CLASS B
WATER AND/OR WASTEWATER UTILITIES

FINANCIAL, RATE AND ENGINEERING MINIMUM FILING REQUIREMENTS

OF

PLACID LAKES UTILITIES, INC.
Exact Legal Name of Utility
Docket No.: 130025-WU

VOLUME III
(Additional Engineering)

FOR THE YEAR ENDING

Test Year Ended: December 31, 2012

DOCUMENT NUMBER-DATE
02142 APR 24 12
FPSC-COMMISSION CLERK

Placid Lakes Utilities, Inc.

Docket No. 130025-WU

Application to Increase Rates and Charges
For a "Class B" Utility
in
Highlands County, Florida

VOLUME III

Containing

Engineering Information

For the Test Year Ended
December 31, 2012

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Placid Lakes Utilities, Inc.

Engineering Information

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PLACID LAKES UTILITIES, INC.

Docket No.: 130025-WU

Highlands County

25-30.440 (1)
DETAILED MAP

Test Year Ended December 31, 2012

USED AND USEFUL
ANALYSIS
Schedule I

Company: Placid Lakes Utilities, Inc.
Docket No.: 130025-WU
Test Year Ended: December 31, 2012

Florida Public Service Commission
Schedule I
5 Pages
Preparer: Larry P. King, Treasurer
Supporting Schedule F-7

Used & Useful Analysis – Transmission & Distribution System

Sec.		Street Name	Line " Diameter	Connected Lots	Private Wells	Total Lots	Connect / Total %	Used & Useful %	Line Feet Length	Original $ Cost	Std. Cur. Cost $	Std. Cost Allocated
1		Detroit	3	5		21	23.81%	23.81%	1050	$1,997	$7,392	$1,760
1		Baltimore/Briar Glen	3	3		21	14.29%	14.29%	1175	$2,235	$8,272	$1,182
1		E Canal Way	3	10		29	34.48%	34.48%	1400	$2,663	$9,856	$3,399
1		East Hampton	4	3		18	16.67%	16.67%	875	$2,376	$7,604	$1,267
1		Adams/Bowie	4	6		22	27.27%	27.27%	1050	$2,851	$9,125	$2,489
1		Chicago	4	6		19	31.58%	31.58%	1200	$3,258	$10,428	$3,293
1		Augusta	4	8		28	28.57%	28.57%	1500	$4,073	$13,035	$3,724
1	^	Buchanan	6	4		22	18.18%	100.00%	1400	$4,721	$16,240	$16,240
1	^	Washington	6	20		46	43.48%	100.00%	2350	$7,925	$27,260	$27,260
1	^	Lincoln	6	3		18	16.67%	100.00%	2450	$8,262	$28,420	$28,420
2	*	Fillmore	3	5		8	62.50%	100.00%	550	$1,046	$3,872	$3,872
2		Jackson/Thurman	3	10		18	55.56%	100.00%	800	$2,460	$5,632	$5,632
2		Hoover	3	3		7	42.86%	42.86%	950	$1,807	$6,688	$2,866
2		Augusta/Briar Lane	3	5		25	20.00%	20.00%	1175	$2,235	$8,272	$1,654
2		Baltimore	3	6		36	16.67%	16.67%	1800	$3,423	$12,672	$2,112
2	#	Briarberry/Baltimore	3	0		2	0.00%	10.00%	120	$2,347	$845	$84
2	#	Jackson/Thurman	4	0		4	0.00%	10.00%	1105	$679	$9,602	$960
2		Coolidge	4	8	1	33	25.00%	25.00%	860	$11,490	$7,473	$1,868
2		Detroit	4	3		15	20.00%	20.00%	680	$4,860	$5,909	$1,182
2		Grant	4	9		33	27.27%	27.27%	1555	$5,625	$13,513	$3,685
2		Chicago	4	12		29	41.38%	41.38%	1750	$4,751	$15,208	$6,293
2		Augusta/Boston Way	4	8		36	22.22%	22.22%	1825	$4,955	$15,859	$3,524
2	^	Garfield	6	12		40	30.00%	100.00%	2175	$7,335	$25,230	$25,230
2	^	Lincoln	6	4		26	15.38%	100.00%	3675	$12,393	$42,630	$42,630
2	^	Jefferson/Placid Lk Blvd	6	3		13	23.08%	100.00%	1975	$7,683	$22,910	$22,910
3		Hayes	3	1		1	100.00%	100.00%	100	$190	$704	$704
3		Hoover	3	3		3	100.00%	100.00%	465	$1,108	$3,274	$3,274
3		Jackson/Thurman	3	12		46	26.09%	26.09%	1650	$3,138	$11,616	$3,030
3	#	Grant	4	0		2	0.00%	10.00%	125	$339	$1,086	$109
3		Edison	4	1		4	25.00%	25.00%	300	$815	$2,607	$652
3		Hoover	4	2		6	33.33%	33.33%	425	$1,154	$3,693	$1,231
3		Coolidge	4	3		28	10.71%	10.71%	1400	$3,801	$12,166	$1,304
3	^	Hoover	6	3		11	27.27%	100.00%	250	$843	$2,900	$2,900
3	^	Placid Court	6	0		0	0.00%	100.00%	600	$2,023	$6,960	$6,960
3	^	Flamingo	6	22		42	52.38%	100.00%	1958	$6,603	$22,713	$22,713
3	^	Jefferson/Placid Lk Blvd	8	4		5	80.00%	100.00%	700	$2,723	$13,055	$13,055
4		Truman	3	6		13	46.15%	46.15%	775	$1,474	$5,456	$2,518
4	#	Taft/Rockefeller	3	2	1	28	7.41%	10.00%	1200	$2,282	$8,448	$845
4		Circle Court	4	3		8	37.50%	37.50%	200	$543	$1,738	$652
4	^	W Canal Way	6	1		25	4.00%	100.00%	1075	$3,625	$12,470	$12,470
4	^	Wilson/Kemper	6	3		26	11.54%	100.00%	1450	$4,890	$16,820	$16,820
4	^	Washington	6	6		34	17.65%	100.00%	1975	$6,660	$22,910	$22,910
4	^	Roosevelt	6	4		44	9.09%	100.00%	2175	$7,335	$25,230	$25,230
5		Wilson	3	1		6	16.67%	16.67%	300	$571	$2,112	$352
5	*	Cleveland	3	4		6	66.67%	100.00%	600	$1,141	$4,224	$4,224
5	#	Tulsa	3	0		12	0.00%	10.00%	875	$1,664	$6,160	$616
5		Fillmore	3	1		1	100.00%	100.00%	500	$4,692	$3,520	$3,520
5		Johnson	3	11		72	15.28%	15.28%	3560	$10,522	$25,062	$3,829
5		McKinley	4	2	1	18	11.76%	11.76%	850	$2,308	$7,387	$869
5	^	Flamingo	6	0		8	0.00%	100.00%	675	$2,276	$7,830	$7,830
5	^	Roosevelt	6	5		29	17.24%	100.00%	1550	$5,227	$17,980	$17,980
5	^	Washington	6	17		19	89.47%	100.00%	2900	$9,780	$33,640	$33,640
6	^	Jefferson/Placid Lk Blvd	10	8		8	100.00%	100.00%	2200	$10,939	$58,014	$58,014
6	*	Cumquat NE	3	17		21	80.95%	100.00%	700	$1,331	$4,928	$4,928
6	*	Orange NE	3	31		32	96.88%	100.00%	1200	$2,282	$8,448	$8,448
6		Lakefront Ct and Ln	3	25		25	100.00%	100.00%	1300	$2,472	$9,152	$9,152
6	*	Lime Rd NE	4	38		39	97.44%	100.00%	1500	$4,073	$13,035	$13,035
6	*	Cumquat NE	4	25		34	73.53%	100.00%	1800	$4,887	$15,642	$15,642
6	*	Lemon NE	4	40		46	86.96%	100.00%	1800	$4,887	$15,642	$15,642
6	*	Orange NW/FoxRidge	4	31		45	68.89%	100.00%	1800	$4,887	$15,642	$15,642
6	*	Tangerine NW	4	32		49	65.31%	100.00%	2000	$5,430	$17,380	$17,380
6	*	Lime NW	4	36		53	67.92%	100.00%	2200	$5,973	$19,118	$19,118
6	*	Loquat NE	4	38		54	70.37%	100.00%	2200	$5,973	$19,118	$19,118
6	*	Lemon NW	4	35		57	61.40%	100.00%	2350	$6,380	$20,422	$20,422
6		Loquat NW	4	28		59	47.46%	47.46%	2500	$3,788	$21,725	$10,310
6	*	Cumquat NW	4	20		31	64.52%	100.00%	3050	$8,281	$26,505	$26,505

Company: Placid Lakes Utilities, Inc.
Docket No.: 130025-WU
Test Year Ended: December 31, 2012

Florida Public Service Commission
Schedule I
5 Pages
Preparer: Larry P. King, Treasurer
Supporting Schedule F-7

Used & Useful Analysis – Transmission & Distribution System

Sec.		Street Name	Line " Diameter	Connected Lots	Private Wells	Total Lots	Connect / Total %	Used & Useful %	Line Feet Length	Original $ Cost	Std. Cur. Cost	Std. Cost Allocated
6	^	Lk June NE/Catfish Creek	6	13		13	100.00%	100.00%	1200	$4,047	$13,920	$13,920
6	^	Lk JuneNW/Catfish Creek	8	29		38	76.32%	100.00%	1600	$6,224	$29,840	$29,840
7	^	Jefferson/Placid Lk Blvd	10	9		18	50.00%	100.00%	1800	$8,950	$58,014	$58,014
7		Parker	3	6		16	37.50%	37.50%	450	$856	$3,168	$1,188
7	*	Citrus	3	13		17	76.47%	100.00%	600	$1,141	$4,224	$4,224
7	*	Anderson	3	12		21	57.14%	100.00%	800	$1,522	$5,632	$5,632
7	*	Cumquat NE	3	16		21	76.19%	100.00%	800	$1,522	$5,632	$5,632
7		Bougvilla	3	10		26	38.46%	38.46%	900	$1,712	$6,336	$2,437
7		Mango	3	3		24	12.50%	12.50%	1100	$2,092	$7,744	$968
7	#	Connecticut	4	0		4	0.00%	10.00%	400	$1,086	$3,476	$348
7		Wilson	4	11		28	39.29%	39.29%	950	$6,142	$8,256	$3,243
7	*	Cumquat NE	4	25		34	73.53%	100.00%	1400	$3,801	$12,166	$12,166
7	*	Bougvilla	4	27		41	65.85%	100.00%	1600	$4,344	$13,904	$13,904
7	*	Citrus	4	28		40	70.00%	100.00%	1700	$4,616	$14,773	$14,773
7		Mango	4	9		48	18.75%	18.75%	1970	$7,131	$17,119	$3,210
7	#	Parker	4	1		28	3.57%	10.00%	1800	$4,887	$15,642	$1,564
7	*	Anderson	4	25		32	78.13%	100.00%	2000	$5,430	$17,380	$17,380
7	^	Lk Groves	6	4		15	26.67%	100.00%	1300	$4,384	$15,080	$15,080
7	^	Johnson	6	2		18	11.11%	100.00%	1400	$4,721	$16,240	$16,240
8	*	TangerineNW/A Summers	3	6		11	54.55%	100.00%	300	$571	$2,112	$2,112
8	*	W Waterway	3	5		7	71.43%	100.00%	450	$856	$3,168	$3,168
8	*	Lakerim	3	9		11	81.82%	100.00%	700	$1,331	$4,928	$4,928
8		Orange NW/FoxRidge	3	6		26	23.08%	23.08%	1110	$3,521	$7,814	$1,803
8		Lemon NW	4	5		11	45.45%	45.45%	500	$1,358	$4,345	$1,975
8		Loquat NW	4	5		12	41.67%	41.67%	500	$1,358	$4,345	$1,810
8	#	Plum	4	0		7	0.00%	10.00%	600	$1,629	$5,214	$521
8		Cumquat NW	4	2		7	28.57%	28.57%	700	$1,901	$6,083	$1,738
8	*	Orange NW/FoxRidge	4	12		20	60.00%	100.00%	800	$2,172	$6,952	$6,952
8		Pear	4	3		19	15.79%	15.79%	800	$2,172	$6,952	$1,098
8		Tangerine NW	4	13		22	59.09%	100.00%	900	$2,444	$7,821	$7,821
8		Grape/NW Grapefruit	4	5		12	41.67%	41.67%	1000	$2,715	$8,690	$3,621
8		Lime NW	4	6		19	31.58%	31.58%	1000	$2,715	$8,690	$2,744
8		W Waterway	4	5		16	31.25%	31.25%	2480	$6,529	$21,551	$6,735
8	^	Lk JuneNW/Catfish Creek	6	12		16	75.00%	100.00%	1570	$7,341	$18,212	$18,212
8	^	E Waterway	6	9		27	33.33%	100.00%	1550	$5,227	$17,980	$17,980
8	^	Lk JuneNW/Catfish Creek	8	10		14	71.43%	100.00%	1200	$4,668	$22,380	$22,380
9		Woodmere	3	2		2	100.00%	100.00%	600	$1,850	$4,224	$4,224
9	#	Walker	4	0		4	0.00%	10.00%	425	$1,154	$3,693	$369
9		Farrell	4	5		12	41.67%	41.67%	910	$5,781	$7,908	$3,295
9	^	Lk Groves	6	0		7	0.00%	100.00%	1900	$6,407	$22,040	$22,040
9	^	Washington	6	4		34	11.76%	100.00%	2925	$9,864	$33,930	$33,930
9	*	Jefferson/Placid Lk Blvd	8	0		3	0.00%	100.00%	1625	$6,321	$30,306	$30,306
10		White	3	3		16	18.75%	18.75%	800	$1,522	$5,632	$1,056
10		Farrell	3	3		26	11.54%	11.54%	1500	$2,853	$10,560	$1,218
10	*	Walker	4	3		4	75.00%	100.00%	350	$950	$3,042	$3,042
10	^	Taft/Humphrey	6	4	1	9	50.00%	100.00%	750	$2,529	$8,700	$8,700
10	^	Washington	6	0		19	0.00%	100.00%	1825	$6,154	$21,170	$21,170
11	*	Atlas	3	6		7	85.71%	100.00%	360	$685	$2,534	$2,534
11		Sheppard	3	18		18	100.00%	100.00%	660	$1,255	$4,646	$4,646
11	*	Van Guard	3	14		15	93.33%	100.00%	960	$1,826	$6,758	$6,758
11	*	Pennsylvania/Gates	3	14		23	60.87%	100.00%	1260	$2,396	$8,870	$8,870
11	*	Jupiter	4	6		10	60.00%	100.00%	480	$1,303	$4,171	$4,171
11		Kings Court	4	11		10	110.00%	100.00%	480	$1,303	$4,171	$4,171
11		Abel	4	12		10	120.00%	100.00%	630	$1,711	$5,475	$5,475
11	*	Glen	4	4		6	66.67%	100.00%	780	$2,118	$6,778	$6,778
11		Club Rd	4	20		18	111.11%	100.00%	840	$2,281	$7,300	$7,300
11	*	Murray Ct	4	25		27	92.59%	100.00%	1110	$3,014	$9,646	$9,646
11	*	Van Allen	4	12		23	52.17%	100.00%	1170	$3,177	$10,167	$10,167
11	*	Sheppard	4	27		45	60.00%	100.00%	1920	$5,213	$16,685	$16,685
11		Grissom	4	17		44	38.64%	38.64%	3000	$8,145	$26,070	$10,073
11	^	Lincoln	6	35		56	62.50%	100.00%	2460	$8,296	$28,536	$28,536
11	^	Lk Groves	6	10		9	111.11%	100.00%	2760	$9,308	$32,016	$32,016
11	^	Enos	6	28		68	41.18%	100.00%	5280	$17,806	$61,248	$61,248
11	^	Jefferson/Placid Lk Blvd	10	0		0	0.00%	100.00%	2200	$10,939	$70,906	$70,906
12		Booster	3	3		6	50.00%	50.00%	840	$2,788	$5,914	$2,957
12		Launch	3	3		18	16.67%	16.67%	850	$1,617	$5,984	$997
12	#	Cape	3	0		10	0.00%	10.00%	900	$1,712	$6,336	$634

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Sec.		Street Name	Line " Diameter	Connected Lots	Private Wells	Total Lots	Connect / Total %	Used & Useful %	Line Feet Length	Original $ Cost	Std. Cur. Cost	Std. Cost Allocated
12		Fig	4	4		9	44.44%	44.44%	800	$2,172	$6,952	$3,090
12	*	Jefferson/Cornelius	4	8		10	80.00%	100.00%	1050	$2,851	$9,125	$9,125
12		Grape NW	4	12		36	33.33%	33.33%	1600	$4,344	$13,904	$4,635
12	*	Cumquat NW	4	14		18	77.78%	100.00%	1700	$4,616	$14,773	$14,773
12	^	Jupiter	6	7		16	43.75%	100.00%	1300	$4,384	$15,080	$15,080
12	^	Van Guard	6	5		16	31.25%	100.00%	1450	$4,890	$16,820	$16,820
12	^	Lk Groves	6	0		0	0.00%	100.00%	1900	$6,407	$22,040	$22,040
12	^	Washington	8	23		27	85.19%	100.00%	2100	$8,169	$39,165	$39,165
13	#	Prince/Draycott	3	1		14	7.14%	10.00%	550	$1,046	$3,872	$387
13		Apple//Star Fruit	3	5		15	33.33%	33.33%	800	$1,522	$5,632	$1,877
13		Kaiser	3	3		18	16.67%	16.67%	800	$1,522	$5,632	$939
13	#	Cape	4	1		5	0.00%	10.00%	140	$1,336	$1,217	$122
13		Guymon	4	2		6	33.33%	33.33%	590	$4,013	$5,127	$1,709
13	#	Prince	4	0		7	0.00%	10.00%	500	$1,358	$4,345	$435
13		Eva	4	1		1	100.00%	100.00%	550	$1,493	$4,780	$4,780
13		Adam	4	1		8	12.50%	12.50%	600	$1,629	$5,214	$652
13	*	Cumquat NW	4	8		15	53.33%	100.00%	1200	$3,258	$10,428	$10,428
13		Grape NW	4	11		29	37.93%	37.93%	1200	$3,258	$10,428	$3,955
13	*	Apple/Starfruit	4	7		8	87.50%	100.00%	1700	$4,616	$14,773	$14,773
13	^	Van Guard	6	1		6	16.67%	100.00%	600	$2,023	$6,960	$6,960
13	^	Lk Groves	6	0		9	0.00%	100.00%	800	$2,698	$9,280	$9,280
13	^	Washington	8	12		15	80.00%	100.00%	1250	$4,863	$23,313	$23,313
14	@	Roland	3	0		0	0.00%	100.00%	300	$571	$2,112	$2,112
14	*	Washington	3	14		18	77.78%	100.00%	600	$1,141	$4,224	$4,224
14		Bronson	3	2		16	12.50%	12.50%	800	$1,522	$5,632	$704
14	*	Cumquat NW	4	2		3	66.67%	100.00%	300	$815	$2,607	$2,607
14	#	Grapefruit	4	0		2	0.00%	10.00%	350	$950	$3,042	$304
14	#	Eva	4	0		4	0.00%	10.00%	550	$1,493	$4,780	$478
14		Crosby	4	2		14	14.29%	14.29%	850	$2,308	$7,387	$1,055
14		Adam	4	2		5	40.00%	40.00%	1050	$2,851	$9,125	$3,650
14		Grape	4	6		19	31.58%	31.58%	1150	$3,122	$9,994	$3,156
14		Marlin	4	1		3	33.33%	33.33%	1350	$3,665	$11,732	$3,911
14		Prince	4	3		10	30.00%	30.00%	1650	$4,480	$14,339	$4,302
14		Keith/Ellison	4	13		43	30.23%	30.23%	2350	$6,380	$20,422	$6,174
14	^	E Waterway	6	1		6	16.67%	100.00%	400	$1,349	$4,640	$4,640
14	^	Washington/Lake August	6	23		50	46.00%	100.00%	2700	$9,105	$31,320	$31,320
14		Washington	8	6		15	40.00%	100.00%	1150	$4,474	$21,448	$21,448
15		Rocky	3	1		4	25.00%	25.00%	180	$342	$1,267	$317
15		Carole	3	4		14	28.57%	28.57%	216	$411	$1,521	$434
15		Heal	3	2		13	15.38%	15.38%	360	$685	$2,534	$390
15		Vera	3	5		19	26.32%	26.32%	810	$2,575	$5,702	$1,501
15		Orange/FoxDale	3	7		26	26.92%	26.92%	1100	$2,915	$7,744	$2,085
15		Tangerine/A. Summers	3	9		43	20.93%	20.93%	1672	$4,565	$11,771	$2,464
15	@	Carey	4	0		0	0.00%	100.00%	324	$880	$2,816	$2,816
15	@	Donald	4	0		0	0.00%	100.00%	360	$977	$3,128	$3,128
15		Ida/Kayla	4	2		6	33.33%	33.33%	368	$1,271	$3,198	$1,066
15		Plum	4	1		7	14.29%	14.29%	468	$1,271	$4,067	$581
15		W Waterway	4	4		11	36.36%	36.36%	576	$1,564	$5,005	$1,820
15	#	Flo	4	0		11	0.00%	10.00%	720	$1,955	$6,257	$626
15		Bonnie	4	7		30	23.33%	23.33%	1440	$3,910	$12,514	$2,920
15	^	Washington	6	25		41	60.98%	100.00%	1440	$4,856	$16,704	$16,704
16		Pamela	3	2		2	100.00%	100.00%	970	$2,149	$6,829	$6,829
16		Eula	3	1		5	20.00%	20.00%	325	$618	$2,288	$458
16		Carole	3	5		46	10.87%	10.87%	1725	$3,281	$12,144	$1,320
16	^	Tangerine/A Summers	4	0		3	0.00%	10.00%	250	$679	$2,173	$217
16		Barbara	4	2		10	20.00%	20.00%	550	$1,493	$4,780	$956
16		Corine	4	1		4	25.00%	25.00%	550	$1,493	$4,780	$1,195
16		Flo	4	2		15	13.33%	13.33%	925	$2,511	$8,038	$1,072
16	^	Lk June NW	6	5		5	100.00%	100.00%	900	$3,035	$10,440	$10,440
17	^	Washington	6	3		23	13.04%	100.00%	1250	$4,215	$14,500	$14,500
17	^	Washington	6	0		0	0.00%	100.00%	300	$571	$3,480	$3,480
17	@	Ronald	4	0		0	0.00%	100.00%	600	$1,629	$5,214	$5,214
17	^	Ronald	6	4		4	100.00%	100.00%	775	$2,614	$8,990	$8,990
17	^	Washington/Lake August	6	14		30	46.67%	100.00%	1625	$5,480	$18,850	$18,850
17	^	Christine	6	4		9	44.44%	100.00%	400	$4,359	$4,640	$4,640
18		Frederick	3	1		2	50.00%	50.00%	250	$475	$1,760	$880
18	#	Commerce	3	0		8	0.00%	10.00%	450	$856	$3,168	$317

Company: Placid Lakes Utilities, Inc.
Docket No.: 130025-WU
Test Year Ended: December 31, 2012

Florida Public Service Commission
Schedule I
5 Pages
Preparer: Larry P. King, Treasurer
Supporting Schedule F-7

Used & Useful Analysis – Transmission & Distribution System

Sec.		Street Name	Line " Diameter	Connected Lots	Private Wells	Total Lots	Connect / Total %	Used & Useful %	Line Feet Length	Original $ Cost	Std. Cur. Cost	Std. Cost Allocated
18	@	Robeling	3	0		0	0.00%	100.00%	775	$1,474	$5,456	$5,456
18	#	Putney	3	1		30	3.33%	10.00%	925	$1,759	$6,512	$651
18		Keith/Ellison	4	1		5	20.00%	20.00%	600	$1,629	$5,214	$1,043
18		Robeling	4	3		28	10.71%	10.71%	675	$1,833	$5,866	$628
18	#	Robeling/Hathaway	4	1		14	7.14%	10.00%	450	$5,500	$3,911	$391
18		Columbia	4	2		2	100.00%	100.00%	225	$4,347	$1,955	$1,955
18		Columbia/Atherton	4	2		9	22.22%	22.22%	400	$3,097	$3,476	$772
18		Lk Groves	4	3		15	20.00%	20.00%	1075	$2,919	$9,342	$1,868
18		Marlin	4	5		12	41.67%	41.67%	1150	$3,122	$9,994	$4,164
18		Prince	4	2		18	11.11%	11.11%	1350	$3,665	$11,732	$1,304
18	#	Matthew	4	1		19	5.26%	10.00%	1700	$4,616	$14,773	$1,477
18	^	Washington	6	3		4	75.00%	100.00%	350	$1,180	$4,060	$4,060
18	^	Ronald	6	0		0	0.00%	100.00%	775	$2,614	$8,990	$8,990
18	^	Tobler Terrace	6	0		0	0.00%	100.00%	950	$3,204	$11,020	$11,020
19		Tiger	3	1		4	25.00%	25.00%	275	$523	$1,936	$484
19		Corvair	3	2		5	40.00%	40.00%	300	$571	$2,112	$845
19		Astro Ct	3	2		6	33.33%	33.33%	700	$10,065	$4,928	$1,643
19		Aries	4	5		9	55.56%	100.00%	140	$1,383	$1,217	$1,217
19		Aztec	3	4		3	133.33%	100.00%	350	$3,318	$2,464	$2,464
19		Bell	3	1		4	25.00%	25.00%	425	$808	$2,992	$748
19		Derringer	4	2		4	50.00%	50.00%	1440	$13,234	$12,514	$6,257
19	@	Colt	3	0		0	0.00%	100.00%	700	$1,331	$4,928	$4,928
19		Avenger	3	1		1	100.00%	100.00%	800	$1,522	$5,632	$5,632
19		Conquest	3	2		20	10.00%	10.00%	900	$1,712	$6,336	$634
19		Embracer	3	1		3	33.33%	33.33%	1025	$1,949	$7,216	$2,405
19		Boeing	3	8		28	28.57%	28.57%	1575	$2,995	$11,088	$3,168
19		Hawk/Wildcat	3	11		49	22.45%	22.45%	2245	$7,100	$15,805	$3,548
19		Pacer	3	3		8	37.50%	37.50%	690	$6,372	$4,858	$1,822
19		Darter	3	4		18	22.22%	22.22%	765	$2,089	$5,386	$1,197
19		Chieftan	3	3		18	16.67%	16.67%	680	$1,850	$4,787	$798
19	#	Sundowner	3	1		18	5.56%	10.00%	760	$3,343	$5,350	$535
19		Jetway	3	3		6	50.00%	50.00%	650	$3,825	$4,576	$2,288
19		Cessna Way	3	2		2	100.00%	100.00%	180	$2,709	$1,267	$1,267
19		Interstate	3	1		5	20.00%	20.00%	320	$2,281	$2,253	$451
19	@	Wildcat	4	0		0	0.00%	100.00%	200	$543	$1,738	$1,738
19		Hawk/Wildcat	4	2		7	28.57%	28.57%	550	$1,493	$4,780	$1,366
19		Buccaneer	4	4		16	25.00%	25.00%	1060	$7,780	$9,211	$2,303
19	#	Gulfstream	4	1		12	8.33%	10.00%	690	$3,270	$5,996	$600
19		Vega	3	2		8	25.00%	25.00%	535	$6,759	$3,766	$942
19	@	Seebee	4	0		0	0.00%	100.00%	850	$2,308	$7,387	$7,387
19		Comanche	4	3		18	16.67%	16.67%	1300	$3,530	$11,297	$1,883
19		Mustang	4	1		7	14.29%	14.29%	1865	$3,598	$16,207	$2,315
19		Baron	4	1		4	25.00%	25.00%	180	$3,962	$1,564	$391
19		Lark	3	1		3	33.33%	33.33%	680	$5,438	$4,787	$1,596
19	^	Airport Rd	6	0		0	0.00%	100.00%	450	$1,518	$5,220	$5,220
19	#	Gull	3	1		20	5.00%	10.00%	650	$2,192	$4,576	$458
19		Norseman	4	1		2	50.00%	50.00%	90	$1,560	$782	$391
19	^	Challenger	6	1		6	16.67%	100.00%	1540	$8,306	$17,864	$17,864
19	^	Derringer	6	1		9	11.11%	100.00%	571	$11,998	$6,624	$6,624
19	^	Placid Airway	6	4		6	66.67%	100.00%	825	$2,782	$9,570	$9,570
19		Eagle/Chippewa	3	2		20	10.00%	10.00%	975	$3,288	$6,864	$686
19	#	Foxstar	3	1		12	8.33%	10.00%	520	$6,609	$3,661	$366
19	^	Kingfisher	6	4		31	12.90%	100.00%	2350	$7,925	$27,260	$27,260
19	^	Jefferson/Placid Lk Blvd	6	18		18	100.00%	100.00%	3800	$12,815	$44,080	$44,080
19	^	Seneca	6	11		59	18.64%	100.00%	4240	$15,760	$49,184	$49,184
19	^	Apache	6	1		19	5.26%	100.00%	4600	$15,513	$53,360	$53,360
19	^	Concord	6	0		0	0.00%	100.00%	3060	$16,226	$35,496	$35,496
19		Delta	4	1		4	25.00%	25.00%	175	$4,168	$1,521	$380
20		Coquina	3	1		3	33.33%	33.33%	80	$152	$563	$188
20		Keos	3	2		6	33.33%	33.33%	160	$304	$1,126	$375
20		Homassassa	3	1		4	25.00%	25.00%	240	$456	$1,690	$422
20		Spice	3	2		8	25.00%	25.00%	280	$533	$1,971	$493
20		Bay Harbor	3	3		13	23.08%	23.08%	1080	$3,647	$7,603	$1,755
20	*	Bokeelia Way	3	6		8	75.00%	100.00%	1100	$4,024	$7,744	$7,744
20		Anna Maria W	3	11		8	137.50%	100.00%	1210	$3,735	$8,518	$8,518
20		Fire Island	3	3		25	12.00%	12.00%	1140	$5,276	$8,026	$963
20		Barbados	3	4		14	28.57%	28.57%	835	$6,138	$5,878	$1,680

Company: Placid Lakes Utilities, Inc.
Docket No.: 130025-WU
Test Year Ended: December 31, 2012

Florida Public Service Commission
Schedule I
5 Pages
Preparer: Larry P. King, Treasurer
Supporting Schedule F-7

Used & Useful Analysis – Transmission & Distribution System

Sec.		Street Name	Line " Diameter	Connected Lots	Private Wells	Total Lots	Connect / Total %	Used & Useful %	Line Feet Length	Original $ Cost	Std. Cur. Cost	Std. Cost Allocated
20		Captiva	3	8		8	100.00%	100.00%	500	$4,628	$3,520	$3,520
20		Java	3	3		8	37.50%	37.50%	360	$4,905	$2,534	$950
20		Island Pkwy	4	2		2	100.00%	100.00%	880	$1,498	$7,647	$7,647
20		Leeward/Cross Creek	3	3		14	21.43%	21.43%	960	$1,826	$6,758	$1,448
20		Komota/Sonora	3	6		22	27.27%	27.27%	1120	$2,130	$7,885	$2,150
20		Bimini	3	14		32	43.75%	43.75%	1840	$3,499	$12,954	$5,667
20		Estero	3	2		7	28.57%	28.57%	270	$3,628	$1,901	$543
20	#	Dry Tortogus	3	0		3	0.00%	10.00%	220	$1,009	$1,549	$155
20	#	Honeymoon	4	1		13	7.69%	10.00%	640	$1,738	$5,562	$556
20		Cayman	4	4		18	22.22%	22.22%	215	$2,456	$1,868	$415
20		Bali	4	2		2	100.00%	100.00%	300	$5,895	$2,607	$2,607
20		Easter	3	2		4	50.00%	50.00%	1580	$20,588	$11,123	$5,562
20		Minorca	4	6	1	13	50.00%	50.00%	720	$1,955	$6,257	$3,128
20		Imbros	4	4		14	28.57%	28.57%	800	$2,172	$6,952	$1,986
20	@	Cayman	4	0		0	0.00%	100.00%	1280	$3,475	$11,123	$11,123
20	*	Anna Maria Ct	3	5		6	83.33%	100.00%	580	$3,246	$4,083	$4,083
20		Bokeelia Ct	3	3		6	50.00%	50.00%	800	$4,627	$5,632	$2,816
20	*	Devon Way	3	6		10	60.00%	100.00%	1545	$14,122	$10,877	$10,877
20		Grenada	4	4		21	19.05%	19.05%	1840	$4,996	$15,990	$3,046
20	#	Fisher	4	0		16	0.00%	10.00%	2880	$7,819	$25,027	$2,503
20	^	Aleutian	6	17	1	33	53.13%	100.00%	2520	$9,850	$29,232	$29,232
20		Galapagos	3	2		18	11.11%	11.11%	765	$3,777	$5,386	$598
20	^	Corsica	6	4		26	15.38%	100.00%	1849	$2,200	$21,448	$21,448
20	^	Jersey	6	8		36	22.22%	100.00%	3520	$14,169	$40,832	$40,832
20	^	Jefferson/Placid Lk Blvd	6	18		35	51.43%	100.00%	4440	$19,693	$51,504	$51,504
20	^	Lincoln	6	15		60	25.00%	100.00%	6920	$23,336	$80,272	$80,272
20	#	Islamorada	3	1		12	8.33%	10.00%	560	$1,520	$3,942	$394
20		Kodiak	4	2		7	28.57%	28.57%	377	$991	$3,276	$936
20	~	Placid View Dr	6	29		90	32.22%	100.00%	5000	$59,093	$58,000	$58,000
21	^	Catfish Creek	6	40		70	57.14%	100.00%	5200	$17,536	$60,320	$60,320
				2020	6	5147			348449	$1,240,405	$3,471,555	$2,631,061
											A	*B*

^ *Lines larger than 6" are 100% U&U: since they provide service to other lines.*
@ *Lines smaller than 6" are 100% if no lots are to be serviced.*
* *Lines greater than 50% connected are considered 100% U&U.*
\# *Lines less than 10% connected are considered 10% U&U.*
~ *This line run at DEP's insistence to correct water pressure problems in another line.*
$ *U&U % is weighted by size of line and length in feet: converted to a standard current cost.*

	2012	2009 (PSC)
Weighted U&U % (A/B)	75.79%	67.37%
Margin Reserve Factor	1.015	1.174
U&U % Final	76.92%	79.09%

Calculation of standard current labor & material line cost per foot

	3"	4"	6"	8"	10"
Pipe cost	$2.04	$2.69	$5.60	$11.65	$24.23
Labor cost	$5.00	$6.00	$6.00	$7.00	$8.00
Total $/ft	$7.04	$8.69	$11.60	$18.65	$32.23

CHEMICALS USED
Schedule II

PLACID LAKES UTILITIES, INC.

Docket No.: 130025-WU

Highlands County

25-30.440 (2)
CHEMICALS USED

Test Year Ended December 31, 2012

Chemicals Used Schedule

Company: Placid Lakes Utilities, Inc.
Docket No.: 130025-WU
Test Year Ended: 12/31/12
Interim [ ] Final [X]
Historical [X] Projected [ ]

Florida Public Service Commission

Schedule II
Page 1 of 1
Preparer: Larry P. King, Treasurer

CHLORINE	2010 QUANTITY LBS	2010 $AMOUNT	2010 UNIT PRICE	2010 DOSAGE RATE	2011 QUANTITY LBS	2011 $AMOUNT	2011 UNIT PRICE	2011 DOSAGE RATE	2012 QUANTITY LBS	2012 $AMOUNT	2012 UNIT PRICE	2012 DOSAGE RATE
JAN	750	$717.53	$0.96	9 ppm	1050	$1,003.47	$0.96	9 ppm	750	$723.00	$0.96	9 ppm
FEB	750	$717.53	$0.96	9 ppm	750	$722.63	$0.96	9 ppm				9 ppm
MAR	750	$717.53	$0.96	9 ppm	750	$722.63	$0.96	9 ppm	1050	$1,005.40	$0.96	9 ppm
APR	750	$718.67	$0.96	9 ppm	750	$723.00	$0.96	9 ppm	750	$726.00	$0.97	9 ppm
MAY	900	$859.87	$0.96	9 ppm	750	$723.00	$0.96	9 ppm	750	$726.00	$0.97	9 ppm
JUNE				9 ppm	750	$723.00	$0.96	9 ppm	750	$726.00	$0.97	9 ppm
JULY	900	$859.87	$0.96	9 ppm				9 ppm	750	$726.00	$0.97	9 ppm
AUG	1050	$1,001.07	$0.95	9 ppm	750	$723.00	$0.96	9 ppm				9 ppm
SEPT	1050	$1,001.07	$0.95	9 ppm	900	$869.20	$0.97	9 ppm	750	$726.00	$0.97	9 ppm
OCT				9 ppm	900	$864.20	$0.96	9 ppm	750	$726.00	$0.97	9 ppm
NOV	750	$718.67	$0.96	9 ppm	750	$723.00	$0.96	9 ppm	750	$726.00	$0.97	9 ppm
DEC	750	$718.67	$0.96	9 ppm	750	$723.00	$0.96	9 ppm	1050	$1,008.40	$0.96	9 ppm
Total	8400	$8,030.48	$0.96	9 ppm	8850	$8,520.13	$0.96	9 ppm	8100	$7,818.80	$0.97	9 ppm

Per discussion with Nathan Brewer, Plant Operator, target Dosage Rates are calculated as follows:

Chlorine: The target is 9 ppm:
The plant uses on average 24 lbs Chlorine / day (gas – 150 lbs canister)
The plant produces approximately 300,000 gals water / day
This coverts to 2.5 million lbs of water produced / day (300,000 x 8.34 lbs / gal water)
Thus the Dosage Rate is 24 lbs Chlorine / 2.5 lbs water = 9 lbs Chlorine / million lbs water

SEQUESTAL	2010 QUANTITY GALLONS	2010 $AMOUNT	2010 UNIT PRICE	2010 DOSAGE RATE	2011 QUANTITY GALLONS	2011 $AMOUNT	2011 UNIT PRICE	2011 DOSAGE RATE	2012 QUANTITY GALLONS	2012 $AMOUNT	2012 UNIT PRICE	2012 DOSAGE RATE
JAN	120	$1,787.37	$14.89	6.67 gpm	120	$1,795.77	$14.96	6.67 gpm	120	$1,798.83	$14.99	6.67 gpm
FEB	120	$1,785.51	$14.88	6.67 gpm				6.67 gpm				6.67 gpm
MAR				6.67 gpm	120	$1,802.18	$15.02	6.67 gpm	120	$1,834.17	$15.28	6.67 gpm
APR	120	$1,788.21	$14.90	6.67 gpm				6.67 gpm	120	$1,800.94	$15.01	6.67 gpm
MAY				6.67 gpm	120	$1,795.65	$14.96	6.67 gpm				6.67 gpm
JUNE	120	$1,789.93	$14.92	6.67 gpm				6.67 gpm	120	$1,804.33	$15.04	6.67 gpm
JULY				6.67 gpm	120	$1,799.02	$14.99	6.67 gpm				6.67 gpm
AUG	120	$1,789.47	$14.91	6.67 gpm				6.67 gpm				6.67 gpm
SEPT				6.67 gpm	120	$1,798.76	$14.99	6.67 gpm	120	$1,809.26	$15.08	6.67 gpm
OCT	120	$1,792.02	$14.93	6.67 gpm				6.67 gpm				6.67 gpm
NOV	120	$1,791.78	$14.93	6.67 gpm	120	$1,799.22	$14.99	6.67 gpm	120	$1,763.79	$14.70	6.67 gpm
DEC				6.67 gpm				6.67 gpm				6.67 gpm
	840	$12,524.29	$14.91	6.67 gpm	720	$10,790.60	$14.99	6.67 gpm	720	$10,811.32	$15.02	6.67 gpm

Sequestall: The target Dosage Rate is 6.67 gpm:
The plant uses on average 2 gals Sequestall / day (liquid – 30 gal drums)
The plant produces approximately 300,000 gals water / day
Thus the Dosage Rate is 2 gals Sequestall / 300,000 gals x 1,000,000 = 6.67 gals Sequestall / million gals water

Totals	$20,555	$19,311	$18,630

	Grand Total	Average	Excess over 2012
	$58,496	$19,499	$868

Sch. B-3

Total Chemicals Purchased	18,630
Prepaid Chemicals AJE Acct. # 162	-285
Balance Account # 618.3	18,345

Rule 25-30.440(2), F.A.C.

CHEMICAL ANALYSIS
Schedule III

PLACID LAKES UTILITIES, INC.

Docket No.: 130025-WU

Highlands County

25-30.440 (3)
CHEMICAL ANALYSIS

Test Year Ended December 31, 2012

SCHEDULE III

SHORT Environmental Laboratories, Inc.

10405 U.S. 27 S. Sebring, FL 33876 email: Shortlab@strato.net
Phone: (863) 655-4022 (800) 833-4022 Fax: (863) 655-5820

Report Cover Page

Client:	**Placid Lakes Utilities, Inc.**	Report #:	**2012090218**
Address:	410 Washington Blvd., NW	Report Date:	9/26/2012
City, State, Zip:	Lake Placid, FL 33852		
Attention:	Pam Brewer		
Project:	DWTP		
	Disinfection By-Products		
Sample Date:	8/16/2012		
Sample Numbers:	396426		

This report package includes the following contents and attachments:

Contents	Item	Pages
Cover Page:		1
Report of Analysis:	DW Original	3
Attachments:	Sampler Certification	1
	Chain of Custody	1
Total Pages:		6

Commonly used Qualifiers with explanations:

Qualifier	Explanation
U	Compound was analyzed for but not detected.
J	Result is between the MDL and the PQL.
Q	Sample was analyzed out of holding time.
J	Estimated value; may not be accurate.

The results contained in the report meet all requirements of the NELAC standards. All results are representative of the sample as collected. Direct all questions to the signatory below at the phone number above.

Respectfully Submitted,

Douglas E. Morton

Digitally signed by Douglas E. Morton
DN: cn=Douglas E. Morton, o=Short Environmental Labs, ou=Project Manager, email=shortlab@strato.net, c=US
Date: 2012.09.26 16:27:53 -04'00'

Project Manager

This report is for the exclusive and private use of the client listed above and recipients designated by the client. If reproduced in whole or in part by authorized recipients, this cover sheet should accompany any such copies.

ACCREDITED IN ACCORDANCE WITH nelac
FL CERT #85458

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

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

Sys em Name: Placid Lakes Utilities PWS I.D. #: 6280223

System Type (check one): (●) Community ( ) NonTransient Noncommunity ( ) Transient NonCommunity

Address: 410 Washington Blvd NW

City: Lake Placid State: Florida ZIP Code: 33852

Phone#: 863-465-0345 Fax #: 863-465-1313 E-Mail Address: ndbrewer@embarqmail.com

SAMPLE INFORMATION (to be completed by sampler)

Sample Number: 396426 Sample Date: 8/16/2012 Sample Time: 1300

Sample Location (be specific): 2620 Placid View Drive, Lake Placid, FL 33852 - hose spigot on south side of house

Disinfectant Residual (Required when reporting results for trihalomethanes and haloacetic acids): 0.4 mg/L Field pH: 7.3

Sample Type (Check Only One)

- [ ] Distribution
- [ ] Entry Point (to Distribution)
- [ ] Plant Tap (not for compliance with 62.550)
- [ ] Raw (at well in ake)
- [■] Max. Residence Time
- [ ] Ave. Residence Time
- [ ] Near First Customer

Reason(s) for Sample (Check all that apply)

- [■] Routine Compliance (with 62-550)
- [ ] Confirmantion of MCL Exceedance*
- [ ] Composite Multiple Sites**
- [ ] Clearance (permitting)
- [ ] O her:

- [ ] Quarterly (Which One?)
- [ ] Special (not for compliance with 62-550.)
- [ ] Violation Resolution
- [ ] Replacement (of invalidated Sample)

Sampling Procedure Used or other Comments:

*See 62-550.500(6) for requirements and restrictions and 62-550.513(3) for nitrate or nitrite exceedances..

** See 62-550 550(4) for requirements and attach a results page for each site.

SAMPLER CERTIFICATION

I, Nathan Brewer (Print Name), Operator (Print Title), do HEREBY CERTIFY that the above public water system and sample collection information is complete and correct.

Signature: Date: 08/16/2012

Cert fied Opera or #: C-14995 Phone #: 863-441-1090 Sampler's FAX #: 863-465-1313

Sampler's E-mail: ndbrewer@embarqmail.com

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

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

LABORATORY CERTIFICATION INFORMATION (to be completed by lab - Please type *or* print legibly)

Lab Name: Short Environmental Laboratories | Florida DOH Certification # : E85458 | Certification Expiration Date: 06/30/ 013

ATTACH CURRENT DOH ANALYTE SHEET*

Address: 10405 US Highway 27 South | Sebring, FL 33876 | Phone # : (863) 655-4022

Were any analyses subcontracted? (●) Yes ( ) No | If yes, please provide DOH certification Number(s): E84129

ATTACH CURRENT DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB*

ANALYSIS INFORMATION (to be completed by lab) | Date Sample(s) Received : 8/16/2012

PWS ID (From Page 1): 6280223 | Sample Number (From Page 1): 396426 | Lab Assigned Report Number or Job ID: 396426

Group(s) Analyzed & Results attached for compliance with Chapter 62-550, F.A.C. (Check all that apply):

Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts	Radionuclides	Secondaries
☐ All Except Asbestos	☐ All 30	☐ All 21	■ Trihalomethanes	☐ Single Sample	☐ All 14
☐ Partial	☐ All Except Dioxin	☐ Partial	■ Haloacetic Acid	☐ Qtrly Composite**	☐ Partial
☐ Nitrate	☐ Partial		☐ Chlorite		
☐ Nitrite	☐ Dioxin Only		☐ Bromate	Miscellaneous	Lead & Copper
☐ Asbe tos				☐	☐

LAB CERTIFICATION

I, Douglas E. Morton (Print Name), Project Manager (Print Title) do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).

Signature: Douglas E Morton | Date: 9/26/2012

* Failure to provide a valid and current Florida DOH lab certification number and a current Analyte Sheet for the attached analysis results will result in rejection of the report, possible enforcement against the public water system for failure to sample, and may result in notification of the DOH Bureau of Laboratory Services.

** Please provide radiological sample dates & locations for each quarter.

CONFIRMATION & NOTIFICATION IS REQUIRED WITHIN 24 HOURS FOR NITRATE OR NITRITE MCL EXCEEDANCES

NON-DETECTS ARE TO BE REPORTED AS THE MDL WITH A "U" QUALIFIER

(Non-detects reported as "BDL" or with a "<" are not acceptable)

COMPLIANCE DETERMINATION (to be completed by DEP or DOH)

Sample Collection & Analysis Satisfactory: ( ) Yes ( ) No | Replacement Sample or Report Requested (circle or highlight group(s) above)

Person Notified: | Date Notified: | DEP/DOH Reviewing Official:

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

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

Disinfection By-Products
62-550.310(3)

Report Number / Job ID: 396426
Disinfectant Residual (mg/L) (From Page 1): 0.4
PWS ID (From Page 1): 6280223

Comtam ID	Contaminant Name	MCL	Units	Analysis Results	Qualifier*	Analytical Method	Lab MDL	Regulatory MRL **	Analysis Date	Analysis Time	DOH Lab Certification#
1099	Chlorite	1000	µg/L					20 ***			
1011	Bromate	10	µg/L					5.0 or 1.0****			

Contam ID	Contaminant Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Regulatory MRL **	Analysis Date	Analysis Time	DOH Lab Certification#
2450	Monochloroacetic Acid	N/A	µg/L	0.80	U	EPA 552.2	0.80	2.0	08/31/2012	2153	E84129
2451	Dichloroacetic Acid	N/A	µg/L	14.		EPA 552.2	0.72	1.0	08/31/2012	2153	E84129
2452	Trichloroacetic Acid	N/A	µg/L	22.		EPA 552.2	0.36	1.0	08/31/2012	2153	E84129
2453	Monobromoacetic Acid	N/A	µg/L	0.35	U	EPA 552.2	0.35	1.0	08/31/2012	2153	E84129
2454	Dibromoacetic Acid	N/A	µg/L	0.43	I	EPA 552.2	0.28	1.0	08/31/2012	2153	E84129
2456	Total Haloacetic Acids (HAA5)	60	µg/L	36.43		EPA 552.2	0.28	—	08/31/2012	2153	E84129

Contam ID	Contaminant Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Regulatory MRL **	Analysis Date	Analysis Time	DOH Lab Certification#
2941	Chloroform	N/A	µg/L	43.		EPA 524.2	0.2	1.0	08/23/2012	0105	E84129
2942	Bromoform	N/A	µg/L	0.2	U	EPA 524.2	0.2	1.0	08/23/2012	0105	E84129
2943	Bromodichloromethane	N/A	µg/L	10.		EPA 524.2	0.2	1.0	08/23/2012	0105	E84129
2944	Dibromochloromethane	N/A	µg/L	2.3		EPA 524.2	0.1	1.0	08/23/2012	0105	E84129
2950	Total Trihalomethanes	80	µg/L	55.3		EPA 524.2	0.1	—	08/23/2012	0105	E84129

** Laboratories are required to adhere to the minimum reporting level (MRL) requirements of 40 CFR 141.131(b)(2)(iv).

*** 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 µg/L MRL for bromate.

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, 0, T, Z,?,, are unacceptable for compliance with 62.550. Results qualified with a J,Q,R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

Reporting Format 62-550.730
Effective January 1995, Revised January 2004

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

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

System Name: Placid Lakes Utilities PWS I.D. #: 6280223

System Type (check one): (X) Community ( ) NonTransient Noncommunity ( ) Transient NonCommunity

Address: 410 Washington Blvd N.W.

