R for the fourth quarter of 2009 and first quarter of 2010. Please provide these ground water elevations or the reason for this data being unavailable.
- The ground water monitoring report for the first quarter of 2010 was not on the new forms from the new permit issued on January 29, 2010. The ground water samples were not analyzed for the fourth quarter of 2009 and first quarter of 2010 for the new parameters of sodium and total trihalomethanes. All future submittals shall contain these items.

The Department requests a written response addressing the items listed above within 14 days of 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 accordance with Section 120.57(5), Florida Statutes. Ground water questions should be directed to Marsha Johnson at (407) 893-3308, Ext. 2275. Please direct any other questions to William Hesser at (407) 893-3313, or via e-mail: William.Hesser@dep.state.fl.us.

Sincerely

Gary P. Miller Program Manager

Wastewater Compliance/Enforcement

San f. Miller

GM/wh/ar

Enclosures: Inspection Reports

Orange County Environmental Protection Division, <u>michelle.narvaez@ocfl.net</u>
Anil Desai, Program Manager, Ground Water Section, <u>anil.desai@dep.state.fl.us</u>
Roger Holsapple, Lead Operator, <u>rholsapple@utilitypartnersllc.com</u>

"More Protection, Less Process"
www.dep.state.fl.us

#### FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

## WASTEWATER COMPLIANCE INSPECTION REPORT

@ = Optional FACILITY AND INSPECTION INFORMATION County Name and Physical Location of Facility WAFR ID: Entry Date/Time 6/3/2010 7:51:00 AM FLA010900 Orange Pluris Wedgefield, Inc. @ Exit Date/Time Рьопе 3100 Bancroft Blvd Orlando, FL 32833 - 4011 (949) 454-7104 6/3/2010 10:51:00 AM Name(s) of Field Representatives(s) Title Email Phone Name and Address of Permittee or Designated Representative Title @ Operator Certification # (949) 454-7104 Maurice W Gallarda President 2600 Commercecentre Drive Lake Forest, FL 92630 Inspection Type C @ Sample ID#: E I Samples Taken(Y/N): N Samples Split (Y/N): N X Domestic @ Page Industrial Were Photos Taken(Y/N): Y @ Log book Volume : eIP 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 "♦" EFFLUENT/DISPOSAL PERMITS/ORDERS SELF MONITORING PROGRAM FACILITY OPERATIONS IC NE 3. Laboratory IC 6. Facility Site Review NE 9. ◆Effluent Quality 1. 

Permit NA IC 4. Sampling IC 7. Flow Measurement IC 10. *Effluent Disposal 2. 

Compliance Schedules IC 5. ◆ Records & Reports 8. ♦Operation & IC 11. Residuals/Sludge Maintenance NA 13. Other: NE 12. Groundwater Facility and/or Order Compliance X In-Compliance Out-Of-Compliance _ Significant-Out-Of-Compliance Recommended Actions: None Name(s) and Signature(s) of Inspector(s) District Office/Phone Number White Central District (407) 893-3313 August 25, 2010 William Hesser @ Signature of Reviewer District Office/Phone Number September 3, 2010 Central District (407) 893-3313 David Smileta David Smicherko

#### INSPECTION SUMMARY

Facility Name: Pluris Wedgefield, Inc.

Facility ID: FLA010900 Inspection Type: CEI

Date: 6/3/2010 10:51:00 AM

#### **FACILITY BACKGROUND:**

Address: 3100 Bancroft Blvd, Orlando, FL 32833 - 4011, Orange County

Permit Information: Wastewater Permit issued: 1/29/2010, and expires: 1/28/2015

Treatment Summary: Twin Contact Stabilization Ring Steel Stp's, 2 Filters w/Eff to Golf Course

Permitted Capacity: 0.368 MGD

#### 1. Permit: IN COMPLIANCE

1.1 Observation: A copy of the permit was on-site and available to plant personnel. A new permit was issued for this facility on January 29, 2010. A letter transferring ownership from Wedgefield Utilities, Inc. to Pluris Wedgefield, Inc. on January 29, 2010.

#### 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: IN COMPLIANCE

- 4.1 Observation: Please see specific comments
  - Sample points are appropriate, and are as described in the permit.
  - Effluent is sampled via an ISCO 3710 automatic sampler set to pull eight-hour, flow-proportioned samples. The sampler
    was not operating at the time of the inspection. Aliquots are meeting the required 100 mL minimum volume
    requirement. The effluent sampler was 2.0 degrees C at the time of the inspection.
  - Inline instruments are checked daily against field instruments. All data is appropriately logged.
  - The calibration of the field turbidity meter is checked daily. The standards are verified quarterly by the contract laboratory. All data is appropriately logged.
  - The calibration of the field residual chlorine meter is checked daily with gel standards. Gel standards are verified quarterly against primary standards by the contract laboratory. All data is appropriately logged.
  - The field pH meter is calibrated daily; buffers (4.0, 7.0, 10.0) are within appropriate use dates. All data is appropriately logged.
  - The sample refrigerator was 6.0 degrees C at the time of the inspection. All compliance thermometers are checked daily
    and the results are logged.
  - Temperature measurement devices are routinely checked against a (NIST) certified thermometer.
  - Alarm set points for diversion from reuse are as described in the current Operating Protocol.

#### 5. Records and Reports: IN COMPLIANCE

- 5.1 Observation: Please see specific comments
  - A bound logbook with pre-numbered pages was on-site and contained excellent entries.
  - Facility operation and maintenance manuals were on-site and current.
  - Sludge hauling records are retained on-site.
  - Operator certifications were on-site for Roger Holsapple C8863; and Paul <u>Tzareff C16046</u>.
  - Operations and Maintenance manuals were on-site.

#### INSPECTION FINDINGS

- Effluent quality data is maintained on-site for at least three years.
- Current laboratory certification on-site for Tri Tech Laboratories (E83294).
- The most recent pathogen monitoring report was submitted in April, 2005.
- The most recent Effluent Analysis Report was submitted on August 25, 2010 for the year ending December 31, 2009 (no new non-domestic dischargers added).
- The most recent Annual Reuse Report was submitted on December 17, 2009 for the period ending September 30, 2009.
- Spills and malfunctions have been reported properly.

#### 6. Facility Site Review: IN COMPLIANCE

- 6.1 Observation: General The facility grounds were secured properly.
- 6.2 Observation: General The facility grounds were clean and well maintained.
- 6.3 Observation: Backflow Prevention A reduced pressure zone backflow prevention device was in place on the potable water supply line.
- 6.4 Observation: AerationBasins/Act.Sludge The contents in the aeration chambers appeared to be well mixed.
- 6.5 Observation: AlternatePower An alternative power source is available at the WWTF. The on-site generator is exercised weekly, and records of the tests are retained on-site.
- 6.9 <u>Observation</u>: Blowers/Motors The blowers were operational at the time of the inspection. Blowers appeared well-maintained.
- 6.10 Observation: Clarifiers Weirs appear clean and level. Some floating scum present.
- 6.11 Observation: Digesters The tank contents in the aerobic digester were well mixed. No odors observed.
- 6.12 Observation: Disinfection The chlorine contact chambers were providing a minimum contact time of 15 minutes. Floating covers are present on the CCCs to prevent algae growth and reduce chlorine usage.
- 6.13 Observation: Filtration No problems or deficiencies noted. Cloth filters and sand filters appeared well maintained.
- 6.14 Observation: Headworks Screening and grit are being collected in suitable containers. Screening and grit are being disposed of at a Class I landfill. A record of disposal for the screenings and grit collected at the headworks was available for review.
- 6.17 Observation: Headworks There were no excessive odors emanating from the headworks at the time of the inspection.
- 6.18 Observation: SurgeTanks No problems or deficiencies noted.

#### 7. Flow Measurement: IN COMPLIANCE

- 7.1 Observation: The flow measurement devices appeared to be installed properly. The primary effluent flow measuring device is a 90-degree v-notch weir. No staff gauge is present. The secondary effluent flow measuring device is an ISCO3010 ultrasonic.
- 7.2 Observation: The copies of the flow calibration reports are current and satisfactory.

#### 8. Operation and Maintenance: IN COMPLIANCE

8.1 Observation: General - The facility was operated and maintained in accordance with the description in the Permit.

#### 9. Effluent Quality: NOT EVALUATED

9.1 Observation: No observations were recorded.

#### 10. Effluent Disposal: IN COMPLIANCE

- The on-site storage reclaimed water storage pond appeared well maintained with more than three feet of available freeboard. All pumps and piping appeared adequately maintained.
- The reject storage pond appeared well maintained with more than three feet of available freeboard.