City: Lake Placid State: Florida ZIP Code: 33852

Phone#: 863-465-0345 Fax #: 863-465-1313 E-Mail Address: NDBrewer@embarqmail.com

SAMPLE INFORMATION (to be completed by sampler)

Sample Number: _____ Sample Date: 8-16-12 Sample Time: 1:00 pm

Sample Location (be specific): 2620 Placid View Drive L.P. FL 33852 Hose Spigot on South side of House

Disinfectant Residual (Required when reporting results for trihalomethanes and haloacetic acids): .4 mg/L Field pH: 7.3

Sample Type (Check Only One)

- [X] Distribution
- [ ] Entry Point (to Distribution)
- [ ] Plant Tap (not for compliance with 62.550)
- [ ] Raw (at well intake)
- [ ] Max. Residence Time
- [ ] Ave. Residence Time
- [ ] Near First Customer

Reason(s) for Sample (Check all that apply)

- [X] Routine Compliance (with 62-550)
- [ ] Confirmantion of MCL Exceedance*
- [ ] Composite Multiple Sites**
- [ ] Clearance (permitting)
- [X] Other:
- [ ] Quarterly (Which One?)
- [ ] Special (not for compliance with 62-550.)
- [ ] Violation Resolution
- [ ] Replacement (of invalidated Sample)

Sampling Procedure Used or other Comments: Filled vials until full screw on caps make sure no air bubbles.

*See 62-550.500(6) for requirements and restrictions and 62-550.513(3) for nitrate or nitrite exceedances..

** See 62-550.550(4) for requirements and attach a results page for each site.

SAMPLER CERTIFICATION

I, NATHAN BREWER (Print Name), water operator (Print Title), do HEREBY CERTIFY that the above public water system and sample collection information is complete and correct.

Signature: _____ Date: 8-16-12

Certified Operator #: C-14995 Phone #: 863-441-1090 Sampler's FAX #: 863-465-1313

Sampler's E-mail: NDBREWER@embarqmail.com

SHORT ENVIRONMENTAL LABORATORIES

10405 US 27 S
SEBRING, FL 33876
(863) 655-4022 (800) 833-4022
FAX: (863) 655-5820

SAMPLER'S NAME: (PLEASE PRINT) NATHAN BREWER

CLIENT NAME: Placid Lakes Utilities # 411

SAMPLERS SIGNATURE:

PROJECT: DBPs

LOCATION: DWTP

									LABORATORY ANALYSES					
								Cont Type	Vial	Vial				
								Cont Size	40 mL	40 mL				
								Material	G	G				
								Preservative	HCl	NH_4Cl				
FIELD ID#	SAMPLE ID	DATE	TIME	SAMP TYPE	GRAB	WELL	LABORATORY ID#	# OF CONT	THM	HAA		CL2	pH	
	2620 Placid View Dr.	8-16-12	1:00 pm	DW	X		396426	6	3	3		.4	7.3	

COMMENTS: *Sampler's certification must be submitted with this form.*

SOME CONTAINERS MAY BE PRESERVED.

PLEASE READ ALL CONTAINER LABELS FOR CAUTION NOTICES.

SAMPLES ICED TO 9.8 C

NUTRIENT CONTAINERS PRESERVED H2SO4

METALS CONTAINERS PRESERVED HNO3

OTHER

	YES	NO
	✓	

B. Powers 101002

SAMPLE QTY:	RELINQUISHED BY:	ACCEPTED BY:	DATE:	TIME:
6			8-16-12	1425

DEPARTED LAB	
ARRIVED SITE	
DEPARTED SITE	
ARRIVED LAB	

WB

CHAIN OF CUSTODY AND TRANSMITTAL FORM

Florida Department of Environmental Protection

Safe Drinking Water Program Laboratory Reporting Format

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

System Name: Placid Lakes Utilities PWS I.D. #: 6280223

System Type (check one): (●) Community ( ) NonTransient Noncommunity ( ) Transient NonCommunity

Address: 410 Washington Blvd NW

City: Lake Placid State: Florida ZIP Code: 33852

Phone#: 863-465-1313 Fax #: E-Mail Address:

SAMPLE INFORMATION (to be completed by sampler)

Sample Number: 397005 Sample Date: 8/30/2012 Sample Time: 1000

Sample Location (be specific): Point of Entry

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

Sample Type (Check Only One)

- [ ] Distribution
- [■] Entry Point (to Distribution)
- [ ] Plant Tap (not for compliance with 62.550)
- [ ] Raw (at well intake)
- [ ] Max. Residence Time
- [ ] Ave. Residence Time
- [ ] Near First Customer

Reason(s) for Sample (Check all that apply)

- [■] Routine Compliance (with 62-550)
- [ ] Confirmantion of MCL Exceedance*
- [ ] Composite Multiple Sites**
- [ ] Clearance (permit ing)
- [ ] Other:

Sampling Procedure Used or other Comments:

- [ ] Quarterly (Which One?)
- [ ] Special (not for compliance w th 62-550.)
- [ ] Violation Resolution
- [ ] Replacement (of invalidated Sample)

*See 62-550.500(6) for requirements and restrictions and 62-550.513(3) for nitrate or nitrite exceedances..

** See 62-550.550(4) for requirements and attach a results page for each site.

SAMPLER CERTIFICATION

I, Nathan Brewer (Print Name), Operator (Print Title), do HEREBY CERTIFY that the above public water system and sample collection information is complete and correct.

Signature: Date: 08/30/2012

Certified Operator #: Phone #: Sampler's FAX #:

Sampler's E-mail:

Reporting Format 62-550.730

Effective January 1995, Revised February 2010

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

LABORATORY CERTIFICATION INFORMATION (to be completed by lab - Please type *or* print legibly)

Lab Name: Short Environmental Laboratories

Florida DOH Certification # : E85458 Certification Expiration Date: 06/30/2013

ATTACH CURRENT DOH ANALYTE SHEET*

Address: 10405 US Highway 27 South Sebring, FL 33876 Phone # : (863) 655-4022

Were any analyses subcontracted? ◯ Yes ◉ No If yes, please provide DOH certification Number(s):

ATTACH CURRENT DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB*

ANALYSIS INFORMATION (to be completed by lab) Date Sample(s) Received : 8/30/2012

PWS ID (From Page 1): 6280223 Sample Number (From Page 1): 397005 Lab Assigned Report Number or Job ID: 397005

Group(s) Analyzed & Results attached for compliance with Chapter 62-550, F.A.C. (Check all that apply):

Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts	Radionuclides	Secondaries
☐ All Except Asbestos	☐ All 30	☐ All 21	☐ Trihalomethanes	☐ Single Sample	☐ All 14
☐ Partial	☐ All Except Dioxin	☐ Partial	☐ Haloacetic Acid	☐ Qtrly Composite**	☐ Partial
■ Nitrate	☐ Partial		☐ Chlorite		
■ Nitrite	☐ Dioxin Only		☐ Bromate	Miscellaneous	Lead & Copper
☐ Asbestos				☐	☐

LAB CERTIFICATION

I, Douglas E. Morton (Print Name), Project Manager (Print Title) do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).

Signature: [signature] Date: 9/10/2012

* Failure to provide a valid and current Florida DOH lab certification number and a current Analyte Sheet for the attached analysis results will result in rejection of the report, possible enforcement against the public water system for failure to sample, and may result in notification of the DOH Bureau of Laboratory Services.

** Please provide radiological sample dates & locations for each quarter.

CONFIRMATION & NOTIFICATION IS REQUIRED WITHIN 24 HOURS FOR NITRATE OR NITRITE MCL EXCEEDANCES

NON-DETECTS ARE TO BE REPORTED AS THE MDL WITH A "U" QUALIFIER

(Non-detects reported as "BDL" or with a "<" are not acceptable)

COMPLIANCE DETERMINATION (to be completed by DEP or DOH)

Sample Collection & Analysis Satisfactory: ( ) Yes ( ) No Replacement Sample or Report Requested (circle or highlight group(s) above)

Person Notified: _____ Date Notified: _____ DEP/DOH Reviewing Official: _____

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

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

Inorganic Contaminants

62-550.310(1)

Report Number/Job ID: 397005

PWS ID (from page 1): 6280223

Contam ID	Contaminant Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification #
1040	Nitrate (as N)	10	mg/L	0.06	I	EPA 353.2	0.02	08/30/2012	1643	E85458
1041	Nitrite (as N)	1	mg/L	0.01	U	EPA 353.2	0.01	08/30/2012	1643	E85458
1005	Arsenic	0.01	mg/L							
1010	Barium	2	mg/L							
1015	Cadmium	0.005	mg/L							
1020	Chromium	0.10	mg/L							
1024	Cyanide	0.20	mg/L							
1025	Fluoride	4.0	mg/L							
1030	Lead	0.015	mg/L							
1035	Mercury	0.002	mg/L							
1036	Nickel	0.10	mg/L							
1045	Selenium	0.05	mg/L							
1052	Sodium	160	mg/L							
1074	Antimony	0.006	mg/L							
1075	Beryllium	0.004	mg/L							
1085	Thallium	0.002	mg/L							
1094	Asbestos	7 MFL	MFL							

*Results must be reported with appropriate qualifiers in accordance with Florida Administrative Code Rule 62-160, Table 1. Results qualified with A, F, H, N. O, T, Z, ?, are unacceptable for compliance with 62.550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

Reporting Format 62-550.730

Effective January 1995, Revised February 2010

SHORT ENVIRONMENTAL LABORATORIES

10405 US 27 S
SEBRING, FL 33876
(863) 655-4022 (800) 833-4022
FAX: (863) 655-5820

	LABORATORY ANALYSES					
Cont type	Nut	S & M				
Cont size	250 mL	250 mL				
Material	P	P				
Preservative	H_2SO_4	Cool < 6°				

SAMPLER'S NAME: (PLEASE PRINT) NATHAN BREWER
SAMPLER'S SIGNATURE: Nathan Brewer
CLIENT NAME: Placid Lakes Utilities # 411
PROJECT: Nitrates
LOCATION: DWTP 629223

FIELD ID#	SAMPLE ID	DATE	TIME	SAMP TYPE	GRAB	LABORATORY ID#	# OF CONT	NO_3 NOx	NO_2				
	P.O.E	8-30-12	10:20 am	DW	X	397005	2	1	1				

	YES	NO
a2.	✓	
	✓	

Comments: Sample's acidification must be submitted with this form.
SOME CONTAINERS MAY BE PRESERVED.
PLEASE READ ALL CONTAINER LABELS FOR CAUTION NOTICES.

Nutrient Containers Preserved, H2SO4
Metals Container Preserved, HNO3
Vials Preserved, HCl
Samples iced to 3.2 C

101186

SAMPLE QTY:	RELINQUISHED BY:	ACCEPTED BY:	DATE:	TIME:
2	Nathan Brewer	D Kimball	8-30-12	1150

pb

	TIME
DEPARTED LAB	
ARRIVED SITE	
DEPARTED SITE	
ARRIVED LAB	

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Dec

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(DS-4022, 720 Reporting Format Effective 01/1/2005, Revised 08/2010)

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33875-6847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Lab Receipt Date & Time: 12-10-12 @ 1450
Analysis Date & Time: 12-10-12 @ 1536
Sample Acceptance Criteria:
Sample Preservation: ☑ On Ice ☐ Not On Ice ☐ 2 °C
Disinfectant Check: ☑ Not Detected ☐ _____ mg/L
This sample does not meet the following NELAC requirements:

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-87-☐☐☐☐☐☐☐

Analysis Requested: ☒ Total Coliform/*E. coli* Building Permit # ☐☐☐☐☐☐☐☐

System Name: **Placid Lakes Utilities, Inc.** PWS I.D. 6280223

Address: 400 Washington Blvd. NW City: Lake Placid

System or Owner's Phone #: 863-465-0345 Fax #: 863-465-1313

Collector: Nathan Brewer Collector's Phone #: 863-441-1090

Type of Supply: (check only one)
☒ Community Water System ☐ Non-Transient Non-community Water System ☐ Transient Non-community Water System
☐ Limited Use System ☐ Bottled Water ☐ Private Well ☐ Swimming Pool ☐ Other: _____

Reason for Sampling: (check all that apply)
☒ Distribution Routine ☐ Distribution Repeat ☐ Raw (triggered or assessment) ☐ Raw (triggered or assessment) additional ☐ Well Survey
☐ Clearance ☐ Replacement (also check type of sample being replaced) ☐ Boil Water Notice ☐ Other: _____

Sample Collection Date: 12-10-12

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method: COLILERT SM 9223B				
						Non-Coliform	Total Coliform	E. coli	Data Qualifier [2]	Lab Sample #
1	Well # 1	12:00 pm	R	X	7.3		A	A		12-3730
2	Well # 2	12:10 pm	R	X	7.3		A	A		12-3731
3	Well # 3	12:20 pm	R	X	7.3		A	A		12-3732
4	402 W. Waterway Ave NW	12:30 pm	D	.7	7.3		A	A		12-3734 12-3733 12-10-12
5	109 Club Rd NW	12:45 pm	D	.8	7.3		A	A		12-3735
6	837 Lincoln Rd NW	12:55 pm	D	.7	7.3		A	A		12-3736
7	483 Archie Summers Rd	1:05 pm	D	.7	7.3		A	A		12-3737
Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine				.725						

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Disinfectant Residual Analysis Method:
☒ DPD Colorimetric ☐ Other: _____

Person performing disinfectant analysis is (see instructions on reverse):
☒ A certified operator (# C - 14995)
☐ Supervised by certified operator (#)
☐ Employed by a certified lab ☐ Employed by DEP or DOH
☐ Authorized representative of supplier of water

Date and time PWS notified by lab of positive results: _____

Date and time DEP/DOH notified by lab of positive results: _____

Lab Signature: _____

Title: BS1 Date Report Issued: 12-11-12

Name and Mailing Address of person to Recive Repot

Placid Lakes Utilities, Inc.
410 Washington Blvd. NW
Lake Placid, Fl 33852

DEP/DOH USE ONLY
☐ Satisfactory
☐ Incomplete Collection Information
☐ Repeat Samples Required
☐ Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

[1] For Sample Type: ...

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(DEP-SOP-001 Reporting Format Effective 07/1/08, Revised 03/2010)

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33875-5847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Lab Receipt Date & Time: 11-07-12 @ 1345
Analysis Date & Time: 11-07-12 @ 1640

Sample Acceptance Criteria:
Sample Preservation: ☒ On Ice ☐ Not On Ice ☐ 2 °C
Disinfectant Check: ☒ Not Detected ☐ _____ mg/L
This sample does not meet the following NELAC requirements:

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-87-

Analysis Requested: ☒ Total Coliform/E. coli Building Permit #

System Name: Placid Lakes Utilities, Inc. PWS I.D. 6280223

Address: 400 Washington Blvd. NW City: Lake Placid

System or Owner's Phone #: 863-465-0345 Fax #: 863-465-1313

Collector: Nathan Brewer Collector's Phone #: 863-441-1090

Type of Supply: (check only one)
☒ Community Water System ☐ Non-Transient Non-community Water System ☐ Transient Non-community Water System
☐ Limited Use System ☐ Bottled Water ☐ Private Well ☐ Swimming Pool ☐ Other: _____

Reason for Sampling: (check all that apply)
☒ Distribution Routine ☐ Distribution Repeat ☐ Raw (triggered or assessment) ☐ Raw (triggered or assessment) additional ☐ Well Survey
☐ Clearance ☐ Replacement (also check type of sample being replaced) ☐ Boil Water Notice ☐ Other: _____

Sample Collection Date: 11-7-12

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method: COLILERT SM 9223B				
						Non-Coliform	Total Coliform	E. coli	Data Qualifier [2]	Lab Sample #
1	Well # 1	9:00 AM	R	X	7.3		A	A		12-3343
2	Well # 2	9:15 AM	R	X	7.3		A	A		12-3344
3	Well # 3	9:30 AM	R	X	7.3		A	A		12-3345
4	110 Fox Ridge Rd	9:50 AM	D	1.0	7.3		A	A		12-3346
5	759 Washington NW	10:00 AM	D	1.1	7.3		A	A		12-3347
6	1998 Placid Lakes Blvd	10:15 AM	D	1.0	7.3		A	A		12-3348
7	128 Lime Rd NE	9:40 AM	D	1.0	7.3		A	A		12-3349

Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine: 1.025

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Disinfectant Residual Analysis Method:
☒ DPD Colorimetric ☐ Other: _____

Person performing disinfectant analysis is (see instructions on reverse):
☒ A certified operator (# C - 14995)
☐ Supervised by certified operator (#)
☐ Employed by a certified lab ☐ Employed by DEP or DOH
☐ Authorized representative of supplier of water

Date and time PWS notified by lab of positive results: _____
Date and time DEP/DOH notified by lab of positive results: _____
Lab Signature: _____
Title: ASI Date Report Issued: 11-08-12

Name and Mailing Address of person to Recive Repot

Placid Lakes Utilities, Inc.
410 Washington Blvd. NW
Lake Placid, Fl 33852

DEP/DOH USE ONLY
☐ Satisfactory
☐ Incomplete Collection Information
☐ Repeat Samples Required
☐ Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

[1] For Sample Types see Instructions Item 3.1.6 [illegible]

Oct

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(62-550.730 Reporting Format Effective 04/1998, Revised 02/2012)

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33875-5847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Lab Receipt Date & Time: 10-9-12 13:00
Analysis Date & Time: 10-09-12 15:50
Sample Acceptance Criteria:
Sample Preservation: ☒ On Ice ☐ Not On Ice ☐ 10 °C
Disinfectant Check: ☒ Not Detected ☐ _____ mg/L
This sample does not meet the following NELAC requirements:

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-57-☐☐☐☐☐☐☐

Analysis Requested: ☒ Total Coliform/E. coli Building Permit # ☐☐☐☐☐☐☐☐

System Name: Placid Lakes Utilities, Inc. PWS I.D. 6280223

Address: 400 Washington Blvd. NW City: Lake Placid

System or Owner's Phone #: 863-465-0345 Fax #: 863-465-1313

Collector: Nathan Brewer Collector's Phone #: 863-441-1090

Type of Supply: (check only one)
☒ Community Water System ☐ Non-Transient Non-community Water System ☐ Transient Non-community Water System
☐ Limited Use System ☐ Bottled Water ☐ Private Well ☐ Swimming Pool ☐ Other: _____

Reason for Sampling: (check all that apply)
☒ Distribution Routine ☐ Distribution Repeat ☐ Raw (triggered or assessment) ☐ Raw (triggered or assessment) additional ☐ Well Survey
☐ Clearance ☐ Replacement (also check type of sample being replaced) ☐ Boil Water Notice ☐ Other: _____

Sample Collection Date: 10-9-12

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method COLILERT SM 9223B				
						Non-Coliform	Total Coliform	E. coli	Data Qualifier [2]	Lab Sample #
1	Well # 1	9:30 AM	R	X	7.3		P	A		2991
2	Well # 2	9:40 AM	R	X	7.3		P	A		2992
3	Well # 3	9:50 AM	R	X	7.3		A	A		2993
4	103 Orange Rd NE	10:00 AM	D	.9	7.3		A	A		2994
5	563 Lake August Dr	10:30 AM	D	.8	7.3		A	A		2995
6	100 Aries Place	10:30 AM	D	.7	7.3		A	A		2996
7	117 Lemon Rd NE	10:15 AM	D	.8	7.3		A	A		2997

Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine: .8

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Disinfectant Residual Analysis Method:
☒ DPD Colorimetric ☐ Other: _____
Person performing disinfectant analysis is (see instructions on reverse):
☒ A certified operator (# C - 14995)
☐ Supervised by certified operator (#)
☐ Employed by a certified lab ☐ Employed by DEP or DOH
☐ Authorized representative of supplier of water

Date and time PWS notified by lab of positive results: 10-10-12 15:40
Date and time DEP/DOH notified by lab of positive results: 10-10-12 15:43
Lab Signature: _____
Title: ES Tech Date Report Issued: 10/10/12

Name and Mailing Address of person to Recive Repot

Placid Lakes Utilities, Inc.
410 Washington Blvd. NW
Lake Placid, Fl 33852

DEP/DOH USE ONLY
☐ Satisfactory
☐ Incomplete Collection Information
☐ Repeat Samples Required
☐ Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

[1] For Sample Types see Instructions Nos. 11 & 12

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(DS-DOH-730 Reporting Format Effective 01/1998, Revised 03/2010)

Lab Receipt Date & Time: 9/10/12 @ 2:44pm

Analysis Date & Time: 9/10/12 @ 16:20

Sample Acceptance Criteria:
Sample Preservation: ☒Iced ☐Not On Ice ☐ 18 °C
Disinfectant Check: ☒Not Detected ☐ _____ mg/L

This sample does not meet the following NELAC requirements:

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33875-5847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-57- ☐☐☐☐☐☐☐

Analysis Requested: ☒Total Coliform/*E. coli* Building Permit # ☐☐☐☐☐☐☐☐

System Name: **Placid Lakes Utilities, Inc.** PWS I.D. 6280223

Address: 400 Washington Blvd. NW City: Lake Placid

System or Owner's Phone #: 863-465-0346 Fax #: 863-465-1313

Collector: Nathan Brewer Collector's Phone #: 863-441-1080

Type of Supply: (check only one)
☒Community Water System ☐Non-Transient Non-community Water System ☐Transient Non-community Water System
☐Limited Use System ☐Bottled Water ☐Private Well ☐Swimming Pool ☐Other: _____

Reason for Sampling: (check all that apply)
☒Distribution Routine ☐Distribution Repeat ☐Raw (triggered or assessment) ☐Raw (triggered or assessment) additional ☐Well Survey
☐Clearance ☐Replacement (also check type of sample being replaced) ☐Boil Water Notice ☐Other: _____

Sample Collection Date: 9-10-12

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method: COLILERT SM 9223B				
						Non-Coliform	Total Coliform	*E. coli*	Data Qualifier [2]	Lab Sample #
1	Well # 1	12:30 pm	R	X	7.3		A	A		2556
2	Well # 2	12:45 pm	R	X	7.3		A	A		2557
3	Well # 3	12:55 pm	R	X	7.3		A	A		2558
4	754 Placid Lakes Blvd	1:00 pm	D	1.1	7.3		A	A		2559
5	1180 Catfish Creek Rd	1:45 pm	D	.9	7.3		A	A		2560
6	5458 Placid Lakes Blvd	1:15 pm	D	1.0	7.3		A	A		2561
7	318 Lake Groves Rd NW	1:20 pm	D	1.0	7.3		A	A		2562

Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine: 1.0

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Disinfectant Residual Analysis Method:
☒DPD Colorimetric ☐Other: _____

Person performing disinfectant analysis is (see instructions on reverse):
☒A certified operator (# C - 14995)
☐Supervised by certified operator (#)
☐Employed by a certified lab ☐Employed by DEP or DOH
☐Authorized representative of supplier of water

Date and time PWS notified by lab of positive results: _____

Date and time DEP/DOH notified by lab of positive results: _____

Lab Signature: _____

Title: ELL Dept Date Report Issued: 9/11/12

Name and Mailing Address of person to Recive Repot

Placid Lakes Utilities, Inc.
410 Washington Blvd. NW
Lake Placid, Fl 33852

DEP/DOH USE ONLY
☐Satisfactory
☐Incomplete Collection Information
☐Repeat Samples Required
☐Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

[1] For Sample Types see Instructions Item I.14 [2] For Analysis Methods see Instructions Item II.C

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(62-550.730 Reporting Format Effective 01/1998, Revised 02/2010)

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33875-5847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Lab Receipt Date & Time: 9/10/12 @ 2:44pm
Analysis Date & Time: 9/10/12 @ 16:20
Sample Acceptance Criteria:
Sample Preservation: ☒Ice ☐Not On Ice ☐ 18 °C
Disinfectant Check: ☒Not Detected ☐ _____ mg/L
This sample does not meet the following NELAC requirements:

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-57-

Analysis Requested: ☒Total Coliform/E. coli Building Permit #

System Name: Placid Lakes Utilities, Inc. PWS I.D. 6280223

Address: 400 Washington Blvd. NW City: Lake Placid

System or Owner's Phone #: 863-465-0346 Fax #: 863-465-1313

Collector: Nathan Brewer Collector's Phone #: 863-441-1090

Type of Supply: (check only one)
☒Community Water System ☐Non-Transient Non-community Water System ☐Transient Non-community Water System
☐Limited Use System ☐Bottled Water ☐Private Well ☐Swimming Pool ☐Other: _____

Reason for Sampling: (check all that apply)
☒Distribution Routine ☐Distribution Repeat ☐Raw (triggered or assessment) ☐Raw (triggered or assessment) additional ☐Well Survey
☐Clearance ☐Replacement (also check type of sample being replaced) ☐Boil Water Notice ☐Other: _____

Sample Collection Date: 9-10-12

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method: COLILERT SM 9223B				
						Non-Coliform	Total Coliform	E. coli	Data Qualifier [2]	Lab Sample #
1	Well # 1	12:30 pm	R	X	7.3		A	A		2556
2	Well # 2	12:45 pm	R	X	7.3		A	A		2557
3	Well # 3	12:55 pm	R	X	7.3		A	A		2558
4	754 Placid Lakes Blvd	1:00 pm	D	1.1	7.3		A	A		2559
5	1180 Catfish Creek Rd	1:45 pm	D	.9	7.3		A	A		2560
6	5458 Placid Lakes Blvd	1:15 pm	D	1.0	7.3		A	A		2561
7	318 Lake Groves Rd NW	1:20 pm	D	1.0	7.3		A	A		2562

Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine: 1.0

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Disinfectant Residual Analysis Method:
☒DPD Colorimetric ☐Other: _____

Person performing disinfectant analysis is (see instructions on reverse):
☒A certified operator (# C - 14995)
☐Supervised by certified operator (#)
☐Employed by a certified lab ☐Employed by DEP or DOH
☐Authorized representative of supplier of water

Date and time PWS notified by lab of positive results: _____
Date and time DEP/DOH notified by lab of positive results: _____
Lab Signature: _____
Title: EL Dir Date Report Issued: 9/11/12

Name and Mailing Address of person to Recive Repot

Placid Lakes Utilities, Inc.
410 Washington Blvd. NW
Lake Placid, Fl 33852

DEP/DOH USE ONLY
☐Satisfactory
☐Incomplete Collection Information
☐Repeat Samples Required
☐Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

[1] For Sample Types see Instructions Item F.16. [2] See Analysis Method Instructions Item F.17.

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(62-560.730 Reporting Format Effective 01/1998, Revised 09/2010)

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33875-5847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Lab Receipt Date & Time: 8-09-12 11:40
Analysis Date & Time: 8-09-12 15:25
Sample Acceptance Criteria:
Sample Preservation: ☑ On Ice ☐ Not On Ice ☐ 2 °C
Disinfectant Check: ☑ Not Detected ☐ _____ mg/L
This sample does not meet the following NELAC requirements:

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-57-

Analysis Requested: ☒ Total Coliform/E. coli Building Permit #

System Name: Placid Lakes Utilities, Inc. PWS I.D. 6280223

Address: 400 Washington Blvd. NW City: Lake Placid

System or Owner's Phone #: 863-465-0345 Fax #: 863-465-1313

Collector: Nathan Brewer Collector's Phone #: 863-441-1090

Type of Supply: (check only one)
☒ Community Water System ☐ Non-Transient Non-community Water System ☐ Transient Non-community Water System
☐ Limited Use System ☐ Bottled Water ☐ Private Well ☐ Swimming Pool ☐ Other: _____

Reason for Sampling: (check all that apply)
☒ Distribution Routine ☐ Distribution Repeat ☐ Raw (triggered or assessment) ☐ Raw (triggered or assessment) additional ☐ Well Survey
☐ Clearance ☐ Replacement (also check type of sample being replaced) ☐ Boil Water Notice ☐ Other: _____

Sample Collection Date: 8-9-12

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method: COLILERT SM 9223B				
						Non-Coliform	Total Coliform	E. coli	Data Qualifier [2]	Lab Sample #
1	Well # 1	10:00 AM	R	X	7.3		A	A		2310
2	Well # 2	10:10 AM	R	X	7.3		A	A		2311
3	Well # 3	10:20 AM	R	X	7.3		A	A		2312
4	483 Archie Summers Rd	10:35 AM	D	1.0	7.3		A	A		2313
5	122 Lincoln Rd NW	10:59 AM	D	1.0	7.3		A	A		2314
6	442 Grant Ave NE	11:05 AM	D	1.0	7.3		A	A		2315
7	402 W. Waterway Ave NW	10:40 AM	D	1.1	7.3		A	A		2316

Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine: 1.025

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Disinfectant Residual Analysis Method:
☒ DPD Colorimetric ☐ Other: _____
Person performing disinfectant analysis is (see instructions on reverse):
☒ A certified operator (# C - 14995)
☐ Supervised by certified operator (#)
☐ Employed by a certified lab ☐ Employed by DEP or DOH
☐ Authorized representative of supplier of water

Date and time PWS notified by lab of positive results: _____
Date and time DEP/DOH notified by lab of positive results: _____
Lab Signature: _____
Title: _____ Date Report Issued: 8-10-12

Name and Mailing Address of person to Recive Repot

Placid Lakes Utilities, Inc.
410 Washington Blvd. NW
Lake Placid, Fl 33852

DEP/DOH USE ONLY
☐ Satisfactory
☐ Incomplete Collection Information
☐ Repeat Samples Required
☐ Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

[1] Raw Ground Water ...

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(DEP-SED, 720 Reporting Format (Effective 01/1/08), Revised 02/2010)

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33876-5847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Lab Receipt Date & Time: 7-09-12 13:55
Analysis Date & Time: 7-09-12 15:25
Sample Acceptance Criteria:
Sample Preservation: ☑ On Ice ☐ Not On Ice ☐ 3 °C
Disinfectant Check: ☑ Not Detected ☐ _____ mg/L
This sample does not meet the following NELAC requirements:

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-87-

Analysis Requested: ☒ Total Coliform/E. coli Building Permit #

System Name: Placid Lakes Utilities, Inc. PWS I.D. 6280223

Address: 400 Washington Blvd. NW City: Lake Placid

System or Owner's Phone #: 863-465-0345 Fax #: 863-465-1313

Collector: Nathan Brewer Collector's Phone #: 863-441-1090

Type of Supply: (check only one)
☒ Community Water System ☐ Non-Transient Non-community Water System ☐ Transient Non-community Water System
☐ Limited Use System ☐ Bottled Water ☐ Private Well ☐ Swimming Pool ☐ Other: _____

Reason for Sampling: (check all that apply)
☒ Distribution Routine ☐ Distribution Repeat ☐ Raw (triggered or assessment) ☐ Raw (triggered or assessment) additional ☐ Well Survey
☐ Clearance ☐ Replacement (also check type of sample being replaced) ☐ Boil Water Notice ☐ Other: _____

Sample Collection Date: 7-1-12

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method: COLILERT SM 9223B				
						Non-Coliform	Total Coliform	E. coli	Data Qualifier [2]	Lab Sample #
1	Well # 1	12:30 pm	R	X	7.3		A	A		1917
2	Well # 2	12:10 pm	R	X	7.3		A	A		1918
3	Well # 3	12:20 pm	R	X	7.3		A	A		1919
4	128 Lime Rd NE	12:30 pm	D	1.0	7.3		A	A		1920
5	511 Jupiter Ave NW	12:50 pm	D	1.0	7.3		A	A		1921
6	405 Flamingo Rd NE	12:59 pm	D	1.0	7.3		A	A		1922
7	110 Fox Ridge Rd	12:40 pm	D	1.0	7.3		A	A		1923
Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine					1.0					

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Disinfectant Residual Analysis Method:
☒ DPD Colorimetric ☐ Other: _____
Person performing disinfectant analysis is (see instructions on reverse):
☒ A certified operator (# C - 14995)
☐ Supervised by certified operator (#)
☐ Employed by a certified lab ☐ Employed by DEP or DOH
☐ Authorized representative of supplier of water

Date and time PWS notified by lab of positive results: _____
Date and time DEP/DOH notified by lab of positive results: _____
Lab Signature: [signature] Title: Lab Date Report Issued: 7-10-12

Name and Mailing Address of person to Recive Repot

Placid Lakes Utilities, Inc.
410 Washington Blvd. NW
33.

DEP/DOH USE ONLY
☐ Satisfactory
☐ Incomplete Collection Information
☐ Repeat Samples Required
☐ Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

[1] Type Sample Key: ...

Search LAB Results Bacteria

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(62-550.730 Reporting Format Effective 01/1995, Revised 02/2010)

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33875-5847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Lab Receipt Date & Time: 6-21-12 14:45
Analysis Date & Time: 6-20-12 15:40
Sample Acceptance Criteria:
Sample Preservation: ☑ On Ice ☐ Not On Ice ☐ 5 °C
Disinfectant Check: ☑ Not Detected ☐ _____ mg/L
This sample does not meet the following NELAC requirements:

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-57-☐☐☐☐☐☐☐

Analysis Requested: ☒ Total Coliform/E. coli Building Permit # ☐☐☐☐☐☐☐☐

System Name: Placid Lakes Utilities, Inc. PWS I.D. 6280223

Address: 400 Washington Blvd. NW City: Lake Placid

System or Owner's Phone #: 863-465-0345 Fax #: 863-465-1313

Collector: Nathan Brewer Collector's Phone #: 863-441-1090

Type of Supply: (check only one)
☒ Community Water System ☐ Non-Transient Non-community Water System ☐ Transient Non-community Water System
☐ Limited Use System ☐ Bottled Water ☐ Private Well ☐ Swimming Pool ☐ Other: _____

Reason for Sampling: (check all that apply)
☐ Distribution Routine ☐ Distribution Repeat ☐ Raw (triggered or assessment) ☐ Raw (triggered or assessment) additional ☐ Well Survey
☐ Clearance ☐ Replacement (also check type of sample being replaced) ☐ Boil Water Notice ☒ Other: annual maintance Ground storage #1

Sample Collection Date: 6-20-12

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method COLILERT SM 9223B				
						Non-Coliform	Total Coliform	E. coli	Data Qualifier [2]	Lab Sample #
1	Ground Storage #1	11:15 AM	D	2.2	7.3		A	A		1739

Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine: 2.2

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Disinfectant Residual Analysis Method:
☒ DPD Colorimetric ☐ Other: _____

Person performing disinfectant analysis is (see instructions on reverse):
☒ A certified operator (# C - 14995)
☐ Supervised by certified operator (#)
☐ Employed by a certified lab ☐ Employed by DEP or DOH
☐ Authorized representative of supplier of water

Date and time PWS notified by lab of positive results: _____
Date and time DEP/DOH notified by lab of positive results: _____
Lab Signature: [signature] Title: BS Date Report Issued: 6-21-12

Name and Mailing Address of person to Recive Repot

Placid Lakes Utilities, Inc.
410 Washington Blvd. NW
Lake Placid, Fl 33852

DEP/DOH USE ONLY
☐ Satisfactory
☐ Incomplete Collection Information
☐ Repeat Samples Required
☐ Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

[1] For Sample Types see Instructions item I 16. [2] For Analysis Methods see Instructions item II 6
[3] Complete for community & non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(DH-DWS 730 Reporting Format Effective 01/1998, Revised 02/2010)

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33875-5847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Lab Receipt Date & Time: 6-07-12 13:45
Analysis Date & Time: 6-07-12 K:30
Sample Acceptance Criteria:
Sample Preservation: ☒ On Ice ☐ Not On Ice ☐ 2 °C
Disinfectant Check: ☒ Not Detected ☐ _____ mg/L
This sample does not meet the following NELAC requirements:

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-57-

Analysis Requested: ☒ Total Coliform/E. coli Building Permit #

System Name: Placid Lakes Utilities, Inc. PWS I.D. 6280223

Address: 410 Washington Blvd. NW City: Lake Placid

System or Owner's Phone #: 863-465-0346 Fax #: 863-465-1313

Collector: Nathan Brewer Collector's Phone #: 863-441-1090

Type of Supply: (check only one)
☒ Community Water System ☐ Non-Transient Non-community Water System ☐ Transient Non-community Water System
☐ Limited Use System ☐ Bottled Water ☐ Private Well ☐ Swimming Pool ☐ Other: _____

Reason for Sampling: (check all that apply)
☒ Distribution Routine ☐ Distribution Repeat ☐ Raw (triggered or assessment) ☐ Raw (triggered or assessment) additional ☐ Well Survey
☐ Clearance ☐ Replacement (also check type of sample being replaced) ☐ Boil Water Notice ☐ Other: _____

Sample Collection Date: 6-7-12

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method: COLILERT SM 9223B				
						Non-Coliform	Total Coliform	E. coli	Data Qualifier [2]	Lab Sample #
1	Well # 1	10:30 AM	R	X	7.3		A	A		1621
2	Well # 2	10:40 AM	R	X	7.3		A	A		1622
3	Well # 3	10:50 AM	R	X	7.3		A	A		1623
4	117 Lemon Rd NE	11:15 AM	D	1.1	7.3		A	A		1624
5	235 Marlin	11:45 AM	D	1.0	7.3		A	A		1625
6	100 Aries Place	12:00 pm	D	1.0	7.3		A	A		1626
7	103 Orange Rd NE	11:30 AM	D	1.1	7.3		A	A		1627
Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine				1.075						

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Disinfectant Residual Analysis Method:
☒ DPD Colorimetric ☐ Other: _____
Person performing disinfectant analysis is (see instructions on reverse):
☒ A certified operator (# C - 14995)
☐ Supervised by certified operator (#)
☐ Employed by a certified lab ☐ Employed by DEP or DOH
☐ Authorized representative of supplier of water

Date and time PWS notified by lab of positive results: _____
Date and time DEP/DOH notified by lab of positive results: _____
Lab Signature: [signature]
Title: BA1 Date Report Issued: 6-08-12

Name and Mailing Address of person to Recive Repot

Placid Lakes Utilities, Inc.
410 Washington Blvd. NW
Lake Placid, Fl 33852

DEP/DOH USE ONLY
☐ Satisfactory
☐ Incomplete Collection Information
☐ Repeat Samples Required
☐ Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(62-550.730 Reporting Format Effective 01/1995, Revised 02/2010)

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33875-5847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Lab Receipt Date & Time: 5-10-12 18:45
Analysis Date & Time: 5-09-12 15:35
Sample Acceptance Criteria:
Sample Preservation: ☒On Ice ☐Not On Ice ☐ 2 °C
Disinfectant Check: ☒Not Detected ☐ _____ mg/L
This sample does not meet the following NELAC requirements:

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-57-☐☐☐☐☐☐☐

Analysis Requested: ☒Total Coliform/E. coli Building Permit # ☐☐☐☐☐☐☐☐

System Name: Placid Lakes Utilities, Inc. PWS I.D. 6280223

Address: 400 Washington Blvd. NW City: Lake Placid

System or Owner's Phone #: 863-465-0345 Fax #: 863-465-1313

Collector: Nathan Brewer Collector's Phone #: 863-441-1090

Type of Supply: (check only one)
☐Community Water System ☐Non-Transient Non-community Water System ☐Transient Non-community Water System
☐Limited Use System ☐Bottled Water ☐Private Well ☐Swimming Pool ☐Other: _____

Reason for Sampling: (check all that apply)
☐Distribution Routine ☐Distribution Repeat ☐Raw (triggered or assessment) ☐Raw (triggered or assessment) additional ☐Well Survey
☐Clearance ☐Replacement (also check type of sample being replaced) ☐Boil Water Notice ☒Other: Annual maintance

Sample Collection Date: 5-9-12

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method COLILERT SM 9223B				
						Non-Coliform	Total Coliform	E. coli	Data Qualifier [2]	Lab Sample #
1	well #1	12:00pm	R	X	2.3					
2	well #3	12:05pm	R	X	2.3					
3	Ground Storage Tank - #2	12:15pm	D	1.4	2.3		A	A		1360

Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine: 1.4

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Disinfectant Residual Analysis Method:
☒DPD Colorimetric ☐Other: _____
Person performing disinfectant analysis is (see instructions on reverse):
☒A certified operator (# C - 14995)
☐Supervised by certified operator (#)
☐Employed by a certified lab ☐Employed by DEP or DOH
☐Authorized representative of supplier of water

Date and time PWS notified by lab of positive results: _____
Date and time DEP/DOH notified by lab of positive results: _____
Lab Signature: _____
Title: _____ Date Report Issued: 5-10-12

Name and Mailing Address of person to Receive Report

Placid Lakes Utilities, Inc.
410 Washington Blvd. NW
Lake Placid, Fl 33852

DEP/DOH USE ONLY
☐Satisfactory
☐Incomplete Collection Information
☐Repeat Samples Required
☐Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

[1] For Sample Types see instructions item I 16. [2] For Analysis Methods see instructions item II 6
[3] Complete for community & non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(62-550.730 Reporting Format Effective 01/1996, Revised 02/2010)

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33875-5847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Lab Receipt Date & Time: 5-08-12 14:40
Analysis Date & Time: 5-08-12 15:30
Sample Acceptance Criteria:
Sample Preservation: ☒ On Ice ☐ Not On Ice ☐ 2 °C
Disinfectant Check: ☒ Not Detected ☐ _____ mg/L
This sample does not meet the following NELAC requirements:

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-57-☐☐☐☐☐☐☐

Analysis Requested: ☒ Total Coliform/E. coli Building Permit # ☐☐☐☐☐☐☐☐

System Name: Placid Lakes Utilities, Inc. PWS I.D. 6280223

Address: 400 Washington Blvd. NW City: Lake Placid

System or Owner's Phone #: 863-465-0345 Fax #: 863-465-1313

Collector: Nathan Brewer Collector's Phone #: 863-441-1090

Type of Supply: (check only one)
☒ Community Water System ☐ Non-Transient Non-community Water System ☐ Transient Non-community Water System
☐ Limited Use System ☐ Bottled Water ☐ Private Well ☐ Swimming Pool ☐ Other: _____

Reason for Sampling: (check all that apply)
☐ Distribution Routine ☐ Distribution Repeat ☐ Raw (triggered or assessment) ☐ Raw (triggered or assessment) additional ☐ Well Survey
☐ Clearance ☐ Replacement (also check type of sample being replaced) ☐ Boil Water Notice ☒ Other: well resample

Sample Collection Date: 5-8-12

To be completed by collector of sample — To be completed by lab

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method: COLILERT SM 9223B — Non-Coliform	Total Coliform	E. coli	Data Qualifier [2]	Lab Sample #
1	well #1	2:00 pm	R	X	7.3		A	A		1324
2	well #3	2:19 pm	R	X	7.3		A	A		1325

Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine: X

Disinfectant Residual Analysis Method:
☒ DPD Colorimetric ☐ Other: _____

Person performing disinfectant analysis is (see instructions on reverse):
☒ A certified operator (# C - 14995)
☐ Supervised by certified operator (#)
☐ Employed by a certified lab ☐ Employed by DEP or DOH
☐ Authorized representative of supplier of water

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Date and time PWS notified by lab of positive results: _____

Date and time DEP/DOH notified by lab of positive results: _____

Lab Signature: [signature] Title: BS1 Date Report Issued: 5-09-12

Name and Mailing Address of person to Recive Repot

Placid Lakes Utilities, Inc.
410 Washington Blvd. NW
Lake Placid, Fl 33852

DEP/DOH USE ONLY
☐ Satisfactory
☐ Incomplete Collection Information
☐ Repeat Samples Required
☐ Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

[1] For Sample Types see instructions item I 16. [2] For Analysis Methods see instructions item II 6
[3] Compliance for community & non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(62-555.730 Reporting Format Effective 01/1998, Revised 02/2010)

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33876-5847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Lab Receipt Date & Time: 5/7/12 11:30
Analysis Date & Time: 5-07-12 15:35

Sample Acceptance Criteria:
Sample Preservation: ☑ On Ice ☐ Not On Ice ☐ 4 °C
Disinfectant Check: ☑ Not Detected ☐ _____ mg/L

This sample does not meet the following NELAC requirements:

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-67-

Analysis Requested: ☒ Total Coliform/E. coli Building Permit #

System Name: Placid Lakes Utilities, Inc. PWS I.D. 6280223

Address: 400 Washington Blvd. NW City: Lake Placid

System or Owner's Phone #: 863-465-0345 Fax #: 863-465-1313

Collector: Nathan Brewer Collector's Phone #: 863-441-1090

Type of Supply: (check only one)
☒ Community Water System ☐ Non-Transient Non-community Water System ☐ Transient Non-community Water System
☐ Limited Use System ☐ Bottled Water ☐ Private Well ☐ Swimming Pool ☐ Other: _____

Reason for Sampling: (check all that apply)
☒ Distribution Routine ☐ Distribution Repeat ☐ Raw (triggered or assessment) ☐ Raw (triggered or assessment) additional ☐ Well Survey
☐ Clearance ☐ Replacement (also check type of sample being replaced) ☐ Boil Water Notice ☐ Other: _____

Sample Collection Date: 5-7-12

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method: COLILERT SM 9223B				
						Non-Coliform	Total Coliform	E. coli	Data Qualifier [2]	Lab Sample #
1	Well # 1	9:15 AM	R	X	7.3		P	A		1300
2	Well # 2	9:30 AM	R	X	7.3		A	A		1301
3	Well # 3	9:30 AM	R	X	7.3		P	A		1302
4	318 Lake Groves Rd NW	9:40 AM	D	1.3	7.3		A	A		1303
5	1768 Washington NW	10:40 AM	D	1.2	7.3		A	A		1304
6	901 Jersey St NW	10:20 AM	D	1.0	7.3		A	A		1305
7	754 Placid Lakes Blvd	10:10 AM	D	1.3	7.3		A	A		1306

Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine: 1.2

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Disinfectant Residual Analysis Method:
☒ DPD Colorimetric ☐ Other: _____

Person performing disinfectant analysis is: (see instructions on reverse)
☒ A certified operator (# C - 14995)
☐ Supervised by certified operator (#)
☐ Employed by a certified lab ☐ Employed by DEP or DOH
☐ Authorized representative of supplier of water

Date and time PWS notified by lab of positive results: 5-08-12
Date and time DEP/DOH notified by lab of positive results: 5-08-12
Lab Signature: [signature]
Title: BS1 Date Report Issued: 5-08-12

Name and Mailing Address of person to Recive Repot

Placid Lakes Utilities, Inc.
410 Washington Blvd. NW
Lake Placid, Fl 33852

DEP/DOH USE ONLY
☐ Satisfactory
☐ Incomplete Collection Information
☐ Repeat Samples Required
☐ Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

[1] [illegible]

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(62-550.730 Reporting Format Effective 01/1998, Revised 02/2010)

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33875-5847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Lab Receipt Date & Time: 4-25-12 14:40
Analysis Date & Time: 4-25-12 15:45
Sample Acceptance Criteria:
Sample Preservation: ☒ On Ice ☐ Not On Ice ☐ 1 °C
Disinfectant Check: ☒ Not Detected ☐ _____ mg/L
This sample does not meet the following NELAC requirements:

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-67-

Analysis Requested: ☒ Total Coliform/*E. coli* Building Permit #

System Name: Placid Lakes Utilities PWS I.D. 6280223
Address: 400 Washington Blvd NW. City: Lake Placid
System or Owner's Phone #: 863-465-0745 Fax #: 863-465-1317
Collector: NATHAN BREWER Collector's Phone #: 863-441-1090

Type of Supply: (check only one)
☒ Community Water System ☐ Non-Transient Non-community Water System ☐ Transient Non-community Water System
☐ Limited Use System ☐ Bottled Water ☐ Private Well ☐ Swimming Pool ☐ Other: _____

Reason for Sampling: (check all that apply)
☐ Distribution Routine ☐ Distribution Repeat ☐ Raw (triggered or assessment) ☐ Raw (triggered or assessment) additional ☐ Well Survey
☐ Clearance ☐ Replacement (also check type of sample being replaced) ☐ Boil Water Notice ☒ Other: Annual maintenance Hydro #3

Sample Collection Date: 4-25-12

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method: COLILERT SM 9223B				
						Non-Coliform	Total Coliform	*E. coli*	Data Qualifier [2]	Lab Sample #
1	Hydro tank #3	12:00pm	D	2.0	7.3		A	A		1289

Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine: 2.0

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Disinfectant Residual Analysis Method:
☒ DPD Colorimetric ☐ Other: _____

Person performing disinfectant analysis is (see instructions on reverse):
☒ A certified operator (#) C-14995
☐ Supervised by certified operator (#)
☐ Employed by a certified lab ☐ Employed by DEP or DOH
☐ Authorized representative of supplier of water

Date and time PWS notified by lab of positive results: _____
Date and time DEP/DOH notified by lab of positive results: _____
Lab Signature: Lyn Dufresne
Title: BS1 Date Report Issued: 4-26-12

Name and Mailing Address of person to Recive Repot
Placid Lakes Utilities
410 Washington Blvd N.W.
Lake Placid, FL 33852

DEP/DOH USE ONLY
☐ Satisfactory
☐ Incomplete Collection Information
☐ Repeat Samples Required
☐ Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

Results explanation A = Absent P = Present Y = Chlorine present

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(62-550.730 Reporting Format Effective 01/1998, Revised 02/2010)

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33875-5847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Lab Receipt Date & Time: 4-24-12 13:25
Analysis Date & Time: 4-24-12 15:50

Sample Acceptance Criteria:
Sample Preservation: ☑ On Ice ☐ Not On Ice ☐ 1 °C
Disinfectant Check: ☑ Not Detected ☐ _____ mg/L

This sample does not meet the following NELAC requirements:

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-57-

Analysis Requested: ☒ Total Coliform/*E. coli* Building Permit #

System Name: placid PWS I.D. 6280223
Address: 400 washington Blvd N.W. City: Lake placid
System or Owner's Phone #: 863-465-0345 Fax #: 863-465-1313
Collector: NATHAN BREWER Collector's Phone #: 863-441-1090

Type of Supply: (check only one)
☒ Community Water System ☐ Non-Transient Non-community Water System ☐ Transient Non-community Water System
☐ Limited Use System ☐ Bottled Water ☐ Private Well ☐ Swimming Pool ☐ Other: _____

Reason for Sampling: (check all that apply)
☐ Distribution Routine ☐ Distribution Repeat ☐ Raw (triggered or assessment) ☐ Raw (triggered or assessment) additional ☐ Well Survey
☐ Clearance ☐ Replacement (also check type of sample being replaced) ☐ Boil Water Notice ☒ Other: Annual maintenance

Sample Collection Date: 4-24-12 Hydro tank #3

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method COLILERT SM 9223B				
						Non-Coliform	Total Coliform	E. coli	Data Qualifier [2]	Lab Sample #
1	Hydro tank #3	10:00am	D	2.1	7.3		A	A		1229

Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine

Disinfectant Residual Analysis Method:
☒ DPD Colorimetric ☐ Other: _____

Person performing disinfectant analysis is (see instructions on reverse):
☒ A certified operator (#) C-11995)
☐ Supervised by certified operator (#)
☐ Employed by a certified lab ☐ Employed by DEP or DOH
☐ Authorized representative of supplier of water

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Date and time PWS notified by lab of positive results: _____
Date and time DEP/DOH notified by lab of positive results: _____
Lab Signature: _____
Title: _____ Date Report Issued: 4-25-12

Name and Mailing Address of person to Recive Repot
placid Lakes utilities
410 washington Blvd N.W.
Lake placid FL 33852

DEP/DOH USE ONLY
☐ Satisfactory
☐ Incomplete Collection Information
☐ Repeat Samples Required
☐ Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

Results explanation A = Absent P = Present Y = Chlorine present

1pm

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(62-555.730 Reporting Format Effective 01/1/05, Revised 03/2010)

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33876-6847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Lab Receipt Date & Time: 4-10-12 14:00
Analysis Date & Time: 4-10-12 16:55
Sample Acceptance Criteria:
Sample Preservation: ☑ On Ice ☐ Not On Ice ☐ 1 °C
Disinfectant Check: ☐ Not Detected ☐ _____ mg/L
This sample does not meet the following NELAC requirements:

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-57- ☐☐☐☐☐☐☐

Analysis Requested: ☑ Total Coliform/E. coli Building Permit # ☐☐☐☐☐☐☐☐

System Name: Placid Lakes Utilities, Inc. PWS I.D. 6280223

Address: 400 Washington Blvd. NW City: Lake Placid

System or Owner's Phone #: 863-465-0346 Fax #: 863-465-1313

Collector: Nathan Brewer Collector's Phone #: 863-441-1090

Type of Supply: (check only one)
☑ Community Water System ☐ Non-Transient Non-community Water System ☐ Transient Non-community Water System
☐ Limited Use System ☐ Bottled Water ☐ Private Well ☐ Swimming Pool ☐ Other: _____

Reason for Sampling: (check all that apply)
☑ Distribution Routine ☐ Distribution Repeat ☐ Raw (triggered or assessment) ☐ Raw (triggered or assessment) additional ☐ Well Survey
☐ Clearance ☐ Replacement (also check type of sample being replaced) ☐ Boil Water Notice ☐ Other: _____

Sample Collection Date: 4-10-12

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method: COLILERT SM 9223B				
						Non-Coliform	Total Coliform	E. coli	Data Qualifier [2]	Lab Sample #
1	Well # 1	10:00 AM	R	X	7.3		A	A		1118
2	Well # 2	10:15 AM	R	X	7.3		A	A		1119
3	Well # 3	10:30 AM	R	X	7.3		A	A		1120
4	402 W. Waterway Ave NW	10:40 AM	D	.7	7.3		A	A		1121
5	109 Club Rd NW	11:00 AM	D	.7	7.3		A	A		1122
6	837 Lincoln Rd NW	11:10 AM	D	.6	7.3		A	A		1123
7	483 Archie Summers Rd	10:50 AM	D	.7	7.3		A	A		1124

Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine

Disinfectant Resident Analysis Method:
☑ DPD Colorimetric ☐ Other: _____
Person performing disinfectant analysis is (see instructions on reverse):
☑ A certified operator (# C - 14995)
☐ Supervised by certified operator (#)
☐ Employed by a certified lab ☐ Employed by DEP or DOH
☐ Authorized representative of supplier of water

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Date and time PWS notified by lab of positive results: _____
Date and time DEP/DOH notified by lab of positive results: _____
Lab Signature: [signature]
Title: BK Date Report Issued: 4-11-12

Name and Mailing Address of person to Recive Repot

Placid Lakes Utilities, Inc.
410 Washington Blvd. NW
Lake Placid, Fl 33852

DEP/DOH USE ONLY
☐ Satisfactory
☐ Incomplete Collection Information
☐ Repeat Samples Required
☐ Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(62-550.730 Reporting Format Effective 01/1998, Revised 02/2010)

Lab Receipt Date & Time: 4-02-12 14:40

Analysis Date & Time: 4-02-12 15:15

Sample Acceptance Criteria:
Sample Preservation: ☒On Ice ☐Not On Ice ☐ 4 °C
Disinfectant Check: ☒Not Detected ☐ _____ mg/L
This sample does not meet the following NELAC requirements:

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33875-5847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-67- _____

Analysis Requested: ☒Total Coliform/E. coli Building Permit # _____

System Name: Placid lakes utilities PWS I.D. 6280223

Address: 410 washington Blvd N.W. City: Lake Placid

System or Owner's Phone #: 863-465-0345 Fax #: 863-465-1313

Collector: NATHAN BREWER Collector's Phone #: 863-441-1090

Type of Supply: (check only one)
☒Community Water System ☐Non-Transient Non-community Water System ☐Transient Non-community Water System
☐Limited Use System ☐Bottled Water ☐Private Well ☐Swimming Pool ☐Other: _____

Reason for Sampling: (check all that apply)
☐Distribution Routine ☐Distribution Repeat ☐Raw (triggered or assessment) ☐Raw (triggered or assessment) additional ☐Well Survey
☐Clearance ☐Replacement (also check type of sample being replaced) ☐Boil Water Notice ☒Other: Additional tank sample

Sample Collection Date: 4-2-12

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method: COLILERT SM 9223B				
						Non-Coliform	Total Coliform	E. coli	Data Qualifier [2]	Lab Sample #
1	Hydrotank #2	12:00 pm	D	2.2	7.3		A	A		0957

Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine: 2.2

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Disinfectant Residual Analysis Method:
☒DPD Colorimetric ☐Other: _____

Person performing disinfectant analysis is (see instructions on reverse):
☒A certified operator (# C-14975)
☐Supervised by certified operator (#)
☐Employed by a certified lab ☐Employed by DEP or DOH
☐Authorized representative of supplier of water

Date and time PWS notified by lab of positive results: _____

Date and time DEP/DOH notified by lab of positive results: _____

Lab Signature: _____

Title: Tech Date Report Issued: 4-03-12

Name and Mailing Address of person to Recive Repot

DEP/DOH USE ONLY
☐Satisfactory
☐Incomplete Collection Information
☐Repeat Samples Required
☐Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

[1] For Sample Types see instructions item I 16. [2] For Analysis Methods see instructions item II 6
[3] Complete for community & non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.