#### 11. Residuals/Sludge: IN COMPLIANCE

11.1 Observation: General - No problems or deficiencies were observed. Contract with Shelley's.

## **INSPECTION FINDINGS**

12. Groundwater Quality: NOT EVALUATED

12.1 Observation: No observations were recorded.

13. Other: NOT EVALUATED

13.1 Observation: No observations were recorded.

#### FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

## WASTEWATER COMPLIANCE INSPECTION REPORT

@ = Optional FACILITY AND INSPECTION INFORMATION WAFR ID-Entry Date/Time Name and Physical Location of Facility County Pluris Wedgefield, Inc. FLA010900 Orange 7/19/2010 10:52:00 AM Phone @ Exit Date/Time 3100 Bancroft Blvd Orlando, FL 32833 - 4011 (949) 454-7104 7/19/2010 11:04:00 AM Name(s) of Field Representatives(s) Titte Phone Email Name and Address of Permittee or Designated Representative Title @ Operator Certification # Phone Maurice W Gallarda President (949) 454-7104 Email 2600 Commerce centre Drive Lake Forest, FL 92630 Inspection Type Sample ID#: R Samples Taken(Y/N): N Samples Split (Y/N): N (a) Page X Domestic Industrial Were Photos Taken(Y/N): Y @ Log book Volume: eIP 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 "
PERMITSORDERS | SELF MONITORING PROGRAM | FACILITY OPERATIONS | EFFLUENT/DISPOSE EFFLUENT/DISPOSAL 3. Laboratory 6. Facility Site Review 9. ◆Effluent Quality NE IC NE I. ♦Permit 4. Sampling 7. Flow Measurement NE NE NE NE 10. ◆Effluent Disposal 2. Compliance Schedules 5. ♦ Records & Reports IC NE. 8. ♦ Operation & NE 11. Residuals/Sludge Maintenance NA 13: Other: NE 12. Groundwater Facility and/or Order Compliance _ Out-Of-Compliance _ Significant-Out-Of-Compliance X In-Compliance Status: Recommended Actions: None Name(s) and Signature(s) of Inspector(s) District Office/Phone Number Wisi. Central District (407) 893-3313 August 25, 2010 William Hesser @ Signature of Reviewer District Office/Phone Number September 3, 2010 Central District (407) 893-3313 David Somidule David Smicherko

#### **INSPECTION SUMMARY**

Facility Name: Pluris Wedgefield, Inc.

Facility ID: FLA010900 Inspection Type: RI

Date: 7/19/2010 11:04:00 AM

#### FACILITY BACKGROUND:

Address: 3100 Bancroft Blvd, Orlando, FL 32833 - 4011, Orange County

Permit Information: Wastewater Permit issued: 1/29/2010, and expires: 1/28/2015

Treatment Summary: Twin Contact Stabilization Ring Steel Stp's, 2 Filters w/Eff to Golf Course

Permitted Capacity: 0.368

1. Permit: NOT EVALUATED

1.1 Observation: No observations were recorded.

2. Compliance Schedules: NOT EVALUATED

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: IN COMPLIANCE

5.1 Observation: Records of the inspection and testing of the RPZ backflow preventers on the potable water supply lines
were on-site and current. Most recently inspected and certified in June, 2010 by Gray's Backflow Service LLC.

6. Facility Site Review: IN COMPLIANCE

6.1 Observation: Backflow Prevention - A reduced pressure zone backflow prevention device was in place on the potable water supply line. A Wilkins Zum 975XL appeared well maintained.