MCR

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(62-550.730 Reporting Format Effective 01/1998, Revised 02/2010)

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33875-5847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Lab Receipt Date & Time: 3-08-12 14:30
Analysis Date & Time: 3-08-12 15:45
Sample Acceptance Criteria:
Sample Preservation: ☑ On Ice ☐ Not On Ice ☐ 2 °C
Disinfectant Check: ☑ Not Detected ☐ _____ mg/L
This sample does not meet the following NELAC requirements:

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-67- ☐☐☐☐☐☐☐

Analysis Requested: ☒ Total Coliform/E. coli Building Permit # ☐☐☐☐☐☐☐☐

System Name: Placid Lakes Utilities, Inc. PWS I.D. 6280223

Address: 400 Washington Blvd. NW City: Lake Placid

System or Owner's Phone #: 863-465-0345 Fax #: 863-465-1313

Collector: Nathan Brewer Collector's Phone #: 863-441-1090

Type of Supply: (check only one)
☒ Community Water System ☐ Non-Transient Non-community Water System ☐ Transient Non-community Water System
☐ Limited Use System ☐ Bottled Water ☐ Private Well ☐ Swimming Pool ☐ Other: _____

Reason for Sampling: (check all that apply)
☒ Distribution Routine ☐ Distribution Repeat ☐ Raw (triggered or assessment) ☐ Raw (triggered or assessment) additional ☐ Well Survey
☐ Clearance ☐ Replacement (also check type of sample being replaced) ☐ Boil Water Notice ☐ Other: _____

Sample Collection Date: 3-8-12

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method: COLILERT SM 9223B				
						Non-Coliform	Total Coliform	E. coli	Data Qualifier [2]	Lab Sample #
1	Well # 1	9:00 AM	R	X	7.3		A	A		0768
2	Well # 2	9:10 AM	R	X	7.3		A	A		0769
3	Well # 3	9:20 AM	R	X	7.3		A	A		0770
4	110 Fox Ridge Rd	10:00 AM	D	1.2	7.3		A	A		0771
5	759 Washington NW	10:30 AM	D	1.3	7.3		A	A		0772
6	1998 Placid Lakes Blvd	11:00 AM	D	1.3	7.3		A	A		0773
7	128 Lime Rd NE	12:00 PM	D	1.2	7.3		A	A		0774

Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine: 1.25

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Disinfectant Residual Analysis Method:
☒ DPD Colorimetric ☐ Other: _____

Person performing disinfectant analysis is (see instructions on reverse):
☒ A certified operator (# C - 14995)
☐ Supervised by certified operator (#)
☐ Employed by a certified lab ☐ Employed by DEP or DOH
☐ Authorized representative of supplier of water

Date and time PWS notified by lab of positive results: _____
Date and time DEP/DOH notified by lab of positive results: _____
Lab Signature: _____
Title: _____ Date Report Issued: 3-09-12

Name and Mailing Address of person to Recive Repot

Placid Lakes Utilities, Inc.
410 Washington Blvd. NW
Lake Placid, Fl 33852

DEP/DOH USE ONLY
☐ Satisfactory
☐ Incomplete Collection Information
☐ Repeat Samples Required
☐ Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

[1] For Sample Types see Instructions Item I.16 [2] For Analysis Methods see Instructions Item II.6

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

62-550.730 Reporting Format Effective 01/1996, Revised 02/2010

Highlands County Health Department - Environmental Health
7205 S. George Blvd, Sebring, Fl 33875-5847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Lab Receipt Date & Time: 02-14-12 13:21
Analysis Date & Time: 02-14-12 13:41
Sample Acceptance Criteria:
Sample Preservation: ☑ On Ice ☐ Not On Ice ☐ 1 °C
Disinfectant Check: ☑ Not Detected ☐ _____ mg/L
This sample does not meet the following NELAC requirements:

Report Number: _____ Sub-Contract Lab ID: _____

Analysis Requested: (check all that apply)
☒ Total Coliform/*E. coli* ☐ Total Coliform/Fecal ☐ Enterococci ☐ Coliphage ☐ HPC ☐ Other: _____

Public Water System (PWS) Name: Placid Lakes Utilities PWS I.D. 6280223
PWS Address: 400 Washington Blvd N.W. City: Lake Placid
PWS or PWS Owner's Phone #: 863 465-0345 Fax #: 863-465-1313
Collector: NATHAN BREWER Collector's Phone #: 863-441-1090

Type of Supply: (check only one)
☒ Community Water System ☐ Non-Transient Non-community Water System ☐ Transient Non-community Water System
☐ Limited Use System ☐ Bottled Water ☐ Private Well ☐ Swimming Pool ☐ Other: _____

Reason for Sampling: (check all that apply)
☐ Distribution Routine ☐ Distribution Repeat ☐ Raw (triggered or assessment) ☐ Raw (triggered or assessment) additional ☐ Well Survey
☐ Clearance ☐ Replacement (also check type of sample being replaced) ☐ Boil Water Notice ☒ Other: Hydro #1 Annual maint.

Sample Collection Date: 2-13-12 / 2-14-12

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type[1]	Disinfectant Residual (mg/L)	pH	Analysis Method(s)[2]: Non-Coliform	Total Coliform	Fecal, E. coli, Enterococci, or Coliphage[3]	Data Qualifier[4]	Lab Sample #
1	Hydro tank #1 2-13-12	3:00pm	D	1.1	7.3		A	A		0529
2	Hydro tank #1 2-14-12	8:00am	D	1.0	7.3		A	A		0530

Average of disinfectant residuals for distribution routine & repeat samples.[5] Free chlorine or Total chlorine (circle one). 1.05

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Disinfectant Residual Analysis Method:
☒ DPD Colorimetric ☐ Other: _____

Person performing disinfectant analysis is (see instructions on reverse):
☒ A certified operator (# C-14995)
☐ Supervised by certified operator (# _____)
☐ Employed by a certified lab ☐ Employed by DEP or DOH
☐ Authorized representative of supplier of water

Date and time PWS notified by lab of positive results: _____
Date and time DEP/DOH notified by lab of positive results: _____
Date Report Issued: 2-15-12
Lab Signature: _____
Title: _____

Mailing Address: Placid Lakes Utilities
400 Washington Blvd N.W.
Lake Placid FL 33852

DEP/DOH USE ONLY
☐ Satisfactory
☐ Incomplete Collection Information
☐ Repeat Samples Required
☐ Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

[1] For Sample Types see Instructions Item I #6.
[2] For Analysis Methods see Instructions Item II A.
[3] Write check appropriate collection.
[4] Defined in Florida Administrative Code Rule 62-160, Table I.
[5] Complete for community & non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.

Jan

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

(62-550.730 Reporting Format Effective 01/1996, Revised (02/2010))

Highlands County Health Department – Environmental Health
7205 S. George Blvd, Sebring, FL 33875-5847
FDOH Bureau of Laboratories, Certification # E25705
Contact: (863) 382-7227

Lab Receipt Date & Time: 01-09-12 14:10
Analysis Date & Time: 01-09-12 15:20
Sample Acceptance Criteria:
Sample Preservation: ☑ On Ice ☐ Not On Ice ☐ 2 °C
Disinfectant Check: ☑ Not Detected ☐ _____ mg/L
This sample does not meet the following NELAC requirements:

Report Number: _____ Sub-Contract Lab ID: _____ LU # 28-57-

Analysis Requested: ☒ Total Coliform/*E. coli* Building Permit #

System Name: **Placid Lakes Utilities, Inc.** PWS I.D. 6280223

Address: 400 Washington Blvd. NW City: Lake Placid

System or Owner's Phone #: 863-465-0345 Fax #: 863-465-1313

Collector: Nathan Brewer Collector's Phone #: 863-441-1080

Type of Supply: (check only one)
☒ Community Water System ☐ Non-Transient Non-community Water System ☐ Transient Non-community Water System
☐ Limited Use System ☐ Bottled Water ☐ Private Well ☐ Swimming Pool ☐ Other: _____

Reason for Sampling: (check all that apply)
☒ Distribution Routine ☐ Distribution Repeat ☐ Raw (triggered or assessment) ☐ Raw (triggered or assessment) additional ☐ Well Survey
☐ Clearance ☐ Replacement (also check type of sample being replaced) ☐ Boil Water Notice ☐ Other: _____

Sample Collection Date: 1-9-12

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type [1]	Disinfectant Residual (mg/L)	pH	Analysis Method: COLILERT SM 9223B				
						Non-Coliform	Total Coliform	*E. coli*	Data Qualifier [2]	Lab Sample #
1	Well # 1	10:00 Am	R	X	7.3		A	A		0111
2	Well # 2	10:10 Am	R	X	7.3		A	A		0112
3	Well # 3	10:20 Am	R	X	7.3		A	A		0113
4	754 Placid Lakes Blvd	10:30 Am	D	1.5	7.3		A	A		0114
5	1180 Catfish Creek Rd	11:00 Am	D	1.2	7.3		A	A		0115
6	5458 Placid Lakes Blvd	10:50 Am	D	1.3	7.3		A	A		0116
7	318 Lake Groves Rd NW	10:40 Am	D	1.5	7.3		A	A		0117

Average of disinfectant residuals for distribution routine & repeat samples [3] Free chlorine: 1.375

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Disinfectant Residual Analysis Method:
☒ DPD Colorimetric ☐ Other: _____
Person performing disinfectant analysis is (see instructions on reverse):
☒ A certified operator (# C - 14995)
☐ Supervised by certified operator (#)
☐ Employed by a certified lab ☐ Employed by DEP or DOH
☐ Authorized representative of supplier of water

Date and time PWS notified by lab of positive results: _____
Date and time DEP/DOH notified by lab of positive results: _____
Lab Signature: _____
Title: BS1 Date Report Issued: 01-10-12

Name and Mailing Address of person to Recive Repot

Placid Lakes Utilities, Inc.
410 Washington Blvd. NW
Lake Placid, Fl 33852

DEP/DOH USE ONLY
☐ Satisfactory
☐ Incomplete Collection Information
☐ Repeat Samples Required
☐ Replacement Samples Required
Date Reviewed by DEP/DOH: _____
DEP/DOH Reviewing Official: _____

[1] For Sample Types see Instructions Item I 16. [2] For Analysis Methods see Instructions Item II 6

SANITARY SURVEY
Schedule IV

PLACID LAKES UTILITIES, INC.

Docket No.: 130025-WU

Highlands County

25-30.440 (5)
INSPECTION REPORTS

Test Year Ended December 31, 2012

SCHEDULE IX

Large System Sanitary Survey Form

SURVEY SUMMARY

SURVEY ESSENTIALS

Water System Name: Placid Lake Utilities
Date(s) Surveyed: 9-20-12
Survey Inspector(s): Ryan Schwarb
Person(s) Contacted: Nathan Brewer

WATER SYSTEM INFORMATION

PWS ID: 6280223 System (Office) Address: 410 Washington Blvd NW. Lake Placid
Phone: 863-465-0245 Cell: 863-441-1090 Fax Number: 863-465-1313
Email:
Directions to water system office or plant: SR 70 to Placid Lakes Blvd to left on Washington to left into drive

OWNER INFORMATION

Owner Name: Lake Placid Holding Company Owner Title: Parent Co
Owner Address: 410 Washington Blvd NW City: Lake Placid State: FL Zip: 33852
Owner Phone: 863-465-0345 Cell:
Fax Number: 863-465-1313 Email:

OPERATOR INFORMATION

Operator Name: Nathan D. Brewer Lead Operator Class & Certification Number: C-14995
Operator Address: 93 Elkcam Rd City: Lake Placid State: FL Zip: 33852
Operator Phone: 863-465-0345 Cell: 863-441-1090
Fax Number: 863-465-1313 Email:

SYSTEM CHARACTERISTICS SUMMARY

Source Summary:
Number of Sources: 3 ground water wells
☐ Surface Name of Source(s):
☐ Purchase Name of System(s):

Treatment Summary:
Number of Plants: 1 Number of Operators: 1
☒ Disinfection ☒ Aeration ☐ Coagulation
☐ Stabilization ☐ Filtration ☐ Flocculation
☒ Corrosion Control ☐ Softening ☐ Reverse Osmosis

Service Area Characteristics Summary:
☐ City or Community ☒ Residential ☐ Mobile Home Park ☐ Institution ☐ Medical ☐ School ☐ Wholesaler ☐ Other:
Number of Service Connections: 1,945 Population Served: 3,307 Approx number of outstanding DEP permits 0

Demand & Capacity:
Maximum Daily Demand: 441,583 GAL Total Design Capacity: 1,104,000GPD Total Storage Capacity: 360,000 GAL
Average Daily Demand: 307,017 GAL Stand-by Power Capacity: 1,104,000 GPD Firm Capacity: 1,000 GPM
Comment:

SYSTEM COMPLIANCE SUMMARY

Past Compliance Status Summary:
Date of last inspection: 8-16-11 Results: ☒ In compliance ☐ Deficiencies, but not significant ☐ Out of compliance
Date of last sanitary survey: 7-9-09 Results: ☐ In compliance ☒ Deficiencies, but not significant ☐ Out of compliance
Current Sanitary Survey Results:
☒ In Compliance ☐ Deficiencies, but not significant ☐ Out of compliance
Comment:

SOURCE (GROUNDWATER)

GROUNDWATER WELLS

Well Name or Number	1	2	3			
Florida Unique Well Identification	AAH9129	AAH9128	AAH9127			
Year Drilled	1971	1979	1996			
Depth Drilled	1,290	1,340	1,420			
Aquifer Name	Floridan	Floridan	Floridan			
Depth & Diameter of casing?	606', 8"	596', 8"	550', 10"			
Depth of Screen & Material						
Depth of grouting & type?	Cement	Cement	Cement			
Depth to Static Water Level?		80	48			
Is the drawdown measured?	N	N	N			
Is the site subject to flooding?	N	N	N			
Is the well below grade?	N	N	N			
Potential pollution sources near?	N	N	N			
Contaminated, UDI, or ASR Well?	N	N	N			
Is lightning protection provided?						
Is the well housed or fenced?	Fenced	Fenced	Fenced			
Pump Type	Vert Turb	Vert Turb	Vert Turb			
Horse Power	25	25	25			
Rated Pump Capacity (GPM@PSI)	550	500	500			
Normal Yield (GPM @ PSI)	500	500	500			
Proper raw water tap?	Y	Y	Y			
Proper casing height?	Y	Y	Y			
Well head properly sealed?	Y	Y	Y			
Proper casing vent?	Y	Y	Y			
Dumpline installed?	Y	Y	Y			
Proper Check Valve?	Y	Y	Y			
Air-relief valve installed?	N	N	N			
Proper Water Meter?	Y	Y	Y			
Meter check for accuracy?	Y	Y	Y			
Stand-by Capacity?	550	500	500			
Overall Site Condition	Good	Good	Good			

Comments:

GROUNDWATER QUANTITY, QUALITY, AND PROTECTION

Total Source Capacity (TSC) exceeds Maximum Daily Demand (MDD)?	☒ Yes	☐ No	
TSC (excluding best well) exceed the Average Daily Demand?	☒ Yes	☐ No	
Does the Water Management Permitted Capacity exceed the MDD?	☒ Yes	☐ No	
Any routinely utilized interconnections with neighboring systems?	☒ Yes	☐ No	Town of Lake Placid
Any unused or improperly abandoned wells within the system?	☐ Yes	☒ No	
Is water system using the highest quality sources known?	☒ Yes	☐ No	
Do all source(s) maintain complaint water quality standards?	☒ Yes	☐ No	
Does the system have a well head protection program?	☒ Yes	☐ No	
System enact a wellhead protection program (with setbacks)?	☒ Yes	☐ No	
Does the system have an emergency spill response plan?	☒ Yes	☐ No	
Are the synthetic organic chemical (SOC) waivers accurate?	☒ Yes	☐ No	

Comments:

DISINFECTION - PLANT INFORMATION	Plant Name	Plant Name	Comment
Chlorinator Type (gas, hypo, chloramination)	Gas		
Condition of Chlorination Equipment	Good		
Capacity (PPD, GPD)	2@ 100ppd each		
Chlorine Feed Rate (PPD, GPD)	45ppd		
Max Day Run Time (Hr/Day)	24		
Is chlorinator manual or flow paced?	flow		
Loss of chlorination alarm function?	Y		
Chlorine leak detection functioning?	Y		
Chlorine detection equipment & alarms tested?	Y		
Operation and maintenance manual onsite?	Y		
Compliant housing/security	Y		
Overall condition of facility	Good		
Stand-by Power Capability?	Y		
POE Chlorine Residual/pH	1.2		
GAS CHLORINATION			
150 lb or Ton Cylinders?	150lb		
Vacuum or pressure system	Vacuum		
Automatic Switchover?	Y		
Scale condition?	new		
In place wrench with ¼ turn	Y		
Cylinder restrained/chained?	Y		
Ammonia onsite?	Y		
Evidence of leaks	N		
Adequate leak containment?	Y		
Storage & feed facilities in separate room?	N		
Chlorine leak repair kit provided?	Y		
Ventilation Proper?	Y		
Vent switch on exterior?	Y		
Panic hardware and window provided?	Y		
Booster Pump Capacity (GPM/ft head)			
HYPO CHLORINATION			
Sodium or Calcium Hypo Chlorite?			
Positive Displacement Pump?			
Solution strength			
How often replenished?			
Solution tank compliant? (cover/measure/drain)			
Adequate spill containment?			
CHLORAMINATION			
Chlorine to ammonia ratio? (5:1 recommended)			
Is the ammonia flow-paced?			
Ammonia added before or after chlorine?			
Frequency of free chlorine "burn"?			
Backflow prevention from chlorine chambers?			
Any bacteriological MCL's in last 12 months?		If yes, explain?	
OZONE			
Equipment Condition			
Adequate dose?			
Stand-by Power Capability?			
Injection point proper & ensures mixing?			

Comments:

OTHER TREATMENTS (CHECK ☐ IF APPLICABLE OR OPTIONALLY REMOVE SECTION IF NOT APPLICABLE)

☒ CORROSION CONTROL

Why is corrosion control practiced? Not due to water quality/ due to acid flux solder

What chemicals are used? ☒ PO4 ☐ Aqua-Mag® ☐ Other:

Results of current lead and copper exceed action level? ☐ Yes ☒ No Are water quality parameters tested? ☒ Yes ☐ No

What are the characteristics of the water entering and leaving the treatment plant? Good quality- non-corrosive

Distribution system sampling for the corrosion control program conducted? ☒ Yes ☒ No

Comments:

☐ STABILIZATION

Why is stabilization practiced? _____

Stability Index of effluent (Langelier) _____ Chemical(s) used _____

re dusty and dry chem cals, and feed equipment housed separately? ☐ Yes ☐ No Is proper and adequate ventilation provided? ☐ Yes ☐ No

Appropriate safety equipment a ailable & in use? ☐ Yes ☐ No re the buildings as clean and as dry as possib e? ☐ Yes ☐ No

Comments:

☐ IRON AND MANGANESE REMOVAL

What treatment process is used? _____

Is the process performing adequately based on visual observation? ☐ Yes ☐ No

What chemicals are used and in what amounts? _____

Comments:

☐ ACTIVATED CARBON

Why is activated carbon used? _____

What process is being used? _____

What testing is performed to determine effectiveness of activated carbon?

☐ POWDERED ACTIVATED CARBON (PAC)

Why is powdered activated carbon used? _____

Black water prevented? ☐ Yes ☐ No Is the PAC stored properly? ☐ Yes ☐ No How often are the feeders calibrated? _____

Comments:

☐ GRANULAR ACTIVATED CARBON (GAC)

Why is activated carbon used? _____

Is backwash compliant? ☐ Yes ☐ o What is the depth of the GAC? _____

Any problems observed? _____

Comments:

☒ AERATION

Why is aeration used? Gases

What type of aeration system is used? Tray

What parameters are monitored to evaluate the performance of the process? none

Is the aerator isolated from any contaminants which could be pulled from the air supply? ☒ Yes ☐ No Is screening intact? ☒ Yes ☐ No

Appropriate mesh size (#24)? ☒ Yes ☐ No Aerator adequately covered? ☒ Yes ☐ No Chlorination after aeration? ☒ Yes ☐ No

What is the condition of the aerator, both inside and out? Good

Comments:

☐ SOFTENING

Why s softening used? _____

What are treatment goals? _____

Performing adequate process control testing? ☐ Yes ☐ No Is the facility tracking the chemicals used? ☐ Yes ☐ No

Is the faci ity meeting the TOC removal requirements of the Stage 1 DBP Ru e? ☐ Yes ☐ No

Comments:

☐ ION EXCHANGE

What are the treatment goals? _____

What is condition of equipment? _____

Any other problems observed?

☐ FLUORIDATION

Proper concentration of fluoride in the distribution system? ☐ Yes ☐ No Fluoride concentrations tested in the system daily? ☐ Yes ☐ No

Are fluoride concentrations consistent? ☐ Yes ☐ No Is the testing performed correctly? ☐ Yes ☐ No

When was the testing instrument last calibrated? _____ How often is the saturator tank cleaned? _____

Is the electr cal system wired with a fail-safe? ☐ Yes ☐ No Is there a scale for weighing the solution tank? ☐ Yes ☐ No ☐ NA

Comments:

☐ **COAGULATION**

List types: _____ List types of coagulant ads: _____

Rapid mix unit visually appear adequate? ☐Yes ☐No Coagulant used at all times the plant is in operation? ☐Yes ☐No

What type and combination of coagulants are being used? _____

Does the plant have multiple mix units? ☐Yes ☐No How often is maintenance done? _____

Is there a process control plant for coagulation addition? ☐Yes ☐No Is the rapid mix process adequate? ☐Yes ☐No

Mechanical equipment working? ☐Yes ☐No Any hydraulic inadequacies? ☐Yes ☐No Is the rate of mixing adjustable? ☐Yes ☐No

Comment:

☐ **FLOCCULATION**

Flocculation process adequate? ☐Yes ☐No What type of flocculation facilities are being used? _____

Flocculation process visually appear adequate? ☐Yes ☐No Evidence of coagulants clumps in first compartment of flocculation? ☐Yes ☐No

Mechanical equipment working? ☐Yes ☐No Any hydraulic inadequacies? ☐Yes ☐No Preventive maintenance program exist? ☐Yes ☐No

Is the rate of mixing adjustable? ☐Yes ☐No Is it within the G, GT, and tip speed within the accepted range? ☐Yes ☐No

What is the detention time? _____ Is it within the generally accepted range? ☐Yes ☐No

Comment:

☐ **SEDIMENTATION**

Is sedimentation process adequate? ☐Yes ☐No

What type of sedimentation/clarification process and facilities are being used? _____

Is flow distributed evenly to all basins? ☐Yes ☐No Is the inlet flow distributed uniformly over the full cross section? ☐Yes ☐No

Does the plant have multiple units with some that are not in use? ☐Yes ☐No Are the idle basins in a condition to be used if needed? ☐Yes ☐No

Is the mechanical equipment working? ☐Yes ☐No Are there any hydraulic inadequacies? ☐Yes ☐No

What is the surface overflow rate? _____ Detention time? _____ Velocity flow _____

Within the generally accepted range? ☐Yes ☐No Does there appear to be too much sludge in the basin(s)? ☐Yes ☐No

Impacting settled water performance? ☐Yes ☐No How is sludge removed from the clarifier(s)? _____

How often is sludge removed? _____ What is the settled water turbidity? _____ Does it meet the general criteria? ☐Yes ☐No

Comment:

☐ **FILTRATION**

Type of filtration system is being used? ☐ Gravity ☐Pressure ☐Constant ☐Declining rate Other: _____

What kind of media has been installed? ☐Mono ☐Dual ☐Multi ☐Other: _____

Filtration process performing adequately (mudballs/cracks)? ☐Yes ☐No Is there adequate pre-treatment? ☐Yes ☐No

Are there rapid fluctuations in the flow through of the filter? ☐Yes ☐No Are filters ever "bumped" to extend filter runs? ☐Yes ☐No

Is filter performance assessed? ☐Yes ☐No Are filters & related equipment in good condition? ☐Yes ☐No

Meters calibrated or checked for accuracy? ☐Yes ☐No Filter gallery piping in good condition? ☐Yes ☐No Is it color coded? ☐Yes ☐No

Are there any cross-connections observed? ☐Yes ☐No Is there a floor drain to remove all leaking water from the filter gallery floor? ☐Yes ☐No

What initiates a backwash? _____

Is there a backwash SOP in place? ☐Yes ☐ No Backwash flow rate measurable? ☐Yes ☐No Backup backwash system? ☐Yes ☐No

Operating filter flow rates reduced when another filter is backwashed? ☐Yes ☐No

Can the backwash flow be varied to allow for the varying conditions? ☐Yes ☐No If so, can the operator adjust the rate of flow? ☐Yes ☐No

Are newly backwashed filters brought back into service at low rates that are gradually increased (ramped-up)? ☐Yes ☐No

Re-wash (filter-to-waste) capability available? ☐Yes ☐No Used? ☐Yes ☐No ☐N/A

System meeting the disinfection byproduct precursor removal requirements of the Stage 1 Disinfectants/Disinfection Byproducts Rule? ☐Yes ☐No

System required to prepare disinfection profile? ☐Yes ☐No Is the profile available for review? ☐Yes ☐No

Any individual filter excursions occurred in past? ☐Yes ☐No If so, actions taken : _____

Operators received thorough Actiflo training? ☐Yes ☐No

Comment:

☐ **SLOW SAND FILTRATION**

What pre-treatment is used, if any? What method is used to clean the slow sand filters?

Are there redundant slow filters? ☐Yes ☐No Is the slow sand filter covered and protected from light? ☐Yes ☐No

Comment:

☐ **BAG AND CARTRIDGE FILTRATION**

What type of pre-treatment is used? _____ What is the micron rating for the final unit? _____

What are the average and the shortest times between filter replacements?

Is there a manufacturer's challenge for Giardia removal for the filter and housing being used? ☐Yes ☐No

Comment:

☐ **MEMBRANES**

What type of membrane is used? _____ What is its intended purpose? _____

What type of pre-treatment is used? _____

Date of the membrane installation? _____ Are safeguards in place to warn operators of membrane failure? ☐Yes ☐No

What is fouling rate of membranes? _____ What is the expected life of the membranes? _____

What is the percentage recovery? _____ What technique is used for backwash? _____

What is the frequency of cleaning and disposal of cleaning fluids and brines? _____

What is the condition of the plant, gauges, and appurtenances? _____

What is the operating pressure? _____ If a field test of conductivity of TDS is sampled, what was the result? _____

DISTRIBUTION

MAINS, HYDRANTS, & VALVES

Material: ☒PVC ☐Ductile Iron ☐Steel ☐Concrete ☒Asbestos-Cement Pipe Size Max. (in) 14 Min 3 PSI Max 60 Min 40

Are main breaks recorded? ☒Yes ☐No Standard Operating Procedures (SOP) for main repair? ☒Yes ☐No

Are all connections metered? ☒Yes ☐No Meters (installed after 2003) NSF approved? ☒Yes ☐No

Flushing program compliant? ☒Yes ☐No # dead ends: 28 # flush points/hydrants? 94 # fire hydrants? 46 Any Auto-flush? ☒Yes ☐No

Valve maintenance program compliant? ☒Yes ☐No # of in-line valves: 1 How often exercised? Quarterly

CROSS-CONNECTION CONTROL (CCC)

Written CCC Program Compliant? ☒Yes ☐No Is the program adequately implemented? ☒Yes ☐No Annual Testing Required: ☒Yes ☐No

Total Number of Devices: Approx. # RPZ's: 50 DCVA's: PVB's: Other: Approx. # of tests last year: 26

Any cross-connections observed during survey? ☐Yes ☒No If yes, describe:

MAPS, ENGINEERING, AND PERMITTING

MAPS INCLUDE: ☒Lines (all) ☒Valves ☒Flush/Fire Hydrants ☐Storage/Booster Pumps ☒Interconnections

☐Line Size ☐Line Material ☐Updates ☐Air relief/Blow-off Valves ☐Complaints

SOP for new line installation and clearance? ☒Yes ☐No Hydraulic model been performed? ☐Yes ☒No

Approximate number of outstanding permits distribution permits? 0 Any currently in use without clearance? ☐Yes ☒No

RESIDUAL DISINFECTANT AND MONITORING

Chorine Residual Max (mg/L): 1.4 Min 1.2 Are residuals tested in the system daily? ☐Yes ☐No How many sampling sites?

FIELD TESTING				
Free and/or total Cl (MGL)				
pH				

STORAGE FACILITIES

Tank Name or Number							
Storage Type	Ground	Ground	Hydro	Hydro	Hydro		
Tank Material	Concrete	Concrete	Steel	Steel	Steel		
Capacity (Gallons)	150,000	150,000	15,000	15,000	15,000		
Watertight Roof/Hatch?	Y	Y	N/A	N/A	N/A		
Venting/Screens Proper?	Y	Y	N/A	N/A	N/A		
Overflow Proper?	Y	Y	N/A	N/A	N/A		
Level/PSI Indicator Functional?	Y	Y	Y	Y	Y		
On/Off PSI	Y	Y	Y	Y	y		
Flow-through or Float?							
Drain & Bypass Installed?	Y	Y	Y	Y	Y		
Compliant Security?	Y	Y	Y	Y	Y		
Overall Condition?	Good	Good	Good	Good	Good		
Date of last annual inspection	3-12	6-12	2-12	3-12	4-12		
Year of last 5 year inspection?	2009	2009	2012	2009	2009		
Year of last washout	2012	2012	2012	2012	2012		

Storage capacity exceed 25% of the max day? ☒Yes ☐No Is the interior tank coating NSF/ANSI approved? ☒Yes ☐No

Do any of the ground storage tanks have baffles? ☒Yes ☐No Any elevated storage tanks utilize altitude valves? ☐Yes ☒No

Do the storage tanks have a proper turnover? ☒Yes ☐No Do the storage facilities utilize low level alarms? ☒Yes ☐No

How are tanks levels controlled: ☐Manually ☒Auto (onsite) ☐Auto (SCADA)

Comment:

PUMPS AND CONTROLS

Pump Name or Model						
Type	Centr	Centr	Centr			
Year Installed	1997	1997	1997			
Year of last servicing	2012	2012	2012			
Horsepower	40	40	40			
Pump Capacity-MG/day	800	800	800			
Standby Capacity?	40	40	40			
Proper valves/gauges?	Y	Y	Y			
Overall Condition?	Good	Good	Good			
Housing/Security?	Y	Y	Y			

Adequate access for maintenance & pump removal? ☒Yes ☐No Pump lubrication NSF/ANSI Approved? ☒Yes ☐No

Are transmission lines visible and in good condition? ☒Yes ☐No Low flow or failure alarm provided? ☒Yes ☐No

Are Protective Guards/Fire Extinguishers Provided? ☒Yes ☐No Are adequate spares available? ☒Yes ☐No

Overall Capacity Compliant? ☒Yes ☐No Firm Capacity Compliant? ☒Yes ☐No Standby Power Capacity Compliant? ☒Yes ☐No

Comment:

MONITORING, REPORTING, & DATA VERIFICATION

MONITORING PLANS AND PROGRAMS

Required Monitoring Plans: ☒ Bacteriological ☒ DBP ☒ Pb/Cu ☒ CCC ☒ Emergency Preparedness ☐ Other:

Adequate monitoring in place? ☒ Yes ☐ No — Is monitoring program adequately maintained and followed? ☒ Yes ☐ No

Proper monitoring procedures? ☒ Yes ☐ No — Results adequately recorded? ☒ Yes ☐ No — Records maintained? ☒ Yes ☐ No

Timely submittal of samples? ☒ Yes ☐ No — Compliance samples analyzed by a Certified Lab? ☒ Yes ☐ No

MONITORING FACILITIES AND EQUIPMENT

Testing facilities adequate? ☐ Yes ☐ No ☒ Not Applicable — Testing equipment adequate? ☒ Yes ☐ No

Are the reagents in date? ☒ Yes ☐ No — Proper procedures for calibrating monitoring equipment? ☒ Yes ☐ No

Which parameters does the system monitor? ☒ Chlorine ☒ pH ☒ F ☐ PO4 ☐ Fe ☐ H2S ☐ Other(s)

FILE REVIEW

Does the system maintain adequate compliance records? ☒ Yes ☐ No — System in compliance with parameters below? ☒ Yes ☐ No

Compliance Schedule: The following parameters are due during the year shown.

NO_2/NO_3: X Inorganic: ___ Secondary: ___ VOC: ___ Pb/Cu: ___ THMs: X Rads: ___ SOC: ___ Asbestos: ___

Comments:

SYSTEM MANAGEMENT AND OPERATION

ADMINISTRATION

Formal Organization Chart: ☒ Available ☐ Not available — Operating authority to make decisions: ☒ Sufficient ☐ Insufficient

Administrators familiar with the SDWA: ☒ Yes ☐ No — Planning Process: Formal and adequate: ☒ Yes ☐ No

INFORMATION MANAGEMENT

Does the utility manage the following information (check if yes):

☒ Maintaining plans ☒ Updating maps ☒ Handling customer complaints

☒ Collecting O & M data ☒ SOPs ☒ Maintenance Records ☒ Financial Records

Does the system track typical operating data such as unaccounted for water? ☒ Yes ☐ No

Cost/unit of production? ☒ Yes ☐ No — Customer Complaints? ☒ Yes ☐ No

Are financial, operational data and maintenance records tracked via a PC? ☒ Yes ☐ No

COMMUNICATION

Communication effective between management, operations, & FDEP? ☒ Yes ☐ No

Cooperation adequate between the system & other agencies/organizations? ☒ Yes ☐ No

Cooperation level between system and local fire department? ☒ Effective ☐ Needs improvement

PLANNING

Emergency response plan includes: ☐ Communication Chart ☐ Written Agreements ☒ Disaster Plan ☒ Standby Power Info ☐ Inventories

Written available plans for: ☒ Sampling & monitoring ☒ Materials Survey ☒ Water Quality Parameters ☒ Repair replacement & expansion

PERSONNEL

Proper staffing ☒ Yes ☐ No — Proper qualifications ☒ Yes ☐ No — Proper training ☒ Yes ☐ No

FACILITIES AND EQUIPMENT

Preventative Maintenance Program in place? ☒ Yes ☐ No

Facilities for storing parts, equipment, vehicles, traffic control devices, & supplies sufficient? ☒ Yes ☐ No

Are facilities for personnel adequate? ☒ Yes ☐ No — Are system facilities adequate? ☒ Yes ☐ No

Maintenance of facilities adequate? ☒ Yes ☐ No — Equipment properly sized? ☒ Yes ☐ No

Stand-by capacity meet requirements? ☒ Yes ☐ No — Is stand-by equipment exercised at least monthly? ☒ Yes ☐ No

FINANCE

Financing & budget satisfactory: ☒ Yes ☐ No — Funds allocated properly: ☒ Yes ☐ No

Training funds sufficient: ☒ Yes ☐ No — Is there a water conservation policy/program? ☒ Yes ☐ No

Were any deficiencies identified or is technical assistance recommended for this element? ☐ Yes ☒ No

Comments:

OPERATOR STAFFING REQUIREMENTS

Treatment Category/Class: ___ Lead Operator Name & Class/Cert. Number: ___

Staffing Requirements: ___ Total Number of Operators Staffed ___ Staffing meet FAC 62-699? ☐ Yes ☐ No

Name(s) of all other operator(s) and Class & Cert. number: ___

Comments:

TECHNICAL ASSISTANCE

Technical assistance providers (tap) recommended? ☐ Yes (see enclosed tap information) ☐ No tap recommended at this time

CPE required? ☐ Yes ☐ No — Should a CTA be performed? ☐ Yes ☐ No

Comments:

Inspector Signature ___ Date: October 8, 2012

Reviewer's Signature ___ Date: October 8, 2012

SUMMARY OF DEFICIENCIES AND RECOMMENDATIONS FOR TECHNICAL ASSISTANCE.

SYSTEM DIAGRAM

SYSTEM MAP

POPULATION AND FLOW EVALUATION

PHOTOS

Florida Department of Environmental Protection

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

July 23, 2009

Pam Brewer, Secretary Treasurer
Lake Placid Holding Company
410 Washington Blvd., NW
Lake Placid, Florida 33852

Re: Highlands County - PW
Placid lakes Utilities
PWS I.D. Number: 6280223
Sanitary Survey Inspection Report

Dear Mrs. Brewer:

Enclosed is your copy of the recently completed Sanitary Survey Inspection Report for the referenced public drinking water system.

If there are deficiencies listed in the Report, they may be violations of Rules 62-550 and 62-555, F.A.C. You must correct all deficiencies listed in the Sanitary Survey Inspection Report within 30 days of the date of this letter and notify the Department in writing of corrective actions completed within 30 days of the date of this letter.

If you have any questions, please contact Ryan Schwarb at 2812 Kenilworth Blvd. Sebring, Fl 33870. By phone at 863-314-5975, ext. 105, or by e-mail at Ryan.Schwarb@dep.state.fl.us

Sincerely,

Mark Charneski

Mark Charneski
Environmental Supervisor II

MAC/rjs
Enclosures
cc: Nathan Brewer (w/enclosures)
Danny Holmes (w/enclosures)

SANITARY SURVEY REPORT

Water system: PLACID LAKES | System PWS #: 6280223 | Date of survey: 7-9-09

Inspector name: Ryan Schwarb | Person(s) contacted: Nathan Brewer

System type: C | Population: 3295 | Connections: 1938 | Design capacity: 1,104,000 | Storage capacity: 345,000

System address: 410 Washington Blvd NW | City: Lake Placid | State: FL | Zip: 33852

System phone: 863-465-0345 | Cell:

Fax number: | Email:

Owner name: Lake Placid Holding Company | Owner title:

Owner address: 410 Washington Blvd NW | City: Lake Placid | State: FL | Zip: 33852

Owner phone: | Cell:

Fax number: | Email:

Operator required? ☒ Yes ☐ No (If "No", Operator sections not applicable) | Operator class & cert. number: C-14995

Operator name: Nathan Brewer | Phone: 863-441-1090

Fax number: | Email:

Well Name and/or FL Unique Well ID	AAH9129	AAH9128	AAH9127
Well head sealed? (Pad/conduit/openings)	Y	Y	Y
Well casing 12" above grade?	Y	Y	Y
Casing vent compliant? (Installed, screened)	Y	Y	Y
Check valve compliant (installed/no leak)?	Y	Y	Y
Tap Compliant? (Smooth/12" high/prechec)	Y	Y	Y
Flow measurable? (If applicable, GPM@psi)	Y	Y	Y
Flow meter accuracy checked?	Y	Y	Y
Well capacity > maximum day?	Y	Y	Y
Setbacks compliant? (Hazard type and distance)	Y	Y	Y
Name of plant & type of chlorination	Gas	Gas	Gas
O & M log compliant?	Y	Y	Y
O & M manual compliant?	Y	Y	Y
Cl storage compliant? (no organics/acid/sun)	Y	Y	Y
Chlorinator flow proportionate?	Y	Y	Y
Treated sample tap provided?	Y	Y	Y
Chlor. Room: Cl solution strength?			
Chlor. Room: Solution tank compliant? (covered/etc)			
Chlor. Room: Antisiphon protection compliant?			
Chlor. Room: Safety: (Gloves/Apron/Eyewash/etc)			
Gas Cl: Cl room compliant? (separate/ventilation)	Y	Y	Y
Gas Cl: Scales compliant? (Installed/functional)	Y	Y	Y
Gas Cl: Safety: (SCBA/Gloves/Ammonia)	Y	Y	Y
AERATE: Choose type: "X" box below if not compliant ☐ Screen ☐ Tray ☐ Lid ☐ Bypass ☐ Drain ☐ Algae Free ☒ Compliant			
Flushing of dead ends compliant?	Y		
Valve maintenance compliant?	Y		
Distribution PSI compliant? (> 20 PSI)	Y		
Chlorine residual above minimum?	Y		

Storage type used: ☒ Hydro ☒ Ground ☐ Elevated ☐ Badder ☐ N/A	
Inspections compliant? (annual/5yr)	Y
Washouts compliant? (every 5 yrs)	Y
Storage capacity compliant? (¼ max)	Y
HYDRO: APPURTENANCES: "X" box below if not compliant, ☐ PRV ☐ Gauge ☐ Sight glass ☐ Bypass ☐ Drain ☒ Compliant	
GROUND: APPURTENANCES: "X" box below if not compliant. ☐ Hatch ☐ Vent ☐ Overflow ☐ Drain ☐ Bypass ☒ Compliant	
Manual or automatic controls?	Auto
On/Off pressure of pumps?	Unk
HSP: High Service Pumps functional?	Y
HSP: HSP capacity compliant?	Y
Chlorine test kit compliant?	Y
Chlorine grab sampling compliant?	Y
Bacti sampling compliant?	Y
Chemical sampling compliant?	Y
Lead/copper sampling compliant? (C,P)	Y
DBP monitoring compliant? (C,P)	Y
MONITORING PLANS: "X" box below if not compliant ☐ Bacteriological ☐ Disinfection By-Products (C,P) ☐ Lead & Copper (C,P)	
NSF: "X" box below if not compliant ☐ Treatment Chemicals/Components ☐ Storage ☐ Pipe ☐ New Meters	
CCC / Plan(C) implemented?	Y
Record keeping compliant?	Y
Security measures compliant?	Y
Plant category and type?	S/C
Operator visits compliant?	Y
Plant checked 5 days/week? (owner/rep)	Y
MORs submittal compliant?	Y

FIELD SAMPLING RESULTS: Plant Cl (mg/L)/pH: 1.6 | Distribution Cl (mg/L)/pH: 0.6

TECHNICAL ASSISTANCE PROVIDERS (TAP) RECOMMENDED? ☒ Yes (see enclosed TAP information) ☐ No TAP recommended at this time

COMMENTS:

DEFICIENCIES

Well pad at well #1 is cracked. - Repair crack in well pad. Rule 62-555.355(2), F.A.C. Suppliers of water shall keep all necessary public water system components in operation and shall maintain such components in good operating condition so the components function as intended.

REMARKS AND RECOMMENDATIONS

None.

SYSTEM SCHEMATIC

```
W1-WV-CV-Sequestall-GCL-2SAE-2ST(0.15MG)-3HT(15,000)-FOEST->
W2-WV-CV-/
W3-WV-CV/
```

TECHNICAL ASSISTANCE PROVIDERS

You may wish to contact the Florida Rural Water Association at 1-850-668-2746 for technical assistance with your water system. Services include water meter calibration, leak detection, drafting the Consumer Confidence Report and limited engineering assistance.