7. Flow Measurement: NOT EVALUATED

7.1 Observation: No observations were recorded.

8. Operation and Maintenance: NOT EVALUATED

8.1 Observation: No observations were recorded.

9. Effluent Quality: NOT EVALUATED

9.1 Observation: No observations were recorded.

10. Effluent Disposal: NOT EVALUATED

10.1 Observation: No observations were recorded.

11. Residuals/Sludge: NOT EVALUATED

11.1 Observation: No observations were recorded.

12. Groundwater Quality: NOT EVALUATED

12.1 Observation: No observations were recorded.

13. Other: NOT APPLICABLE

13.1 Observation: No observations were recorded.

## FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

## WASTEWATER COMPLIANCE INSPECTION REPORT

FACILITY AND INSPECTION INFORMATION @ = Optional

			F #	LUIL	III AND INSPECT	LON	INTORMATION		*	
Name a	nd Physical L	ocation of	Facility		WAFR ID:		County	Entry	Date/Time	
Pluris	Wedgefie	ld, Inc.			FLA010900		Orange		8/18/2010 1:35:00 PM	
3100	Bancroft E	Blvd					Phone	@ Ex	it Date/Time	
Orlan	do, FL 32	833 - 40	11				(949) 454-7104	8/18	/2010 2:00:00 PM	
Name(s	i) of Field Rep	resentativ	es(s)	•	Title	Email			Phone	
Name a	and Address o	Permitte	or Desig	nated Re	presentative Title		Phone	@	Operator Certification #	
Maur	ice W Gal	larda			Presid	dent	(949) 454-7104			
	Commerce Forest, FL		Drive		Email					
	tion Type	R	I	<u> </u>	Samples Taken(Y/N): N	@ San	ple ID#:	Sai	mples Split (Y/N): N	
<u>X</u> D	omestic	_ Inc	dustria	ıl	Were Photos Taken(Y/N): Y		@ Log book Volume : eIP		@ Page	
		on-Con		Criteria	Compliance; SC = Significant of a Should be Reviewed when Ou SELF MONITORING PROGRAM	t of Con	pliance Ratings Are Given in FACILITY OPERATIONS	n Areas	Marked by a "•"  EFFLUENT/DISPOSAL	
NE	1. ♦Permit	i		NE	3. Laboratory	NE	6. Facility Site Review	NC	9. ◆Effluent Quality	
NE	2. ♦Comp	liance Sch	redules	NE	4. Sampling	NE	7. Flow Measurement	IC	10. ◆Effluent Disposal	
				NC	5. ♦ Records & Reports	NE	8. Operation & Maintenance	NE	11. Residuals/Sludge	
NA	13. Other;							NC	12. Groundwater	
Facilit Status	y and/or Orde	r Complia	nce	_	In-Compliance >	<b>∠</b> Out-Of	-Compliance _ Sign	ificant-C	Out-Of-Compliance	
Recon	mended Actio	ns: Nonco	mpliance l	Letter						
Name(	s) and Signatu	re(s) of In	spector(s	)		Dist	rict Office/Phone Number	I	Date	
Willi	iam Hesser	•		u	list for	Ce	ntral District (407) 893-3.	313	August 25, 2010	
@ Sic	mature of Rev	lewer	···			Diet	rict Office/Phone Number		Date	
-	d Smicher		Da	nil 5	module	- 1	ntral District (407) 893-3.		September 3, 2010	

#### INSPECTION SUMMARY

Facility Name: Pluris Wedgefield, Inc.

Facility ID: FLA010900 Inspection Type: RI

Date: 8/18/2010 2:00:00 PM

#### **FACILITY BACKGROUND:**

Address: 3100 Bancroft Blvd, Orlando, FL 32833 - 4011, Orange County

Permit Information: Wastewater Permit issued: 1/29/2010, and expires: 1/28/2015

Treatment Summary: Twin Contact Stabilization Ring Steel Stp's, 2 Filters w/Eff to Golf Course

Permitted Capacity: 0.368

1. Permit: NOT EVALUATED

1.1 Observation: No observations were recorded.

2. Compliance Schedules: NOT EVALUATED

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

- Discharge Monitoring Reports (DMRs) were reviewed from June, 2009 through June, 2010 with the following record keeping deficiencies observed:
  - o Total Nitrogen was not reported on the May, 2010 DMR. A letter from the facility attributed this to operator
- 6. Facility Site Review: NOT EVALUATED
  - 6.1 Observation: No observations were recorded.
- 7. Flow Measurement: NOT EVALUATED
  - 7.1 Observation: No observations were recorded.
- 8. Operation and Maintenance: NOT EVALUATED
  - 8.1 Observation: No observations were recorded.
- 9. Effluent Quality: OUT OF COMPLIANCE
  - 9.1 Observation: Discharge Monitoring Reports (DMRs) were reviewed from June, 2009 through June, 2010 with the following effluent quality deficiencies observed:
    - June, 2009: Total Suspended Solids, Maximum (TSS Max.) at EFB-1 (R-001) reported at 7.8 milligrams
      per liter (mg/L) which exceeded the permitted limit of 5.0 mg/L. This exceedence was appropriately
      reported to the Department.
    - August, 2009: TSS Max. at EFB-1 (R-001) reported at 5.1 mg/L which exceeded the permitted limit of 5.0 mg/L. This exceedence was appropriately reported to the Department.
    - October, 2009: Nitrate Max. at EFA-1 (R-001) reported at 19.1 mg/L which exceeded the permitted limit of 12.0 mg/L. This exceedence was appropriately reported to the Department.
    - April, 2010: TSS Max. at EFB-1 (R-001) reported at 7.9 mg/L which exceeded the permitted limit of 5.0 mg/L. This exceedence was appropriately reported to the Department.