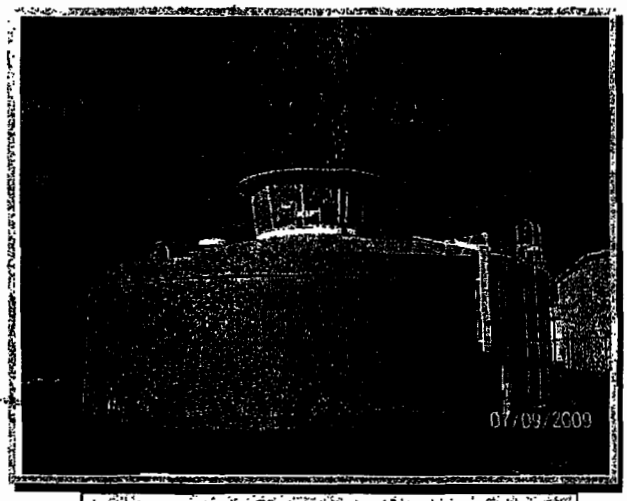
MAPS OR DIRECTIONS TO SYSTEM (text and/or graphics)

RED CIRCLE INDICATES LOCATION OF WTP

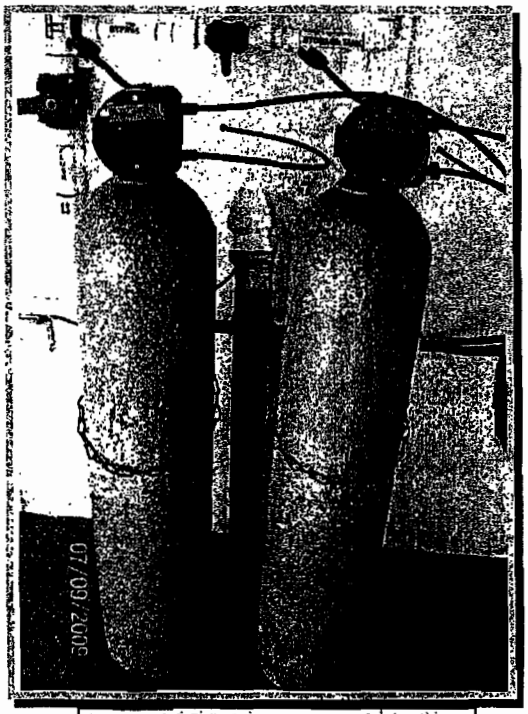
DIGITAL PHOTOS

Cracked well pad

Well



Storage tank



Chlorine gas tanks

Inspector Signature _____ Date: July 23, 2009

Reviewer's Signature _____ Date: July 23, 2009

Placid Lakes Utilities, Inc.

A DIVISION OF LAKE PLACID HOLDING CO.

410 Washington Blvd. NW
Lake Placid, Florida 33852

Office: (863) 465-0345
Water Plant: (863) 465-2427
Fax: (863) 465-1313

August 27, 2009

Ryan Schwarb
Florida Department of Environmental Protection
South District- Sebring Office
2812 Kenilworth Blvd.
Sebring, FL 33870

Re: Highlands County –PW
Placid Lakes Utilities, Inc.
PWS I.D. #6280223
Sanitary Survey Inspection Report

Dear Mr. Schwarb:

Enclosed please find copies of pictures taken of the repair to the crack at the #1 well mentioned in the above referenced report.

This repair was done to correct the deficiency mentioned in the report.

If you have any questions, please contact me at my cell number: 863-441-1090.

Sincerely,

Nathan Brewer
Water Plant Operator

NB/pb

Placid Lakes Utilities, Inc.

A DIVISION OF LAKE PLACID HOLDING CO.

410 Washington Blvd. NW
Lake Placid, Florida 33852

March 28,2008

Office: (863) 465-0345
Water Plant: (863) 465-2427
Fax: (863) 465-1313

Raymond W. Kenney, Engineering Specialist II
Florida Department of Environmental Protection
South District
PO Box 2549
Fort Myers, FL 33902-2549

RE: Highlands County – PW
Placid Lakes Utilities WTP
PWS ID #: 6280223
Compliance Inspection Report

Dear Mr. Kenney:

In response to the deficiencies in your report dated 03/05/2008:

1. Lead and Copper Sampling has been revised and the form is enclosed with this letter. In addition, a new map with the correct names of the streets is enclosed marked with the twenty sampling sites, the ten optional sites and the Water Quality Parameter Sampling site.
2. The Cross Connection Control plan dated April 2007 has been revised to correct the rule number reference in Section II A. Section II B has been revised to reflect the AWWA Manual M14 and the revision was approved at the Board of Director's Meeting held March 28, 2008.

In response to comment number 2, the utility now has a full time operator who will be filling in the correct number of service connections on the monthly operating reports beginning on the March 2008 report.
In addition, the utility has ordered parts to install the automatic blow off device at Anna Maria Way NE and will add the request for funds to do all dead end mains in the current rate case before the Florida Public Service Commission.

If you have any questions or need further information, please contact me at the letterhead address, call 863-465-0345 or e-mail me at pbrewer@embarqmail.com.

Sincerely,

Pam Brewer
Vice President/Secretary

Florida Department of
Environmental Protection
South District
P.O. Box 2549
Fort Myers, FL 33902-2549

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

March 11, 2008

Ms. Pam Brewer, Secretary-Treasurer
Lake Placid Holding Company
410 Washington Blvd., NW
Lake Placid, Florida 33852

Re: Highlands County - PW
Placid Lakes Utilities WTP
PWS I.D. Number: 6280223
Compliance Inspection Report

Dear Ms. Brewer:

Enclosed is your copy of the recently completed Compliance Inspection Report for the referenced public drinking water system.

The deficiencies listed in the Report may in violation of Rule 62-555, F.A.C. Please correct the deficiencies as soon as possible and notify the Department in writing postmarked no later than April 28, 2008 indicating which deficiencies have been corrected. For those deficiencies that have not been corrected, indicate how and on what schedule the system will address the deficiencies noted in the report.

Comments and a recommendation are included in the Report. Recommendations are not requirements of State law. They are provided as guidelines towards optimizing water treatment plant operation.

If you have any questions, please contact me at the letterhead address, call 239-332-6975, extension 119 or e-mail me at Raymond.Kenney@dep.state.fl.us. Please include the system name and PWS I.D. number with all correspondence.

Sincerely,

Raymond W. Kenney
Engin ering Specialist II

RWK
Enclosure
cc: Nathan Brewer (w/enc)

State of Florida
Department of Environmental Protection
South District

WATER TREATMENT PLANT COMPLIANCE INSPECTION REPORT

Plant Name:	**Placid Lakes Utilities**	County: **Highlands**	PWS: **6280223**
Address:	**410 Washington Blvd NW**	Contact: **Pam Brewer, Sec - Treasurer**	
	Lake Placid, Fl 33852	Phone: **(863) 465-0345**	
Owner Name:	**Lake Placid Holding Company**	Contact: **Nathan Brewer, Operator**	
Owner Address:	**410 Washington Blvd NW**	Phone: **(863) 441-1090**	
	Lake Placid, Fl 33852		

This Inspection Date: **Mar 05, 2008** Last C.I. Date: **Jan 23, 2007**
Last Sanitary Survey Date: **Feb 08, 2006**
PWS Type: **Community**
Service Area Characteristics: **Town**
No. of Service Connections: **1500**
Served Population: **3600**

OPERATION AND MAINTENANCE

Certified Operator: **Yes**
Required Coverage: **5 visits/week and one visit each weekend for a total of 0.6 hour/week**
Operator & Certification Class-Number: **Nathan Brewer C 14995**
O&M Log: **Yes** Condition of Plant? **Good**

WELLS

Number of Wells: **3 (#1 @ Plant; #2 @ Washington Blvd NW & Jupiter; #3 @ Jefferson & Lake Groves)**
Florida ID No. **#1 – AAH 9129; #2 - AAH9128; #3 – AAH9127**
Check Valve: **Yes**
Fence/Housing: **Yes**
Sanitary Hazards: **No**
Auxiliary Power: **Yes**
Tested Weekly? **Yes**

DESIGN CAPACITY **1.104MGD**
STORAGE CAPACITY **0.345 MG**

CHLORINATION

Chlorinator Type: **Gas**
Cl2 Residual:
Plant: **1.7 mg/l Free**
Remote: **0.2 mg/l Free**
Location: **Blow off at Anna Maria Way NE**
Gas Cylinder Scale: **Yes**
Gas Cylinder Chained: **Yes**
Adequate Air-pak: **Yes**
Adequate Ventilation: **Yes**
Dual Chlorination: **Yes**
Auto-switchover: **Yes**
Alarm: **Yes**

PRESSURE
Plant: **52 psi**

AERATION **Yes**
Type: **Tray**
Condition: **Good**

OTHER TREATMENT PROCESSES
Corrosion Control (Sequest-All)

OTHER
Flow Measuring Device: **Meter**
Backflow Prevention Device: **Yes**
Cross-connection Observed? **No**

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

Tank type	G (#1-NE)	G (#2-SW)	H (1-E)	H (2-C)	H (3-W)
Capacity, Gal	150,000	150,000	15,000	15,000	15,000
Gravity drain	Y	Y	Y	Y	Y
Manufacturer	Crom	Crom	—	—	—
Date	—	1996	1994	1997	1979
By-pass piping	Y	y	Y	Y	Y
Pressure gauge	N/A	N/A	Y	Y	Y
On/Off pressure, psi	"	'	32-58	32-58	32-58
Sight glass	"	'	Y	Y	Y
Fittings for sight	"	'	Y	Y	Y
Air release valve	"	'	Y	Y	Y
Pressure relief valve	"	'	Y	Y	Y
Access padlocked	Y	Y	Y	Y	Y

O&M log compliant? ☒ Yes ☐ No
O&M manual compliant? ☒ Yes ☐ No
Dead end mains flushed? ☒ Yes ☐ No ☐ N/A
Isolation valves exercised? ☒ Yes ☐ No
CCC plan satisfactory? ☒ Yes ☐ No
CCC plan implemented? ☒ Yes ☐ No
Bacti plan compliant? ☒ Yes ☐ No
DBP monitoring plan compliant? ☒ Yes ☐ No
Pb&Cu plan compliant? ☐ Yes ☒ No
Record keeping compliant? ☒ Yes ☐ No
Plant checked 5 days/week? ☒ Yes ☐ No
Operator visits compliant? ☒ Yes ☐ No ☐ N/A
Plant category/type V/C

Recordkeeping Requirements Checklist	Rule	Years	Yes	No
Bacteriologicals	62-550.720(1)	5		
Physical analyses	62-550.720(1)	10		
Chemical analyses	62-550.720(1)	10		
Radiological analyses	62-550.720(1)	10		
Action to correct violations of primary regulations	62-550.720(2)	3		
Cross connection control information	62-550.720(3)	10		
Sanitary survey information	62-550.720(3)	10		
Variance or exemption	62-550.720(4)	5		
Monthly Operating Reports	62-550.720(5)	10		
Lead and Copper	62-550.720(6)	12		
Finished water tanks cleaned during last 5 years	62-555.350(12)(c)			
Finished water tanks inspected during last 5 years	62-555.350(12)(c)			
Dead end mains flushed	62-555.350(12)(c)			
Isolation valves exercised	62-555.350(12)(c)			
Auxiliary power exercised monthly	62-555.350(12)(c)			
Operation and maintenance logs at WTP	62-602.650(4)			

DEFICIENCIES:

1. A review of the Lead and Copper Sampling indicates that it needs to be revised. The plan on file with the Department is from the mid 90's. Highlands County has changed the names of many streets some of which may have been on the old sampling plan. In addition, the old plan does not identify any Water Quality parameter sample sites.

The minimum number of sample sites for your system on reduced monitoring is twenty (20) sample sites. The Department recommends that the system submit a revised Lead and Copper Sampling Plan that identifies thirty (30) lead and copper sample sites. Twenty of the sites should be identified on the plan with an "S' for sites that will be sampled and ten (10) with an "O" that are optional sites that can be sampled if an "S" site is not available. In addition, this provides the system with another option. If the system samples early in the monitoring period at the twenty "S" sites and exceeds an Action Level for either lead or copper, the system can then sample before the end of the monitoring period at the "O" sites and combine these results with the first twenty and recalculate if the Action Level is exceeded. This option is only available if the thirty sites are on an approved sampling plan.

The system also needs to identify Water Quality Parameter Sampling Sites on Page 4. The entry point needs to be identified on the left portion of the page and three distribution sites on the right side of the page that should be bacteriological sample sites.

All questions on Page 5 need to be answered and the plan signed and dated.

A blank form in Word format can be found at
http://www.dep.state.fl.us/water/drinkingwater/forms.htm

2. The revised Cross Connection Control plan, dated April 2007, was received by the Department on April 27, 2007. This plan needs further revision before it can be approved.

Section II A – the rule covering Cross Connection is 62-555.360 F.A.C. The revision to the rule on August 28, 2003 mandates that the plan be implemented.

Section II B – the March 20, 1996 HRS refers to a residence that does not have auxiliary water on the premise.

The plan must address the issue of auxiliary water at a premise. The system must perform a hazard analysis on residential service connections if there is auxiliary water on the premise. To assist in determining if there is an auxiliary water source (e.g. well) at a premise the system may need to check records at the Highlands County Health Department. AWWA Manual M14 states that an approved backflow prevention device shall be installed at the service connection to any premise where there is an auxiliary water supply, even if there is no connection between the auxiliary water and the potable water system. Auxiliary water on a premise of any type (commercial or residential) can present a hazard to the community water system. An auxiliary water system is a piping system supplied by water from a source other than the community water system serving the premises, such as a lake or private well. Surface water from lakes, rivers, ponds and streams that would constitute a health or high hazard requires an air gap separation or a reduced backflow preventer at the service connection. Ground water from wells or springs which would constitute a non health or low hazard requires a double check valve assembly or a reduced backflow preventer at the service connection with the determination being made by the water supplier.

COMMENTS:

1. 62-699 F.A.C. was revised effective October 15, 2007. This changed the operator coverage for the system. The system is now a Category V Class C facility. The facility now requires staffing by Class C or higher operator: 5 visits/week and one visit each weekend for a total of 0.6 hour/week.

2. The system is reporting 1800 service connections and a population of 3600 on the MOR. The service connection number is questionable. The January 2007 MOR indicated 1925 service connections. The system should be able to indicate from its records a more accurate number of service connections (population) and report them monthly on the MOR.

3. The system is to sample for lead and copper this year during the monitoring period June through September.

RECOMMENDATIONS:

1. Install automatic blow off devices on dead end mains to ensure that there is always a minimum residual of 0.2 in the distribution system. The blow off at Anna Maria Way NE was 0.2 mg/l

Inspector: Raymond W. Kenney Raymond W. Kenney Eng Specialist II Date 3 / 11 / 2008

Approved By: Mark Charneski Mark Charneski Env. Supervisor II Date 3 / 11 / 2008

MONTHLY OPERATING
REPORTS 2012
Schedule V; Part A

PLACID LAKES UTILITIES, INC.

Docket No.: 130025-WU

Highlands County

25-30.440 (4)
OPERATIONS REPORTS

Test Year Ended December 31, 2012

SCHEDULE V
PART A

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: December 2012

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.		PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive		
Number of Service Connections at End of Month: 1,945	Total Population Served at End of Month: 3,307	
PWS Owner: Placid Lakes Utilities, Inc.		
Contact Person: Nathan Brewer	Contact Person's Title: Operator	
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313	
Contact Person's E-Mail Address: plcomm@embarqmail.com		

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.			Plant Telephone Number: 863-465-2427
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):		Plant Class (per subsection 62-699.310(4), F.A.C.):	

Plant Operators	Nathan Brewer	C	14995	7

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least 10 years.

1-12-13	Nathan Brewer	C14995
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 5280223 | Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: December 2012

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant Staffed or Visited by Operator	Total Quantity Finished Water Produced, gal	Highest Daily Flow, gpm	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at Q Max During Peak Flow, minutes	Disinfectant Contact Time (T) at Q Max Before First Customer, minutes	Lowest Temp. of Water Sample, °C	Lowest pH of Water Sample, pH Units	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm²	Minimum UV Dose Required, mW-sec/cm²	Lowest Residual Disinfectant Concentration (C) in Water Entering Distribution System, mg/L	Comments, Including Reasons for Any Interruptions of Water Service, Unusual Conditions, Source Problems, Chemical Use, Water Quality Complaints, Etc.
1	X	24	219,000	199	0.90			25.00	7.30				0.60	
2	X	24	326,000	287	1.30			25.00	7.30				1.00	
3	X	24	372,000	247	1.40			25.00	7.30				1.10	
4	X	24	319,000	299	1.50			25.00	7.30				1.20	
5	X	24	319,000	361	1.70			25.00	7.30				1.40	
6	X	24	383,000	383	1.00			25.00	7.30				0.70	
7	X	24	291,000	288	0.60			25.00	7.30				0.50	
8	X	24	271,000	255	1.40			25.00	7.30				1.10	
9	X	24	393,000	352	1.70			25.00	7.30				1.40	
10	X	24	308,000	282	1.30			25.00	7.30				1.00	
11	X	24	375,000	231	1.50			25.00	7.30				1.20	
12	X	24	313,000	199	1.30			25.00	7.30				1.00	
13	X	24	272,000	271	1.30			25.00	7.30				1.00	
14	X	24	323,000	256	0.60			25.00	7.30				0.50	
15	X	24	264,000	279	0.90			25.00	7.30				0.60	
16	X	24	282,000	317	0.70			25.00	7.30				0.60	
17	X	24	366,000	306	0.90			25.00	7.30				0.60	
18	X	24	262,000	236	1.30			25.00	7.30				1.00	
19	X	24	318,000	325	1.30			25.00	7.30				1.00	
20	X	24	265,000	215	1.10			25.00	7.30				0.80	
21	X	24	288,000	300	1.20			25.00	7.30				0.90	
22	X	24	264,000	232	1.60			25.00	7.30				1.30	
23	X	24	290,000	229	1.40			25.00	7.30				1.10	
24	X	24	342,000	280	1.20			25.00	7.30				0.90	
25	X	24	321,000	297	1.50			25.00	7.30				1.20	
26	X	24	256,000	248	1.30			25.00	7.30				1.00	
27	X	24	320,000	227	0.90			25.00	7.30				0.60	
28	X	24	329,000	374	1.10			25.00	7.30				0.80	
29	X	24	265,000	299	1.10			25.00	7.30				0.80	
30	X	24	335,000	290	1.20			25.00	7.30				0.90	
31	X	24	318,000	360	1.30			25.00	7.30				1.00	
Total			9,569,000											
Average			308,677											
Maximum			393,000											

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

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * **December 2012**

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? ☒ No ☐ Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, %† =

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? ☒ No ☐ Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, %† =

C. Is any iron or manganese sequestrant used at the water treatment plant? ☒ No ☐ Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):
Sequestrant Dose, mg/L of phosphate as PO_4 or mg/L of silicate as SiO_2 =
If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO_2 =

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

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD No. (as listed on your permit)	Permittee W.D.#	Meter #	Date of Meter Reading	Actual Meter Reading	Quantities Withdrawn (In Gallons)
004980	Well 1	1	12-31-12	243529	
			11-30-12	239602	3927
004980	Well 2	2	12-31-12	187510	
			11-30-12	184373	3137
004980	Well 3	3	12-31-12	27282	
			11-30-12	25440	1842
004980					
				TOTAL	8906

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT

Tampa Service Office 7601 US HWY. 301, Tampa, FL 33637-6759

(813) 985-7481 OR 1 (800) 836-0797 (Florida Only)

ATTN: Water Use Permit Bureau

Lake Placid Holding Co. / Attn: Peggy A. Brewer
410 Washington Boulevard NW
Lake Placid, FL 33852

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 12-12

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	12	31	12		243529000	0 0 0 0 0 0	
REPORT METER READINGS PRC 12012012										
0002	030	001	951869	12	31	12		187510000	0 0 0 0 0 0	
REPORT METER READINGS PRC 12012012										
0003	030	001	964256	12	31	12		27282000	0 0 0 0 0 0	
REPORT METER READINGS PRC 12012012										

*VALID REMARK CODES:

- Y NORMAL (OPTIONAL)
- O ROLLOVER
- X NOT AVAILABLE
- F RESTART METER READING
- U WITHDRAWAL NOT USED

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW Lake Placid FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

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

See page 4 for instructions.

I. General Information for the Month/Year of: November 2012

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,945	Total Population Served at End of Month: 3,307		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.			Plant Telephone Number: 863-465-2427
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s) Shift(s) Worked
Lead/Chief Operator	Nathan Brewer	C	14995	7
Other Operators				

II. Certification by Lead/Chief Operator

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

Signature and Date	Printed or Typed Name	License Number
Nathan Brewer	Nathan Brewer	C14995

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: November 2012

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

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

Day of the Month	Plant Operated Today? (Yes or No)	Hours Plant Operated Today	Finished Water Pumped Today (gallons)	Highest Disinfectant Residual in Distribution System Today (mg/L)	Lowest Disinfectant Residual in Distribution System Today (mg/L)	Highest Turbidity of Water Entering Membranes Today (NTU)	Highest Turbidity of Membrane Filtered Water Today (NTU)	Lowest Temperature of Water Entering Membranes Today (°C)	Highest Temperature of Water Entering Membranes Today (°C)	Minimum Operating Pressure Required (psig)	Lowest Operating Pressure Today (psig)	Highest Operating Pressure Today (psig)	Highest Disinfectant Residual in Plant Finished Water Today (mg/L)	Emergency or Abnormal Operations Not Reported Elsewhere That Affected Water Quality or Quantity (Include Start and End Times)
1	X	24	240,000	252	1.70			25.00	7.30				1.40	
2	X	24	321,000	316	0.80			25.00	7.30				0.50	
3	X	24	220,000	306	1.30			25.00	7.30				1.00	
4	X	24	301,000	387	0.80			25.00	7.30				0.80	
5	X	24	330,000	333	1.00			25.00	7.30				0.70	
6	X	24	289,000	175	1.50			25.00	7.30				1.20	
7	X	24	277,000	196	1.30			25.00	7.30				1.00	
8	X	24	295,000	271	1.20			25.00	7.30				0.90	
9	X	24	230,000	280	1.40			25.00	7.30				1.10	
10	X	24	231,000	254	1.30			25.00	7.30				1.00	
11	X	24	335,000	341	0.80			25.00	7.30				0.50	
12	X	24	328,000	263	1.60			25.00	7.30				1.30	
13	X	24	252,000	211	1.60			25.00	7.30				1.30	
14	X	24	242,000	186	1.40			25.00	7.30				1.40	
15	X	24	298,000	219	1.70			25.00	7.30				1.70	
16	X	24	272,000	197	1.30			25.00	7.30				1.00	
17	X	24	258,000	292	1.40			25.00	7.30				1.10	
18	X	24	298,000	351	2.00			25.00	7.30				1.70	
19	X	24	387,000	273	1.40			25.00	7.30				1.10	
20	X	24	257,000	242	1.40			25.00	7.30				1.10	
21	X	24	255,000	335	1.10			25.00	7.30				0.80	
22	X	24	373,000	331	1.00			25.00	7.30				0.70	
23	X	24	253,000	173	1.40			25.00	7.30				1.10	
24	X	24	311,000	299	1.20			25.00	7.30				0.90	
25	X	24	321,000	378	1.20			25.00	7.30				0.90	
26	X	24	330,000	241	1.30			25.00	7.30				1.00	
27	X	24	356,000	210	1.40			25.00	7.30				1.10	
28	X	24	326,000	280	1.60			25.00	7.30				1.30	
29	X	24	305,000	215	1.40			25.00	7.30				1.10	
30	X	24	318,000	217	1.00			25.00	7.30				0.70	
31	X	24	321,000	236	1.50			25.00	7.30				1.20	
Total			9,130,000											
Average			294,516											
Maximum			387,000											

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

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year:* November 2012

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? ☒ No ☐ Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, %† =

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? ☒ No ☐ Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, %† =

C. Is any iron or manganese sequestrant used at the water treatment plant? ☒ No ☐ Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):
Sequestrant Dose, mg/L of phosphate as PO_4 or mg/L of silicate as SiO_2 =
If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO_2 =

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

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT

Tampa Service Office 7601 US HWY. 301, Tampa, FL 33637-6759

(813) 985-7481 OR 1 (800) 836-0797 (Florida Only)

ATTN: Water Use Permit Bureau

Lake Placid Holding Co. / Attn: Peggy A. Brewer
410 Washington Boulevard NW
Lake Placid, FL 33852

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 11-12

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	11	30	12		239602000	0 0 0 0 0 0	
REPORT METER READINGS PRC 11012012										
0002	030	001	951869	11	30	12		184373000	0 0 0 0 0 0	
REPORT METER READINGS PRC 11012012										
0003	030	001	964256	11	30	12		25440000	0 0 0 0 0 0	
REPORT METER READINGS PRC 11012012										

*VALID REMARK CODES:

- Y NORMAL (OPTIONAL)
- O ROLLOVER
- X NOT AVAILABLE
- F RESTART METER READING
- U WITHDRAWAL NOT USED

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

Water Use Permit Number	Source Name	Meter Number	Date of Meter Reading	Gauge Meter Reading	Quantities Withdrawn (Gallons)
004980	Well 1	1	11-30-12	239602	
			10-31-12	235825	3777
004980	Well 2	2	11-30-12	184373	
			10-31-12	181570	2803
004980	Well 3	3	11-30-12	25440	
			10-31-12	23706	1734
004980					
				TOTAL	8314

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

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: October 2012

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,945	Total Population Served at End of Month: 3,307		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.			Plant Telephone Number: 863-465-2427
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Type of Operator	Name	Operator Class	Operator Number	Hours Operated
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Nathan Brewer Printed or Typed Name	C14995 License Number

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: October 2012

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

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

Day of the Month	Plant Effluent Valved Out of Service (Yes or No)	Hours Plant Operating	Total Quantity of Water Produced (gallons)	Average Daily Flow Rate (gpm)	Lowest Disinfectant Residual Concentration (CT) Before First Customer (mg/L)	Duration of Lowest Disinfectant Residual Concentration (CT) Before First Customer (minutes)	Disinfectant Residual Concentration (CT) Measurement Point Before First Customer	Highest Disinfectant Residual Concentration in Distribution System (mg/L)	Lowest Disinfectant Residual Concentration in Distribution System (mg/L)	Minimum Required Disinfectant Residual Concentration in Distribution System (mg/L)	Lowest Operating Pressure (psi)	Minimum Daily Pressure Recorded in Distribution System (psi)	Quantity of Disinfectant Applied (mg/L)	Specify Corrosion Control Treatment Chemical(s) Used and Amount Applied (mg/L)
1	X	24	288,000	216	1.10			25.00	7.30				0.90	
2	X	24	252,000	270	1.30			25.00	7.30				1.00	
3	X	24	244,000	192	1.70			25.00	7.30				1.40	
4	X	24	256,000	209	1.30			25.00	7.30				1.00	
5	X	24	253,000	319	1.40			25.00	7.30				1.10	
6	X	24	222,000	176	0.80			25.00	7.30				0.60	
7	X	24	259,000	220	0.70			25.00	7.30				0.50	
8	X	24	281,000	167	1.10			25.00	7.30				0.80	
9	X	24	281,000	249	1.00			25.00	7.30				0.70	
10	X	24	244,000	157	1.30			25.00	7.30				1.00	
11	X	24	265,000	161	1.30			25.00	7.30				1.00	
12	X	24	249,000	226	1.30			25.00	7.30				1.00	
13	X	24	257,000	206	1.30			25.00	7.30				1.00	
14	X	24	299,000	331	1.40			25.00	7.30				1.10	
15	X	24	303,000	291	1.50			25.00	7.30				1.20	
16	X	24	277,000	228	1.40			25.00	7.30				1.10	
17	X	24	253,000	263	1.40			25.00	7.30				1.10	
18	X	24	271,000	277	1.40			25.00	7.30				1.10	
19	X	24	250,000	229	1.50			25.00	7.30				1.20	
20	X	24	265,000	325	1.50			25.00	7.30				1.20	
21	X	24	311,000	355	0.70			25.00	7.30				0.50	
22	X	24	322,000	235	0.90			25.00	7.30				0.60	
23	X	24	277,000	293	1.40			25.00	7.30				1.10	
24	X	24	344,000	330	1.20			25.00	7.30				0.90	
25	X	24	213,000	203	1.20			25.00	7.30				0.90	
26	X	24	255,000	270	1.20			25.00	7.30				0.90	
27	X	24	341,000	300	1.20			25.00	7.30				0.90	
28	X	24	231,000	400	1.00			25.00	7.30				0.70	
29	X	24	285,000	217	1.20			25.00	7.30				0.90	
30	X	24	315,000	193	1.30			25.00	7.30				1.00	
31	X	24	321,000	236	1.50			25.00	7.30				1.20	
Total			8,484,000											
Average			273,677											
Maximum			344,000											

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

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * October 2012

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? ☒ No ☐ Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, %† =

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? ☒ No ☐ Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, %† =

C. Is any iron or manganese sequestrant used at the water treatment plant? ☒ No ☐ Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):
Sequestrant Dose, mg/L of phosphate as PO_4 or mg/L of silicate as SiO_2 =
If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO_2 =

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

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT

Tampa Service Office 7601 US HWY. 301, Tampa, FL 33637-6759

(813) 985-7481 OR 1 (800) 836-0797 (Florida Only)

ATTN: Water Use Permit Bureau

Lake Placid Holding Co. / Attn: Peggy A. Brewer
410 Washington Boulevard NW
Lake Placid, FL 33852

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 10-12

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	10	31	12		235825000	0 0 0 0 0 0	
REPORT METER READINGS PRC 10012012										
0002	030	001	951869	10	31	12		181570000	0 0 0 0 0 0	
REPORT METER READINGS PRC 10012012										
0003	030	001	964256	10	31	12		23706000	0 0 0 0 0 0	
REPORT METER READINGS PRC 10012012										

*VALID REMARK CODES:

- Y NORMAL (OPTIONAL)
- O ROLLOVER
- X NOT AVAILABLE
- F RESTART METER READING
- U WITHDRAWAL NOT USED

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Ave NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1690

COMMENTS:

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

Well ID No. (as identified on permit)	Well Name/Description	Meter #	Date Recorded (Reading)	Total Meter Reading	Quantities Withdrawn (Gallons)
004980	Well 1	1	10-31-12	235825	
			9-30-12	232277	3548
004980	Well 2	2	10-31-12	181570	
			9-30-12	178726	2844
004980	Well 3	3	10-31-12	23706	
			9-30-12	22026	1680
004980					
				TOTAL	8072

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

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 2012

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,945	Total Population Served at End of Month: 3,307		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.		Plant Telephone Number: 863-465-2427	
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Nathan Brewer Printed or Typed Name	C14995 License Number

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: September 2012

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

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

Day of the Month	Plant Staffed or Visited by Operator (Place X in Column)	Hours Operated	Net Quantity of Water Produced (gal)	Average Daily Flow Rate (gpm)	Lowest Reading of Disinfectant Residual Leaving Plant (mg/L)	Duration Below Minimum Disinfectant Residual (minutes)	Lowest Reading of Disinfectant Residual in Distribution System (mg/L)	Temperature (°C)	pH (Standard Units)	Minimum Contact Time (T) Provided (minutes)	Actual Contact Time (T) Provided (minutes)	Minimum Contact Time (T) Required (minutes)	Calculated CT Value for Virus Inactivation	Comments: Unusual Conditions/Events/Actions Related to Operation of Water System Components
1	X	24	240,000	161	1.00			25.00	7.30				0.70	
2	X	24	324,000	312	1.50			25.00	7.30				1.20	
3	X	24	296,000	317	0.80			25.00	7.30				0.50	
4	X	24	339,000	174	1.50			25.00	7.30				1.20	
5	X	24	244,000	170	1.80			25.00	7.30				1.50	
6	X	24	248,000	191	1.30			25.00	7.30				1.00	
7	X	24	194,000	202	1.40			25.00	7.30				1.10	
8	X	24	240,000	327	1.50			25.00	7.30				1.20	
9	X	24	285,000	326	1.00			25.00	7.30				0.70	
10	X	24	273,000	187	1.40			25.00	7.30				1.10	
11	X	24	235,000	254	1.50			25.00	7.30				1.20	
12	X	24	279,000	181	1.40			25.00	7.30				1.10	
13	X	24	223,000	114	1.70			25.00	7.30				1.40	
14	X	24	234,000	288	1.10			25.00	7.30				0.80	
15	X	24	240,000	174	1.20			25.00	7.30				0.90	
16	X	24	301,000	231	1.90			25.00	7.30				1.60	
17	X	24	291,000	257	1.50			25.00	7.30				1.20	
18	X	24	243,000	264	1.40			25.00	7.30				1.10	
19	X	24	534,000	182	0.50			25.00	7.30				0.50	
20	X	24	190,000	241	1.80			25.00	7.30				1.50	
21	X	24	291,000	201	0.90			25.00	7.30				0.60	
22	X	24	21,000	221	1.00			25.00	7.30				0.70	
23	X	24	297,000	224	1.00			25.00	7.30				0.70	
24	X	24	313,000	286	1.00			25.00	7.30				0.70	
25	X	24	265,000	355	1.00			25.00	7.30				0.70	
26	X	24	281,000	148	1.10			25.00	7.30				0.80	
27	X	24	259,000	260	1.10			25.00	7.30				0.80	
28	X	24	331,000	199	1.10			25.00	7.30				0.80	
29	X	24	187,000	233	0.90			25.00	7.30				0.60	
30	X	24	256,000	219	1.00			25.00	7.30				0.70	
31														
Total:			7,954,000											
Average:			265,133											
Maximum:			534,000											

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

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * September 2012

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? ☒ No ☐ Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, %† =

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? ☒ No ☐ Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, %† =

C. Is any iron or manganese sequestrant used at the water treatment plant? ☒ No ☐ Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):
Sequestrant Dose, mg/L of phosphate as PO_4 or mg/L of silicate as SiO_2 =
If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO_2 =

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

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT

Tampa Service Office 7601 US HWY. 301, Tampa, FL 33637-6759

(813) 985-7481 OR 1 (800) 836-0797 (Florida Only)

ATTN: Water Use Permit Bureau

Lake Placid Holding Co. / Attn: Peggy A. Brewer
410 Washington Boulevard NW
Lake Placid, FL 33852

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 09-12

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	09	30	12		232277000	0 0 0 0 0 0	
REPORT METER READINGS PRC 09012012										
0002	030	001	951869	09	30	12		178726000	0 0 0 0 0 0	
REPORT METER READINGS PRC 09012012										
0003	030	001	964256	09	30	12		22026000	0 0 0 0 0 0	
REPORT METER READINGS PRC 09012012										

*VALID REMARK CODES:

Y	NORMAL (OPTIONAL)	F	RESTART METER READING
O	ROLLOVER	U	WITHDRAWAL NOT USED
X	NOT AVAILABLE		

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1690

COMMENTS:

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID # (As listed on your permit)	Station Name	Meter #	Date of Meter Reading	Actual Meter reading	Gallons Withdrawn in Gallons
004980	Well 1	1	9-30-12	232277	
			8-31-12	228804	3473
004980	Well 2	2	9-30-12	178726	
			8-31-12	176068	2658
004980	Well 3	3	9-30-12	22026	
			8-31-12	20399	1627
004980					
				TOTAL	7758

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

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

See page 4 for instructions.

I. General Information for the Month/Year of: August 2012

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,945	Total Population Served at End of Month: 3,307		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.		Plant Telephone Number: 863-465-2427	
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator	Nathan Brewer	C	14995	7
Other Operators				

II. Certification by Lead/Chief Operator

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

Signature and Date	Nathan Brewer Printed or Typed Name	C14995 License Number

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: August 2012

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced - gal	Peak Flow Rate - gpd	Lowest Residual Disinfectant Concentration (C) Recorded at Entry to Distribution System During Peak Hourly Flow - mg/L	Duration that Residual Disinfectant Concentration (C) Was Measured Below Required Level During Peak Hourly Flow - minutes	Lowest Cl2 Residual Provided Before or at the First Customer During Peak Hourly Flow - mg/L	Temp of Water - °C	pH of Water if Applicable	Actual CT Value - mg-min/L	Lowest Operating HLR - m/sec/gpm/sq ft	Minimum Operating UV Dose Required - mJ/cm²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System - mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24	281,000	291	1.40			25.00	7.30				1.10	
2	X	24	285,000	176	1.30			25.00	7.30				1.00	
3	X	24	274,000	165	0.80			25.00	7.30				0.50	
4	X	24	193,000	183	1.00			25.00	7.30				0.70	
5	X	24	271,000	184	1.30			25.00	7.30				1.00	
6	X	24	282,000	183	1.50			25.00	7.30				1.20	
7	X	24	276,000	219	1.20			25.00	7.30				0.90	
8	X	24	265,000	183	1.40			25.00	7.30				1.10	
9	X	24	169,000	210	1.40			25.00	7.30				1.10	
10	X	24	297,000	142	1.20			25.00	7.30				0.90	
11	X	24	226,000	193	1.00			25.00	7.30				0.70	
12	X	24	252,000	231	1.00			25.00	7.30				0.70	
13	X	24	295,000	279	1.20			25.00	7.30				0.90	
14	X	24	247,000	166	1.10			25.00	7.30				0.80	
15	X	24	235,000	195	0.90			25.00	7.30				0.60	
16	X	24	250,000	223	1.20			25.00	7.30				0.90	
17	X	24	306,000	313	1.30			25.00	7.30				1.00	
18	X	24	242,000	171	1.30			25.00	7.30				1.00	
19	X	24	287,000	233	1.20			25.00	7.30				0.90	
20	X	24	296,000	247	1.30			25.00	7.30				1.00	
21	X	24	247,000	240	1.50			25.00	7.30				1.20	
22	X	24	238,000	215	1.00			25.00	7.30				0.70	
23	X	24	216,000	238	1.50			25.00	7.30				1.20	
24	X	24	269,000	241	1.30			25.00	7.30				1.00	
25	X	24	235,000	207	0.60			25.00	7.30				0.60	
26	X	24	261,000	292	0.80			25.00	7.30				0.80	
27	X	24	283,000	273	0.90			25.00	7.30				0.60	
28	X	24	231,000	192	0.90			25.00	7.30				0.60	
29	X	24	250,000	176	1.60			25.00	7.30				1.30	
30	X	24	207,000	172	1.20			25.00	7.30				0.90	
31	X	24	240,000	196	1.60			25.00	7.30				1.30	
Total			7,906,000											
Average			255,032											
Maximum			306,000											

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

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * August 2012

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? ☒ No ☐ Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, %† =

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? ☒ No ☐ Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, %† =

C. Is any iron or manganese sequestrant used at the water treatment plant? ☒ No ☐ Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):
Sequestrant Dose, mg/L of phosphate as PO_4 or mg/L of silicate as SiO_2 =
If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO_2 =

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

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

Permit No. (10 digits)	Permittee WD #	Meter #	Date of Meter Reading	Actual Meter Reading	Gallons Withdrawn (metered)
004980	Well 1	1	8-31-12	228804	
			7-31-12	225510	3294
004980	Well 2	2	8-31-12	176068	
			7-31-12	173395	2673
004980	Well 3	3	8-31-12	20399	
			7-31-12	18813	1586
004980					
				TOTAL	7553

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT

Tampa Service Office 7601 US HWY. 301, Tampa, FL 33637-6759

(813) 985-7481 OR 1 (800) 836-0797 (Florida Only)

ATTN: Water Use Permit Bureau

Lake Placid Holding Co. / Attn: Peggy A. Brewer
410 Washington Boulevard NW
Lake Placid, FL 33852

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 08-12

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
001	030	001	952655	08	31	12		228804000	0 0 0 0 0 0	
REPORT METER READINGS PRC 08012012										
0002	030	001	951869	08	31	12		176068000	0 0 0 0 0 0	
REPORT METER READINGS PRC 08012012										
0003	030	001	964256	08	31	12		20399000	0 0 0 0 0 0	
REPORT METER READINGS PRC 08012012										

*VALID REMARK CODES:

- Y NORMAL (OPTIONAL)
- O ROLLOVER
- X NOT AVAILABLE
- F RESTART METER READING
- U WITHDRAWAL NOT USED

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

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: July2012

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,945	Total Population Served at End of Month: 3,307		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.		Plant Telephone Number: 863-465-2427	
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Days/Shifts Worked
Lead/Chief Operator	Nathan Brewer	C	14995	7
Other Operators				

II. Certification by Lead/Chief Operator

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

Signature and Date	Nathan Brewer Printed or Typed Name	C14995 License Number

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: July2012

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

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

Day of the Month	Was Plant Staffed or Visited by Operator (Place X)	Hours Plant Operated	Total Finished Water Produced (gal)	Highest Reading of Turbidity of Finished Water (NTU)	Lowest Reading of Disinfectant Residual Entering Distribution System (mg/L)	Highest Reading of Turbidity Measured in the Distribution System (NTU)	Lowest Reading of Disinfectant Residual Measured in the Distribution System (mg/L)	Temperature of Water Sample (°C)	pH of Water Sample	Was Chlorine Residual Maintained Above 1 mg/L for at least 4 hours? (Place X)	Was Fluoride Added? (Place X)	Was Backwash Water Recycled? (Place X)	Highest Reading of Fluoride Concentration in Finished Water (mg/L)	Emergency or Abnormal Operating Conditions Encountered and Maintenance Performed (Describe)
1	X	24	291,000	195	0.50			25.00	7.30				0.50	
2	X	24	303,000	280	0.60			25.00	7.30				0.60	
3	X	24	268,000	150	0.50			25.00	7.30				0.50	
4	X	24	304,000	356	0.60			25.00	7.30				0.50	
5	X	24	188,000	100	0.90			25.00	7.30				0.50	
6	X	24	322,000	214	1.20			25.00	7.30				0.90	
7	X	24	191,000	206	1.00			25.00	7.30				0.70	
8	X	24	304,000	215	0.90			25.00	7.30				0.60	
9	X	24	278,000	326	1.20			25.00	7.30				0.90	
10	X	24	269,000	208	1.00			25.00	7.30				0.70	
11	X	24	266,000	211	0.80			25.00	7.30				0.50	
12	X	24	215,000	159	0.70			25.00	7.30				0.50	
13	X	24	304,000	201	1.00			25.00	7.30				0.70	
14	X	24	199,000	305	1.40			25.00	7.30				1.10	
15	X	24	241,000	215	1.30			25.00	7.30				1.00	
16	X	24	261,000	322	1.00			25.00	7.30				0.70	
17	X	24	295,000	288	1.10			25.00	7.30				0.80	
18	X	24	238,000	181	0.50			25.00	7.30				0.50	
19	X	24	262,000	278	0.70			25.00	7.30				0.50	
20	X	24	291,000	243	1.20			25.00	7.30				0.90	
21	X	24	185,000	355	1.20			25.00	7.30				0.90	
22	X	24	294,000	225	1.30			25.00	7.30				1.00	
23	X	24	292,000	240	1.10			25.00	7.30				0.80	
24	X	24	205,000	139	1.00			25.00	7.30				0.70	
25	X	24	233,000	224	1.40			25.00	7.30				1.10	
26	X	24	253,000	272	1.40			25.00	7.30				1.10	
27	X	24	278,000	480	1.30			25.00	7.30				1.00	
28	X	24	234,000	195	1.50			25.00	7.30				1.20	
29	X	24	227,000	255	1.50			25.00	7.30				1.20	
30	X	24	281,000	234	1.50			25.00	7.30				1.20	
31	X	24	257,000	201	1.30			25.00	7.30				1.00	
Total			8,029,000											
Average			259,000											
Maximum			322,000											

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

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * July2012

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? ☒ No ☐ Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, %† =

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? ☒ No ☐ Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, %† =

C. Is any iron or manganese sequestrant used at the water treatment plant? ☒ No ☐ Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):
Sequestrant Dose, mg/L of phosphate as PO_4 or mg/L of silicate as SiO_2 =
If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO_2 =

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

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD Number as listed on your permit	Name/Type Well	Meter #	Date of Meter Reading	Actual Meter Reading	Gallons Withdrawn (Monthly Total)
004980	Well 1	1	7-31-12	225510	
			6-30-12	222026	3,484
004980	Well 2	2	7-31-12	173395	
			6-30-12	170695	2,700
004980	Well 3	3	7-31-12	18813	
			6-30-12	17095	1,718
004980					
				TOTAL	7,902

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:

Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT

2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

LAKE PLACID HOLDING CO
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 07-12

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT ID	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	07	31	12		2255 10000	0 0 0 0 0 0	
REPORT METER READINGS PRC			03012011							
0002	030	001	951869	07	31	12		173395000	0 0 0 0 0 0	
REPORT METER READINGS PRC			03012011							
0003	030	001	964256	07	31	12		18813000	0 0 0 0 0 0	
REPORT METER READINGS PRC			03012011							

*VALID REMARK CODES:

Y	NORMAL (OPTIONAL)	F	RESTART METER READING
O	ROLLOVER	U	WITHDRAWAL NOT USED
X	NOT AVAILABLE		

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

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

See page 4 for instructions.

I. General Information for the Month/Year of: June 2012

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,945	Total Population Served at End of Month: 3,307		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.			Plant Telephone Number: 863-465-2427
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Nathan Brewer Printed or Typed Name	C14995 License Number

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

PWS Identification Number: 5280223 | Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: June 2012

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	GT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations							UV Dose				
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm^2	Minimum UV Dose Required, mW-sec/cm^2		
1	X	24	235,000	183	1.10			25.00	7.30				0.80	
2	X	24	203,000	136	0.90			25.00	7.30				0.60	
3	X	24	309,000	227	0.80			25.00	7.30				0.60	
4	X	24	285,000	224	1.10			25.00	7.30				0.80	
5	X	24	278,000	263	0.80			25.00	7.30				0.50	
6	X	24	256,000	172	0.50			25.00	7.30				0.50	
7	X	24	208,000	324	0.50			25.00	7.30				0.50	
8	X	24	241,000	229	0.60			25.00	7.30				0.50	
9	X	24	215,000	293	1.30			25.00	7.30				1.00	
10	X	24	261,000	294	1.40			25.00	7.30				1.10	
11	X	24	236,000	153	1.30			25.00	7.30				1.00	
12	X	24	214,000	220	1.40			25.00	7.30				1.10	
13	X	24	242,000	218	1.10			25.00	7.30				0.80	
14	X	24	243,000	170	1.00			25.00	7.30				0.70	
15	X	24	237,000	244	1.00			25.00	7.30				0.70	
16	X	24	234,000	175	0.80			25.00	7.30				0.60	
17	X	24	228,000	297	0.70			25.00	7.30				0.50	
18	X	24	263,000	249	0.80			25.00	7.30				0.60	
19	X	24	200,000	194	1.20			25.00	7.30				0.90	
20	X	24	235,000	220	0.70			25.00	7.30				0.50	
21	X	24	214,000	130	1.20			25.00	7.30				0.90	
22	X	24	235,000	136	0.70			25.00	7.30				0.50	
23	X	24	236,000	254	1.80			25.00	7.30				1.50	
24	X	24	243,000	198	1.70			25.00	7.30				1.40	
25	X	24	241,000	100	1.60			25.00	7.30				1.30	
26	X	24	248,000	266	1.30			25.00	7.30				1.00	
27	X	24	180,000	152	1.50			25.00	7.30				1.20	
28	X	24	221,000	247	1.30			25.00	7.30				1.00	
29	X	24	261,000	317	0.80			25.00	7.30				0.50	
30	X	24	204,000	260	0.50			25.00	7.30				0.50	
31														
Total			7,106,000											
Average			236,866											
Maximum			309,000											

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

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * June 2012

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? ☒ No ☐ Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, %† =

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? ☒ No ☐ Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, %† =

C. Is any iron or manganese sequestrant used at the water treatment plant? ☒ No ☐ Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):
Sequestrant Dose, mg/L of phosphate as PO_4 or mg/L of silicate as SiO_2 =
If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO_2 =

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

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee W/D #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn (in Gallon)
004980	Well 1	1	6-30-12	222026	
			5-31-12	218386	3640
004980	Well 2	2	6-30-12	170695	
			5-31-12	168256	2439
004980	Well 3	3	6-30-12	17095	
			5-31-12	15460	1635
004980				TOTAL	7,714

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO: Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

Lake Placid Holding Co
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 06-12

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
1	030	001	952655	06	30	12		222026000	0 0 0 0 0 0	
REPORT METER READINGS PRC 06012012										
0002	030	001	951869	06	30	12		170695000	0 0 0 0 0 0	
REPORT METER READINGS PRC 06012012										
0003	030	001	964256	06	30	12		17095000	0 0 0 0 0 0	
REPORT METER READINGS PRC 06012012										

*VALID REMARK CODES:

- Y NORMAL (OPTIONAL)
- O ROLLOVER
- X NOT AVAILABLE
- F RESTART METER READING
- U WITHDRAWAL NOT USED

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

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

See page 4 for instructions.

I. General Information for the Month/Year of: May 2012

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,945	Total Population Served at End of Month: 3,307		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.			Plant Telephone Number: 863-465-2427
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Nathan Brewer Printed or Typed Name	C14995 License Number

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

PWS Identification Number: 5280223 | Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: May 2012

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*									Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations							UV Dose			
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm^2	Minimum UV Dose Required, mW-sec/cm^2		
1	X	24	295,000	301	1.10			25.00	7.30				0.80	
2	X	24	316,000	192	1.50			25.00	7.30				1.20	
3	X	24	363,000	307	0.90			25.00	7.30				0.60	
4	X	24	311,000	262	1.00			25.00	7.30				0.70	
5	X	24	253,000	226	1.30			25.00	7.30				1.00	
6	X	24	332,000	260	1.60			25.00	7.30				1.30	
7	X	24	378,000	339	1.50			25.00	7.30				1.20	
8	X	24	302,000	156	1.30			25.00	7.30				1.00	
9	X	24	244,000	216	0.70			25.00	7.30				0.50	
10	X	24	262,000	186	1.60			25.00	7.30				1.30	
11	X	24	235,000	268	1.40			25.00	7.30				1.10	
12	X	24	263,000	340	2.20			25.00	7.30				1.90	
13	X	24	372,000	361	1.70			25.00	7.30				1.40	
14	X	24	289,000	224	1.50			25.00	7.30				1.20	
15	X	24	274,000	247	1.30			25.00	7.30				1.00	
16	X	24	344,000	179	1.50			25.00	7.30				1.20	
17	X	24	199,000	241	1.30			25.00	7.30				1.00	
18	X	24	300,000	169	1.30			25.00	7.30				1.00	
19	X	24	236,000	237	1.20			25.00	7.30				0.90	
20	X	24	282,000	203	1.10			25.00	7.30				0.80	
21	X	24	283,000	377	1.10			25.00	7.30				0.80	
22	X	24	278,000	302	0.80			25.00	7.30				0.70	
23	X	24	266,000	301	0.90			25.00	7.30				0.70	
24	X	24	288,000	294	1.40			25.00	7.30				1.10	
25	X	24	297,000	218	1.20			25.00	7.30				0.90	
26	X	24	242,000	193	1.30			25.00	7.30				1.00	
27	X	24	322,000	224	1.30			25.00	7.30				1.00	
28	X	24	250,000	250	1.00			25.00	7.30				0.70	
29	X	24	261,000	261	0.70			25.00	7.30				0.50	
30	X	24	274,000	291	1.10			25.00	7.30				0.80	
31	X	24	307,000	206	0.60			25.00	7.30				0.50	
Total			8,918,000											
Average			287,677											
Maximum			378,000											

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

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * May 2012

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? ☒ No ☐ Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, %† =

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? ☒ No ☐ Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, %† =

Is any iron or manganese sequestrant used at the water treatment plant? ☒ No ☐ Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):
Sequestrant Dose, mg/L of phosphate as PO_4 or mg/L of silicate as SiO_2 =
If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO_2 =

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

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee W/D #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn (in Gallon)
004980	Well 1	1	5-31-12	218386	
			4-30-12	214251	4,135
004980	Well 2	2	5-31-12	168256	
			4-30-12	165189	3,067
004980	Well 3	3	5-31-12	15460	
			4-30-12	13550	1,910
004980					
				TOTAL	9,112

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO: Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

Lake Placid Holding Co
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 05-12

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	05	31	12		218386000	0 0 0 0 0 0	
REPORT METER READINGS PRC 05012012										
0002	030	001	951869	05	31	12		168256000	0 0 0 0 0 0	
REPORT METER READINGS PRC 05012012										
0003	030	001	964256	05	31	12		15460000	0 0 0 0 0 0	
REPORT METER READINGS PRC 05012012										

*VALID REMARK CODES:

- Y NORMAL (OPTIONAL)
- O ROLLOVER
- X NOT AVAILABLE
- F RESTART METER READING
- U WITHDRAWAL NOT USED

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd. NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

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 2012

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,945	Total Population Served at End of Month: 3,307		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.			Plant Telephone Number: 863-465-2427
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Nathan Brewer Printed or Typed Name	C14995 License Number

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

PWS Identification Number: 5280223 | Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: April 2012

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

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

				CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										
				CT Calculations						UV Dose				
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	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 Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm^2	Minimum UV Dose Required, mW-sec/cm^2	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24	314,000	409	1.40			25.00	7.30				1.10	
2	X	24	364,000	340	1.10			25.00	7.30				0.80	
3	X	24	285,000	248	1.10			25.00	7.30				0.80	
4	X	24	330,000	289	1.00			25.00	7.30				0.70	
5	X	24	228,000	165	1.10			25.00	7.30				0.80	
6	X	24	221,000	285	1.00			25.00	7.30				0.70	
7	X	24	323,000	268	1.10			25.00	7.30				0.80	
8	X	24	320,000	450	0.80			25.00	7.30				0.60	
9	X	24	321,000	218	0.60			25.00	7.30				0.50	
10	X	24	271,000	195	0.90			25.00	7.30				0.60	
11	X	24	265,000	344	1.10			25.00	7.30				0.80	
12	X	24	290,000	175	1.30			25.00	7.30				1.00	
13	X	24	385,000	218	1.30			25.00	7.30				1.00	
14	X	24	251,000	470	1.30			25.00	7.30				1.00	
15	X	24	333,000	246	0.60			25.00	7.30				0.50	
16	X	24	355,000	357	1.00			25.00	7.30				0.70	
17	X	24	273,000	183	1.30			25.00	7.30				1.00	
18	X	24	303,000	154	1.10			25.00	7.30				0.70	
19	X	24	314,000	176	1.10			25.00	7.30				0.70	
20	X	24	221,000	336	1.40			25.00	7.30				1.10	
21	X	24	280,000	357	1.30			25.00	7.30				1.00	
22	X	24	328,000	328	0.80			25.00	7.30				0.60	
23	X	24	230,000	309	1.10			25.00	7.30				0.90	
24	X	24	305,000	269	1.20			25.00	7.30				0.90	
25	X	24	243,000	211	1.20			25.00	7.30				0.90	
26	X	24	281,000	184	1.20			25.00	7.30				0.90	
27	X	24	289,000	231	1.20			25.00	7.30				0.90	
28	X	24	292,000	374	1.30			25.00	7.30				1.00	
29	X	24	337,000	423	1.10			25.00	7.30				0.80	
30	X	24	294,000	195	1.20			25.00	7.30				0.90	
31														
Total			8,846,000											
Average			294,866											
Maximum			385,000											

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee W/D #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn (in Gallon)
004980	Well 1	1	4-30-12	214251	
			3-31-12	209958	4,293
004980	Well 2	2	4-30-12	165189	
			3-31-12	162132	3,057
004980	Well 3	3	4-30-12	13550	
			3-31-12	11478	2,072
004980					
				TOTAL	9,422

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

Lake Placid Holding Co
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 04-12

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	04	30	12		214251000	0 0 0 0 0 0	
RE :T METER READINGS PRC 04012012										
0002	030	001	951869	04	30	12		165189000	0 0 0 0 0 0	
REPORT METER READINGS PRC 04012012										
0003	030	001	964256	04	30	12		13550000	0 0 0 0 0 0	
REPORT METER READINGS PRC 04012012										

*VALID REMARK CODES:

Y	NORMAL (OPTIONAL)	F	RESTART METER READING
O	ROLLOVER	U	WITHDRAWAL NOT USED
X	NOT AVAILABLE		

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

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

Sec page 4 for instructions.

I. General Information for the Month/Year of: March 2012

A. Public Water System (PWS) Information

PWS Name: Pla id Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,945	Total Population Served at End of Month: 3,307		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.		Plant Telephone Number: 863-465-2427	
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this pl nt 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 operatio s records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Nathan Brewer Printed or Typed Name		C14995 License Number

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: March 2012

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*									Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations							UV Dose			
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm^2	Minimum UV Dose Required, mW-sec/cm^2		
1	X	24	277,000	298	1.00			25.00	7.30				0.70	
2	X	24	325,000	118	0.90			25.00	7.30				0.60	
3	X	24	201,000	223	0.90			25.00	7.30				0.60	
4	X	24	293,000	357	1.30			25.00	7.30				1.00	
5	X	24	303,000	342	1.40			25.00	7.30				1.10	
6	X	24	373,000	114	1.30			25.00	7.30				1.00	
7	X	24	246,000	280	1.40			25.00	7.30				1.10	
8	X	24	258,000	233	1.50			25.00	7.30				1.20	
9	X	24	259,000	323	1.20			25.00	7.30				0.90	
10	X	24	245,000	295	1.40			25.00	7.30				1.10	
11	X	24	357,000	201	1.40			25.00	7.30				1.10	
12	X	24	226,000	140	1.50			25.00	7.30				1.20	
13	X	24	375,000	182	1.40			25.00	7.30				1.10	
14	X	24	229,000	362	1.10			25.00	7.30				0.80	
15	X	24	251,000	267	0.90			25.00	7.30				0.60	
16	X	24	288,000	422	1.40			25.00	7.30				1.10	
17	X	24	278,000	387	0.80			25.00	7.30				0.50	
18	X	24	328,000	392	1.40			25.00	7.30				1.10	
19	X	24	285,000	214	1.40			25.00	7.30				1.10	
20	X	24	294,000	279	0.90			25.00	7.30				0.60	
21	X	24	307,000	195	1.60			25.00	7.30				1.30	
22	X	24	269,000	317	1.60			25.00	7.30				1.30	
23	X	24	284,000	389	1.40			25.00	7.30				1.10	
24	X	24	282,000	304	1.50			25.00	7.30				1.20	
25	X	24	299,000	238	1.50			25.00	7.30				1.20	
26	X	24	303,000	118	1.30			25.00	7.30				1.00	
27	X	24	291,000	255	1.20			25.00	7.30				0.90	
28	X	24	281,000	194	1.40			25.00	7.30				1.10	
29	X	24	347,000	318	1.30			25.00	7.30				1.00	
30	X	24	332,000	206	1.40			25.00	7.30				1.10	
31	X	24	260,000	343	1.70			25.00	7.30				1.40	
Total			8,946,000											
Average			288,580											
Maximum			375,000											

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

Lake Placid Holding Co
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 03-12

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	03	31	12		209958000	0 0 0 0 0 0	
REPORT METER READINGS PRC 03012012										
0002	030	001	951869	03	31	12		162132000	0 0 0 0 0 0	
REPORT METER READINGS PRC 03012012										
0003	030	001	964256	03	31	12		11478000	0 0 0 0 0 0	
REPORT METER READINGS PRC 03012012										

*VALID REMARK CODES:

- Y NORMAL (OPTIONAL)
- O ROLLOVER
- X NOT AVAILABLE
- F RESTART METER READING
- U WITHDRAWAL NOT USED

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

DATA SUBMITTAL FORM 03/12

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee W/D #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn (in Gallon)
004980	Well 1	1	3-31-12	209958	
			2-29-12	205935	4,023
004980	Well 2	2	3-31-12	162132	
			2-29-12	159162	2,970
004980	Well 3	3	3-31-12	11478	
			2-29-12	9663	1,815
004980					
				TOTAL	8,808

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO: Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

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 2012

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,945	Total Population Served at End of Month: 3,307		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.		Plant Telephone Number: 863-465-2427	
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Nathan Brewer Printed or Typed Name	C14995 License Number

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: February 2012

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

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

				CT* Calculations or UV Dose to Demonstrate Four-Log Virus Inactivation, If Applicable*										
				CT Calculations								UV Dose		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	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 Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm²	Minimum UV Dose Required, mW-sec/cm²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24	319,000	286	0.90			25.00	7.30				0.60	
2	X	24	242,000	425	1.10			25.00	7.30				0.80	
3	X	24	446,000	192	1.00			25.00	7.30				0.70	
4	X	24	207,000	328	0.90			25.00	7.30				0.60	
5	X	24	313,000	281	0.90			25.00	7.30				0.60	
6	X	24	378,000	190	0.80			25.00	7.30				0.50	
7	X	24	208,000	311	0.70			25.00	7.30				0.50	
8	X	24	376,000	203	1.30			25.00	7.30				1.00	
9	X	24	234,000	148	1.30			25.00	7.30				1.00	
10	X	24	229,000	262	1.10			25.00	7.30				0.80	
11	X	24	241,000	311	1.60			25.00	7.30				1.30	
12	X	24	298,000	315	1.50			25.00	7.30				1.20	
13	X	24	352,000	178	1.70			25.00	7.30				1.40	
14	X	24	253,000	316	1.90			25.00	7.30				1.60	
15	X	24	301,000	339	1.80			25.00	7.30				1.50	
16	X	24	332,000	265	1.50			25.00	7.30				1.20	
17	X	24	260,000	252	1.50			25.00	7.30				1.20	
18	X	24	283,000	325	1.40			25.00	7.30				1.10	
19	X	24	314,000	420	1.60			25.00	7.30				1.30	
20	X	24	309,000	240	1.40			25.00	7.30				1.10	
21	X	24	264,000	253	1.10			25.00	7.30				0.90	
22	X	24	312,000	298	0.90			25.00	7.30				0.60	
23	X	24	318,000	247	0.70			25.00	7.30				0.50	
24	X	24	387,000	163	1.50			25.00	7.30				1.20	
25	X	24	194,000	358	1.70			25.00	7.30				1.40	
26	X	24	259,000	193	1.60			25.00	7.30				1.30	
27	X	24	327,000	304	1.60			25.00	7.30				1.30	
28	X	24	364,000	364	1.30			25.00	7.30				1.30	
29	X	24	249,000	262	1.00			25.00	7.30				0.70	
30														
31														
Total			8,569,000											
Average			295,482											
Maximum			446,000											

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee W/D #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn in Gallon
004980	Well 1	1	2-29-12	205935	
			1-31-12	202135	3,800
004980	Well 2	2	2-29-12	159162	
			1-31-12	156355	2,807
004980	Well 3	3	2-29-12	9663	
			1-31-12	7905	1,758
004980					
				TOTAL	8,365

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

Lake Placid Holding Co
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 02-12

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	02	29	12		2059350000	0 0 0 0 0 0	
REPORT METER READINGS PRC 02012012										
0002	030	001	951869	02	29	12		1591620000	0 0 0 0 0 0	
REPORT METER READINGS PRC 02012012										
0003	030	001	964256	02	29	12		9663000	0 0 0 0 0 0	
REPORT METER READINGS PRC 02012012										

*VALID REMARK CODES:

- Y NORMAL (OPTIONAL)
- O ROLLOVER
- X NOT AVAILABLE
- F RESTART METER READING
- U WITHDRAWAL NOT USED

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

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: January 2012

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,945	Total Population Served at End of Month: 3,307		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.			Plant Telephone Number: 863-465-2427
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Nathan Brewer Printed or Typed Name	C14995 License Number

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: January 2012

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

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

				CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*											
				CT Calculations							UV Dose				
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	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 Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm²	Minimum UV Dose Required, mW-sec/cm²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24	376,000	294	1.20			25.00	7.30				0.90	
2	X	24	197,000	257	1.30			25.00	7.30				1.00	
3	X	24	319,000	219	1.30			25.00	7.30				1.00	
4	X	24	282,000	234	1.00			25.00	7.30				0.70	
5	X	24	243,000	296	1.70			25.00	7.30				1.40	
6	X	24	303,000	311	1.90			25.00	7.30				1.60	
7	X	24	230,000	280	1.40			25.00	7.30				1.10	
8	X	24	347,000	270	1.80			25.00	7.30				1.50	
9	X	24	301,000	212	1.70			25.00	7.30				1.70	
10	X	24	399,000	203	1.50			25.00	7.30				1.30	
11	X	24	203,000	287	1.30			25.00	7.30				1.00	
12	X	24	314,000	325	1.30			25.00	7.30				1.00	
13	X	24	263,000	227	1.30			25.00	7.30				1.00	
14	X	24	264,000	332	1.70			25.00	7.30				1.40	
15	X	24	372,000	186	1.90			25.00	7.30				1.60	
16	X	24	229,000	286	1.60			25.00	7.30				1.60	
17	X	24	344,000	388	1.10			25.00	7.30				0.80	
18	X	24	359,000	248	1.30			25.00	7.30				1.00	
19	X	24	245,000	401	1.30			25.00	7.30				1.00	
20	X	24	350,000	156	1.60			25.00	7.30				1.30	
21	X	24	263,000	357	1.80			25.00	7.30				1.50	
22	X	24	346,000	223	1.50			25.00	7.30				1.20	
23	X	24	299,000	239	1.30			25.00	7.30				1.00	
24	X	24	343,000	142	1.50			25.00	7.30				1.20	
25	X	24	242,000	272	1.50			25.00	7.30				1.20	
26	X	24	302,000	221	1.80			25.00	7.30				1.50	
27	X	24	332,000	124	1.70			25.00	7.30				1.30	
28	X	24	240,000	275	1.60			25.00	7.30				1.60	
29	X	24	209,000	363	1.40			25.00	7.30				1.10	
30	X	24	324,000	318	1.50			25.00	7.30				1.20	
31	X	24	364,000	217	1.40			25.00	7.30				1.10	
Total			9,204,000											
Average			296,903											
Maximum			399,000											

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee W/D #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn (in Gallon)
004980	Well 1	1	1-31-12	202135	
			12-31-11	197836	4,299
004980	Well 2	2	1-31-12	156355	
			12-31-11	153176	3,179
004980	Well 3	3	1-31-12	7905	
			12-31-11	6216	1,689
004980					
				TOTAL	9,167

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

Lake Placid Holding Co
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 01-12

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	01	31	12		202135000	000000	
REPORT METER READINGS PRC 01012012										
0002	030	001	951869	01	31	12		156355000	000000	
REPORT METER READINGS PRC 01012012										
0003	030	001	964256	01	31	12		7905000	000000	
REPORT METER READINGS PRC 01012012										

*VALID REMARK CODES:

Y	NORMAL (OPTIONAL)	F	RESTART METER READING
O	ROLLOVER	U	WITHDRAWAL NOT USED
X	NOT AVAILABLE		

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

SCHEDULE IV
PART B

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: December 2011

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,945		Total Population Served at End of Month: 3,307	
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer		Contact Person's Title: Operator	
Contact Person's Mailing Address: 410 Washington Blvd Nw		City: Lake Placid State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090		Contact Person's Fax Number: 863-465-1313	
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.			Plant Telephone Number: 863-465-2427
Plant Address: 410 Washington Blvd Nw		City: Lake Placid	State: Fl Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):		Plant Class (per subsection 62-699.310(4), F.A.C.):	

Licensed Operators:	Name	License Class	License Number	Days/Shifts Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Printed or Typed Name	License Number
	Nathan Brewer	C14995

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: December 2011

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable: CT Calculations: Peak Flow Rate, gpd	CT Calculations: Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	CT Calculations: Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	CT Calculations: Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	CT Calculations: Temp. of Water, °C	CT Calculations: pH of Water, Applicable	CT Calculations: Minimum CT Required, mg-min/L	UV Dose: Lowest Operating UV Dose, mW-sec/cm²	UV Dose: Minimum UV Dose Required, mW-sec/cm²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24	344,000	135	0.90			25.00	7.30				0.60	
2	X	24	246,000	275	1.30			25.00	7.30				1.00	
3	X	24	243,000	337	0.90			25.00	7.30				0.60	
4	X	24	285,000	289	1.00			25.00	7.30				0.70	
5	X	24	321,000	185	1.00			25.00	7.30				0.70	
6	X	24	266,000	220	1.00			25.00	7.30				0.70	
7	X	24	241,000	241	0.90			25.00	7.30				0.60	
8	X	24	261,000	208	0.80			25.00	7.30				0.60	
9	X	24	249,000	285	0.80			25.00	7.30				0.60	
10	X	24	251,000	280	0.60			25.00	7.30				0.50	
11	X	24	324,000	136	0.80			25.00	7.30				0.60	
12	X	24	248,000	146	0.50			25.00	7.30				0.50	
13	X	24	223,000	254	0.90			25.00	7.30				0.60	
14	X	24	271,000	194	0.80			25.00	7.30				0.60	
15	X	24	240,000	301	1.00			25.00	7.30				0.80	
16	X	24	281,000	161	0.70			25.00	7.30				0.50	
17	X	24	248,000	321	1.60			25.00	7.30				1.30	
18	X	24	278,000	233	1.70			25.00	7.30				1.40	
19	X	24	360,000	260	1.80			25.00	7.30				1.50	
20	X	24	242,000	279	1.70			25.00	7.30				1.40	
21	X	24	293,000	269	1.10			25.00	7.30				0.80	
22	X	24	409,000	209	1.30			25.00	7.30				1.00	
23	X	24	241,000	222	1.10			25.00	7.30				0.80	
24	X	24	241,000	209	0.90			25.00	7.30				0.60	
25	X	24	315,000	336	1.30			25.00	7.30				1.00	
26	X	24	275,000	237	1.50			25.00	7.30				1.20	
27	X	24	302,000	203	1.70			25.00	7.30				1.40	
28	X	24	217,000	161	1.70			25.00	7.30				1.40	
29	X	24	272,000	300	1.30			25.00	7.30				1.00	
30	X	24	351,000	358	1.30			25.00	7.30				1.00	
31	X	24	217,000	156	1.00			25.00	7.30				0.90	
Total			8,555,000											
Average			275.967											
Maximum			409,000											

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee W/D #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn in Gallons
004980	Well 1	1	12-31-11	197836	
			11-30-11	193814	4,022
004980	Well 2	2	12-31-11	153176	
			11-30-11	150128	3,048
004980	Well 3	3	12-31-11	6216	
			11-30-11	4332	1,884
004980					
				TOTAL	8,954

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

Lake Placid Holding Co
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 12-11

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT ID	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	12	31	11		197836000	0 0 0 0 0 0	
REPORT METER READINGS PRC 12012011										
0002	030	001	951869	12	31	11		153176000	0 0 0 0 0 0	
REPORT METER READINGS PRC 12012011										
0003	030	001	964256	12	31	11		6216000	0 0 0 0 0 0	
REPORT METER READINGS PRC 12012011										

*VALID REMARK CODES:

- Y NORMAL (OPTIONAL)
- O ROLLOVER
- X NOT AVAILABLE
- F RESTART METER READING
- U WITHDRAWAL NOT USED

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

DATA SUBMITTAL FORM 12/11

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

See page 4 for instructions.

I. General Information for the Month/Year of: November 2011

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,945	Total Population Served at End of Month: 3,307		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.			Plant Telephone Number: 863-465-2427
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators:	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Nathan Brewer Printed or Typed Name	C14995 License Number

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: November 2011

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	CT Calculations or UV Dose to Demonstrate 4-Log Virus Inactivation, if Applicable: Lowest Cl2 Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	CT Calculations: Disinfectant Contact Time (Time C Measurement Point During Peak Flow), minutes	Lowest CT Provided Between Point of Disinfectant Application and First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Maximum CT Required, mg-min/L	UV Dose: Lowest Operating UV Dose, mW-sec/cm²	UV Dose: Minimum UV Dose Required, mW-sec/cm²	Lowest Residual Disinfectant Concentration in Remote Portion of Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24	258,000	279	1.10			25.00	7.30				0.80	
2	X	24	228,000	232	1.40			25.00	7.30				1.10	
3	X	24	260,000	197	1.20			25.00	7.30				0.90	
4	X	24	239,000	231	1.00			25.00	7.30				0.70	
5	X	24	252,000	222	1.00			25.00	7.30				0.70	
6	X	24	222,000	254	1.00			25.00	7.30				0.70	
7	X	24	305,000	236	1.00			25.00	7.30				0.70	
8	X	24	289,000	183	1.00			25.00	7.30				0.70	
9	X	24	225,000	222	1.00			25.00	7.30				0.70	
10	X	24	281,000	265	1.00			25.00	7.30				0.70	
11	X	24	242,000	261	0.90			25.00	7.30				0.60	
12	X	24	318,000	265	1.00			25.00	7.30				0.70	
13	X	24	262,000	259	1.00			25.00	7.30				0.70	
14	X	24	306,000	210	1.00			25.00	7.30				0.70	
15	X	24	297,000	365	1.00			25.00	7.30				0.70	
16	X	24	303,000	309	0.80			25.00	7.30				0.50	
17	X	24	259,000	309	0.80			25.00	7.30				0.50	
18	X	24	302,000	233	0.80			25.00	7.30				0.50	
19	X	24	247,000	233	0.90			25.00	7.30				0.60	
20	X	24	273,000	289	1.00			25.00	7.30				0.70	
21	X	24	281,000	210	0.80			25.00	7.30				0.50	
22	X	24	281,000	246	0.70			25.00	7.30				0.40	
23	X	24	281,000	184	0.90			25.00	7.30				0.60	
24	X	24	344,000	215	0.80			25.00	7.30				0.50	
25	X	24	345,000	288	0.60			25.00	7.30				0.50	
26	X	24	179,000	310	0.80			25.00	7.30				0.50	
27	X	24	298,000	300	1.10			25.00	7.30				0.70	
28	X	24	336,000	159	1.20			25.00	7.30				0.90	
29	X	24	265,000	189	0.80			25.00	7.30				0.50	
30	X	24	259,000	270	0.90			25.00	7.30				0.60	
31														
Total			8,237,000											
Average			274,566											
Maximum			345,000											

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee WD #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn (in Gallon)
004980	Well 1	1	11-30-11	193814	
			10-31-11	190121	3,693
004980	Well 2	2	11-30-11	150128	
			10-31-11	147184	2,944
004980	Well 3	3	11-30-11	4332	
			10-31-11	2506	1,826
004980					
				TOTAL	8,463

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

Lake Placid Holding Co
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 11-11

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT ID	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	11	30	11		193814000	0 0 0 0 0 0	
REPORT METER READINGS PRC			11012011							
12	030	001	951869	11	30	11		150128000	0 0 0 0 0 0	
RE..ORT METER READINGS PRC			11012011							
0003	030	001	964256	11	30	11		4332000	0 0 0 0 0 0	
REPORT METER READINGS PRC			11012011							

*VALID REMARK CODES:

Y	NORMAL (OPTIONAL)	F	RESTART METER READING
O	ROLLOVER	U	WITHDRAWAL NOT USED
X	NOT AVAILABLE		

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd. NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

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: October 2011

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,945	Total Population Served at End of Month: 3,307		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.			Plant Telephone Number: 863-465-2427
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Nathan Brewer Printed or Typed Name	C14995 License Number

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: October 2011

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Hourly Flow Rate, gpd	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable: CT Calculations: Lowest Residual Disinfectant Concentration (C) in Water Entering First Customer During Peak Flow, mg/L	CT Calculations: Disinfectant Contact Time ("T") in Minutes During Peak Flow	CT Calculations: Lowest CT Value Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	UV Dose: Minimum UV Dose Required, mW-sec/cm²	UV Dose: Lowest Operating UV Dose in Use, mW-sec/cm²	UV Dose: Maximum UV Dose Required, mW-sec/cm²	Lowest Residual Disinfectant Concentration (C) in Water Entering Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24	311,000	458	1.00			25.00	7.30				0.70	
2	X	24	416,000	223	0.80			25.00	7.30				0.60	
3	X	24	232,000	239	0.90			25.00	7.30				0.60	
4	X	24	295,000	221	1.30			25.00	7.30				1.00	
5	X	24	254,000	216	1.30			25.00	7.30				1.00	
6	X	24	271,000	224	1.00			25.00	7.30				0.70	
7	X	24	351,000	268	1.30			25.00	7.30				1.00	
8	X	24	211,000	188	1.40			25.00	7.30				1.10	
9	X	24	292,000	295	1.00			25.00	7.30				0.70	
10	X	24	291,000	345	1.40			25.00	7.30				1.10	
11	X	24	278,000	163	1.30			25.00	7.30				1.00	
12	X	24	255,000	173	1.60			25.00	7.30				1.30	
13	X	24	286,000	240	1.20			25.00	7.30				0.90	
14	X	24	269,000	160	1.20			25.00	7.30				0.90	
15	X	24	289,000	381	1.20			25.00	7.30				0.90	
16	X	24	284,000	295	1.40			25.00	7.30				1.10	
17	X	24	317,000	180	1.40			25.00	7.30				1.10	
18	X	24	245,000	246	1.60			25.00	7.30				1.30	
19	X	24	213,000	211	1.40			25.00	7.30				1.10	
20	X	24	239,000	278	1.50			25.00	7.30				1.20	
21	X	24	244,000	175	1.30			25.00	7.30				1.00	
22	X	24	238,000	271	1.10			25.00	7.30				0.80	
23	X	24	248,000	303	1.00			25.00	7.30				0.70	
24	X	24	252,000	231	0.90			25.00	7.30				0.60	
25	X	24	273,000	233	1.20			25.00	7.30				0.90	
26	X	24	265,000	269	1.60			25.00	7.30				1.30	
27	X	24	275,000	176	1.50			25.00	7.30				1.20	
28	X	24	324,000	312	1.20			25.00	7.30				0.90	
29	X	24	183,000	220	1.00			25.00	7.30				0.90	
30	X	24	327,000	185	0.90			25.00	7.30				0.60	
31	X	24	185,000	177	0.90			25.00	7.30				0.60	
Total			8,413,000											
Average			271,387											
Maximum			416,000											

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee W/D #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn (In Gallon)
004980	Well 1	1	10-31-11	190121	
			9-30-11	186501	3,620
004980	Well 2	2	10-31-11	147184	
			9-30-11	144452	2,732
004980	Well 3	3	10-31-11	2506	
			9-30-11	861	1,645
004980					
				TOTAL	7,997

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT

2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

Lake Placid Holding Co
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 10-11

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT ID	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	10	31	11		190121000	0 0 0 0 0 0	
R RT METER READINGS PRC			10012011							
0002	030	001	951869	10	31	11		147184000	0 0 0 0 0 0	
REPORT METER READINGS PRC			10012011							
0003	030	001	964256	10	31	11		2506000	0 0 0 0 0 0	
REPORT METER READINGS PRC			10012011							

*VALID REMARK CODES:

- Y NORMAL (OPTIONAL)
- O ROLLOVER
- X NOT AVAILABLE
- F RESTART METER READING
- U WITHDRAWAL NOT USED

REPORTERS NAME: Nathan Beyler
ADDRESS: 410 Washington Blvd. NW
Lake Placid FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

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: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,944	Total Population Served at End of Month: 3,305		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.		Plant Telephone Number: 863-465-2427	
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Nathan Brewer Printed or Typed Name	C14995 License Number

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

PWS Identification Number: 5280223 | Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: September 2011

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

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

				CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*											
				CT Calculations							UV Dose				
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	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 Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm^2	Minimum UV Dose Required, mW-sec/cm^2	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24	246,000	164	0.90			25.00	7.30				0.60	
2	X	24	304,000	251	0.90			25.00	7.30				0.60	
3	X	24	218,000	346	2.20			25.00	7.30				1.90	
4	X	24	343,000	336	1.30			25.00	7.30				1.00	
5	X	24	305,000	286	0.70			25.00	7.30				0.60	
6	X	24	383,000	216	0.60			25.00	7.30				0.50	
7	X	24	298,000	168	1.70			25.00	7.30				1.40	
8	X	24	206,000	216	1.30			25.00	7.30				1.00	
9	X	24	310,000	317	0.90			25.00	7.30				0.70	
10	X	24	265,000	281	0.80			25.00	7.30				0.50	
11	X	24	337,000	380	0.90			25.00	7.30				0.60	
12	X	24	351,000	263	0.90			25.00	7.30				0.60	
13	X	24	306,000	273	1.20			25.00	7.30				0.90	
14	X	24	277,000	203	0.50			25.00	7.30				0.50	
15	X	24	294,000	287	0.60			25.00	7.30				0.50	
16	X	24	332,000	324	1.40			25.00	7.30				1.10	
17	X	24	280,000	269	0.60			25.00	7.30				0.50	
18	X	24	347,000	364	0.80			25.00	7.30				0.50	
19	X	24	409,000	311	0.60			25.00	7.30				0.50	
20	X	24	287,000	246	1.20			25.00	7.30				0.90	
21	X	24	239,000	237	1.30			25.00	7.30				1.00	
22	X	24	327,000	174	1.40			25.00	7.30				1.10	
23	X	24	279,000	240	1.20			25.00	7.30				0.90	
24	X	24	216,000	277	1.20			25.00	7.30				0.90	
25	X	24	309,000	340	1.00			25.00	7.30				0.80	
26	X	24	296,000	270	1.30			25.00	7.30				1.00	
27	X	24	285,000	184	2.20			25.00	7.30				1.90	
28	X	24	255,000	273	2.20			25.00	7.30				1.90	
29	X	24	334,000	293	1.10			25.00	7.30				0.80	
30	X	24	361,000	269	0.80			25.00	7.30				0.50	
31														
Total			8,999,000											
Average			299,966											
Maximum			409,000											

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

Lake Placid Holding Co
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 09-11

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT ID	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
[illegible]1	030	001	952655	09	30	11		186501000	0 0 0 0 0 0	
REPORT METER READINGS PRC			09012011							
0002	030	001	951869	09	30	11		144452000	0 0 0 0 0 0	
REPORT METER READINGS PRC			09012011							
0003	030	001	964256	09	16	11		128016000	0 0 0 0 0 0	
REPORT METER READINGS PRC			09012011							
				09	17	11		0000		
				09	30	11		861000		

*VALID REMARK CODES:

- Y NORMAL (OPTIONAL)
- O ROLLOVER
- X NOT AVAILABLE
- F RESTART METER READING
- U WITHDRAWAL NOT USED

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee W/D #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn (in Gallon)
004980	Well 1	1	9-30-11	186501	
			8-31-11	182727	3,774
004980	Well 2	2	9-30-11	144452	
			8-31-11	141390	3,062
004980	Well 3	3	9-16-11	128016	
			8-31-11	127046	970
			9-17-11	0	
			9-30-11	861	861
004980					
				TOTAL	8667

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

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

See page 4 for instructions.

I. General Information for the Month/Year of: August 2011

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,944	Total Population Served at End of Month: 3,305		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.			Plant Telephone Number: 863-465-2427
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators:	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Nathan Brewer Printed or Typed Name	C14995 License Number

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: August 2011

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

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

				CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*											
				CT Calculations							UV Dose				
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	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 Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm^2	Minimum UV Dose Required, mW-sec/cm^2	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24	355,000	340	1.10			25.00	7.30				0.80	
2	X	24	281,000	338	1.10			25.00	7.30				0.80	
3	X	24	382,000	243	1.10			25.00	7.30				0.80	
4	X	24	341,000	248	1.10			25.00	7.30				0.80	
5	X	24	258,000	170	1.10			25.00	7.30				0.80	
6	X	24	310,000	333	1.00			25.00	7.30				0.70	
7	X	24	399,000	340	1.00			25.00	7.30				0.70	
8	X	24	260,000	206	1.10			25.00	7.30				0.80	
9	X	24	273,000	242	1.10			25.00	7.30				0.80	
10	X	24	292,000	256	1.10			25.00	7.30				0.80	
11	X	24	260,000	211	1.10			25.00	7.30				0.80	
12	X	24	268,000	212	1.00			25.00	7.30				0.70	
13	X	24	298,000	312	1.00			25.00	7.30				0.70	
14	X	24	289,000	281	1.00			25.00	7.30				0.70	
15	X	24	349,000	120	0.90			25.00	7.30				0.60	
16	X	24	252,000	302	1.20			25.00	7.30				0.90	
17	X	24	293,000	279	1.30			25.00	7.30				1.00	
18	X	24	338,000	221	1.50			25.00	7.30				1.20	
19	X	24	217,000	268	1.30			25.00	7.30				1.00	
20	X	24	240,000	277	1.30			25.00	7.30				1.00	
21	X	24	333,000	298	1.00			25.00	7.30				0.70	
22	X	24	262,000	280	1.10			25.00	7.30				0.80	
23	X	24	274,000	188	1.20			25.00	7.30				0.90	
24	X	24	266,000	278	1.10			25.00	7.30				0.80	
25	X	24	261,000	243	1.00			25.00	7.30				0.70	
26	X	24	273,000	318	1.10			25.00	7.30				0.80	
27	X	24	269,000	302	1.20			25.00	7.30				0.90	
28	X	24	341,000	385	1.10			25.00	7.30				0.80	
29	X	24	319,000	246	0.90			25.00	7.30				0.70	
30	X	24	293,000	157	1.10			25.00	7.30				0.80	
31	X	24	304,000	144	1.00			25.00	7.30				0.70	
Total			9,150,000											
Average			295,161											
Maximum			399,000											

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee WD #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn (in Gallon)
004980	Well 1	1	8-31-11	182727	
			7-31-11	178798	3,929
004980	Well 2	2	8-31-11	141390	
			7-31-11	138519	2,871
004980	Well 3	3	8-31-11	127046	
			7-31-11	125210	1,836
004980				TOTAL	8,636

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT

2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

Lake Placid Holding Co
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 08-11

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT ID	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	08	31	11		182727000	0 0 0 0 0 0	
RI	:T METER READINGS PRC		08012011							
0002	030	001	951869	08	31	11		141390000	0 0 0 0 0 0	
REPORT METER READINGS PRC			08012011							
0003	030	001	964256	08	31	11		127046000	0 0 0 0 0 0	
REPORT METER READINGS PRC			08012011							

*VALID REMARK CODES:

- Y NORMAL (OPTIONAL)
- O ROLLOVER
- X NOT AVAILABLE
- F RESTART METER READING
- U WITHDRAWAL NOT USED

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

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

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,944	Total Population Served at End of Month: 3,305		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.		Plant Telephone Number: 863-465-2427	
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Printed or Typed Name	License Number
	Nathan Brewer	C14995

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: July 2011

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations							UV Dose			
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm^2	Minimum UV Dose Required, mW-sec/cm^2	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	
1	X	24	359,000	237	1.30			25.00	7.30				1.00	
2	X	24	268,000	302	1.20			25.00	7.30				0.90	
3	X	24	299,000	191	1.10			25.00	7.30				0.80	
4	X	24	429,000	265	1.10			25.00	7.30				0.80	
5	X	24	456,000	399	1.10			25.00	7.30				0.80	
6	X	24	227,000	257	1.30			25.00	7.30				1.00	
7	X	24	276,000	210	1.20			25.00	7.30				0.90	
8	X	24	265,000	219	1.10			25.00	7.30				0.80	
9	X	24	254,000	316	1.20			25.00	7.30				0.90	
10	X	24	250,000	158	1.10			25.00	7.30				0.80	
11	X	24	293,000	255	1.00			25.00	7.30				0.70	
12	X	24	299,000	117	1.00			25.00	7.30				0.70	
13	X	24	311,000	166	1.00			25.00	7.30				0.70	
14	X	24	200,000	157	1.40			25.00	7.30				1.10	
15	X	24	302,000	193	1.20			25.00	7.30				0.90	
16	X	24	226,000	333	1.10			25.00	7.30				0.80	
17	X	24	305,000	296	1.10			25.00	7.30				0.80	
18	X	24	352,000	210	1.20			25.00	7.30				0.90	
19	X	24	229,000	309	1.10			25.00	7.30				0.80	
20	X	24	310,000	255	1.20			25.00	7.30				0.90	
21	X	24	224,000	235	1.20			25.00	7.30				0.90	
22	X	24	284,000	170	1.10			25.00	7.30				0.80	
23	X	24	269,000	259	1.30			25.00	7.30				1.00	
24	X	24	270,000	168	1.00			25.00	7.30				0.70	
25	X	24	335,000	236	1.20			25.00	7.30				0.90	
26	X	24	327,000	175	1.10			25.00	7.30				0.80	
27	X	24	277,000	244	1.30			25.00	7.30				1.00	
28	X	24	242,000	181	1.10			25.00	7.30				0.80	
29	X	24	288,000	227	1.30			25.00	7.30				1.00	
30	X	24	271,000	296	1.20			25.00	7.30				0.90	
31	X	24	346,000	323	1.00			25.00	7.30				0.70	
Total			9,043,000											
Average			291,709											
Maximum			456,000											

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee W/D #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn (in Gallon)
004980	Well 1	1	7-31-11	178798	
			6-30-11	175015	3,783
004980	Well 2	2	7-31-11	138519	
			6-30-11	135632	2,887
004980	Well 3	3	7-31-11	125210	
			6-30-11	123436	1,774
004980				TOTAL	8,444

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

Lake Placid Holding Co
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 07-11

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT ID	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655							
R RT METER READINGS PRC			07012011	07	31	11		178798000	0 0 0 0 0 0	
0002	030	001	951869							
REPORT METER READINGS PRC			07012011	07	31	11		138519000	0 0 0 0 0 0	
0003	030	001	964256							
REPORT METER READINGS PRC			07012011	07	31	11		125210000	0 0 0 0 0 0	

*VALID REMARK CODES:

- Y NORMAL (OPTIONAL)
- O ROLLOVER
- X NOT AVAILABLE
- F RESTART METER READING
- U WITHDRAWAL NOT USED

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

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

See page 4 for instructions.

I. General Information for the Month/Year of: June 2011

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,944	Total Population Served at End of Month: 3,305		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.		Plant Telephone Number: 863-465-2427	
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator	Nathan Brewer	C	14995	7
Other Operators				

II. Certification by Lead/Chief Operator

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

Signature and Date	Nathan Brewer Printed or Typed Name	C14995 License Number

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: June 2011

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable: CT Calculations: Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	UV Dose: Minimum UV Dose Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm²	Minimum UV Dose Required, mW-sec/cm²	Lowest Residual Disinfectant Concentration at Entry Point to Distribution System, mg/L	Emergency or Abnormal Operating Condition, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24	274,000	244	1.20			25.00	7.30				0.90	
2	X	24	281,000	151	0.50			25.00	7.30				0.50	
3	X	24	294,000	235	0.90			25.00	7.30				0.50	
4	X	24	225,000	203	1.10			25.00	7.30				0.80	
5	X	24	327,000	319	1.30			25.00	7.30				1.00	
6	X	24	489,000	236	1.30			25.00	7.30				1.00	
7	X	24	317,000	308	1.30			25.00	7.30				1.00	
8	X	24	326,000	241	1.40			25.00	7.30				1.10	
9	X	24	240,000	332	1.50			25.00	7.30				1.20	
10	X	24	360,000	275	1.50			25.00	7.30				1.20	
11	X	24	239,000	299	1.80			25.00	7.30				1.50	
12	X	24	364,000	172	1.80			25.00	7.30				1.50	
13	X	24	423,000	208	1.30			25.00	7.30				1.00	
14	X	24	316,000	264	1.00			25.00	7.30				0.70	
15	X	24	341,000	218	1.00			25.00	7.30				0.70	
16	X	24	320,000	191	0.70			25.00	7.30				0.50	
17	X	24	393,000	336	0.90			25.00	7.30				0.60	
18	X	24	240,000	339	0.80			25.00	7.30				0.50	
19	X	24	320,000	215	0.50			25.00	7.30				0.50	
20	X	24	380,000	273	0.50			25.00	7.30				0.50	
21	X	24	299,000	210	1.60			25.00	7.30				1.30	
22	X	24	353,000	219	1.40			25.00	7.30				1.10	
23	X	24	280,000	148	1.40			25.00	7.30				1.10	
24	X	24	307,000	246	1.30			25.00	7.30				1.00	
25	X	24	245,000	166	1.50			25.00	7.30				1.30	
26	X	24	373,000	320	1.00			25.00	7.30				0.70	
27	X	24	283,000	305	1.20			25.00	7.30				0.80	
28	X	24	266,000	213	1.40			25.00	7.30				1.10	
29	X	24	310,000	177	1.10			25.00	7.30				0.80	
30	X	24	251,000	146	1.30			25.00	7.30				1.00	
31														
Total			9,436,000											
Average			314,533											
Maximum			489,000											

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee W/D #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn (in Gallon)
004980	Well 1	1	6-30-11	175015	
			5-31-11	170876	4,139
004980	Well 2	2	6-30-11	135632	
			5-31-11	132920	2,712
004980	Well 3	3	6-30-11	123436	
			5-31-11	121662	1,774
004980				TOTAL	8,625

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT

2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

Lake Placid Holding Co
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 06-11

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT ID	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	06	30	11		1750150000	0 0 0 0 0 0	
REPORT METER READINGS PRC			06012011							
2	030	001	951869	06	30	11		1356320000	0 0 0 0 0 0	
RE..ORT METER READINGS PRC			06012011							
0003	030	001	964256	06	30	11		1234360000	0 0 0 0 0 0	
REPORT METER READINGS PRC			06012011							

*VALID REMARK CODES:

Y	NORMAL (OPTIONAL)	F	RESTART METER READING
O	ROLLOVER	U	WITHDRAWAL NOT USED
X	NOT AVAILABLE		

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

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

See page 4 for instructions.

I. General Information for the Month/Year of: May 2011

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,944	Total Population Served at End of Month: 3,305		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.		Plant Telephone Number: 863-465-2427	
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Nathan Brewer *Printed or Typed Name*	C14995 License Number

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

PWS Identification Number: 5280223 | Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: May 2011

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

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

				CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*											
				CT Calculations							UV Dose				
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	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 Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm^2	Minimum UV Dose Required, mW-sec/cm^2	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24	324,000	236	1.40			25.00	7.30				1.10	
2	X	24	391,000	318	1.50			25.00	7.30				1.20	
3	X	24	319,000	146	1.80			25.00	7.30				1.50	
4	X	24	301,000	241	1.30			25.00	7.30				1.00	
5	X	24	284,000	253	1.40			25.00	7.30				1.10	
6	X	24	318,000	290	1.70			25.00	7.30				1.40	
7	X	24	281,000	262	1.30			25.00	7.30				1.40	
8	X	24	297,000	276	1.60			25.00	7.30				1.30	
9	X	24	416,000	273	1.70			25.00	7.30				1.40	
10	X	24	321,000	211	1.60			25.00	7.30				1.30	
11	X	24	302,000	212	1.60			25.00	7.30				1.30	
12	X	24	295,000	274	1.80			25.00	7.30				1.50	
13	X	24	351,000	325	1.80			25.00	7.30				1.50	
14	X	24	267,000	342	1.60			25.00	7.30				1.30	
15	X	24	274,000	140	1.60			25.00	7.30				1.30	
16	X	24	373,000	247	1.40			25.00	7.30				1.10	
17	X	24	272,000	193	1.30			25.00	7.30				1.00	
18	X	24	241,000	208	1.50			25.00	7.30				1.20	
19	X	24	271,000	295	1.40			25.00	7.30				1.10	
20	X	24	357,000	231	1.30			25.00	7.30				1.00	
21	X	24	224,000	298	1.30			25.00	7.30				1.00	
22	X	24	321,000	300	1.30			25.00	7.30				1.00	
23	X	24	381,000	201	1.20			25.00	7.30				0.90	
24	X	24	322,000	226	1.20			25.00	7.30				0.90	
25	X	24	281,000	250	1.30			25.00	7.30				1.00	
26	X	24	310,000	311	1.20			25.00	7.30				0.90	
27	X	24	325,000	198	1.30			25.00	7.30				1.00	
28	X	24	351,000	134	1.30			25.00	7.30				1.00	
29	X	24	338,000	252	1.40			25.00	7.30				1.10	
30	X	24	504,000	269	0.50			25.00	7.30				0.50	
31	X	24	243,000	209	0.90			25.00	7.30				0.60	
Total			9,855,000											
Average			317,903											
Maximum			504,000											

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee W/D #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn (in Gallon)
004980	Well 1	1	5-31-11	170876	
			4-30-11	166798	4,078
004980	Well 2	2	5-31-11	132920	
			4-30-11	129944	2,976
004980	Well 3	3	5-31-11	121662	
			4-30-11	119692	1,970
004980				TOTAL	9,024

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT

2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

Lake Placid Holding Co
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 05-11

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT ID	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	05	31	11		170876000	0 0 0 0 0 0	
REPORT METER READINGS PRC			05012011							
2	030	001	951869	05	31	11		132920000	0 0 0 0 0 0	
REPORT METER READINGS PRC			05012011							
0003	030	001	964256	05	31	11		121662000	0 0 0 0 0 0	
REPORT METER READINGS PRC			05012011							

*VALID REMARK CODES:

- Y NORMAL (OPTIONAL)
- O ROLLOVER
- X NOT AVAILABLE
- F RESTART METER READING
- U WITHDRAWAL NOT USED

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

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 Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,944	Total Population Served at End of Month: 3,305		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.			Plant Telephone Number: 863-465-2427
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Nathan Brewer Printed or Typed Name	C14995 License Number

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: April 2011

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

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

				CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*											
				CT Calculations								UV Dose			
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	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 Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm^2	Minimum UV Dose Required, mW-sec/cm^2	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24	345,000	236	1.50			25.00	7.30				1.20	
2	X	24	315,000	341	1.20			25.00	7.30				0.90	
3	X	24	336,000	283	1.50			25.00	7.30				1.20	
4	X	24	484,000	237	1.50			25.00	7.30				1.20	
5	X	24	322,000	179	1.50			25.00	7.30				1.20	
6	X	24	269,000	303	1.10			25.00	7.30				0.80	
7	X	24	274,000	319	1.30			25.00	7.30				1.00	
8	X	24	334,000	237	1.20			25.00	7.30				0.90	
9	X	24	469,000	289	0.80			25.00	7.30				0.60	
10	X	24	367,000	335	0.80			25.00	7.30				0.60	
11	X	24	428,000	366	0.90			25.00	7.30				0.60	
12	X	24	388,000	362	1.10			25.00	7.30				0.80	
13	X	24	396,000	259	1.20			25.00	7.30				0.90	
14	X	24	472,000	231	1.10			25.00	7.30				0.80	
15	X	24	346,000	272	1.80			25.00	7.30				1.50	
16	X	24	308,000	316	2.10			25.00	7.30				1.90	
17	X	24	407,000	272	2.00			25.00	7.30				1.70	
18	X	24	490,000	275	1.70			25.00	7.30				1.40	
19	X	24	398,000	293	1.60			25.00	7.30				1.30	
20	X	24	355,000	243	1.20			25.00	7.30				0.90	
21	X	24	409,000	243	1.00			25.00	7.30				0.70	
22	X	24	333,000	354	1.70			25.00	7.30				1.40	
23	X	24	412,000	399	1.70			25.00	7.30				1.40	
24	X	24	436,000	286	1.60			25.00	7.30				1.30	
25	X	24	491,000	222	1.30			25.00	7.30				1.00	
26	X	24	323,000	198	1.40			25.00	7.30				1.10	
27	X	24	378,000	249	1.30			25.00	7.30				1.20	
28	X	24	266,000	203	1.60			25.00	7.30				1.30	
29	X	24	284,000	190	1.30			25.00	7.30				1.00	
30	X	24	202,000	252	1.40			25.00	7.30				1.10	
31														
Total			11,037,000											
Average			367,900											
Maximum			491,000											

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee W/D #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn (in Gallon)
004980	Well 1	1	4-30-11	166798	
			3-31-11	162122	4,676
004980	Well 2	2	4-30-11	129944	
			3-31-11	126421	3,523
004980	Well 3	3	4-30-11	119692	
			3-31-11	117387	2,305
004980				TOTAL	10,504

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

Lake Placid Holding Co
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 04-11

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT ID	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
[illegible]1	030	001	952655	04	30	11		1667980000	0 0 0 0 0 0	
REPORT METER READINGS PRC			04012011							
0002	030	001	951869	04	30	11		1299440000	0 0 0 0 0 0	
REPORT METER READINGS PRC			04012011							
0003	030	001	964256	04	30	11		1196920000	0 0 0 0 0 0	
REPORT METER READINGS PRC			04012011							

*VALID REMARK CODES:

Y	NORMAL (OPTIONAL)	F	RESTART METER READING
O	ROLLOVER	U	WITHDRAWAL NOT USED
X	NOT AVAILABLE		

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

DATA SUBMITTAL FORM 04/11

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

See page 4 for instructions.