#### **INSPECTION FINDINGS**

- May, 2010: Fecal Coliform, Maximum at EFA-1 (R-001) was reported at 37 fecal coliform colonies per 100 milliliters of sample (FCC/100 ml) which exceeded the permit limit of 25 FCC/100 ml. This exceedence was appropriately reported to the Department.
- 10. Effluent Disposal: IN COMPLIANCE
  - 10.1 Observation: General No problems or deficiencies were observed.
  - 10.2 Observation: REUSE All plastic reclaimed water piping, pipelines, valves, outlets, and other appurtenances were color-coded Pantone Purple.
  - 10.3 <u>Observation</u>: REUSE Sprayfields appeared adequately maintained. Warning signs were posted at the golf course. A reclaimed water information pamphlet was available at the golf course clubhouse.
- 11. Residuals/Sludge: NOT EVALUATED
  - 11.1 Observation: No observations were recorded.
- 12. Ground water Quality: OUT OF COMPLIANCE
  - 12.1 Observation: A review of the ground water files for this facility indicates the following deficiencies:
    - Groundw ater elevations were not reported for well MW-1R for the fourth quarter of 2009 and first quarter
      of 2010. Please provide these ground water elevations or the reason for this data being unavailable.
    - The ground water monitoring report for the first quarter of 2010 was not on the new forms from the new
      permit issued on January 29, 2010. The ground water samples were not analyzed for the fourth quarter of
      2009 and first quarter of 2010 for the new parameters of sodium and total trihalomethanes. All future
      submittals shall contain these items.
- 13. Other: NOT APPLICABLE
  - 13.1 Observation: No observations were recorded.

Docket No.: 120152-WS

**Orange County** 

25-30.440 (8) FIELD EMPLOYEES

Test Year Ended December 31, 2011

Utility Partners LLC Employee	Duties programme and the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of	License	Responsibilities
Larry White	Operator	DW & WW	Operator of WWTP & WTP
John Coffee	Operator	DW	Operator of WWTP & WTP
Johnny Meadows	Field Tech	N/A	Work orders & maintenance
Richard Galarza	Field Tech	N/A	Work orders & maintenance
Roger Holsapple	Project Manager	DW & WW	Oversight of all phases of work

Docket No.: 120152-WS

**Orange County** 

25-30.440 (9) VEHICLES

Assigned Vehicles									
Driver	Vehicle	Tag #	Last 4 Digits of VIN	Lease/ Owned	l l	st Annual e or Asset			
Roger Holsapple	2010 F150	ABT-J70	4093	L		·			
John Coffee	2004 Silverado	AAM-V34*	1605	0	\$	7,459			
Johnny Meadows**	2004 Silverado	AAM-V35*	5249	0	\$	7,459			
Richard Galarza**	2004 Silverado	H	ıı	0		Ð			
Larry White	2004 Silverado	AAM-V36*	4231	0	\$	7,459			

Docket No.: 120152-WS

**Orange County** 

25-30.440 (10) CUSTOMER COMPLAINTS

Test Year Ended December 31, 2011

#### **Customer Complaints - 2011 Test Year**

#### 1. Lanay Lyons - Complaint Number 0990308W - Date closed by PSC - 2/25/2011

#### a. The cause of the problem - According to the Customer

The customer stated her water bill use "is too high". The meter indicated the usage is accurate and there did not appear to be a leak.

#### b. Action taken to resolve the customer's complaint

The meter was reread the same day the complaint was received and the meter indicated the usage was accurate and no indication of a leak.

#### 2. John Petroccia - Complaint Number 0991045W - Date closed by PSC - 2/28/2011

## a. The cause of the problem - According to the Customer

The customer stated his water bill use "is too high". The meter indicated the usage was accurate and no leak

#### b. Action taken to resolve the customer's complaint

The meter was reread and the meter indicated the usage was accurate and no leak.