I. General Information for the Month/Year of: March 2011

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,944	Total Population Serve at End of Month: 3,305		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Cont ct Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.			Plant Telephone Number: 863-465-2427
Plant Add ess: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Nathan Brewer Printed or Type Name	C14995 License Number

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

PWS Identification Number: 5280223 | Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: March 2011

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

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

				CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*											
				CT Calculations							UV Dose				
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	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 Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm²	Minimum UV Dose Required, mW-sec/cm²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24	384,000	315	1.80			25.00	7.30				1.50	
2	X	24	293,000	337	1.60			25.00	7.30				1.30	
3	X	24	304,000	279	1.60			25.00	7.30				1.30	
4	X	24	397,000	223	1.70			25.00	7.30				1.40	
5	X	24	238,000	357	1.50			25.00	7.30				1.10	
6	X	24	326,000	462	1.80			25.00	7.30				1.50	
7	X	24	427,000	202	1.50			25.00	7.30				1.20	
8	X	24	258,000	350	1.90			25.00	7.30				1.60	
9	X	24	418,000	224	1.80			25.00	7.30				1.50	
10	X	24	340,000	188	1.60			25.00	7.30				1.30	
11	X	24	242,000	229	1.70			25.00	7.30				1.40	
12	X	24	333,000	449	1.60			25.00	7.30				1.30	
13	X	24	322,000	285	1.40			25.00	7.30				1.10	
14	X	24	455,000	239	1.70			25.00	7.30				1.40	
15	X	24	295,000	220	1.50			25.00	7.30				1.20	
16	X	24	369,000	347	1.10			25.00	7.30				0.80	
17	X	24	342,000	251	1.20			25.00	7.30				0.90	
18	X	24	294,000	321	1.60			25.00	7.30				1.30	
19	X	24	328,000	436	1.10			25.00	7.30				0.90	
20	X	24	335,000	457	1.80			25.00	7.30				1.50	
21	X	24	456,000	283	1.80			25.00	7.30				1.50	
22	X	24	316,000	255	1.90			25.00	7.30				1.60	
23	X	24	365,000	217	1.80			25.00	7.30				1.50	
24	X	24	339,000	380	1.30			25.00	7.30				1.00	
25	X	24	429,000	408	1.40			25.00	7.30				1.10	
26	X	24	293,000	451	1.30			25.00	7.30				1.00	
27	X	24	365,000	217	1.40			25.00	7.30				1.10	
28	X	24	484,000	213	1.70			25.00	7.30				1.40	
29	X	24	333,000	170	1.30			25.00	7.30				1.00	
30	X	24	259,000	328	1.60			25.00	7.30				1.30	
31	X	24	321,000	254	1.70			25.00	7.30				1.40	
Total			10,660,000											
Average			343,870											
Maximum			484,000											

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee W/D #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn (in Gallon)
004980	Well 1	1	3-31-11	162122	
			2-28-11	157277	4,845
004980	Well 2	2	3-31-11	126421	
			2-28-11	123017	3,404
004980	Well 3	3	3-31-11	117387	
			2-28-11	115216	2,171
004980				TOTAL	10,420

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT

2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

LAKE PLACID HOLDING CO
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 02-11

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT ID	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	03	31	11		162122000	0 0 0 0 0 0	
REPORT METER READINGS PRC			02012011							
0002	030	001	951869	03	31	11		126421000	0 0 0 0 0 0	
REPORT METER READINGS PRC			02012011							
0003	030	001	964256	03	31	11		117387000	0 0 0 0 0 0	
REPORT METER READINGS PRC			02012011							

*VALID REMARK CODES:

- Y NORMAL (OPTIONAL)
- O ROLLOVER
- X NOT AVAILABLE
- F RESTART METER READING
- U WITHDRAWAL NOT USED

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

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

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,947	Total Population Served at End of Month: 3,310		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: ndbrewer@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.			Plant Telephone Number: 863-465-2427
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Printed or Typed Name	License Number
	Nathan Brewer	C14995

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: February 2011

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable *										
				CT Calculations							UV Dose			
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm²	Minimum UV Dose Required, mW-sec/cm²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24	357,000	320	1.60			25.00	7.30				1.30	
2	X	24	326,000	241	1.90			25.00	7.30				1.60	
3	X	24	373,000	268	1.50			25.00	7.30				1.20	
4	X	24	288,000	241	1.50			25.00	7.30				1.20	
5	X	24	284,000	349	1.60			25.00	7.30				1.30	
6	X	24	344,000	195	1.30			25.00	7.30				1.00	
7	X	24	356,000	232	1.10			25.00	7.30				0.80	
8	X	24	338,000	412	1.50			25.00	7.30				1.20	
9	X	24	400,000	215	1.60			25.00	7.30				1.30	
10	X	24	300,000	262	1.20			25.00	7.30				0.90	
11	X	24	313,000	272	0.80			25.00	7.30				0.50	
12	X	24	281,000	340	1.40			25.00	7.30				1.10	
13	X	24	336,000	332	1.60			25.00	7.30				1.30	
14	X	24	427,000	247	1.60			25.00	7.30				1.30	
15	X	24	314,000	208	1.60			25.00	7.30				1.30	
16	X	24	354,000	209	1.60			25.00	7.30				1.30	
17	X	24	353,000	193	1.30			25.00	7.30				1.00	
18	X	24	308,000	329	1.30			25.00	7.30				1.00	
19	X	24	254,000	311	1.20			25.00	7.30				0.90	
20	X	24	336,000	424	1.10			25.00	7.30				0.80	
21	X	24	484,000	446	1.20			25.00	7.30				0.90	
22	X	24	340,000	199	1.20			25.00	7.30				0.90	
23	X	24	317,000	263	1.10			25.00	7.30				0.80	
24	X	24	381,000	205	1.40			25.00	7.30				1.10	
25	X	24	339,000	347	1.50			25.00	7.30				1.20	
26	X	24	284,000	462	1.80			25.00	7.30				1.50	
27	X	24	317,000	363	1.60			25.00	7.30				1.30	
28	X	24	402,000	330	1.70			25.00	7.30				1.40	
29														
30														
31														
Total			9,506,000											
Average			339,500											
Maximum			484,000											

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee W/D #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn (In Gallon)
004980	Well 1	1	2-28-11	157277	
			1-31-11	153137	4,140
004980	Well 2	2	2-28-11	123017	
			1-31-11	119778	3,239
004980	Well 3	3	2-28-11	115216	
			1-31-11	113277	1,939
004980				TOTAL	9,318

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT

2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

LAKE PLACID HOLDING CO
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 01-11

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT ID	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	02	28	11		151277000	0 0 0 0 0 0	
REPORT METER READINGS PRC			01012011							
0002	030	001	951869	02	28	11		123017000	0 0 0 0 0 0	
REPORT METER READINGS PRC			01012011							
0003	030	001	964256	02	28	11		115216000	0 0 0 0 0 0	
REPORT METER READINGS PRC			01012011							

*VALID REMARK CODES:

- Y NORMAL (OPTIONAL)
- O ROLLOVER
- X NOT AVAILABLE
- F RESTART METER READING
- U WITHDRAWAL NOT USED

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

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: January 2011

A. Public Water System (PWS) Information

PWS Name: Placid Lakes Utilities, Inc.			PWS Identification Number: 5280223
PWS Type: ☒ Community ☐ Non-Transient Non-Community ☐ Transient Non-Community ☐ Consecutive			
Number of Service Connections at End of Month: 1,947	Total Population Served at End of Month: 3,310		
PWS Owner: Placid Lakes Utilities, Inc.			
Contact Person: Nathan Brewer	Contact Person's Title: Operator		
Contact Person's Mailing Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Contact Person's Telephone Number: 863-441-1090	Contact Person's Fax Number: 863-465-1313		
Contact Person's E-Mail Address: plcomm@embarqmail.com			

B. Water Treatment Plant Information

Plant Name: Placid Lakes Utilities, Inc.			Plant Telephone Number: 863-465-2427
Plant Address: 410 Washington Blvd Nw	City: Lake Placid	State: Fl	Zip Code: 33852
Type of Water Treated by Plant: ☒ Raw Ground Water ☐ Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:			
Plant Category (per subsection 62-699.310(4), F.A.C.):	Plant Class (per subsection 62-699.310(4), F.A.C.):		

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Nathan Brewer	C	14995	7
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Printed or Typed Name	License Number
	Nathan Brewer	C14995

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

PWS Identification Number: 5280223	Plant Name: Placid Lakes Utilities, Inc.

III. Daily Data for the Month/Year of: January 2011

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable: *										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations							UV Dose			
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm²	Minimum UV Dose Required, mW-sec/cm²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	
1	X	24	304,000	261	2.10			25.00	7.30				1.90	
2	X	24	375,000	360	1.70			25.00	7.30				1.30	
3	X	24	240,000	297	1.60			25.00	7.30				1.30	
4	X	24	412,000	268	1.60			25.00	7.30				1.30	
5	X	24	274,000	176	1.50			25.00	7.30				1.20	
6	X	24	279,000	188	1.90			25.00	7.30				1.60	
7	X	24	304,000	242	1.70			25.00	7.30				1.40	
8	X	24	232,000	237	1.80			25.00	7.30				1.50	
9	X	24	266,000	236	1.70			25.00	7.30				1.40	
10	X	24	413,000	267	1.50			25.00	7.30				1.20	
11	X	24	217,000	157	1.50			25.00	7.30				1.20	
12	X	24	270,000	177	1.70			25.00	7.30				1.40	
13	X	24	255,000	197	1.90			25.00	7.30				1.60	
14	X	24	247,000	237	1.40			25.00	7.30				1.10	
15	X	24	299,000	398	1.40			25.00	7.30				1.10	
16	X	24	268,000	239	1.20			25.00	7.30				0.90	
17	X	24	307,000	261	1.40			25.00	7.30				1.10	
18	X	24	346,000	251	1.40			25.00	7.30				1.10	
19	X	24	301,000	203	1.30			25.00	7.30				1.00	
20	X	24	256,000	232	1.30			25.00	7.30				1.00	
21	X	24	263,000	329	1.20			25.00	7.30				0.90	
22	X	24	231,000	332	1.40			25.00	7.30				1.10	
23	X	24	274,000	324	1.20			25.00	7.30				0.80	
24	X	24	378,000	249	1.30			25.00	7.30				1.00	
25	X	24	293,000	214	1.60			25.00	7.30				1.30	
26	X	24	217,000	231	1.20			25.00	7.30				0.90	
27	X	24	294,000	283	1.60			25.00	7.30				1.30	
28	X	24	311,000	172	1.80			25.00	7.30				1.50	
29	X	24	216,000	312	1.40			25.00	7.30				1.10	
30	X	24	299,000	321	1.40			25.00	7.30				1.10	
31	X	24	404,000	210	1.00			25.00	7.30				0.70	
Total			9,045,000											
Average			291,774											
Maximum			413,000											

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
WATER USE PERMIT REPORT FORM

Permit Granted To: Lake Placid Holding Company Permit #: 004980

(Note: Required weekly readings should be taken the same day each week and/or required monthly readings should be taken at the end of each calendar month)

SWFWMD ID# (as listed on your permit)	Permittee WD #	Meter #	Date of Meter Reading	Actual Meter reading	Quantities Withdrawn (in Gallons)
004980	Well 1	1	01-31-11	153137	
			12-31-10	148933	4,204
004980	Well 2	2	01-31-11	119778	
			12-31-10	116720	3,058
004980	Well 3	3	01-31-11	113277	
			12-31-10	111455	1,822
004980				TOTAL	9,084

(If you need assistance in preparing this form, contact Permits Data Section @ 1-800-423-1476)

MAIL ALL REPORTS TO:
Permits Data Section
Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Reporter's Name: Nathan Brewer
Address : 410 Washington Blvd NW
City, State, Zip: Lake Placid, FL 33852
Telephone No: (863) 465-0345

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
2379 BROAD STREET BROOKSVILLE, FLORIDA 34604-6899

LAKE PLACID HOLDING CO
410 WASHINGTON BLVD NW
LAKE PLACID, FL 33852

(352) 796-7211 OR 1 (800) 423-1476
ATTN: PERMIT DATA TEAM

WUP PERMIT NUMBER: 004980
PERMITTING OFFICE: BA
REPORT FOR: 12-10

PLEASE WRITE CLEARLY USING A BLACK FINE POINT PEN.

DISTRICT ID	COND CODE	SEQUENCE NUMBER	SERIAL NUMBER	READING DATE MONTH	DAY	YEAR	NEG. SIGN	VALUE/READING	DECIMAL VALUE	RMK*
0001	030	001	952655	01	31	11		153137000	0 0 0 0 0 0	
REPORT METER READINGS PRC			12012010							
0002	030	001	951869	01	31	11		119778000	0 0 0 0 0 0	
REPORT METER READINGS PRC			12012010							
0003	030	001	964256	01	31	11		113277000	0 0 0 0 0 0	
REPORT METER READINGS PRC			12012010							

*VALID REMARK CODES:

Y	NORMAL (OPTIONAL)	F	RESTART METER READING
O	ROLLOVER	U	WITHDRAWAL NOT USED
X	NOT AVAILABLE		

REPORTERS NAME: Nathan Brewer
ADDRESS: 410 Washington Blvd NW
Lake Placid, FL 33852
PHONE NUMBER: 863-441-1090

COMMENTS:

PERMITS
Schedule VI

PLACID LAKES UTILITIES, INC.

Docket No.: 130025-WU

Highlands County

25-30.440 (6)
PERMITS

Test Year Ended December 31, 2012

Schedule VI

FLORIDA PUBLIC SERVICE COMMISSION

Certificate Number
401 - W

Upon consideration of the record it is hereby ORDERED that authority be and is hereby granted to:

PLACID LAKES UTILITIES, INC.

Whose principal address is:

2000 Jefferson Avenue, North
Lake Placid, FL 33852 (Highlands County)

to provide water service in accordance with the provision of Chapter 367, Florida Statutes, the Rules, Regulations and Orders of this Commission in the territory described by the Orders of this Commission.

This Certificate shall remain in force and effect until suspended, cancelled or revoked by Orders of this Commission.

ORDER	12954	DOCKET	820478-W
ORDER	17372	DOCKET	860532-WU
ORDER	22164	DOCKET	891158-WU
ORDER	PSC-97-1148-FOF-WU	DOCKET	970231-WU
ORDER	PSC-98-0687-FOF-WU	DOCKET	971204-WU
ORDER		DOCKET	
ORDER		DOCKET	
ORDER		DOCKET	
ORDER		DOCKET	
ORDER		DOCKET	
ORDER		DOCKET	
ORDER		DOCKET	

BY ORDER OF THE
FLORIDA PUBLIC SERVICE COMMISSION

Director
Division of Records and Reporting

State of Florida
Department of Environmental Protection

This Is To Certify That

NATHAN D. BREWER

Has successfully passed the examination and has met all qualifications required by Chapter 403, Florida Statutes, and is hereby certified as a

Drinking Water Treatment Plant Operator, Level C

License Number
DW 0014995

Date Issued
October 26, 2007

Charlie Crist
Governor

Michael W. Sole
Secretary

THIS CERTIFICATE IS NOT A LICENSE

RECEIVED
OCT 1 2012
HIGHLANDS COUNTY
ENGINEERING DEPARTMENT

HIGHLANDS COUNTY

BLANKET UTILITY MAINTENANCE PERMIT

(ALL COUNTY RIGHT-OF-WAYS)

Permission is hereby granted to:

Placid Lakes Utilities
410 Washington Boulevard NW
Lake Placid, FL 33852

to maintain existing utility construction within County right-of-ways for the period ending September 30, 2013, subject to the following eleven (11) general conditions and six (6) specific conditions:

GENERAL CONDITIONS

1. The maintenance of existing utility construction shall not interfere with the property and rights of other occupants.

2. All work shall be done in keeping with standards of the Highlands County Engineering Department and subject to the approval of the County Engineer, located at Sebring, Florida.

3. All materials and equipment shall be subject to inspection by the County Engineer.

4. During construction all safety regulations shall be observed and the County shall be relieved of all responsibility from damage of any nature arising from this permit.

5. All County or State property shall be restored to its original condition as far as practical.

6. All construction shall conform to the standards and requirements of this section. If at any time during the utility construction/maintenance, the County Engineer finds that the permit conditions have been violated, the County Engineer may issue an immediate *Stop Work Order.* The *Stop Work Order* shall be in effect until the operation is brought into compliance with the permit. Failure to perform satisfactory construction may result in the County's not issuing additional permits to the applicant until deficiencies are corrected.

7. It is expressly stipulated that this permit is a license for permissive use only and that the placing of facilities upon public property pursuant to this permit shall not operate to create or to vest any property right in said holder.

8. Whenever necessary for the construction, repair, improvement, alteration or relocation of all, or any portion of said road or street as determined by the County Engineer, any or all of said poles, wires, pipes, cables or other facilities and appurtenances authorized hereunder, shall be immediately removed from said road or street or reset or relocated thereon, as required by the County Engineer, and at the expense of the holder.

9. The permittee shall complete any construction commenced under the terms of this permit within sixty (60) working days.

10. Applicant declares that prior to commencing work under this application he will ascertain the location of all existing utilities, both aerial and underground and furnish due notice of proposed work to each utility involved.

11. It is understood and agreed that the rights and privileges herein set out are granted only to the extent of the County's right, title and interest in the land to be entered upon and used by the holder and the holder will, at all times assume all risk of and indemnify, defend, and save harmless Highlands County from and against any and all loss, damages, cost or expense arising in any manner on account of the exercise or attempted exercises by said holder of the aforesaid rights and privileges. During construction, all safety regulations of the Department of Transportation shall be observed and the holder must take such measures, including placing and display of safety devices, as may be necessary in order to safely conduct the public through the project area.

SPECIFIC CONDITIONS

1. Maintenance is defined as the repair or replacement of poles, wires, pipes, cables, terminals or other facilities and appurtenances in the same position and of approximately the same size. Construction resulting in an increase in utility capacity is not considered maintenance.

2. The maximum time that any excavation may be left open for maintenance is one week. When the maintenance will require an open excavation for a longer length of time a regular Utility Permit which explains the necessity, complete with detailed drawings, must be secured.

3. Maintenance of both the permitted and non-permitted utility construction, including service drops, must conform to the requirement of this permit.

4. Emergency repair of utilities under both paved and unpaved roads is authorized by this permit. This includes open cutting a paved road or trenching across an unpaved road when necessary, but the permittee will first make a diligent effort to notify the County Engineer by calling 402-6877. (After hours call 381-6736). All excavation shall be covered before leaving the work site. No notice is required for work outside the traveled way.

5. The permittee will repair the road as directed by the County Engineer and accept road maintenance responsibility for the repair of the cut or underground crossing for a period of thirty-six (36) months from the date of construction.

6. All disturbed area within the public right-of-way shall be restored to its original configuration.

Submitted By: Placid Lakes Utilities
(Permittee)

Jon Brewer, VP Ops
(Signature & Title)

Place
Corporate

Seal

Approved By: Deborah Carmichael
for the County Engineer

Date: 10-3-12

RECEIVED
OCT 1 2012
HIGHLANDS COUNTY
ENGINEERING DEPARTMENT

HIGHLANDS COUNTY

BLANKET UTILITY SERVICE DROP PERMIT

(ALL COUNTY RIGHT-OF-WAYS)

Permission is granted to:

Placid Lakes Utilities
410 Washington Boulevard NW
Lake Placid, FL 33852

for the construction and maintenance of service drops to provide customer service without individual applications for the period ending September 30, 2013, subject to the following twelve (12) general conditions and eight (8) specific conditions:

GENERAL CONDITIONS

1. The construction and maintenance of such utility shall not interfere with the property and rights of a prior occupant.

2. All work shall be done in keeping with standards of the Highlands County Engineering Department and subject to the approval of the County Engineer.

3. All materials and equipment shall be subject to inspection by the County Engineer.

4. During construction all safety regulations shall be observed and the County shall be relieved of all responsibility from damage of any nature arising from this permit.

5. All County or State property shall be restored to its original condition as far as practical.

6. All construction shall conform to the standards and requirements of this section. If at any time during the utility construction/maintenance, the County Engineer finds that the permit conditions have been violated, the County Engineer may issue an immediate *Stop Work Order*. The *Stop Work Order* shall be in effect until the operation is brought into compliance with the permit. Failure to perform satisfactory construction may result in the County's not issuing additional permits to the applicant until deficiencies are corrected.

7. The attached sketch covering details of this installation shall be made a part of this permit.

8. It is expressly stipulated that this permit is a license for permissive use only and that the placing of facilities upon public property pursuant to this permit shall not operate to create or to vest any property right in said holder.

9. Whenever necessary for the construction, repair, improvement, alteration or relocation of all, or any portion of said road or street as determined by the County Engineer, any or all of said poles, wires, pipes, cables, or other facilities and appurtenances authorized hereunder, shall be immediately removed from said road or reset or relocated thereon, as required by the County Engineer, and at the expense of the holder.

10. The permittee shall complete any construction commenced under the terms of this permit within sixty (60) working days.

11. Applicant declares that prior to commencing work under this application he will ascertain the location of all existing utilities, both aerial and underground, and furnish due notice of proposed work to each utility involved.

12. It is understood and agreed that the rights and privileges herein set out are granted only to the extent of the County's right, title and interest in the land to be entered upon and used by the holder and the holder will, at all times assume all risk of and indemnify, defend, and save harmless Highlands County from and against any and all loss damages, cost or expense arising in any manner on account of the exercise or attempted exercises by said holder of the aforesaid rights and privileges. During construction, all safety regulations of the Department of Transportation shall be observed and the holder must take such measures, including placing and display of safety devices, as may be necessary in order to safely conduct the public through the project area.

SPECIFIC CONDITIONS

1. This permit authorizes service drops from existing non-permitted lines or cables where construction can be performed without placing additional poles or terminals in the right-of-way. Parallel construction (of service drops only) is permitted. Water and sewer connections are permitted, but the mains may not be extended.

2. When service drops are made from a previously permitted line or cable additional poles or terminals may be placed in the right-of-way within the pole or cable lines to facilitate the connection. However, additional poles or terminals may not be placed beyond the original permit limits in any direction. Parallel construction is permitted, but only within the limits of the original permit and only for the purpose of making a service drop. Water and sewer connections are permitted, but the mains may not be extended beyond the limits of the original permit.

3. The permittee accepts road maintenance responsibility for any underground crossing for a period of thirty-six (36) months from the date of construction.

4. All former State secondary roads (numbered roads) and those roads designated collector or arterial by the County's Comprehensive Plan, as amended, must be crossed using the "Jack and Bore" method and a casing left in place under the road.

5. No open road cuts are authorized by this permit.

6. The placing of additional poles or terminals within the right-of-way for any reason other than to facilitate a service drop is not authorized by this permit.

7. All disturbed areas within the public right-of-way shall be restored to its original configuration.

8. All construction shall conform to the attached sketch and the most current edition of *Manual of Uniform Standards for Design, Construction and Maintenance of Streets and Highways* prepared by the Florida Department of Transportation.

Submitted By: Placid Lakes Utilities
(Permittee)

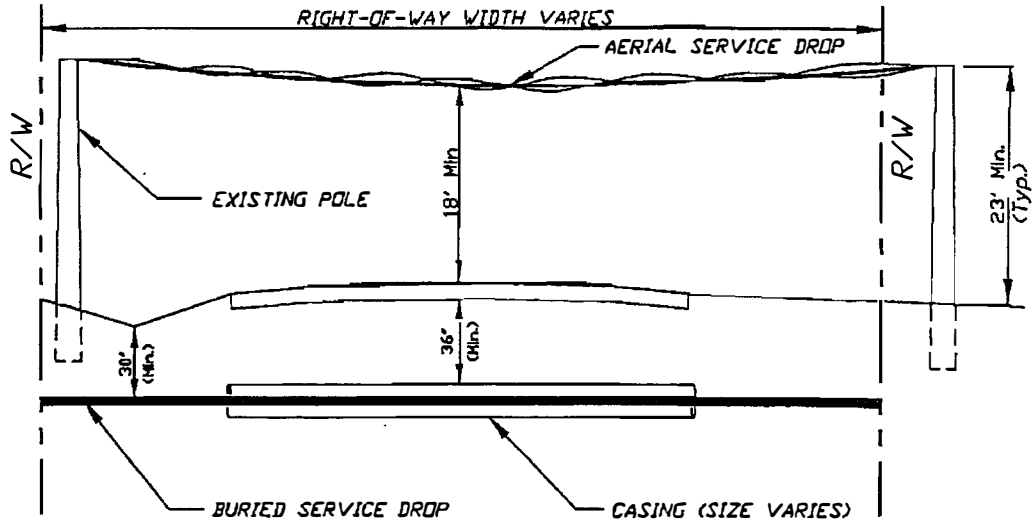
Signature & Title)

Place
Corporate
Seal

Approved By: Deborah Carnahan
for the County Engineer

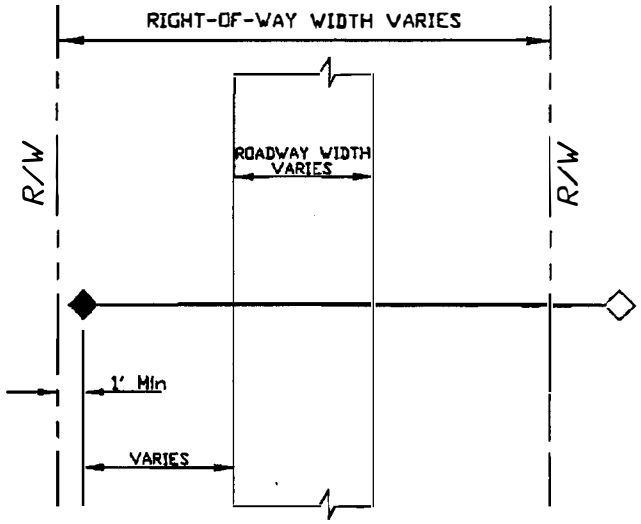
Date: 10-3-12

SERVICE CROSSING
BLANKET PERMIT APPLICATION



TYPICAL CROSS SECTION

(NOT TO SCALE)



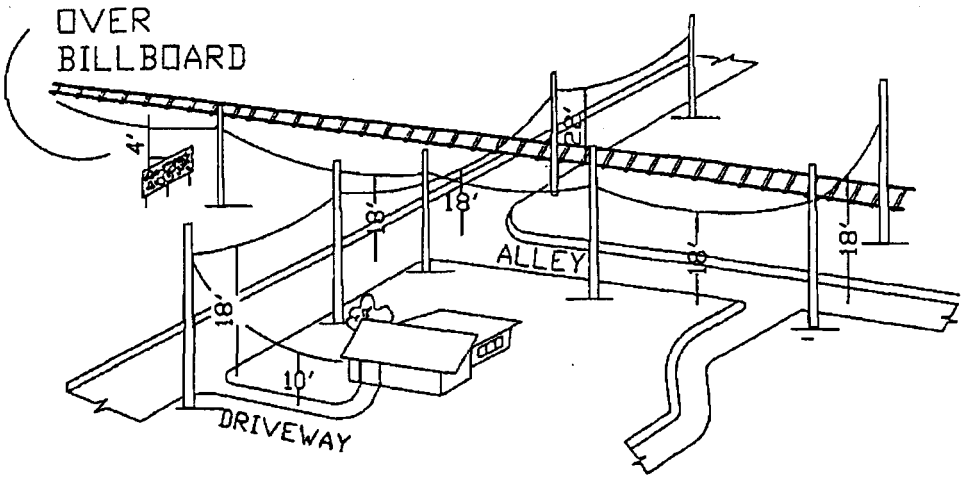
PLAN SKETCH OF INSTALLATION

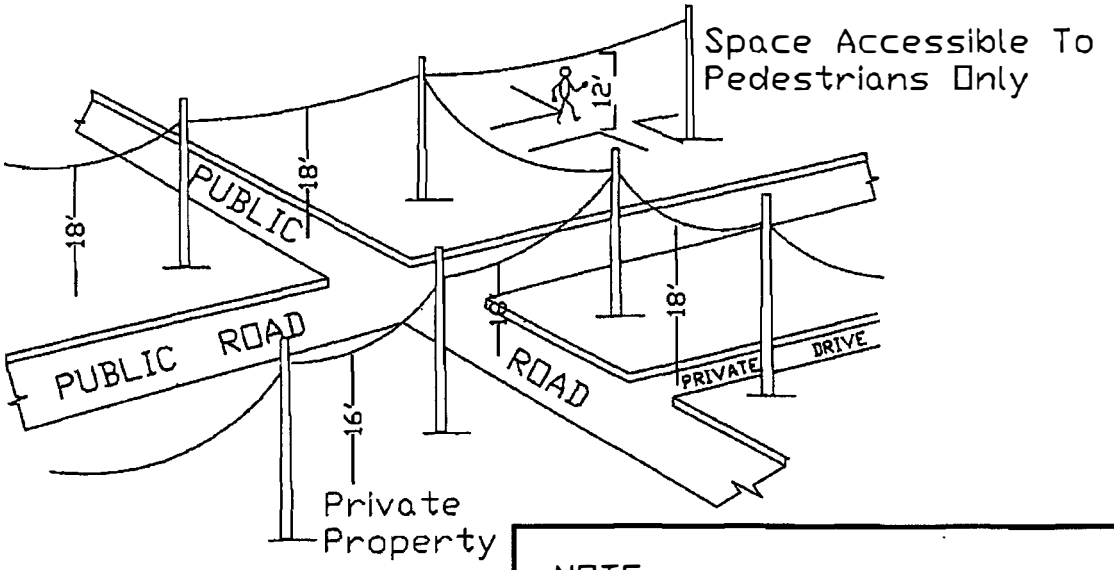
(NOT TO SCALE)

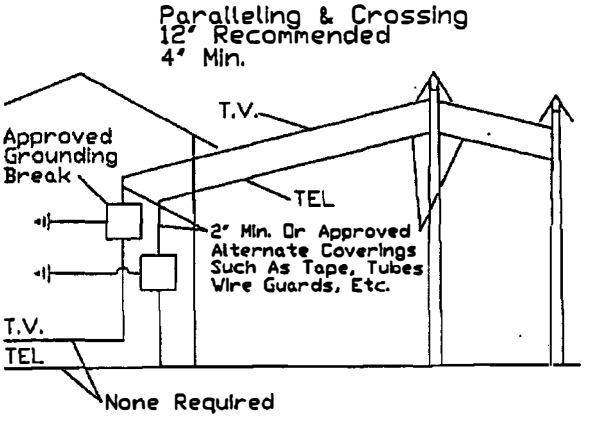
NOTE:

All former State Secondary Roads (Numbered Roads) And Those Roads Designated As Collector Or Arterials By The County's Comprehensive Plan, As Amended, must be crossed using the 'Jack & Bore' Method and a Casing Left in Place Under The Road.

All Underground Crossing Installations Shall Be Laid At A Minimum Depth Of Thirty-Six (36) Inches Below Pavement And At Least Thirty (30) Inches Below Ditch Grade. Exceptions May Be Made In Special Cases By The Authority Of The County Engineer.







NOTE:

All former State Secondary Roads (Numbered Roads) And Those Roads Designated As Collector Or Arterials By The County's Comprehensive Plan, As Amended, must be crossed using the 'Jack & Bore' Method and a Casing Left in Place Under The Road.

All Underground Crossing Installations Shall Be Laid At A Minimum Depth Of Thirty-Six (36) Inches Below Pavement And At Least Thirty (30) Inches Below Ditch Grade. Exceptions May Be Made In Special Cases By The Authority Of The County Engineer.

TYPICAL HOUSE-DROP CLEARANCE
FOR CATV & TELEPHONE

Department of
Environmental Protection

FILE

Lawton Chiles
Governor

South District
2295 Victoria Avenue, Suite 364
Fort Myers, Florida 33901-3881

Virginia B. Wetherell
Secretary

NOTICE OF PERMIT ISSUANCE 3/10/08 under new operation rules dated 10/15/07 the plant is now a VC plant 1.104 MGD Ruth

CERTIFIED MAIL No. P 482 211 426
RETURN RECEIPT REQUESTED

In the Matter of an Application for Permit by:

Scott Hutchins
Placid Lakes Utilities, Inc.
2000 Jefferson Avenue
Lake Placid, Florida 33852

DEP File No. 5280223
Highlands County - PW
Placid Lakes Utilities
Water Treatment Plant
Expansion

Enclosed is Permit Number WC28-292790 to construct the subject water treatment plant expansion issued pursuant to Section 403.861(9), Florida Statutes.

A person whose substantial interests are affected by this permit may petition for an administrative proceeding (hearing) in accordance with Section 120.57, Florida Statutes. The petition must contain the information set forth below and must be filed (received) in the Office of General Counsel of the Department at 2600 Blair Stone Road, Tallahassee, Florida 32399-2400, within 14 days of receipt of this Permit. Petitioner shall mail a copy of the petition to the applicant at the address indicated above at the time of filing. Failure to file a petition within this time period shall constitute a waiver of any right such person may have to request an administrative determination (hearing) under Section 120.57, Florida Statutes.

The Petition shall contain the following information;

(a) The name, address, and telephone number of each petitioner, the applicant's name and address, the Department Permit File Number and the county in which the project is proposed;

(b) A statement of how and when each petitioner received notice of the Department's action or proposed action;

"Protect, Conserve and Manage Florida's Environment and Natural Resources"

Printed on recycled paper.

(c) A statement of how each petitioner's substantial interests are affected by the Department's action or proposed action;

(d) A statement of the mat rial facts disputed by Petitioner, if any;

(e) A statement of facts which petitioner cont nds warrant reversal or modification of the Department's action or proposed action;

(f) A statement of which rules or statutes p titioner cont nds r quire reversal or modification of the Department's action or proposed action; and

(g) A statement of the relief sought by petitioner, stating precisely the action petitioner wants the D partment to take with respect to the Department's action or proposed action.

If a petition is filed, the administrativ hearing process is designed to formulate ag ncy action. Accordingly, the Department's final action may be different from the position taken by it in this permit. Persons whose substantial interests will be affected by any decision of the Departm nt with regard to the application have the right to petition to become a party to the proceeding. The petition must conform to the r quirements specified above and be filed (received) within 14 days of receipt of this notice in the Office of General Counsel at the above address of the Department. Failure to petition within the allowed time frame constitut s a waiver of any right such person has to r quest a hearing under Section 120.57, F.S., and to participate as a party to this proceeding. Any subsequent intervention will only be at the approval of the presiding officer upon motion filed pursuant to Rule 28-5.207, F.A.C.

This permit is final and effective on the date filed with the Clerk of the Department unless a petition is filed in accordance with the above paragraphs or unless a request for extension of time in which to file a petition is filed within the time sp cified for filing a petition and conforms to Rule 62-103.070, F.A.C. Upon timely filing of a petition or a request for an extension of time this permit will not be effective until further Order of the Department.

When the Order (Permit) is final, any party to the Order has the right to seek judicial review of the Order pursuant to Section 120.68, Florida Statutes, by the filing of a Notice of Appeal pursuant to Rule 9.110, Florida Rules of Appellate Proc dure, with the Clerk of the Department in the Office of General Counsel, 2600 Blair Stone Road, Tallahassee, Florida 32399-2400; and by filing a copy of the Notice of Appeal accompanied by the applicable filing fees with the appropriate District Court of Appeal. The Notice of Appeal must be filed within 30 days from the date the Final Order is filed with the Clerk of the Department.

Executed in Fort Myers, Florida.

STATE OF FLORIDA DEPARTMENT
OF ENVIRONMENTAL PROTECTION

Abdul B. Ahmadi, Ph.D., P.E.
Water Facilities Administrator

CERTIFICATE OF SERVICE

The undersigned duly designated deputy agency clerk hereby certifies that this **NOTICE OF PERMIT** and all copies were mailed before the close of business on September 27, 1996, to the listed persons.

Clerk Stamp

FILING AND ACKNOWLEDGMENT FILED, on this date, pursuant to §120.52(11), Florida Statutes, with the designated Department Clerk, receipt of which is hereby acknowledged.

Irene S. Kidd (Clerk) 9/27/96 (Date)

ABA/OJO/SKW

Enclosures

Copies furnished to:

Roger Dale Polston, P.E.

Department of Environmental Protection

Lawton Chiles
Governor

South District
2295 Victoria Avenue, Suite 364
Fort Myers, Florida 33901-3881

Virginia B. Wetherell
Secretary

1.104
- 0.664
0.44

PERMITTEE:
Scott Hutchins
Placid Lakes Utilities, Inc.
2000 Jefferson Avenue
Lake Placid, Florida 33852

I.D. No: 5280223
Permit/Cert. No.: WC28-292790
Date of Issue: Sept. 26, 1996
Exp. Date: Sept. 26, 2001
County: Highlands
Latitude: 27°16'10" N
Longitude: 81°24'02" W
Section/Town/Range: 10/37S/29E
Project: Placid Lakes Utilities
Water Treatment Pla t
Expansion

This permit is issued under the provisions of Chapter 403, Florida Statutes (F.S.), and Florida Administrative Code (F.A.C.) Rules 62-4, 62-550, 62-555 and 62-699. The above named permittee is hereby authorized to perform the work or operate the facility shown on the application and approved drawing(s), plans, and other documents, attached hereto or on file with the Department and made a part hereof and specifically described as follows:

Construct an expansion to the existing water treatme t plant by increasing the pla t capacity by 0.664 MGD for a total capacity of 1.104 MGD as depicted on Polston Engineering, Inc., design drawings, work order number 95026, sheets 1 thru 7 of 7, dated August 30, 1996, and September 19, 1996. The plant expansion includes a proposed 300 GPM Peerless well pump, discharge piping and appurtenances for the new well #3, a 150,000 gallon CROM concrete storage tank with a 1800 GPM fiberglass cascade aerator, modification to the three (3) existing high service Peerless pump each to be rated at 800 GPM, a 15,000 gallon hydropneumatic steel tank and modification to the gas chlorination system. The treatment system initially consists of a 150,000 gallon CROM concrete storage tank with a 1800 GPM fiberglass cascade aerator, an 800 GPM high service pump, two 400 GPM high service pumps and two 15,000 gallon hydropneumatic steel tanks.

The design drawings were submitted in support of the construction application, dated July 19, 1996, technical specifications and related documents which were received September 3, 1996, and September 20, 1996.

The treatment plant is located off Jefferson Avenue in Lake Placid, Florida.

PERMITTEE:
Scott Hutchins
Placid Lakes Utilities, Inc.

I.D. No: 5280223
Permit/Cert. No.: WC28-292790
Date of Issue: Sept. 26, 1996
Exp. Date: Sept. 26, 2001

GENERAL CONDITIONS:

1. The terms, conditions, requirements, limitations, and restrictions set forth in this permit are "permit conditions" and are binding and enforceable pursuant to Sections 403.141, 403.727, or 403.859 through 403.861, F.S. The permittee is placed on notice that the Department will review this permit periodically and may initiate enforcement action for any violation of these conditions.

2. This permit is valid ly for the specific processes and operations applied for and indicated in the approved drawings or exhibits. Any unauthorized deviation from the approved drawings, exhibits, specifications, or conditions of this permit may constitute grounds for revocation and enforcement action by the Department.

3. As provided in Subsections 403.087(6) and 403.722(5) F.S., the issuance of this permit does not convey any vested rights or any exclusive privileges. Neither does it authorize any injury to public or private property or any invasion of personal rights, nor any infringement of federal, state or local laws or regulations. This permit is not a waiver of or approval of any other Department permit that may be required for other aspects of the total project which are not addressed in the permit.

4. This permit conveys no title to land or water, does not constitute State recognition or acknowledgment of title, and does not constitute authority for the use of submerged lands unless herein provided and the necessary title or leasehold interests have been obtained from the State. Only the Trustees of the Internal Improvement Trust Fund may express State opinion as to title.

5. This permit does not relieve the permittee from liability for harm or injury to human health or welfare, animal, or plant life, or property caused by the construction or operation of this permitted source, or from penalties therefore; nor does it allow the permittee to cause pollution in contravention of Florida Statutes and Department rules, unless specifically authorized by any order from the Department.

6. The permittee shall properly operate and maintain the facility and systems of treatment and control (and related appurtenances) that are inst lled and used by the permittee to achieve compliance with the conditions of this permit, as required by Department rules. This provision includes the operation of backup or auxiliary facilities or similar systems when necessary to achieve compliance with the conditions of the permit and when required by Department rules.

PERMITTEE:
Scott Hutchins
Placid Lakes Utilities, Inc.

I.D. No: 5280223
Permit/Cert. No.: WC28-292790
Date of Issue: Sept. 26, 1996
Exp. Date: Sept. 26, 2001

GENERAL CONDITIONS:

7. The permittee, by accepting this permit, specifically agrees to allow authorized Department personnel, upon presentation of credential or other documents as may be required by law, and at reasonable times, access to the premises where the permitted activity is located or conducted to:

a. Have access to and copy any records that must be kept under the conditions of the permit;
b. Inspect the facility, equipment, practices, or operations regulated or required under this permit; and
c. Sample or monitor any substances or parameters at any location reasonably necessary to assure compliance with this permit or Department rules.

Reasonable time may depend on the nature of the concern being investigated.

8. If, for any reason, the permittee does not comply with or will be unable to comply with any condition or limitation specified in this permit, the permittee shall immediately provide the Department with the following information:

a. A description of and cause of non-compliance; and
b. The period of non-compliance, including dates and times; or, if not corrected, the anticipated time the non-compliance is expected to continue, and steps being taken to reduce, eliminate, and prevent recurr nce of the non-compliance. The permittee shall be responsible for any and all damages which may result and may be subject to enforcement action by the Department for penalties or revocation of this permit.

9. In accepting this permit, the permittee understands and agrees that all records, notes, monitoring data and other information relating to the construction or operation of this permitted source, which are submitted to the Department, may be used by the Department as evidence in any enforcement case involving the permitted source arising under the Florida Statutes or Department rules, except where such use is prescribed by Section 403.111 and 403.73, F.S. Such evidence shall only be used to the extent it is consistent with the Florida Ru es of Civil Procedure and appropriate evidentiary rules.

10. The permittee agrees to comply with changes in Department rules and Florida Statutes after a reasonable time for compliance, provided however, the permittee does not waive any other rights granted by Florida Statutes or Department rules. A reasonable time for compliance with a new or amended surface water quality standard, other than those standards addressed in

GENERAL CONDITIONS:

Rule 62-3.051, shall include a reasonable time to obtain or be denied a mixing zone for the new or amended standard.

11. This permit is transferable only upon Department approval in accordance with F.A.C. Rules 62-4.120 and 62-30.300, F.A.C. as applicable. The permittee shall be liable for any non-compliance of the permitted activity until the transfer is approved by the Department.

12. This permit or a copy the eof shall be kept at the work site of the permitted activity.

13. This permit also constitutes:

(a) Determination of Best Available Control Technology (BACT)
(b) Determination of Prevention of Significant Deterioration (PSD)
(c) Certification of compliance with State Water Quality Standards (Section 401, PL 92-500)
(d) Compliance with New Source Performance Standards

14. The permittee shall comply with the following:

(a) Upon request, the permittee shall furnish all records and plans required under Department rules. During enforcement actions, the retention period for all records will be extended automatically, unless otherwise stipulated by the Department.
(b) The permittee shall hold at the facility or other location designated by this permit records of all monitoring information (including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation), required by the permit, copies of all reports required by this permit, and records of all data used to complete the application for this permit. These materials shall be retained at least three years from the date of the sample, measurement, report or application unless otherwise specified by Department rule.

(c) Records of monitoring information shall include:

1. the date, exact place, and time of sampling or measurements;
2. the person responsible for performing the sampling or measurements;
3. the dates analyses were performed;
4. the person responsible for performing the analyses;
5. the analytical techniques or methods used;
6. the results of such analyses.

PERMITTEE:
Scott Hutchins
Placid Lakes Utilities, Inc.

I.D. No: 5280223
Permit/Cert. No.: WC28-292790
Date of Issue: Sept. 26, 1996
Exp. Date: Sept. 26, 2001

GENERAL CONDITIONS:

15. When requested by the Department, the permittee shall within a reasonable time furnish any information required by law which is needed to determine compliance with the permit. If the permittee becomes aware the relevant facts were not submitted or were incorrect in the permit application or in any report to the Department, such facts or information shall be corrected promptly.

SPECIFIC CONDITIONS:

1. Drawings, plans, documents or specifications submitted by the Permittee, not attached hereto, but retained on file at the South Florida District Office, are made a part hereof.

2. The applicant shall retain the engineer of record or obtain the services of any professional engineer registered in the State of Florida for the inspection of the construction of this proje t. Upon completion the engineer shall inspe t for conformity to co struction permit applications and associated documents.

3. A Request for Letter of Release to Place Water Supply System Into Service, form 62-555.910(9), along with record drawings and bacteriological analysis results shall be submitted within 30 days after completion of construction of the project and Dep rtment approval obtained prior to placement in operation.

4. Pipe, fittings, valves, fire hydrants and other materials shall conform to the most recent standards issued by the American Water Works Association (AWWA).

5. Water supply facilities including mains shall be installed, cleaned, disinfected and bacteriologically cleared for service, in accordance with the latest applicable AWWA Standards and Department rules and regulations.

6. The facility is a category IV, requiring a Class C or higher operator on site 1 hour per day for 5 days per week and one visit on each weekend day, F.A.C. Rule 62-699.310(4)(d). Operator shall be on call during periods when the plant is unattended. [Daily checks of all plants shall be performed by the permittee, or supplier, or his represe tative or agent 5 days per week for all Class C and D plants.] Reference Rule 62-699.311(1), F.A.C.

7. The permittee shall comply with the requirements of water treatment plants, storage and distribution systems utilizing chlorination facilities in accordance with F.A.C. Rules 62-555.320(5)(a) and 62-555.330(1),(2), (3) and (4); including, but not limited to, respiratory protection equipment, chlori e leak detection equipment, and protective equipment.

PERMITTEE:
Scott Hutchins
Placid Lakes Utilities, Inc.

I.D. No: 5280223
Permit/Cert. No.: WC28-292790
Date of Issue: Sept. 26, 1996
Exp. Date: Sept. 26, 2001

SPECIFIC CONDITIONS:

8. The water treatment plant shall maintain throughout the distribution system a minimum continuous and effective free chlorine residual of 0.2 mg/l. A minimum system pressure of 20 psi must be maintained throughout the system. Also, safety equipment shall be provided and located outside of chlorine room.

9. Fencing, locks on access manholes and other necessary precautions shall be provided for the finished water storage to prevent trespassing, vandalism and sabotage.

10. The permittee shall submit a monthly operations report (MOR) DER Form 62-555.910(3), to the Department no later that the fifteenth of each succeeding month.

11. This facility is a Community Water System as defined in F.A.C. Rule 62-550.200(9) and shall comply with the applicable chemical and bacteriological monitoring requirements of F.A.C. Rule 62-550. Such requirements shall be initiated within 90 days of issue of the letter of release and placement of the water treatment facility in service, and the results submitted to the Department.

12. Disinfection and bacteriological survey shall be conducted on the proposed well in accordance with F.A.C. Rule 62-555.315(3)(b) and (c). The well shall not be used until the bacteriological survey are done and satisfactory results of the analyses are received by the Department. Water qu lity analyses on the proposed well shall be conducted after completion of construction in accordance with F.A.C. Rules 62-550.310 and 62-550.320 and the results submitted to the Department. If any of the water quality standards are exceeded, additional treatment may be required in order to improve the quality of water for human consumption.

13. The permittee is reminded of the necessity to comply with the pertinent regulations of any other regulatory agency, as well as any county, municipal, and federal regulations applicable to the project. These regulations may include, but are not limited to, those of the Federal Emergency Management Agency in implementing flood control measures. This permit should not be construed to imply compliance with the rules and regulations of other regulatory agencies.

PERMITTEE:
Scott Hutchins
Placid Lakes Utilities, Inc.

I.D. No: 5280223
Permit/Cert. No.: WC28-292790
Date of Issue: Sept. 26, 1996
Exp. Date: Sept. 26, 2001

SPECIFIC CONDITIONS:

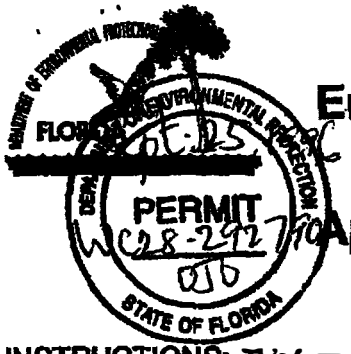
Note: In the event of an emergency the permittee shall contact the Department by calling (904) 413-9911. During normal business hours, the permittee shall call (941) 332-6975.

Issued this 26th day of September, 1996

STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION

Abdul B. Ahmadi, Ph.D., P.E.
Water Facilities Administrator

ABA/OJO/skw



DEP Form No.:	62-555.900(1)
Form Title:	Application for a Public Drinking Water Facility Construction Permit
Effective Date:	December 18, 1995
DEP Application No.:	(filled in by DEP)

Department of Environmental Protection

Office Copy

Application for a Public Drinking Water Facility Construction Permit

INSTRUCTIONS: This form shall be completed and submitted by persons proposing to construct new, or alter existing, public drinking water facilities unless such proposed construction or alteration is permitted under the "General Permit for Construction of an Extension to a Public Drinking Water Distribution System," in which case Form 62-555.910(7) is to be completed and submitted. Complete this form and submit it in quadruplicate to the appropriate district office of the Department or the appropriate Approved County Public Health Unit (ACPHU) along with a check for the proper application processing fee and the following supporting documents: a signed and sealed engineering report (including design data); signed and sealed engineering plans and specifications; a certificate that the project has been approved by the governing body of the applicant (city commissioners, corporation, board, etc.); and, for each project involving the construction of a new drinking water treatment plant in a county regulated by the Florida Public Service Commission (PSC), a copy of the PSC certificate authorizing the applicant to provide service or a copy of the PSC order exempting the applicant from PSC regulation. (Section 367.031, Florida Statutes, requires that a utility obtain a certificate of authorization or an exemption order from the PSC prior to being issued a permit by the Department for the construction of a new water facility.) All supporting documents, as well as this form, shall be submitted in quadruplicate. All information provided on this form shall be typed or printed in ink. Complete Parts I, II, IV, V, and VI.A of this form for all projects, and complete Parts III and VI.B through VI.E of this form when applicable. A signature page or cover letter for engineering reports, each sheet of engineering plans, and a cover or index sheet for engineering specifications shall be signed, dated, and sealed with an impression-type metal seal by the professional engineer(s) in responsible charge of the documents. Also, engineering plans and specifications shall be those intended for construction and shall not be stamped otherwise (e.g., "For Permitting Only," "For Review Only," etc.). Application processing fees are listed in Rule 62-4.050, Florida Administrative Code. Checks for application processing fees shall be made payable to the Department of Environmental Protection or to the appropriate ACPHU. NOTE THAT A SEPARATE APPLICATION AND A SEPARATE PROCESSING FEE ARE REQUIRED FOR EACH NON-CONTIGUOUS PUBLIC DRINKING WATER DISTRIBUTION SYSTEM PROJECT.

I. NAME, DESCRIPTION, AND LOCATION OF PROJECT; APPLICANT; ETC.

RECEIVED
JUL 23 1996
D.E.P. South District

•Project Name:

1996 Water Treatment Plant Expansion

•Project Description:

The expansion of the existing water treatment plant to serve growth within the subdivision. Included in the expansion are a new well storage tank, high service pumps and hydropneumatic tanks.

•Project Location

County: Highlands; Section: 10; Township: 37; Range: 29;
Latitude and Longitude of Each New Treatment Plant and Each New Raw Water Source (attach additional sheets if necessary):

Name of New Treatment Plant or New Raw Water Source	Latitude	Longitude
Placid Lakes Utilities (Water Plant)	27 ° 16' 10" N	81 ° 24 ' 02" W

Application for a Public Drinking Water Facility Construction Permit

Project Name: 1996 Water Treatment Plant Expansion
Applicant: Placid Lakes Utilities, Inc.

DEP Form No.:	62-555.900(1)
Form Title:	Application for a Public Drinking Water Facility Construction Permit
Effective Date:	December 10, 1996
DEP Application No.:	(filled in by DEP)

•Applicant

Utility/Company Name: **Placid Lakes Utilities, Inc.** Telephone No.: **941-465-0345**
Address: **2000 Jefferson Ave.**
City: **Lake Placid** State: **Florida** Zip Code:**33852**

•Public Water System Supplying Water for Project:

System Name: **Placid Lakes Utilities** PWS IdentificationNo.: **5280223**
System Owner: **Placid Lakes Utilities, Inc.** Telephone No.: **941-382-2196**
Address: **2000 Jefferson Ave.**
City: **Lake Placid** State: **Florida** Zip Code:**33852**

•Owner/Operator of Project After It Is Placed into Service

Utility/Company Name: **Placid Lakes Utilities** PWS IdentificationNo.: **5280223**
System Owner: **Placid Lakes Utilities, Inc.** Telephone No.: **941-382-2196**
Address: **2000 Jefferson Ave.**
City: **Lake Placid** State: **Florida** Zip Code:**33852**

•Professional Engineer in Responsible Charge of Designing Project

Name of Engineer: **Roger Dale Polston**
Firm Name: **Polston Engineering, Inc.**
Address **P.O Box 588**
City: **Sebring** State: **Florida** Zip Code: **33871-0588**

II. STATEMENT BY APPLICANT

I, the undersigned owner or authorized representative* of **Placid Lakes Utilities, Inc.**, certify that all components that will be installed under this project and that will come into contact with drinking water or drinking water treatment chemicals (except components that will come into contact with raw water prior to its treatment by reverse osmosis) conform, or will conform, with American National Standards Institute (ANSI)/NSF International (NSF) Standard 61. Also, I certify that all drinking water treatment chemicals that will be supplied under this project except fluoridation chemicals conform, or will conform, with ANSI/NSF Standard 60 and that all fluoridation chemicals that will be supplied under this project conform, or will conform, with ANSI and American Water Works Association Standard B701, B702, or B703 as applicable.

I agree that we will require the contractor to furnish us with record drawings for this project. Also, I agree that we will retain a professional engineer registered in Florida to inspect construction of this project for the purpose of determining if work proceeds in compliance with the construction permit and approved engineering plans and specifications.

I am fully aware that we must obtain a letter of clearance from the Department before we place this project into service for any purpose other than disinfection, testing for leaks, or testing equipment operation. Also, I am fully aware that, if we sell or legally transfer ownership of this project before obtaining a letter of clearance from the Department, we must submit to the Department an "Application for Transfer of a Public Water System Construction Permit" within 30 days after such sale or legal transfer of ownership.

Scott Hutchins 7/26/96 — **Scott Hutchins, Operator**

Signature and Date — Name and Title (please type or print)

* *Attach a letter of authorization.*

III. STATEMENT BY PUBLIC WATER SYSTEM SUPPLYING WATER FOR PROJECT (complete for distribution system projects)

I, the undersigned owner or authorized representative* of __Placid Lakes Utilities, Inc.___, certify that we will provide the potable water supply required by this project. As indicated below, the water treatment plant to which this project will be connected has the capacity to provide the potable water supply required by this project, and I certify that said plant is in compliance with the standards and criteria set forth in Chapters 62-550, 62-551, 62-555, and 62-560, Florida Administrative Code (F.A.C.). Also, said plant was constructed under one or more valid Department construction permits as indicated below, and I certify that connection of this project to said plant will not be a violation of any condition of this(these) construction permit(s).

- Name of Water Treatment Plant to Which this Project Will Be Connected: **Placid Lakes Utilities (Water Plant)**
- Construction Permit Number(s) for Plant: **PWS-5280223**
  Date(s) Permit(s) Issued:
- Permitted Maximum Day Capacity of Plant: _____**440,000 gpd**_____
- Maximum Day Flow at Plant as Recorded on Monthly Operating Reports During Past 12 Months: **448,000** on **04/10/96**

Furthermore, if this project involves construction of a new, or alteration of an existing, "regulated" consecutive public water system† that only sells water and that does not have any treatment facilities, I agree to the following:

☒ we will consider said consecutive system as part of our system for the purpose of the microbiological and chlorine residual monitoring required by Chapter 62-550, F.A.C., and if applicable, the asbestos, total trihalomethane, and lead and copper monitoring required by Chapters 62-550 and 62-551, F.A.C.

☐ we will not consider said consecutive system as part of our system for monitoring purposes. (In this case, the consecutive system shall be responsible for conducting monitoring in accordance with Rule 62-550.540, F.A.C.)

Signature and Date: 7/19/96

Scott Hutchins, Operator
Name and Title (please type or print)

* *Attach a letter of authorization.*

† *A consecutive public water system is a water system that provides piped water to the public for human consumption; that has at least 15 service connections or regularly serves at least 25 individuals daily at least 60 days out of the year; and that receives all of its water from, but is not owned or operated by, another public water system. A consecutive system is "regulated" if it meets one or more of the following criteria: (a) it has collection or treatment facilities; (b) it sells water; or (c) it is a carrier that conveys passengers in interstate commerce.*

IV. STATEMENT BY OWNER/OPERATOR OF PROJECT AFTER IT IS PLACED INTO SERVICE

I, the undersigned owner or authorized representative* of _____**Placid Lakes Utilities, Inc.**_____, certify that we will be the owner/operator of this project after it is placed into service. I agree that we will operate and maintain this project in a manner that will comply with Chapters 62-550, 62-551, 62-555, 62-560, and 62-699, Florida Administrative Code; and I certify that all drinking water treatment chemicals that we will use except fluoridation chemicals conform, or will conform, with American National Standards Institute (ANSI)/NSF International Standard 60 and that all fluoridation chemicals that we will use conform, or will conform, with ANSI and American Water Works Association Standard B701, B702, or B703 as applicable. Also, I agree that we will promptly notify the Department if we sell or legally transfer ownership of this project.

Signature and Date: 7/19/96

Scott Hutchins, Operator
Name and Title (please type or print)

* *Attach a letter of authorization.*

V. STATEMENT BY PROFESSIONAL ENGINEER IN RESPONSIBLE CHARGE OF DESIGNING PROJECT

I, the undersigned professional engineer registered in Florida, certify that I am in responsible charge of the preparation and production of engineering documents for this project; that I have expertise in environmental/sanitary engineering; and that, to the best of my knowledge and belief, the engineering design for this project complies with Chapter 62-555, Florida Administrative Code (F.A.C.), and provides reasonable assurance of compliance with Chapters 62-550 and 62-551, F.A.C.

The plans and specifications for this project require that all new and relocated project components that will come into contact with drinking water or drinking water treatment chemicals (except components that will come into contact with raw water prior to its treatment by reverse osmosis) be in conformance with American National Standards Institute (ANSI)/NSF International (NSF) Standard 61. Also, the plans and specifications for this project require that all drinking water treatment chemicals supplied under this project except fluoridation chemicals be in conformance with ANSI/NSF Standard 60 and that all fluoridation chemicals supplied under this project be in conformance with ANSI and American Water Works Association Standard B701, B702, or B703 as applicable.

7/22/96
Signature, Date, and Seal

Roger Dale Polston, #33222
Name and License Number (please type or print)

VI. SUMMARY OF DESIGN DATA FOR PROJECT

A. General

System PWS Identification Number, Name, Owner, and Type

1. System PWS Identification Number (if existing system): **5280223**
2. System Name: **Placid Lakes Utilities**
3. System Owner: **Placid Lakes Utilities, Inc.**
4. System Type: **X** community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive

System Service Area

5. Nature and Extent of Existing Service Area and Design/Projected Service Area:
   Sections 1-20 of Placid Lakes are the Existing and Projected Service Areas

6. Number of Existing Service Connections: **1235**
7. Existing Significant Industrial Water Users (industries with an average or maximum daily water demand that is ≥ 1% of the total average or maximum daily water demand on the system) (attach additional sheets if necessary):

Name of Facility	Type of Facility	Present Daily Water Demand	
		Average	Maximum
N/A			

8. Regulated Consecutive Public Water Systems Presently Connected to this System (attach additional sheets if necessary): **N/A**

Name of System	Type of System	Any Existing Significant Industrial Water Users?

* *IF YES, PROVIDE ON AN ATTACHMENT THE NAMES OF THE USERS AND THEIR PRESENT AVERAGE AND MAXIMUM DAILY WATER DEMANDS.*

Present Population Served by System and Present Water Demand

9. Present Population Served Directly (excluding all regulated consecutive public watersystems): 1235 X 2.3 = 2840
10. Present Total Population Served (including all consecutive public water systems): 2840
11. Present Annual Average Day Water Demand: 245258 gpd (averaged 7/95-6/96's average day ÷ 12 mo.)
12. Present Per Capita Annual Average Day Water Demand: 87 gpcd
13. Present Maximum Day Water Demand: 448,000 gpd (per 04/96 M.O.R.)
14. Present Maximum Hour Water Demand: unknown

Design Population and Water Demand for System

15. Design Year and Estimated Total Population to Be Served in Design Year:
16. Projected Annual Average Day Water Demand in Design Year and Basis of Projection:
    2400 connections X 2.3 = 5520 population X 100 = 552,000 gpd
17. Projected Maximum Day Water Demand in Design Year and Basis of Projection:
    552,000 X 2 = 1,104,000 gpd
18. Projected Maximum Hour Water Demand in Design Year and Basis of Projection:
    552,000/24 X 3 = 69,000 gph
19. Design Fire Demand (flow rate and duration) and Basis ofDesign N/A

System Raw Water Sources and Collection Facilities

20. Existing Ground Water Sources and Wells (attach additional sheets if necessary):

Name of Treatment Plant Supplied	Name of Aquifer from Which Raw Water is Withdrawn	Number of Existing Wells	Total Capacity of Existing Wells (All Wells in Service)	Total Capacity of Existing Wells When Largest Well is Out of Service
Placid Lakes Utilities	lime rock	2	1000 gpm	450 gpm

21. Existing Surface Water Sources and Raw Surface Water Pumps (attach additional sheets if necessary):

Name of Treatment Plant Supplied	Name of Surface Water from Which Raw Water is Withdrawn	Number of Existing Pumps	Total Capacity of Existing Pumps When Largest Pump is Out of Service
N/A			

22. Existing Purchased Water Sources (attach additional sheets if necessary):

Name of Finished Water System Supplying Water
N/A

23. Will existing raw water sources and collection facilities (including raw water pumping facilities) be altered under this project, or are new raw water sources or collection facilities (including raw water pumping facilities) proposed under this project? __Yes_____ IF YES, COMPLETE PART VI.B BELOW.

System Treatment Facilities

24. Existing Treatment Plants (attach additional sheets if necessary):

Plant Name	Existing Reported Maximum Day Capacity of Plant	Existing Maximum Hour Capacity of Plant	Component That Limits Existing Capacity of Plant	Existing Type of Treatment at Plant
Placid Lakes Utilities	440,000 gpd	1600	pump	chlorination aeration

* *Provide this only if increased treatment capacity is provided in lieu of sufficient storage capacity to meet peak water demands.*

25. Will existing treatment facilities (including in-plant and finished water pumping facilities) be altered under this project, or are new treatment facilities (including in-plant and finished water pumping facilities) proposed under this project? ___Yes _____ IF YES, COMPLETE PART VI.C BELOW.

System Finished Water Storage Facilities

26. Existing Plant and Distribution System Finished Water Storage Facilities (attach additional sheets if necessary):

Storage Facility Name/Location	Type of Storage Facility (clearwell, hydropneumatic tank, ground-level reservoir, standpipe, elevated tank, etc.)	Existing Useful Volume of Storage Facility
Placid Lakes Utilities	Clearwell	150,000 gal
Placid Lakes Utilities	2 Hydropneumatic tanks	15,000 gal each

27. Will existing plant or distribution system finished water storage facilities be altered under this project, or are new plant or distribution system finished water storage facilities proposed under this project? __Yes _____ IF YES, COMPLETE PART VI.D BELOW.

System Distribution Facilities

28. Will existing distribution facilities (including booster pumping facilities) be altered or extended under this project, or are new distribution facilities (including booster pumping facilities) proposed under this project? __Yes____ IF YES, COMPLETE PART VI.E BELOW.

Interconnections with Other Public Water Systems that Have Separate Water Supply Sources

29. Names of Existing Interconnected Public Water Systems and Purpose of Each Existing Interconnection: N/A

B. Proposed Altered/New Raw Water Sources and Collection Facilities (including raw water pumping facilities)

Ground Water Sources

1. Name of Treatment Plant to Be Supplied with Raw Water from Proposed Altered/New Wells:
   Plant Number 1
2. Name of Aquifer from Which Raw Water Will Be Withdrawn by Proposed Altered/New Wells:
   N/A
3. Existing and Proposed Altered/New Wells Supplying Raw Water to the Treatment Plant Named in Part VI.B.1 Above (attach additional sheets if necessary):

Well Location/Name/Number	Well Status (existing (not to be altered), proposed (altered or proposed (new))	Elevation of Top of Well Casing*	Well Yield*	Pumping Water Level*	Type of Well Pump	Well Pump Capacity and Total Dynamic Head
Well 1	existing				turbine	450 gpm
Well 2	existing				turbine	450 gpm
Well 3	proposed	Well is	proposed	not	constructed	yet.
Total Capacity of Existing and Proposed Altered/New Wells (all wells in service): 1800 gpm = 1,080,000 gallons in 12 hour pumping day						
Total Capacity of Existing and Proposed Altered/New Wells When Largest Well is Out of Service: 950 gpd						

* *Provide this only for proposed altered/new wells.*

ATTACH PUMP AND SYSTEM HEAD CURVES FOR PROPOSED ALTERED/NEW WELLS.

4. Water Management District Construction Permit Number(s) (if applicable) for Proposed Altered/New Well(s): 204980.05
   Date(s) Permit(s) Issued:
5. ATTACH A COPY OF THE LOG COMPLETION REPORT (if applicable) FOR EACH PROPOSED ALTERED/NEW WELL. Not available yet.
6. ATTACH A MAP OF THE AREA WITHIN 500 FEET OF EACH PROPOSED ALTERED/NEW WELL INDICATING SANITARY HAZARDS.
7. ATTACH RESULTS OF LABORATORY ANALYSES OF RAW WATER FROM NEW GROUND WATER SOURCES (analyses shall be conducted for each applicable water quality standard in Part III of Chapter 62-550, Florida Administrative Code [F.A.C.], and for new sources in delineated areas, analyses shall be conducted pursuant to Rule 62-524.600, F.A.C.).

Submit the Samples

8. Standby Power Source for Well Pumps: diesel generator
   Well Pumps Connected, or Proposed to Be Connected, to Standby Power: Well No. 1 connected to stand by
9. 100-Year, or Highest Known, Flood Elevation in Area of Wells: The area not subject to 100 year flood

Surface Water Sources N/A

10. Name of Treatment Plant to Be Supplied with Raw Water from Proposed Altered/New Facilities:
11. Name of Surface Water from Which Raw Water Will Be Withdrawn by Proposed Altered/New Facilities:

12. Estimated Dry-Weather Flow at Surface Water Intake and Basis of Estimate:

13. Description of Existing and Proposed Altered/New Diverting Dams, Impounding Reservoirs, Intake Structures, and/or Infiltration Galleries (attach additional sheets if necessary):

14. FOR A PROPOSED NEW OR RELOCATED SURFACE WATER INTAKE, ATTACH A DESCRIPTION AND MAP OF THE WATERSHED AREA ABOVE THE INTAKE INDICATING SANITARY HAZARDS.
15. ATTACH RESULTS OF LABORATORY ANALYSES OF RAW WATER FROM NEW SURFACE WATER SOURCES (analyses shall be conducted for each applicable water quality standard in Part III of Chapter 62-550, Florida Administrative Code).
16. Existing and Proposed Altered/New Raw Surface Water Pumps for the Treatment Plant Named in Part VI.B.9 Above (attach additional sheets if necessary):

Pump Name(s)/Number(s)	Pump Status (existing (not to be altered), proposed altered, or proposed new)	Type of Pump	Capacity and Total Dynamic Head for Each Pump
Total Capacity of Existing and Proposed Altered/New Pumps When Largest Pump Is Out of Service:			

* *ATTACH PUMP AND SYSTEM HEAD CURVES FOR PROPOSED ALTERED/NEW PUMPS.*

17. Standby Power Source for Raw Surface Water Pumps_____;
Raw Surface Water Pumps Connected, or Proposed to Be Connected, to Standby Power:

18. 100-Year, or Highest Known, Flood Elevation in Area of Intake:

C. Proposed Altered/New Treatment Facilities (including in-plant and finished water pumping facilities)

1. Name of Proposed Altered/New Treatment Plant:
   Placid Lakes Utilities
2. Previous Construction Permit Number(s) for Plant: **PWS-6280273**
   Date(s) Permit(s) Issued: _____
3. Design/Projected Annual Average Day Water Demand for Plant and Basis of Design/Projection:
   2480 connections x 2.3 people/connections x 100 gal/person = 552,000 gpd
4. Design/Projected Maximum Day Water Demand for Plant and Basis of Design/Projection:
   1,104,000 gpd = 522 x 000 x 2

5. Design/Projected Maximum Hour Water Demand and Design/Projected Fire Demand Plus Coincident Draft for Plant and Basis of Design/Projections (provide this only if increased treatment capacity will be provided in lieu of sufficient finished water storage volume to meet peak water demands):
6. Design Daily Operating Period for Plant: _____**24 hours**_____;
   Design Daily Operating Period for Finished Water Pumping Facilities: ___**24 hours**_____
7. Design Peak Sustained Operating Flow Through Plant: **800 gpm x 3 = 2400 gpm (three 40 hp high service pumps)**
8. ATTACH RESULTS OF LABORATORY ANALYSES OF RAW WATER FOR THE PLANT (analyses shall be conducted for each applicable water quality standard in Part III of Chapter 62-550, Florida Administrative Code). **Not done yet**

9. ATTACH A FLOW DIAGRAM SHOWING ALL EXISTING AND PROPOSED ALTERED/NEW TREATMENT PROCESSES (including waste handling processes), CHEMICAL APPLICATION POINTS, PUMPING FACILITIES, AND TREATMENT BYPASS ARRANGEMENTS FOR THE PLANT. **See attached plans**

10. ATTACH A SUMMARY OF DESIGN CRITERIA FOR EACH EXISTING OR PROPOSED ALTERED/NEW TREATMENT PROCESS (including waste handling processes) AND FOR EACH EXISTING OR PROPOSED ALTERED/NEW CHEMICAL TO BE APPLIED AT THE PLANT (design criteria should include basin capacities, retention times, unit loadings, surface loading rates, backwash rates, feeder capacities and ranges, etc.). **See attached plans**

11. Existing and Proposed Altered/New In-Plant and Finished Water Pumps (attach additional sheets if necessary):

Pump Function/Flow Stream Pumped:			
Pump Name(s)/Number(s)	Pump Status (existing [not to be altered], proposed altered, or proposed new)	Type of Pump	Capacity and Total Dynamic Head for Each Pump*
20 hp high service	existing to be removed	Peerless	400 gpm
20 hp high service	existing to be removed	Peerless	400 gpm
40 hp high service	existing to remain	Peerless	800 gpm
Total Capacity of Existing and Proposed Altered/New Pumps When Largest Pump is Out of Service: 800 gpm			

* *ATTACH PUMP AND SYSTEM HEAD CURVES FOR PROPOSED ALTERED/NEW PUMPS.*

Pump Function/Flow Stream Pumped:			
Pump Name(s)/Number(s)	Pump Status (existing [not to be altered], proposed altered, or proposed new)	Type of Pump	Capacity and Total Dynamic Head for Each Pump*
40 hp high service	proposed replacement for 20 hp	Peerless	800 gpm
40 hp high service	proposed replacement for 20 hp	Peerless	800 gpm
40 hp high service	existing	Peerless	800 gpm
Total Capacity of Existing and Proposed Altered/New Pumps When Largest Pump is Out of Service: 1600 gpm			

* *ATTACH PUMP AND SYSTEM HEAD CURVES FOR PROPOSED ALTERED/NEW PUMPS.*

Pump Function/Flow Stream Pumped:			
Pump Name(s)/Number(s)	Pump Status (existing [not to be altered], proposed altered, or proposed new)	Type of Pump	Capacity and Total Dynamic Head for Each Pump*
Total Capacity of Existing and Proposed Altered/New Pumps When Largest Pump is Out of Service:			

* *ATTACH PUMP AND SYSTEM HEAD CURVES FOR PROPOSED ALTERED/NEW PUMPS.*

12. Method of Disposal of Plant Wastes (Aluminum/Iron Coagulant or Lime Softening Sludge from Clarification, Waste Backwash Water from Filtration, and/or Waste Brine from Ion Exchange or Membrane Processes): **N/A**

13. Standby Power Source for Plant: **diesel generator**
Plant Equipment Connected, or Proposed to Be Connected, to Stand by Power: **all plant equipment plus well #1**

14. 100-Year, or Highest Known, Flood Elevation in Area of Plant: **Area not subject to 100 year flood.**

D. Proposed Altered/New Plant and Distribution System Finished Water Storage Facilities N/A

1. Existing and Proposed Altered/New Plant and Distribution System Finished Water Storage Facilities (attach additional sheets if necessary):

	Storage Facility Name/Location	Status (existing (not to be altered), proposed altered, or proposed new)	Type of Storage Facility (clearwell, hydropneumatic tank, ground level reservoir, standpipe, elevated tank, etc.)	Gross Volume of Storage Facility	Useful Volume of Storage Facility
	Crom concrete tank	existing	clear well	150,000 gal	150,000 gal
✓	Crom concrete tank	proposed	clear well	150,000 gal	150,000 gal
	Steel	existing	hydropneumatic	15,000 gal	12,000 gal
	Steel	existing	hydropneumatic	15,000 gal	12,000 gal
✓	Steel	proposed	hydropneumatic	15,000 gal	12,000 gal

Form No. 62-555.900(3)
Form Title: Instruction For a Public Drinking Water Facility Construction Permit
Effective Date: December 10, 1996
DEP Application No.: _____ (Filled in by DEP)

E. Proposed Altered/New Distribution Facilities (including booster pumping facilities)

Distribution Facilities

1. Design/Projected Annual Average and Maximum Day Water Demands for Proposed Altered/New Distribution Facilities (i.e., water mains) Under this Project:

A = Type of Unit	B = Number of Units	C = Population per Unit	D = Total Population (Columns B x C)	E = Per Capita Average Day Water Demand	F = Total Average Day Water Demand (Columns D x E)	G = Total Maximum Day Water Demand†
Single-Family Home	2400	2.3	5520	100	552,00	1,104,000
Mobile Home						
Apartment						
Commercial, Institutional, or Industrial Facility*						
Total						

* *Description of Commercial, Institutional, and Industrial Facilities and Explanation of Method Used to Estimate Average Day Water Demand for These Facilities:*
2400 x 2.3 x 100 = 552,000

† *Explanation of Method Used to Estimate Maximum Day Water Demand:*
552,000 x 2 peak factor = 1,104,000 gpd

2. Design/Projected Maximum Hour Water Demand for Proposed Altered/New Distribution Facilities Under this Project and Basis of Design/Projection:
552,000 ÷ 24 x 3 p.f. = 69,000 gph
Design/Projected Fire Demand Plus Coincident Draft (usually maximum day water demand) for Proposed Altered/New Distribution Facilities Under this Project and Basis of Design/Projection:

3. Operating Pressure Range for Proposed Altered/New Distribution Facilities Under this Project: _____
30 to 60 psi

4. Will any proposed altered/new distribution facilities under this project be installed in areas where there is existing documented evidence that the ground water is contaminated by organic compounds? __no_____ If yes, describe the nature and extent of such areas: _____

5. Will any proposed altered/new distribution facilities under this project connect previously separate public water systems that have separate water supply sources? __no_____ If yes, provide the names of the systems proposed to be interconnected and explain the purpose of each proposed interconnection: _____

6. Will the proposed altered/new distribution facilities under this project be part of a community water system or a public water system that has a service area also served by a reclaimed water system? ___no____ If yes, document that the system has a routine cross-connection control plan, including a written plan, in accordance with Rule 62-555.360, F.A.C.: _____

Booster Pumping Facilities N/A

7. Name/Location of Proposed Altered/New Booster Pumping Station: _____

8. Design/Projected Annual Average and Maximum Day Water Demands for Booster Pumping Station:

A = Type of Unit	B = Number of Units	C = Population per Unit	D = Total Population (Columns B x C)	E = Per Capita Average Day Water Demand	F = Total Average Day Water Demand (Columns D x E)	G = Total Maximum Day Water Demand†
Single-Family Home						
Mobile Home						
Apartment						
Commercial, Institutional, or Industrial Facility*						
Total						

* *Description of Commercial, Institutional, and Industrial Facilities and Explanation of Method Used to Estimate Average Day Water Demand for These Facilities:* _____

† *Explanation of Method Used to Estimate Maximum Day Water Demand:* _____

9. Design/Projected Maximum Hour Water Demand and Design/Projected Fire Demand Plus Coincident Draft (usually maximum day water demand) for Booster Pumping Station and Basis of Design/Projections (provide this only if increased pumping capacity will be provided in lieu of sufficient finished water storage volume to meet peak water demands): _____

10. Existing and Proposed Altered/New Pumps at Booster Pumping Station (attach additional sheets if necessary):

Pump Name(s)/Number(s)	Pump Status (existing [not to be altered], proposed altered, or proposed new)	Type of Pump*	Capacity and Total Dynamic Head for Each Pump*
Total Capacity of Existing and Proposed Altered/New Pumps When Largest Pump Is Out of Service:			

* *ATTACH PUMP AND SYSTEM HEAD CURVES FOR PROPOSED ALTERED/NEW PUMPS.*

11. Standby Power Source for Booster Pumping Station: _____;
Pumps Connected, or Proposed to Be Connected, to Standby Power: _____

12. 100-Year, or Highest Known, Flood Elevation in Area of Booster Pumping Station: _____

PERMIT ROUTING SHEET

Date September 25, 1996 Co. Highlands-F

PLEASE INITIAL By O. J. ONI Placid Lakes Utilities Wat

292790 Treatment Plant Expansion

ENFORCEMENT
( ) No problems.
( ) Under Enforcement - return to Permitting.

9/26/96 CLERICAL
(✓) Type cover letter, permit and "conditions of permit."
Type following envelopes:
( ) Tallahassee
(✓) Applicant
(✓) Engineer
( ) Local Program
( ) Co. Health Dept.
( ) Co. Commission
( ) Fla. Public Service Comm.
( ) Other
( ) Make new file folder for this project.
( )

DISTRICT MANAGER
Check, sign permit and cover letter. If any problems, return to permitting.

PERMITTING
( ) A OK
( )

9/27 CLERICAL
(✓) Make 2 Xerox copies of cover letter, permit, permit conditions, and
( ) make ____ Xerox copies of Sampling schedule for each package below.
(✓) Group package for ~~Applicant~~; original cover letter, permit, permit conditions and one copy of application.
(✓) Group package for Engineer; 1 copy of cover letter, permit, permit conditions and application.
( ) Group package for Local Program; 1 copy of cover ~~letter, permit, permit conditions and application.~~
(✓) Group office copies of permit, cover letter, permit conditions, application, plans and specifications.
Group packages of 1 copy of cover letter, permit and permit conditions for:
( ) County Health Dept.
( ) County Commission
( ) Fla. Public Service Commission
( )
( )
( )

CLERICAL - Mail each package to respective party:

( ) (Tallahassee)	( ) County Health Dept.
(✓) Applicant	( ) County Commission
(✓) Engineer	( ) Fla. Public Service Commission
( ) Local Program	
(✓) OFFICE PACKAGE	( ) Other

CERTIFICATION

Application No. WC28-292790

Placid Lakes Utilities Water Treatment Plant Expansion

I HEREBY CERTIFY that the engineering features described in the above referenced application provide reasonable assurance of compliance with applicable provisions of Chapter 403, Florida Statutes, and Florida Administrative Code Title 62. However, I have not evaluated and I do not certify aspects of the proposal outside of my area of expertise (including, but not limited to, the electrical, mechanical, structural, hydrological, and geological features).

Mary A. Maier

(Signed)

Sept. 26, 1996

(Date)

(Seal)

PLACID LAKES UTILITIES, INC.

Docket No.: 130025-WU

Highlands County

25-30.440 (10)
CUSTOMER COMPLAINTS

Test Year Ended December 31, 2012

SCHEDULE VII

WORK ORDER

January 2012

DATE	ORD #	ACCT. #	NAME	ADDRESS	PROBLEM	ACTION TAKEN	CORRECT	INITIALS
1/3	16413	5813	Herbert Norman	145 Citrus Rd NE	Black Stuff in water	Flushed line	1/4	BP
1/3	16668	5469	William Sinnott IV	246 Boston Way	Sediment in water	Flushed line	1/4	BP
1/4	16415	81366	Sergio Zamarripa	561-563 Vanguard Ave NW	High usage-test meter and look for signs of a leak	Meter tested good, no signs of a leak	1/5	BP
1/9	16416	5320	Lingle/Allen	441 Keos Ave NE	Turn water on	Turned water on	1/10	JD
1/9	16669	81527	Taquetta Davis	107 Van Allen Ave NW	Tenant moving out, read meter and turn water off	Read meter and turned water off	1/11	JD, BJ
1/9	16670	81414	Terry Henson	1912 Washington Blvd NW	Tenant moved out, read meter and turn water off	Read meter and turned water off	1/10	JD,BJ
1/10	16417	1891	Violet Davis	227 Cumquat Rd NE	H in reading	Replaced meter	1/12	JD, BJ
1/10	16418	5471	Larry Risk	218 Cumquat Rd NE	H in reading	Replaced meter	1/12	JD, BJ
1/10	16419	81347	Brandi Bennette	604 Jupiter Ave NW	Meter tested bad	Replaced meter	1/12	JD, BJ
1/10	16420	5620	Dahlia Abreu	828 Grissom Rd NW	H in reading	Replaced meter	1/12	JD, BJ
1/10	16421	4293	Joanne Slayton	112 Grant Ave NE	H in reading	Replaced meter	1/12	JD, BJ
1/10	16422	4238	Kevin Whitney	220 Captiva Way NE	H in reading	Replaced meter	1/12	JD, BJ
1/10	16423	1634	Irvin Barber	264 Cumquat Rd NE	Have Nathan call him	Nathan called and talked to him	1/10	JD
1/11	16426	5725	Leigh Ann Giacin	374 East Canal Way NE	High usage - test meter and look for signs of a leak	Meter tested good, no signs of a leak	1/11	JD
1/11	16671	3681	Ken Langley	266 Cumquat Rd NW	High usage - reread meter, test meter and look for signs of a leak	Meter was misread	1/12	JD,BJ
1/12	16672	5471	Larry Risk	218 Cumquat Rd NE	House was sold, read meter and turn water off	Read meter and turned water off	1/12	JD,BJ
1/12	16673	3040	Ruth McKenzie	264 Cumquat Rd NW	High usage - reread meter, test meter and look for signs of a leak	Meter tested good, customer has a possible small leak	1/17	JD,BJ

1/12	16674	299	Sharion Hudson	490 Briar Glen Rd	High usage - test meter and look for signs of a leak	Meter tested good, no signs of a leak	1/17	JD,BJ
1/13	16675	308	W&S Ellis	225 East Canal Way NE	High usage - reread meter, test meter and look for signs of a leak	Meter tested good, no signs of a leak	1/17	JD,BJ
1/13	16676	3995	Paul Sydenstricker	112 Lemon Rd NW	High usage - reread meter, test meter and look for signs of a leak	Meter tested bad	1/17	JD
1/13	16677	81464	Miracle Redden	573 Vanguard Ave NW	Tenant moved out, read meter and turn water off	Read meter and turned water off	1/17	JD
1/13	16679	1463	Robert Walker	216 Crosby Ave NW	High usage - reread meter, test meter and look for signs of a leak	Meter tested bad	1/17	JD
1/13	16680	2559	Aurelio Salgado	257 Grape Rd NW	High usage - test meter and look for signs of a leak	Meter tested good, small leak	1/17	JD
1/17	16682	5434	Michelle Perry	266 Lemon Rd NW	High usage - reread meter, test meter and look for signs of a leak	Meter tested good, no signs of a leak	1/18	JD,BJ
1/18	16427	5684	Alberto Quesada	1144 Washington Blvd NE	Tenant moving out, read meter and turn water off	Read meter and turned water off	1/18	JD,BJ
1/18	16702	3995	Paul Sydenstricker	112 Lemon Rd NW	Meter tested bad	Replaced meter	1/19	JD,BJ
1/18	16703	1463	Robert Walker	216 Crosby Ave NW	Meter tested bad	Replaced meter	1/19	JD,BJ
1/19	16705	80383	Alma Barragan	167 Wilson Way NE	Post office says she moved out and left no forwarding address turn water off	Turned water off	1/20	JD
1/20	16429	5729	Kasie Rosenberg	221 Spice Ave NE	Tenant moving out, read meter and turn water off	Read meter and turned water off	1/25	JD,BJ
1/26	16714	80118	M. Conley	121-123 Lincoln Rd NE	High usage - reread meter, test meter and look for signs of a leak	Meter tested bad	1/27	BP
1/27	16432	3061	Rosa Babich	340 E Waterway Ave NW	Black stuff in water	Flushed line	1/27	JD
1/30	16722	2690	Bruce Moyster	108 Kaiser Ave NW	House has been sold, turn wate off and read meter	Read meter and turned water off	1952/6242	BP

WORK ORDER

February 2012

DATE	ORD #	ACCT. #	NAME	ADDRESS	PROBLEM	ACTION TAKEN	CORRECT	INITIALS
2/1	16718	80118	M. Conley	121-123 Lincoln Rd NE	Meter tested bad	Replaced meter	2/6	BP
2/1	16726	80149	Campbell / Lingle	514 Washington Blvd NE	Tenant moving, shut water off and read meter	Turned water off and read meter	2/2	BP
2/2	16727	5469	William Sinnott	246 Boston Way	Owner passed away, turn water off and read meter	Turned water off and read meter	2/6	BP
2/2	16791	81293	Betty Armstead	110 Abel Rd NW	Tenant moving out, read meter and turn water off	read meter and turned water off	2/3	BP
2/3	16730	81507	Robert Pickering	131 Glenn Ave NW	Tenant moving out, read meter and turn water off	read meter and turned water off	2/6	BP
2/7	16735	5865	Leah and Milo Osceola	1007 Washington Blvd NW	Tenant moving out, read meter and turn water off	Read meter and turned water off	2/13	JD, BJ
2/9	16795	81490	Marisela Rodrigues	116 Abel Rd NW	Tenant moving out, read meter and turn water off	Read meter and turned water off	2/9	JD, BJ
2/10	16738	5527	Daniel Ellery	118 Easthampton Rd NE	Tenant moving out, read meter and turn water off	Read meter and turned water off	2/13	JD, BJ
2/10	16796	3605	Susan Compton	325 Johnson Ave NE	Realtor request water be turned back on to clean property	Turned water on	2/13	JD, BJ
2/10	16797	81077	Gilbert Randall	493 Washington Blvd NE	Mr. Randall said he has not owned this property for many months. Turn water off	Turned water off	2/13	JD, BJ
2/10	16798	4689	Howard Jones	537 Lake August Dr	High usage - check reading, test meter and look for signs of a leak	Meter tested good, no signs of a leak	2/13	JD, BJ
2/13	16740	2407	Alison Schiewe	423 Ronald Rd NW	H in reading	Replaced meter	4/12	JD
2/13	16741	4090	James Neylon	231 Cumquat Rd NE	H in reading	Replaced meter	3/15	JD
2/13	16742	2666	Terry Triggs	246 Cumquat Rd NE	H in reading	Replaced meter	3/15	JD
2/13	16743	5839	Tom Blades	101 Citrus Rd NE	H in reading	Replaced meter	3/15	JD
2/13	16744	2729	Steven Van Cedarfield	111 Orange Rd NE	H in reading	Replaced meter	3/15	JD

2/13	16746	4229	Linda Hodge	115 Kayla Ave	Meter needs new pad or wire	Replaced	4/11	JD
2/13	16749	282	Carl Day	4114 Placid Lakes Blvd	Valve is leaking in box	Replaced valve	4/11	JD
2/13	16799	3390	Robert Kretzschmar	1252 Washington Blvd NE	High usage - reread meter, test meter and look for signs of a leak	Meter tested good no signs of a leak	2/13	JD
2/14	16802	5867	John Hilleary	108 Starfruit Ave	Getting lime deposits on shower walls and doors	Flushed line	2/15	BP
2/15	16819	4227	Pamela Smith Amone	139 Loquat Rd NE	Bill came back saying no fowarding address, shut water off	Shut water off	2/16	BP
2/16	16820	5889	Barry Schaffer	107 Citrus Rd NE	Sand in water	Flushed line	2/17	BP
2/20	16761	2419	Karen Burns	339 Commanche St NW	Water has black stuff in it	Flushed line for 30 minutes	2/21	JD, BJ
2/20	16762	4320	Marie Williams	237 Tangerine Rd	Tenant moving out, read meter and turn water off	Read meter, water was already off	3/1	BP
2/20	16764	4451	John Webb	250 Cumquat Rd NW	Meter is not working properly	Meter tested bad - 8-5	2/20	JD, BJ
2/21	16765	80149	Lingle	514 Washington Blvd NE	Mrs. Lingle requested the water be turned on	Turned water on	2/21	JD
2/21	16766	80522	Sara Coughlan	381 Flamingo Rd NE	Owner requests that the water be turned on	Turned water on	2/21	JD, BJ
2/27	16771	5878	Vivian Benvenuto	524 Catfish Creek Rd	High usage - test meter and look for signs of a leak	Meter tested bad - 9-5	2/27	JD
2/27	16772	4451	John Webb	250 Cumquat Rd NW	Meter tested bad	Replaced meter	2/27	JD
2/27	16/25	5526	Maria Martinez	608 Coolidge Ave NE	Tenant moving, read meter	Read meter	2/28	JD
2/28	16776	363	Betty Kerpan	243 Sheppard Rd NW	Water in the meter	Valve needs to be replaced	2/28	JD
2/28	16778	5792	Eric Guiher	124 Gates Ave	Tenant moved out, read meter and turn water off	Read meter and turned water off	2/28	JD
2/29	16782	363	Betty Kerpan	243 Sheppard Rd NW	Valve is bad on the meter	Replaced valve	2/29	JD

WORK ORDERS

March 2012

DATE	ORD #	ACCT. #	NAME	ADDRESS	PROBLEM	ACTION TAKEN	CORRECT	INITIALS
3/1	16785	5878	Vivian Benvenuto	524 Catfish Creek Rd	Meter tested bad	Replaced meter	3/8	JD
3/1	16825	5877	David Scott	351 Chicago Way NE	Renter moving out, read meter and turn water off	Read meter and turned water off	3/2	NB
3/2	16787	2921	Angela Moore	323 Buccaneer St NW	New renter moving in, turn water on	Turned water on	3/2	NB
3/2	16788	5681	Samantha Dunn	104 Anna Maria Ct NE	Renter moving out, read meter and turn water off	Read meter and turned water off	3/16	JD
3/5	16754	2334	D. Hambleton	620 Grissom Rd NW	House has been sold - read meter and turn water off	Read meter and turned water off	3/9	JD
3/5	16755	5810	John Fureigh	8736 Placid Lakes Blvd	Renter moving out, read meter and turn water off	Read meter and turned water off	3/5	JD
3/6	16827	N/A	Vacant	332 Coolidge Ave NE	Water usage at a house that should be vacant and meter is turned off	Meter is off, hose bib on side of house is broken. Looks like someone cleaned around yard and house. Still vacant	3/7	JD
3/6	16828	N/A	Vacant	213 Hoover Ave NE	Wate usage at a house that should be vacant and meter is turned off	House is still vacant, meter is off	3/7	JD
3/6	16830	N/A	Vacant	621 Starfruit Ave	Water usage at a house that should be vacant and meter is turned off	Meter was on, we turned it off. House is vacant	3/7	JD
3/6	16831	N/A	Vacant	110 Atlas Ct NW	Water usage at a house that should be vacant and meter is turned off	House is vacant	3/7	JD
3/6	16832	N/A	Vacant	108 Atlas Ct NW	Water usage at a house that should be vacant and meter is turned off	House is vacant	3/7	JD
3/6	16833	N/A	Vacant	253 Thurman Ave	Water usage at a house that should be vacant and meter is turned off	House is vacant	3/7	JD

3/6	16834	81238	Barbara Piar	257 Cumquat Rd NW	Renter moving out, read meter and turn water off	Read meter and turned water off	3/7	JD
3/6	16758	5934	Joe Iglesias	103 Ronald Rd NW	High usage - reread meter	Meter was read incorrectly	3/7	JD
3/6	16903	5832	Marisol Fernandez	750 Placid Lakes Blvd	Renter moving out, read meter and turn water off	Read meter and turned water off	3/7	JD
3/8	16862	4881	Elba Lopez	127 Cumquat Rd NW	H in reading	Replaced meter	4/12	JD
3/8	16864	2422	John Huber	270 Cumquat Rd NE	H in reading	Replaced meter	3/15	JD
3/8	16865	5943	Charles Reynolds	123 Lemon Rd NE	H in reading	Replaced meter	3/15	JD
3/8	16866	1109	Henry Pemberton	136 Lime Rd NE	H in reading	Replaced meter	3/15	JD
3/8	16867	4467	Anthony Wisnom	117 Orange Rd NE	H in reading	Replaced meter	3/15	JD
3/8	16868	115	Edward Elliott	209 Lakerim Court	H in reading	Replaced meter	3/15	JD
3/8	16869	5850	Cory Varnum	443 Foxdale Rd	H in reading	Replaced meter	3/15	JD
3/8	16870	2860	Bruce Howell	103 Kayla Ave	H in reading	Replaced meter	3/15	JD
3/8	16905	5534	Francis Maloney	1351 Washington Blvd NW	H in reading	Replaced meter	4/12	JD
3/9	16838	80383	Alma Barragan	167 Wilson Way NE	Owner would like water turned on	Turned water on	3/12	JD
3/9	16877	4885	At Placid Lakes Storage	200 Columbia St NW	Owner wants water turned on	Turned water on	3/9	JD
3/13	16842	3356	George Hill	114 Lakefront Ct NE	Automatic flush is making a hole in his yard	Added 45 degrees, water goes into catch basin	3/13	JD
3/13	16843	81506	Shannon Downing	375 Flamingo Rd NE	New renter, turn water on and read meter	Turned water on and read meter	3/13	JD
3/13	16841	81238	Barbara Piar	257 Cumquat Rd NW	New tenant moving in, turn water on	Turned wate on	3/13	JD
3/13	16880	5529	Pat Stoker	100 Boeing St NW	High usage - reread meter, test meter and look for signs of a leak	Meter tested bad	3/13	JD

3/14	16855	3717	Janet South	251 Baltimore Way NE	Check to make sure water is off all the way	Meter was on	3/14	JD
3/14	16856	5904	Amanda Wilson	357 Chicago Way NE	Tenant moving out, read meter	Read meter	3/15	JD
3/14	16882	4759	George Filip	209 Fiji Way NE	Owner moving - read meter and turn water off	Read meter and turned water off	4/2	JD
3/14	16883	81195	Julie Adams	116 Barbara Ave NW	New owner - turn water on	Turned water on	3/14	JD
3/19	16886	5711	John Free	126 Sheppard Rd NW	Tenant moving out - read meter and turn water off	Read meter and turned water off	3/19	JD
3/19	16887	5529	Pat Stoker	100 Boeing St NW	Meter tested bad	Replaced meter	3/19	JD
3/19	16888	2980	Jean Parrish	325 E Waterway Ave NW	Owner wants water turned on	Turned water on	3/19	JD
3/20	16890	4227	Pamela Smith Amone	139 Loquat Rd NE	Owner wants water turned on	Turned water on	3/21	JD
3/20	16891	4980	Dave Billitier	217 Catfish Creek Rd	Owner wants water turned on	Water was already on, backflow is leaking	3/21	JD
3/21	16893	4926	Melvin Mayo	113 Sheppard Rd NW	Moving out, shut water off	Turned water off	3/21	JD
3/21	16894	99055	Victor Vegara	2004 Placid Lakes Blvd	High usage - reread meter, test meter and look for signs of a leak	Meter tested good, no signs of a leak	3/21	JD
3/22	16897	3987	Alan Wade	133 Lemon Rd NW	Black stuff in the water	Flushed line for 20 minutes	3/23	JD
3/23	16857	1199	Lee Begley	508 Catfish Creek Rd	Turn water on	Turned water on	3/23	JD
3/26	16901	5770	Elberta Quam	105 Circle Ct NE	Having work done to house, turn water off before 8 AM	Turned water off	3/29	JD
3/27	16858	1199	Lee Begley	508 Catfish Creek Rd	Turn water off	Turned water off	3/27	JD
3/27	16907	4451	John Webb	250 Cumquat Rd NW	Leaving for summer, turn water off	Turned water off	3/29	JD
3/28	16911	5757	Gwendolyn Southworth	126 Tangerine Rd	Leaving for summer, turn water off	Turned water off	4/2	JD
3/28	16912	3798	David Krista	500 Catfish Creek Rd	Customer requests the water be turned off	Turned water off	3/29	JD

WORK ORDERS

April 2012

DATE	ORD #	ACCT. #	NAME	ADDRESS	PROBLEM	ACTION TAKEN	CORRECT	INITIALS
4/1	16915	4926	Melvin Mayo	113 Sheppard Rd NW	Customer requests that water be turned on	Turned water on	4/2	NB
4/2	16861	3202	Jose Rios	1407 Washington Blvd NE	Renter moved out, turn water on and read meter and put back in owners name	Read meter and turned water on	4/2	BP
4/2	16988	5468	Remax Realty Plus	105 Grapefruit Ave NW	Realtor wants house read out of their name and water shut off	Read meter and turned water off	4/2	BP
4/3	16916	5817	Alisha Lowder	257 Sheppard Rd NW	Renter moved out, red meter and turn water off	Read meter and turned water off	4/3	BP
4/3	16919	2417	Richard Philpot	309 W. Waterway Ave NW	Owner requests that water be turned back on	Turned water on	4/4	BP
4/5	16920	4271	Charles Wendorff	317 Ronald Rd NW	Customer says the meter cover is loose	Repaired meter cover	4/12	JD
4/5	16989	2401	Lingle / Delgado	258 Wildcat St NW	High usage - test meter, and look for signs of a leak	Meter tested good, no signs of a leak	4/9	JD
4/9	16921	1137	Remax Realty	608 Archie Summers Rd	House has been sold, turn water off and read meter	Turned water off and read meter	4/11	JD
4/10	16922	5795	Frances Cardenas	259 Cumquat Rd NW	Renter moved out, read meter	Read meter	4/10	JD
4/10	16923	5739	Barbara Courtney	232 Cumquat Rd NE	H in reading	Replaced meter	4/12	JD
4/10	16924	3140	Leroy Medendorp	346 Anderson St NE	H in reading	Replaced meter	4/12	JD
4/10	16925	61	K. Nichol Degler	118 Orange Rd NE	H in reading	Replaced meter	4/12	JD
4/10	16926	2838	Roger Warrick	125 Fox Ridge Rd	H in reading	Replaced meter	4/11	JD
4/10	16927	3482	Kenneth Zimmerman	108 Lime Rd NW	H in reading	Replaced meter	4/12	JD
4/10	16928	3599	Janell Schmidt	331 Anderson St NE	H in reading	Replaced meter	4/12	JD
4/10	16930	5957	Marioli Gil	111 Loquat Rd NW	H in reading	Replaced meter	4/12	JD
4/10	16931	3456	Scott Daisey	627 Starfruit Ave	H in reading	Replaced meter	4/12	JD