#### 3. Jerry Reynolds - Complaint Number 1036403W - Date closed by PSC - 12/5/2011

#### a. The cause of the problem - According to the Customer

The customer stated his services were disconnected.

#### b. Action taken to resolve the customer's complaint

Service was restored the same day of disconnect. The customer was made aware duplicate bills are provided upon request. Reconnect fee was waived as a onetime courtesy.

#### 4. Nelson Lucca - Complaint Number 1036129W - Date closed by PSC - 11/29/2011

#### a. The cause of the problem - According to the Customer

The customer questioned his usage billed in October 2011.

### b. Action taken to resolve the customer's complaint

Customer was made aware of similar usage in the past and a field test on the meter was offered and scheduled. The field meter test was conducted at Mr. Lucca's residence beginning at 3:45 PM EST on Friday, 11.04.11. The customer, Mr. Lucca was present for the field test. Two Pluris operators conducted the test in Mr. Lucca's presence. Mr. Lucca assured the operators that all water was turned off in the house and the operators noticed that before conducting the test that the leak indicator on the meter was spinning indicating that water was flowing somewhere on the property. Mr. Lucca saw the leak indicator himself and went into the home to insure that all water was turned off. After returning to the meter and assuring the operators that all water was turned off. Mr. Lucca visually witnessed that the leak indicator on the meter was still spinning acknowledged there was a leak in his home. The field test was then canceled pending Mr. Lucca having the leak fixed.

#### 5. Michael Duggar - Complaint Number 1036126W - Date closed by PSC - 11/30/2011

#### a. The cause of the problem - According to the Customer

The customer alleged that dirty water with smoke was coming out of the faucet and looking like powdered milk.

#### b. Action taken to resolve the customer's complaint

On October 24, 2011, approximately 5:30pm, the water plant experienced power fluctuations from the Power Company. This caused the generator to cycle on and off until on-call personnel arrived. At 5:47pm personnel operated the generator manually to relieve the cycling. Personnel contacted the Power Company to send out a crew to correct the problem. They arrived at 7:30pm, and the Power Company corrected their problem at 8:30pm. At this point the water plant was back running under normal power.

On October 31, 2011, (4 working days after receiving the complaint, Mr. Duggars contacted Beverly Yopp, Director of Customer Care to say he was still having "white water" and smoke coming out of the faucet. He said it looked like "powdered milk". He was told that Pluris was not aware of this issue and would contact the field. He stated that he had talked to Ron Kramer with Utility Partners, the utility contract operator on Tuesday, October 25, 2011 (the same day of receiving the complaint) and again on Friday, October 28, 2011 (3 days after receiving the complaint) and that Mr. Kramer said the same thing to Mr. Duggar.

Ms. Yopp told him that Pluris had not received any other complaints indicating there was still a problem. He said because he was still having a problem that he had contacted the DEP. Mr. Duggars was told that the water is safe to drink, that it met all the requirements of the DEP.

Pluris, upon electrical power being restored began flushing distribution lines within the immediate vicinity of the water plant. This was continued the following morning throughout the system until all hydrants were flushed. On October 26, 2011, the following morning a malfunction report was sent to Mr. Jose Depedro with the Department of Environmental Regulations describing the power situation the evening before. His office had received a dirty water complaint. We advised the Department that flushing was started the evening before and was continuing that day, Wednesday, October 26, 2011. Mr. Jose Depedro requested four (4) bacteriological samples of the immediate area affected. Mr. Kramer told Mr. Depedro that Pluris would take not just 4 but 24 samples to insure there was no problem in the entire system and not just the immediate area. The samples were taken to a state certified laboratory and all samples passed.

### 6. Mitchel Baum - Complaint Number 1040276W - Date Closed by PSC - 12/29/2011

#### a. The cause of the problem - According to the Customer

The customer stated that the water usage for the month was inaccurate and the meter was not recording properly.

#### b. Action taken to resolve the customer's complaint

Pluris had the meter pulled and sent for a bench test. The meter test results dated December 2, 2011 stated the meter passed all three flow levels. The test results were as follows: High flow – 99.1%, Intermediate flow – 99%, Low flow – 98.5%; all ranges being within AWWA standards.