4/10	16932	4972	Darlene Conner	213 Devon Way NE	H in reading	Replaced meter	4/12	JD
4/10	16933	5322	Judith Lange	114 Lincoln Rd NW	H in reading	Replaced meter	4/12	JD
4/11	16934	1206	Shirley Wilkins	364 Lime Rd NW	Customer leaving for summer, shut water off	Turned water off	4/12	JD
4/12	16936	81530	Coldwell Banker	130 Grape Rd NW	House sold, shut water off and read meter	Turned water off and read meter	4/13	JD
4/12	17010	2490	Robert Knight	104 Grape Rd NW	High usage - reread meter, test meter and look for signs of a leak	Meter tested bad 6-5	4/12	JD
4/12	17011	3376	Larry Smith	240 Grape Rd NW	High usage - test meter and look for signs of a leak	Customer has a small leak	4/12	JD
4/12	17012	81068	Tom Lacy	109 Club Rd NW	Customer is leaving for the summer, turn water off	Turned water off	4/16	JD
4/13	17013	5148	Fred Kinsler	102 Tangerine Rd	Customer is leaving for the summer, turn water off	Turned water off	4/16	JD
4/13	17014	5926	Gary Leach	734 Starfruit Ave	Customer is leaving for the summer, turn water off	Turned water off	4/25	JD
4/16	16937	5930	Dale Willard	319 Fox Ridge Rd	Renter moving out, read meter	Read meter	4/16	JD
4/16	16938	4759	George Filip	209 Fiji Way NE	Owner requests that the water be turned on	Turned water on	4/16	JD
4/17	16942	5966	Leslie Thompson	351 Chicago Way NE	Customer is leaving for the summer, turn water off	Turned water off	4/20	JD
4/17	16945	5905	Cheryl Brantley	965 Mustang Ave NW	House sold, read meter	Read meter	4/18	JD
4/17	16946	5718	Shane Fugate	262 Lemon Rd NW	Water coming out of meter	Replaced rubber gaskets	4/17	JD
4/18	16947	3223	Ed Layher	356 Chicago Way NE	Customer leaving for summer, turn water off	Turned water off	4/20	JD
4/19	16949	1199	Betty Grogg	508 Catfish Creek Rd	Customer moving, turn water off and read meter	Turned water off and read meter	4/20	JD
4/19	16950	5806	Britnie Sawyers	636 Placid Lakes Blvd	Renter moving out, read meter and turn water off	Read meter and turned water off	4/24	JD

4/20	16951	81485	Eric Silsby	621 Washington Blvd NW	Turn water back on	Turned water back on	4/20	JD
4/24	16957	5607	Charles Finn	119 Citrrus Rd NE	Customer leaving for summer turn water off	Turned water off	4/25	JD
4/26	16959	81394	Emeris Chapelin	188 Wilson Way NE	High usage - test meter and look for signs of a leak	Customer has a leak	4/26	JD
4/27	16960	1734	A. Mullens	116 Club Rd NW	House has been sold, turn wate off and read meter	Turned water off and read meter	4/30	JD
4/27	16961	4802	Vicky Spires	559 Garfield Ave NE	Customer moved out, read meter and turn water off	Read meter and turned water off	4/30	JD
4/30	16962	2095	Evelyn Drewry	256 Cumquat Rd NE	Sold home, read meter	Read meter	4/30	JD
4/30	16963	81507	Robert Pickering	301 Jupiter Ave NW	Renter moved out, read meter	Read meter	4/30	JD

WORK ORDERS

May 2012

DATE	ORD #	ACCT. #	NAME	ADDRESS	PROBLEM	ACTION TAKEN	CORRECT	INITIALS
4/30	16964	163	Kevin Nalley	235 Lime Rd NW	Customer leaving for summer, shout water off	Turned water off	5/1	JD
5/1	16966	5974	Tom Hoekenga	253 Thurman Ave	Customer leaving for summer, shout water off	Turned water off and read meter	5/1	JD
5/2	16968	5614	Martha Lee	350 Humphrey Ave	Flush Line	Flush Line	5/3	JD
5/3	16971	2758	Merlene Mclean	140 Citrus Rd NE	Customer sold home, read out meter	Read meter	5/4	JD
5/4	16970	5549	Roger McNeely	119 Murray Ct	Customer sold home, read out meter	Read meter	5/4	JD
5/7	16972			105 Grapefruit Ave NW	Turn on	Turned water on	5/7	JD
5/8	16974	81528	Douglas Mccray	608 Jupiter Ave NW	Put back in owners name, read out meter	Read meter	5/8	JD
5/14	17073	3341	Gerald Turianski	128 Gates Ave	Customer said their usage is higher	Checked meter no signs of lea no spin	5/14	NB
5/14	16976	5879	Rebecca Musgrave	729 catfish Creek Rd	H in reading	New Meter #	ASAP	JD
5/14	16977	3451	Edward Fabik	221 Lakerim Ct	H in reading	New Meter #	ASAP	JD
5/14	16978	4210	Dallas Pardoe	481 Archie Summers Rd	H in reading	New Meter #	ASAP	JD
5/14	16980	4900	Robert Brown	140 Loquat Rd NE	H in reading	New Meter #	ASAP	JD
5/14	16981	3235	Raymond Collings	112 Lime Rd NE	H in reading	New Meter #	ASAP	JD
5/14	16982	5801	Joann Denkhaus	904 Catfish Creek Rd	H in reading	New Meter #	ASAP	JD
5/14	16983	3897	Marlene Larock	427 Lake August Dr	H in reading	New Meter #	ASAP	JD
5/14	16984	5934	Joe Igiesias	103 Ronald Rd NW	H in reading	New Meter #	ASAP	JD
5/14	16986	81169	Largo Mar Ventures	6495 Placid Lakes Blvd	H in reading	New Meter #	ASAP	JD
5/14	17070	3355	Kari Siklo	123 Gates Ave	H in reading	New Meter #	ASAP	JD
5/14	16985	4271	Charles Wendorff	317 Ronald Rd NW	H in reading	New Meter #	ASAP	JD

5/14	170[illegible]	3825	Meissa Waters	323 Anderson St NE	High Usage, test meter, signs of leak	No spin, test meter ok 5 for 5	5/15	NB
5/14	17225	5971	Daniella Taylor	8736 Placid Lakes Blvd	High Usage, test meter, signs of leak	No spin, test meter ok 5 for 5	5/15	NB
5/15	17228	3868	Winston Nees	3859 Placid View Dr	High Usage, test meter, signs of leak	No spin, test meter ok 5 for 5	5/15	NB
5/15	17226	3859	Larry Wildt	230 Fox Ridge Rd	High Usage, test meter, signs of leak	Small Leak, No one home	5/15	NB
5/15	17229	81172	Lingle/Calderon	516 Washington Blvd NE	High Usage, test meter, signs of leak	Spinning, Small Leak, No one home	5/16	NB
5/16	17079	81104	George Shuller	608 Jupiter Ave NW	Read meter	Read out meter	5/16	JD,BJ
5/16	17083	1734	A. Mullens	116 Club Rd NW	New Owners, Read Meter	Read out meter	5/16	JD,BJ
5/16	17254	5880	Lisa Goodwin	117 Sheppard Rd NW	Shut Water Off, Read Meter	Turned off water, Read out Me	5/17	JD,BJ
5/17	17257	5866	Kathy Denny	239 Catfish Creek Rd	High Usage, test meter, signs of leak	No spin, test meter ok 5 for 5	5/17	NB
5/17	17259	3341	Gerald Turiaski	128 Gates Ave	High Usage, test meter, signs of leak	No spin, test meter ok 5 for 5	5/18	NB
5/17	17258	4007	Peter Injasoulian	101 Commanche St NW	Shut water off for summer	Turned water off	5/21	NB
5/18	17078	81556	Darius Longwell	474 Humphery Ave	Put back in owners name, Shut water off, Read Meter	Turned water off, Read out meter	5/22	JD,BJ
5/18	17084	4263	Michael Mazzeo	126 Cumquat Rd NW	Usage Low	Test meter ok 5 for 5	5/18	JD
5/18	17077	5785	Barbara Smith	270 Tangerine Rd	High Usage	Meter Test Good	5/18	JD
5/18	17076	81005	Julia Hidalgo	435 Flamingo Rd NE	Turn on Water	Turned water on	5/21	JD
5/21	17088			151 Wilson Way NE	Turn on water	Turned water on	5/21	NB
5/21	17260	81436	Theresa Baker	4115 Placid Lakes Blvd	Turn on water	Turned water on	5/21	BP
5/21	17021	5182	Daisy Wiggins	102 Anna Maria Ct NE	Shut water off, read meter	Turned water off read out mete	5/21	BP
5/25	17263	81484	Mary Schuessler	104 Cub Rd NW	Read Meter	Read out Meter	5/31	JD
5/24	17262	3859	Larry Wildt	230 Fox Ridge Rd	Shut off Water	Turned water off	5/24	JD

WORK ORDERS

June 2012

DATE	ORD #	ACCT. #	NAME	ADDRESS	PROBLEM	ACTION TAKEN	CORRECT	INITIALS
5/17	17074	2088	Lois Roy	115 Loquat Rd NE	Shut off water vacation	Turned water off	6/1	JD
5/29	17091	3996	Robert Jones	125 Vera Lane NW	Shut off water vacation	Turned water off	6/4	JD
5/30	17095	81484	Mary Schuessler	104 Club Rd NW	Read Meter moved out	Read Meter	6/1	JD
6/4	17267	81401	Yirisi Matos	626 Lake Groves Rd NW	Read meter moved out	Read Meter	6/4	JD
6/4	17103	5087	Steven Bair	453 Roosevelt Ave NE	Test check Meter	Check Mis Read	6/4	NB
6/4	17100	3669	Carlos Rodriguez	1001 Washington Blvd NW	Raise Meter	Repaired Meter	6/4	NB
6/4	17102	66	Elizabeth Vargo	109 Orange Rd NE	Turn On	Turned on water	6/11	JD
6/5	17105	81463	Elsie Espinoza	577 Vanguard Ave NW	Shut Off read meter	Turned water read meter out	6/5	NB
6/6	17268	3987	Alan Wade	133 Lemon Rd NW	Flush Line	Flushed Line	6/6	JD
6/6	17107			140 Citrus Rd NE	Turn on read meter	Turn on water read meter	6/6	NB
6/6	17108	5549	Roger McNeely	119 Murray Ct NW	Turn on read meter	Turn on water read meter	6/6	JD
6/6	17109	5564	Scott Canaday	109 Fig Rd NW	Read Meter moved out	Read meter	6/7	JD
6/8	17113	80300	Mytara McCray	149 Wilson Way NE	High Usage	Tested Meter good 5 for 5	6/8	JD,BJ
6/8	17112	5894	Nick Moore	125 Cumquat Rd Nw	Shut off Read Meter	Turned Off water read meter o	6/11	JD
6/8	17111	5664	Debbie Heston	114 Kings Ct NW	Shut off Read Meter	Turned Off water read meter o	6/29	JD
6/11	17115	5676	Joy Bogaert	314 Wildcat St NW	High Usage	Tested Meter good 5 for 5	6/11	JD
6/11	17114	1989	James Kissinger	114 Walker Ave NE	High Usage	Tested Meter good 5 for 5	6/11	JD
6/11	17122	3316	O Simons	254 Cumquat Rd NE	Check meter leaks	No Spin Tested meter ok	6/11	NB
6/11	17117	1132	Frank Klackle	119 Lime Rd NE	H in reading	New Meter #	6/26	JD
6/11	17121	5169	Rafael Ruiz	324 Roosevelt Ave NE	H in reading	New Meter #	6/26	JD
6/11	17118	3244	William Shergalis	114 Lime Rd NE	H in reading	New Meter #	6/26	JD
6/11	17116	3708	Adalbert Mass	121 Bougainvillea St NE	H in reading	New Meter #	6/26	JD

6/11	17...	80272	Richard Mortell	239-241 Lincoln Rd NE	H ... reading	New Meter #	6/26	JD
6/11	17270	81469	Richard Frye	141 Wilson Way NE	H in reading	New Meter #	6/26	JD
6/12	17272	5950	Stephan Kane	475 Roosevelt Ave NE	Shut Off Read Meter	Turned off water read meter ou	6/12	JD
6/12	17275	5313	Mark Bartlelt	102 Bokeelia Ct NE	Shut off read meter	Turned off water read meter ou	6/18	NB
6/12	17124	2417	Richard Philpot	309 West Waterway Ave NV	Sold Home, read meter	Read meter out	6/13	NB
6/13	17031	1773	Richard Koderhandt	152 Citrus Rd NE	Brown Stuff in water, Flush	Flushed water	6/13	JD
6/13	17032	81532	Midflorida	112 Lake Front Ct NE	Shut off read meter	Turned off water read meter ou	6/14	BJ
6/14	17029	66	Elizabeth Vargo	109 Orange Rd NE	Shut off vacation read meter	Turned off water read meter ou	6/18	JD,BJ
6/15	17425	5836	Ana Fitzsimmons	133 Bougainvillea St NE	Shut off read meter	Turned off water read meter ou	6/18	JD,BJ
6/19	17426	81483	Resendo Gomez	116 Astro Ct	Shut off read meter	Turned off water read meter ou	6/19	JD
6/19	17430	3810	Kimberly Leatherman	435 Fox dale Rd	Check Meter leaks High usage	No leaks Tested meter good 5 for 5	6/19	JD
6/21	17278	3987	Alan Wade	133 Lemon Rd NW	Flush water	Flushed once already	6/21	NB
6/22	17434	81442	Ryan Ward	499 Washington Blvd NE	Shut off read meter	Turned off water read meter ou	6/25	JD,BJ
6/25	17435	81557	Jamie White	509 Washington Blvd NE	Shut off read meter	Turned off water read meter ou	6/25	JD
6/28	17439	81545	David Jackson	172 Wilson Way NE	Read Meter	Read meter out	6/28	JD,BJ

WORK ORDERS

July 2012

DATE	ORD #	ACCT. #	NAME	ADDRESS	PROBLEM	ACTION TAKEN	CORRECT	INITIALS
7/3	17445	4821	Jose Leon	255 Cumquat Rd NW	Shut off and read meter	Turned off water and read mete	7/3	JD
7/3	17450	5901	Connie Lopez	118 Club Rd NW	Moved Out	Read meter and turned water of	7/9	JD
7/3	17449	6011	Norman Dorminey	309 W Waterway Ave NW	Meter Box	Called customer	7/3	JD
7/5	17458	4979	Gernald Meisenheimer	283 Briar Lane	Check for leaks Test meter	Very Sm leak	7/6	NB
7/5	17453	2116	Howard Ticknor	115 Kings Ct NW	Shut off Vacation	Turned Water Off	7/6	NB
7/5	17452	81483	Resendo Gomez	116 Astro Ct	Moved Out	Read meter Turned on Water	7/6	NB
7/6	17459	3316	O. Simons	254 Cumquat Rd NE	Check Meter for leaks	No Spin Meter ok	7/6	JD
7/6	17456	3996	Robert Jones	125 Vera Lane NW	Turn on water	Turned on water	7/6	NB
7/6	17460	81435	Heartland N Bank	184 Wilson Way NE	New Tenant read meter	Read meter out	7/6	JD
7/6	17461	4763	Merle Goodrich	109 Fig Rd NW	New Tenants Read Meter	Read meter out	7/6	JD
7/6	17462	81554	Tamekia Howard	846 Placid Lakes Blvd	Moved Out	Read Meter out	7/6	JD
7/6	17463	4022	Gerald Buonavita	251 Grape Rd NW	Shut Off Vacation	Turned off water	7/9	JD
7/9	17467	5981	Jonathan Kurpa	110 Walker Ave NE	Meter box leaking	Talk to Customer Checked met	7/10	JD
7/10	17470	612	Barbara Allen	305 Anderson St NE	H in reading	New Meter #	7/31	JD
7/10	17471	3338	David Daniel	165 Bougainvillea St NE	H in reading	New Meter #	7/31	JD
7/10	17474	4658	Daniel Poulos	118 Gates Ave	H in reading	New Meter #	7/31	JD
7/10	17468	3401	Wayne Carlton	143 Loquat Rd NE	H in reading	New Meter #	7/31	JD
7/10	17472	59	Helen Weeks	126 Orange Rd NE	H in reading	New Meter #	7/31	JD
7/10	17469	5682	James Brazzel	301 Anderson St NE	H in reading	New Meter #	7/31	JD
7/10	17473	5633	Robert Daubenmire	240 Sheppard Rd NW	H in reading	New Meter #	7/31	JD
7/11	17477	5760	Pat Kilgo	253 Cumquat Rd NW	Moved out Read meter Shut off	Turned off water read meter out	7/11	JD
7/11	17476	5340	John Matthews	131 Lemon Rd NE	No water pressure	Turned on water meter was off	7/11	JD

7/11	17478	80526	John Council	375 Flamingo Rd NE	Check meter for leaks	No Spin Meter Ok	7/11 NB
7/11	17481	4572	Carol Eskew	117 Loquat Rd NE	Check meter for leaks	No Spin Meter good 5 For 5	7/12 JD
7/11	17479	80325	William Hums	4036 Placid Lakes Blvd	Read meter	Read meter out	7/12 JD
7/12	17482	5305	Susan Compton	102 Lakefront Ct NE	Check meter for leaks	Sm Leak Meter good 5 for 5	7/13 JD
7/12	17285	2935	Tom Salzgeber	243 Catfish Creek	High Usage	Test meter ok 5 for 5	7/19 NB
7/13	17486	5565	Craig Beloff	406 Lake August Dr	Check Meter for leaks	No Spin Meter good	7/13 JD
7/13	17483	3968	Ricardo Sanchez	268 Tangerine Rd	Check meter for leaks	SM Leak meter good	7/13 JD
7/16	17488	6013	Marricela Campo	133 Bougainvillea St NE	Turn on	Turned meter on	7/16 JD
7/17	17489	3629	Melissa Crossman	126 Lincoln Rd NW	Shut Off	Turned off water	7/17 JD
7/18	17500	5900	David Wiley	997 Washington Blvd NW	Shut off and read meter	Turned off water read meter out	7/18 JD
7/19	17503	4567	Christy Nicholas	964 Aleutian St NE	Sold Home Read meter	Read meter out	7/19 JD
7/19	17501	3996	Robert Jones	125 Vera Lane NW	Shut off vacation	Turned off water	7/19 JD
7/19	17504	5854	Owner Schroer	241 Sheppard Rd NW	Shut off Vacation	Turned off water	7/20 JD
7/20	17505	4530	Milton Cater	490 Johnson Ave NE	Turn on	Turned on water	7/20 JD
7/20	17506	2700	Manuel Perez	748 Placid Lakes Blvd	Sold Home Shut off read meter	Turned off water read meter out	7/20 JD
7/23	17508	4721	Renee Chapman	141 Lincoln	Shut off read meter	Turned off wtaer read meter out	7/23 JD
7/26	17036	5725	Leigh Ann Giacin	374 E Canal Way NE	Flush Line	Flushed Line	7/26 NB
7/26	17037	5950	Stephen Kane	475 Roosevelt Ave NE	New Tenant shut off read meter	Turned off water read meter out	7/26 JD
7/27	17038	5859	Donovan Carroll	115 Orange Rd NE	Moved out shut of fread meter	Turned off water read meter out	7/27 NB
7/30	17040	3241	Marianne Palumbo	415 Lake August Dr	Check meter	Fixed Lid	7/30 NB
7/31	17043	99009	Golf Villas	Jeffer Ave Story 1	New meter	New meter and #	7/31 NB
7/31	17045	81150	Arlene McMahon	621 Grissom Rd NW	Check meter for Leaks	Sm Leak	7/31 JD
7/31	17042	5972	Midflorida	804 Catfish Creek	Sold Home read meter turn on	Turned on water read meter out	7/31 JD

WORK ORDERS

August 2012

DATE	ORD #	ACCT. #	NAME	ADDRESS	PROBLEM	ACTION TAKEN	CORRECT	INITIALS
8/1	17048	6002	Wesley Feeney	559 Garfield Ave	High usage check for leaks/mete	Sm Leak	8/1	JD
8/3	17052	5215	Jerry Sullivan	121 Cumquat Rd NW	Shut off and read	Turned water off read meter out	8/3	JD
8/3	17051	5953	Michael Felton	828 Catfish Creek	Check Meter/ Leaks	Sm Leak	8/3	JD
8/3	17286	5370	Richard Temple	844 Grissom Rd NW	Low Water Pressure	Checked	8/3	NB
8/6	17055	4126	Goullin Ghlslawan	131 Loquat Rd NW	Meter changed out can't read	New Meter	8/6	JD
8/6	17054	5833	Phylisa Harper	856 Aleutian St NE	Moved Shut off and read	Turned water off read meter out	8/6	JD
8/7	17056	4926	Melvin Mayo	113 Sheppard Rd NW	Shut Off Vacation	Turned off water	8/10	JD
8/7	17057	5878	Vivan Benvenuto	524 Catfish Creek Rd	Moved Read meter	Read meter Out	8/31	JD
8/8	17058	81071	Earl Johnston	4036 Placid Lakes Blvd	Turn On	Turned on water	8/9	JD
8/13	17061	5653	Stephen Marone	126 Bimini St NE	Check meter/ leaks	Sm Leak	8/13	JD
8/13	17062	4369	Bob Muir	3579 Placid View Dr	Check Meter/ leaks	Meter number wrong	8/13	JD
8/13	17063	81283	I E Byrd	4050 Placid Lakes Blvd	Moved Out Shut off and read	Turned off water read meter out	8/13	JD
8/14	17067			120 Gates Ave	Inspection turn on	Turned on water	8/14	JD
8/14	17291	3221	Peggy Nemeth	118 Fig Rd NW	High usage Cheak for leaks	No Leaks	8/14	JD
8/14	17069	3822	Paul Giles	106 E Canal Way NE	Moved out Read	Read meter out	8/21	JD
8/14	17066	4306	Rita Tirado	728 Kemper Ave	Sold home Read	Read meter out	8/24	JD
8/16	17171	80509	David Grillis	505 Washington Blvd NE	No one lives there but has usage	people working in the home	8/16	NB
8/16	17172	1093	Dean Tooker	109 Lincoln Rd Nw	Check meter/ leak	Test ok 5 for 5	8/16	JD
8/17	17174	5543	Coldwell Banker	103 Galapagos Ave NE	Sold home Turn on and read	Turned on water read meter out	8/17	NB
8/20	17178	4926	Melvin Mayo	113 Sheppard Rd NW	Turn on	Turned on water	8/20	JD
8/20	17180	2991	Ray Mills	213 Catfish Creek Rd	water leaking out meter	Fixed	8/20	JD
							210 of 242	
8/21	17183	81499	Staci Starcher	159 Wilson Way NE	Moved Out shut off and read	Turned off water and read mete	8/21	JD

8/21	171[illegible]	1237	Pasty Damato	494 Briar Glen Rd	Flu[illegible] Line	Flushed	8/21	NB
8/24	17186	5872	Roderick Mckeithan	536 Derringer Ave NW	Turn on	Turned on water	8/24	JD, BJ
8/27	17293	5741		266 Enos	Moved out put in owners name	read meter out	8/27	JD
8/28	17187	745	Eloise Peterson	112 Club Rd NW	Check meter/ leak	No Leak meter good	8/29	JD
8/29	17189	5112	John Latimer	129 Bougainvillea St NE	shut off and read	Turned off water and read mete	8/29	NB
8/29	17188	81369	John Latimer	4026 Placid LAkes BLvd	shut off and read	Turned off water and read mete	8/29	NB
8/29	17190	2643	Debbie Huffstutler	623 Starfruit Ave	water being stolen	read meter out	8/29	NB
8/20	17179	4007	Peter Injasoulian	101 Commanche St NW	Turn on	Turned on Water	8/30	NB
8/21	17185	81553	Tomika James	567 VAnguard Ave	Moved read meter	Read meter out	8/31	JD, BJ
8/31	17192	2694	Steven Bair	457 Roosevelt Ave NE	Flush Line	Flushed	8/31	NB
8/31	17194	4797	Paul Burke	141 Lincoln Rd NW	Turn On	Turned on water	8/31	NB

WORK ORDERS

September 2012

DATE	ORD #	ACCT. #	NAME	ADDRESS	PROBLEM	ACTION TAKEN	CORRECT	INITIALS
9/4	17198	81133	Denna Fetner	133 Wilson Way NE	Shut off and Read meter	Turned water off and read mete	9/4	NB
9/4	17196	5870	Michelle Ramirez	615 Starfruit Ave	shut off and read meter	Turned water off and read mete	9/4	NB
9/6	81553	17294	Tomika James	567 Van Guard	Shut off and read meter	Turned water off and read mete	9/4	NB
9/6	5870	17201	Michelle Ramirez	615 Starfruit Ave	Turn on and read	Turned water on and read mete	9/6	JD
9/6	17200	81431	Nikki Dickerson	112 Astro Ct	Turn on and read	Turned water on and read mete	9/6	JD
9/10	17214	2342	Joe Igiesias	116 Loquat Rd NW	H in Reading	New Meter #	9/17	JD
9/10	17209	3923	Jane Ganey	429 W Water Way Ave NW	H in Reading	New Meter #	9/17	JD
9/10	17208	5791	Edith Tormey	488 Archie Summers Rd	H in Reading	New Meter #	9/17	JD
9/10	17216	4979	Gerald Meisenheimer	283 Briar Lane	H in Reading	New Meter #	9/17	JD
9/10	17207	1533	Samuel Feko	213 Lakerim Ct	H in Reading	New Meter #	9/17	JD
9/10	17206	5881	Roland Ponce	116 Lime Rd NE	H in Reading	New Meter #	9/17	JD
9/10	17205	1969	James Kissinger	114 Walker Ave NE	H in Reading	New Meter #	9/17	JD
9/10	17210	3678	Roger Turcotte	1866 Washington Blvd NW	H in Reading	New Meter #	9/17	JD
9/10	17215	81119	Anita Martinec	4042 Placid Lakes Blvd	H in Reading	New Meter #	9/17	JD
9/10	17213	2416	Irving Hurlbutt	233 Marlin St NW	H in Reading	New Meter #	9/17	JD
9/10	17212	4614	Lindsey Pratts	226 Carole Rd NW	H in Reading	New Meter #	9/17	JD
9/10	17211	80339	Sherill Freeman	1912 Washington Blvd NW	H in Reading	New Meter #	9/17	JD
9/10	17204	4036	William Raymond	250 Cumquat Rd NE	H in Reading	New Meter #	9/17	JD
9/10	17203	5850	Cory Varnum	443 Foxdale Rd	Shut off and read	Turn water off and read meter	9/10	NB
9/10	17202	81499	Staci Starcher	159 Wilson Way NE	turn on	Turned water on	9/10	NB
9/11	17217	4022	Gerald Buonavita	251 Grape Rd NW	Turn on	Turned water on	9/12	JD,BJ
9/12	17218	81555	Amanda Post	124 Wilson Way NE	High Usage Check Meter/Leaks	Meter Good No Spain	9/12	JD,BJ

9/12	17[illegible]	3595	Jose Gamio	481 Roosevelt Ave NE	Hi[illegible]sage Check Meter/ Leaks	Test 6 to 5 Meter bad	9/1[illegible]	NB
9/12	17222	1877	Charles Krueger	114 Bougainvillea St NE	High Usage Check Meter/Leaks	Meter read wrong	9/12	NB
9/12	17295	3599	Janell Schmidt	331 Anderson ST	Sm leak when turning water on	checked	9/12	NB
9/13	17223	3595	Jose Gamio	481 Roosevelt Ave NE	Bad Meter	Replaced Radio Read	9/13	NB
9/13	17224	4979	Gerald Meisenheimer	283 Braiar Lane	High Usage Check Leak	Tested ok 5 for 5	9/13	NB
9/17	17511	5976	Gerald Meisenheimer	357 Chicago Way NE	read	read meter out	9/17	NB
9/18	17512	740	James Grainger	557 Farrell Dr NE	Read	Read meter out	9/20	NB
9/19	17533	4423	Ernest Gonzales	716 Catfish Creek RD	Shut Off and read	Turned water off and read mete	10/1	NB
9/19	17534	81071	Earl Johnston	4036 Placid Lakes Blvd	Turn On and read	Turned water on and read mete	10/1	NB
9/20	17536	4184	Gary Ingram	139 Mango Rd Ne	Low water Pressure	Checked 68 PSI hose bid	9/20	JD
9/21	17299	837	D Hoffmsn	250 Tangerine	low water pressure	checked 50 PSI hose Bid	9/21	JD
9/21	17537	81566	Christopher Akins	116 Able Rd NW	read	Read meter out	9/24	JD
9/24	17540	5006	Lavon Stevens	124 Loquat Rd NE	Shut off and read	Turned water off and read mete	9/24	NB
9/24	17539			4026 Placid Lakes Blvd	Turn On	Turned water on	9/24	NB
9/25	17542	5727	R Gilde	103 Galapagos Ave NE	Turn on and read	Turn water on and read meter	9/28	JD
9/26	17544	5974	Tom Hoekenga	253 Thurman Ave	Turn On	Turn water on and read meter	9/28	NB
9/27	17301			247 Devon Way	Turn on Inspection	Turned water on and off	10/2	NB
9/28	17548	4022	Gerald Buonavita	251 Grape Rd NW	Shut off Vacation	Turned water off	9/28	JD
9/28	17546	81379	Johnathan Joles	144 Enos Ave NW	Read Meter	Read meter out	9/28	JD
9/28	17547	81541	Christopher Campbell	113 Atlas CT NW	Shut off and read	Turned water off and read mete	10/1	NB

WORK ORDERS

October 2012

DATE	ORD #	ACCT. #	NAME	ADDRESS	PROBLEM	ACTION TAKEN	CORRECT	INITIALS
9/19	17533	4423	Ernest Gonzales	716 Catfish Creek Rd	Moved Out shut off and read	Turned water off and read mete	10/1	NB
9/27	17301			247 Devon Way	Turn on & Off Inspection	Turned water on and off	10/2	NB
9/28	17546	81379	Johnathan Joles	144 Enos Ave NW	Moved Out read meter	read meter out	9/28	JD
9/28	17548	4022	Gerald Buonavita	251 Grape Rd NW	Shut off for Vacation	Turned water off	9/28	JD
9/28	17547	81541	Christopher Campbell	113 Atlas Ct NW	Moved Out Shut off and read	Turned water off and read mete	10/1	NB
10/1	17552	81172	Lingle/Calderon	516 Washington Blvd NE	Moved out shut off and read	Turned water off and read mete	10/1	NB
10/1	17550	3882	Mayra Diaz	642 Placid Lakes Blvd	Turn on and read	Turned Water on read meter	10/5	NB
10/1	17551	81558	David Barrera	495 Washington Blvd NE	Moved out shut off and read	Turned water off and read mete	10/5	NB
10/2	17557	4964	Ronald Lawrenz	101 Lime Rd NE	Moved out read	Read meter	10/2	NB
10/2	17556	2107	Estate of Torrey	1642 Washington Blvd NW	Shut off and read	Turned water off and read mete	10/2	NB
10/2	17302	3896	Don Neman	352 Chicago Way NE	Junk in water	Flushed Water	10/2	NB
10/8	17568	99037	P.R	1998 Placid Lakes Blvd	Moved Out Shut off and read	Turned water off and read mete	10/8	NB
10/8	17569	99021	P.R	2000 Placid Lakes Blvd	Moved Out Shut off and read	Turned water off and read mete	10/8	NB
10/8	17570	99042	P.R.	1996 Placid LAkes Blvd	Moved Out Shut off and read	Turned water off and read mete	10/8	NB
10/8	17567	3996	Patricia Jones	125 Vera Lane NW	Turn on	Turned Water on	10/12	JD
10/9	17572	6023	Tiffany Arnoto	317 Bowie Ave	Moved out Shut Off and read	Turned water off and read mete	10/10	JD
10/10	17575			137 Bimini St NE	Shut off	Turned water off	10/10	JD
10/10	17573	1206	Shirley Wilkins	364 Lime Rd NW	Turn On	Turned water on	10/23	NB
10/10	17574	4423	Ernest Gonzales	716 Catfish Creek Rd	Shut off and read	Turned water off and read mete	10/11	JD
10/11	17577	5956	Travis Walker	247 Sheppard Rd NW	Shut off and read	Turned water off and read mete	10/11	BP
10/11	17580	4022	Gerald Buonavita	251 Grape Rd NW	Check Meter/Leak High Usage	Meter good	10/11	JD,BJ
10/11	17578	81068	Tom Lacy	109 Club Rd	Turn on	Turned Water on	10/11	BP

10/11	1757[illegible]	5778	Kurt Deboer	142 Bougainvillea St NE	Shut off	Shut off and Turned on	10/11	JD,BJ
10/11	17303	81542	L Callahan	107 Van Allen	Shut Off and read	Turned water off and read mete	10/11	BP
10/11	17581	5889	Barry Schaffer	107 Citrus Rd NE	Check Meter/Leaks High Usage	Meter good customer had brake on there side	10/12	JD,BJ
10/11	17304	4889	Romel Tuason	786 Seneca Dr NW	Shut off and read	Turned water off and read mete	10/17	JD
10/12	17586	5283	Ed Stanley	108 Truman Ave NE	Check Meter/ Leaks High Usage	Meter Bad 7to 5	10/12	JD
10/12	17583			137 Bimini ST NE	Turn on	Turn on	10/12	JD
10/12	17585			317 Bowie Ave	Turn On	Turn on	10/12	JD
10/12	17588	1199	Betty Groff	508 Catfish Creek Rd	read	Read meter out	10/15	JD, BJ
10/15	17305	81562	Monica Leonard	131 Glenn Ave NW	Shut off and read	Turned water off and read mete	10/15	JD
10/15	17598	81411	Yadira Perla	111 Van Allen	Shut off and read	Turned water off and read mete	10/15	JD
10/15	17589	5635	Donald Mietich	973 Chanllenger St NW	Turn On	Turned water on	10/16	JD,BJ
10/15	17590	5283	Ed Stanley	108 Truman ave Ne	Bad Meter	New Meter	10/16	JD,BJ
10/16	17593	5885	Johnathon Hawkins	343 Augusta Rd NE	Turn on and read	Turned water on and read mete	10/17	JD,BJ
10/17	17594	81002	Ana Luna	631 Washington Blvd NW	Shut off and read	Turned water off and read mete	10/17	JD,BJ
10/17	17333	4106	Angela Digaspari	345 Chicago way NE	Shut off and read	Turned water off and read mete	10/22	BP
10/19	17336	81169		6495 Placid Lakes Blvd	Turn on	Turned water On	10/19	NB
10/19	17337			516 Washington Blvd NE	Turn On	Turned water on	10/19	BP
10/19	17339	5998	Theodore Wilder 3	106 Aries Place NW	Shut off and read	Turned water off and read mete	10/22	NB
10/22	17308	4007	Peter Injasoulian	101 Comache NW	No water usage	Checked and read meter fine	10/22	NB
10/22	17345	6069	D Roura	248 Lemon Rd NW	Shut off and read	Turned water off and read mete	10/22	NB
10/22	17341	5383	Sheralyn Dobkin	251 Catfish creek RD	Check meter/Leak High Usage	Meter good	10/23	JD
10/22	17342	3223	Ed Layher	356 Chicago Way NE	Turn on	Turned water on	10/29	NB
10/23	17344	81568	Michelle Carroll	129 Glenn Ave NW	Turn on read	Turned water on and read mete	10/23	NB
10/24	17309	3798	David Kriska	500 Catfish Creek Rd	Shut off	Turned water off	10/24	BP
10/25	17600	4144	Max Telhoard	104 Launch Rd NW	High Usage	Checked no spin	10/25	BP

WORK ORDERS

October 2012

DATE	ORD #	ACCT. #	NAME	ADDRESS	PROBLEM	ACTION TAKEN	CORRECT	INITIALS
10/25	17599	6024	Briana	577 VanGuard AVe NW	Shut off and read	Turned water off and read mete	10/31	BP
10/26	17601	81418		625 Washington Blvd NW	Shut off and read	Turned water off and read Mete	10/26	NB
10/26	17350	6069	Digna Roura	248 Lemon Rd NW	Turn on	Turned water on	10/26	BP
10/29	17351	4124	Mike Creenan	380 Parker ST NE	Shut off	Turned water off	10/29	BP
10/29	17352	5757	Gwendolyn Southworth	126 Tangerine Rd	Turn On	Turned water on	10/29	BP
10/29	17353	81526	Remax	560 Lake August Dr	Shut off and read	Turned water off and read mete	10/30	JD
10/29	17366	81579	Laura Rodriguez	137 Wilson Way NE	Shut off and read	Turned water off and read mete	10/30	NB
10/29	17356	5926	Gary Leach	734 Star Fruit Ave	Turn on	Turned water on	11/1	BP
10/31	17355	80508	Celia Nemeth	497 Washington Blvd NE	Read	Read meter out	10/31	BP
10/31	17367	6041	Jeannette Waterson	109 Fig Rd NW	Turn on and read	Turned water on and read mete	10/31	BP

WORK ORDERS

November 2012

DATE	ORD #	ACCT. #	NAME	ADDRESS	PROBLEM	ACTION TAKEN	CORRECT	INITIALS
10/24	17349	5148	Fred Kinsler	102 Tangerine Rd	Turn on	Water turned on	11/2	BP
11/1	17359	1653	Richard Cruz	874 Durmon Ave	Shut off and read	Water turned off and read out	11/1	BP
11/1	17360	3628	Janet Temple	1400 Jersey St NE	Turn on	Water turned on	11/1	BP
11/5	17376	4759	Chris Filip	209 Fiji Way NE	Shut off and read	Water turned off and read out	11/6	BP
11/5	17375	4426	Richard Bitzer	115 Sheppard Rd NW	Bad Meter	Replace Meter	11/8	JR
11/8	17379	5344	Thomas&Teri Provenca	106 Lakefront Ct NE	Turn on	Water turned on	11/8	JR
11/9	17604	5630	Debra Norman	103 Fox Ridge RD	Shut Off and Read	Water turned off and read out	11/9	JR
11/9	17394	3114	Raul Rodriguez	236 Tangerine Rd	Check Meter/leaks High usage	Checked good meter	11/9	NB
11/9	17398	2223	Evelyn Huggins	100 Lime Rd Nw	High Usage check	Checked fine	11/13	JR
11/9	17395	3793	Donald Harmon	361 Lime Rd NW	Check Meter/Leaks high usage	checked good meter 5for5	11/13	JR
11/9	17396	5856	James&Erica Ashley	238 Fox Ridge Rd	Check Meter/Leaks High usage	checked good meter 5for5	11/13	JR,BJ
11/9	17397	2796	David Rowlands	473 Lime Rd NW	Check Meter/Leaks High usage	checked good meter 5for5	11/13	JR,BJ
11/9	17393	2285	Robert Hicks	443 Foxdale Rd	Turn on	Water turned on	11/9	JR
11/13	17408	2058	Pastsy Peters	312 Aztec St NW	Check meter low usage	Checked fine	11/13	NB
11/13	17400	81552	Percoius Hill	503 Washington Blvd NE	Shut off and read	Water turned off and read out	11/13	BJ,JR
11/13	17405	4190	Louis Luff	106 Corsica Ave NE	Check Meter/Leaks High usage	checked good meter 5for5	11/13	BP
11/13	17407	2419	Karen Burns	339 Commanche ST NW	Flushed Line	Flushed	11/13	NB
11/13	17402	81506	Eric Pope	107 Atlas Ct NW	Shut off and read	Water turned off and read out	11/14	BP
11/13	17403	5854	Owner Schroer	241 Sheppard Rd NW	Shut off and read	Water turned off and read out	11/15	BP
11/13	17404	5854	Owner Schroer	241 Sheppard Rd NW	Turned On	Water turned on	11/27	BP
11/13	17399	5595	William Klatt	124 Tangerine RD	Shut off and read	Water turned off and read out	11/30	NB
11/14	17631	17	Dennis Brouwer	257 Cumquat Rd NE	Flushed Line	Flushed	11/14	BP

11/14	176[illegible]	81523	Scott Calhoun	6493 Placid Lakes Blvd	Sh[illegible]ff and read	Water turned off and read out	11/1[illegible]	BP
11/14	17410			103 Fox Ridge Rd	Turn on	Water turned on	11/19	BP
11/15	17634	4112	Ann Maire Colletti	106 Aleutian ST NE	Check Meter/Leaks High usage	checked good meter 5for5	11/15	BP
11/15	17632	2541	Lingle/Branch	159 Wildcat St NW	Check Meter/Leaks High usage	checked good meter 5for5	11/15	BP
11/15	17633	80143	Ruth Mitchell	136-138 Van Allen Ave NW	Check Meter/Leaks High usage	checked good meter 5for5	11/15	BP
11/16	17636	5519	Donald Ault	538 Claremont Ave	Turn on	Water turned on	11/16	BP
11/16	17635	3911	Angel Lugo	439 Sonora Ave	Check Meter/Leaks High usage	checked good meter 5for5	11/16	BP
11/20	17640	2541	Lingle/Branch	159 Wildcat St NW	Changed out meter	New Meter RR	11/20	BP
11/20	17639	80143	Ruth Mitchell	136-138 Van Allen Ave NW	Changed out meter	New Meter RR	11/20	BP
11/20	17641	4785	Erin Kapalo	615 Starfruit Ave	Shut off	Water turned off	11/21	JR
11/26	17645			845 Grissom RD NW	Turn on	Water turned on	11/26	BP
11/26	17644	1864	Virgie Allen	107 Pear Ave NW	Read	Read out meter	11/28	JR,BJ
11/26	17643	5916	Latonja Bryant	121 Murray CT NW	Shut off and read	Water turned off and read out	12/3	BP
11/27	17647	5667	Ronald Kellenbenz	207 Kodiak ST NE	Shut off and read	Water turned off and read out	11/30	BP
11/28	17605	5668	Gene Connell	133 Lincln Rd NW	Low water Pressure	Checked	11/28	NB
11/29	17648			105 Booster Rd NW	Shut Off	Water turned off	11/28	JR
11/29	17649	4755	Lloved Penn	528 Catfish Creek Rd	Turn on and read	Water turned on and read out	11/30	BP
11/29	17650	2820	Mary Plott	166 Bougainvillea St NE	Fix Knob on flush line	Fixed	11/29	NB
11/29	17651			560 Lake August DR	Turn on	Water turned on	11/29	NB

WORK ORDERS

December 2012

DATE	ORD #	ACCT. #	NAME	ADDRESS	PROBLEM	ACTION TAKEN	CORRECT	INITIALS
11/8	17386	3193	Bill Sullian	141 Citrus Rd NE	H in read	New Meter	12/11	JR
11/8	17383	883	Norma Green	241 Cumquat Rd NE	H in read	New Meter	12/11	JR
11/8	17388	652	William Sowers	101 Loquat Rd NW	H in read	New Meter	12/11	JR
11/8	17389	3848	Dean Waller	261 Cumquat Rd NW	H in read	New Meter	12/11	JR
11/8	17381	2753	Joseph Council	271 Cumquat Rd NE	H in read	New Meter	12/11	JR
11/8	17384	3095	Kellie Pittman	200 Anderson ST NE	H in read	New Meter	12/11	JR
11/8	17385	5525	Dennis Murphy	308 Anderson ST NE	H in read	New Meter	12/11	JR
11/8	17390	81325	Susan Home	627 Washington Blvd NW	H in read	New Meter	12/11	JR
11/29	17652	5607	Charles Finn	119 Citrus Rd NE	Turn on	Turned water on	12/18	BP
12/3	17609			121 Murray Ct NW	Turn on and read	Turned water on read meter	12/3	NB
12/4	17654			6493 Placid Lakes Blvd	Turn on	Turned water on	12/4	NB
12/5	17656	4498	Scott Link	355 Catfish Creek Rd	Turn on	Turned water on	12/5	BP
12/5	17659	6034	James Weimann	119 Murray CT NW	Turn on and read	Turned water on read meter	12/5	BP
12/5	17660	81208	PPA LLC	112 Astro Ct	Shut Off and read	Turned water off read meter	12/7	NB
12/5	17658	5448	Eleze Paul	105 Cumquat Rd NW	Turn on and read	Turned water on read meter	12/10	JR
12/6	17671	5849	Jerry Hoops	108 Cumquat Rd NE	H in read	New meter	12/11	JR
12/6	17662	3408	Thomas Hovis	352 Anderson St NE	Wont read	New meter	12/11	JR
12/6	17661			832 Placid Lakes Blvd	Wont read	New meter	12/11	JR
12/6	17676	5678	Don Mihlfeld	124 Gates Ave	Needs New Pad	Repair	12/10	JR
12/6	17672	4156	Sam Bliss	149 Citrus Rd NE	H in read	New meter	12/11	JR
12/6	17680	3817	Wayne Wood	114 Club Rd Nw	Needs New Pad	New meter	12/10	JR
12/6	17681	5861	Jennifer Kelsen	558 Lake August Dr	Needs New Pad	Repair	12/10	JR

12/6	17682	4229	Linda Hodge	115 Kayla Ave	Needs New Pad	Repair	12/1[illegible]	JR
12/6	17665	3419	Ramiro Fuentes	305 Fox Ridge Rd	Wont read	Repair	12/11	JR
12/6	17666	2838	Rodger Warrick	125 Fox Ridge Rd	Wont read	New meter	12/13	JR
12/6	17683	5516	Tracy Okupski	108 Bougainvillea ST NE	Check Meter	New meter	12/7	JR
12/6	17674	2422	John Huber	270 Cumquat Rd NE	Repogram	Repair	12/7	JR
12/6	17675			347 Chicago Way NE	Repogram	Repair	12/7	JR
12/6	17684			110 Atlas Ct NW	Shut Off	Turned water off	12/7	JR
12/6	17678	81546	Jeannie Tutle	339 Augusta Rd NE	Needs New Pad	Repair	12/7	JR
12/6	17679	81391	Pascal Permis	341 Augusta Rd NE	Needs New Pad	Repair	12/7	JR
12/6	17685			447 Grant Ave NE	Check Meter see spain	Checked	12/7	JR
12/11	17692	3681	Ken Langley	256 Cumquat Rd NW	High Usage	Bad meter 7 to 5	12/12	JR
12/11	17690	5849	Jerry Hoops	108 Cumquat Rd NE	Flush Line	Flushed	12/11	NB
12/11	17693	192	Larry Sapp	108 Loquat Rd NW	High Usage	Meter good 5 for 5	12/12	JR
12/11	17691	2748	George Berteska	109 Tangerine Rd	High Usage	Mis read	12/12	JR,BJ
12/11	17698	5657	Donna Arrowsmith	436 Foxdale Rd	Water leaking by meter	Fixed	12/12	JR,BJ
12/11	17689	6061	John Pruitt	475 Roosevelt Ave NE	High Usage	Bad meter 51/2 to 5	12/12	JR,BJ
12/11	17688	299	Sharion Hudson	490 Briar Glen Rd	Flush Line	Flushed	12/11	NB
12/11	17697	81150	Arlene Mcmahan	621 Grissom Rd	Shut off and read	Turned water off read meter	12/17	JR
12/11	17695	163	Kevin Nalley	235 Lime Rd NW	Turn on	Turned water on	12/17	JR
12/12	17699	5651	Elizabeth Glamer	125 Club Rd NW	High Usage	Water softener	12/12	JR,BJ
12/13	17825	6061	John Pruitt	475 Roosevelt Ave NE	BAd Meter	New Meter	12/14	JR,BJ
12/13	17827	81531	Midflorida	748 Placid Lakes Blvd	Shut off and read	Turned water off read meter	12/14	JR
12/13	17701	3681	Ken Langley	256 Cumquat Rd Nw	Bad Meter	New meter	12/14	JR
12/13	17829	5866	Kathy Denny	239 Catfish Creek Rd	Shut Off	Turned water off	12/13	BP
12/13	17611	3034	Tom Clark	801 Catfish Creek Rd	High usage	Meter ok	12/18	BP

12/14	17	1731	Mack Carroll	112 Conquest St Nw	Fl	Line	Flushed	12/	JR

WORK ORDERS

December 2012

DATE	ORD #	ACCT. #	NAME	ADDRESS	PROBLEM	ACTION TAKEN	CORRECT	INITIALS
12/17	17833	5899	James Morris	115 Lemon Rd NE	Shut off and read	Turned water off read meter	12/21	BP
12/18	17834	2909	Irving Bowen	301 Catfish Creek Rd	High Usage	Meter fine no leak	12/18	BP
12/19	17842	3444	Steve Bragg	737 Catfish Creek Rd	High Usage	House value off	12/19	BP
12/20	18025	5340	John Matthews	131 Lemon Rd NE	High Usage	Small Leak	12/20	BP
12/20	18026	4451	John Webb	250 Cumquat Rd NW	Turn on	Turned water on	12/27	BP
12/21	17843	5344	Thomas & Teri Proveca	106 Lakefront Ct NE	Shut off and read	Turned water off read meter	12/27	BP
12/24	18027	1909	Jerry Pasquino	105 Astec St NW	Flush Line	Flushed	12/26	BP
12/24	18028	6077	Michael Hatchcock	964 Aleutian ST NE	Meter above ground	Next stores meter	12/26	BP
12/26	18030	3605	Susan Compton	325 Johnson Ave NE	High Usage	Test ok 5 for 5	12/26	BP
12/26	18029	81529	Midflorida	807 Washington Blvd NE	Shut Off and read	Turned water off read meter	12/26	BP
12/26	18031	81531	Midflorida	748 Placid Lakes Blvd	read	Read Meter	12/26	BP
12/27	17614			106 LakeFront Ct	Read	Read Meter	12/28	BP
12/27	17615			314 Fox ridge	Read	Read Meter	12/28	BP

COMPLAINTS – Bill
Adjustments
Schedule VIII

SCHEDULE VIII

PLACID LAKES UTILITIES,INC

Transaction List

Sorted by Service Id

From 01/01/2012 to 12/30/2012

Account No	Service ID	Customer Name	Trans. Date	Trans. Type		Reason	Batch	Amount
5383	C10B000L0007	DOBKIN. SHERALYN	08/09/2012	Adjustment	LEAK ADJ			
					WATER			-5.56
								-5.56
5383	C10B000L0007	DOBKIN. SHERALYN	10/24/2012	Adjustment				
					WATER			-57.70
								-57.70
2935	C10B000L0009	SALZGEBER. TOM	07/12/2012	Adjustment				
					WATER			-9.78
								-9.78
5866	C10B000L0010	DENNY. KATHY	12/14/2012	Adjustment	LEAK ADJ			
					WATER			-90.57
								-90.57
5841	S01B006L0025	MURPHY. KAYLEEN	01/30/2012	Adjustment	TO 227 E CAN			
					WATER			-30.64
								-30.64
5841	S01B006L0025	MURPHY. KAYLEEN	03/12/2012	Adjustment	PAID TWICE			
					WATER Redist			30.64
								30.64
5725	S01B009L0025	GIACIN. LEIGH ANN	01/13/2012	Adjustment				
					WATER			-12.89
								-12.89
5922	S01B010L0025	MURPHY. KAYLEEN	01/30/2012	Adjustment	FROM 5841			
					WATER			30.64
								30.64
5922	S01B010L0025	MURPHY. KAYLEEN	03/12/2012	Adjustment	POST ERROR			
					WATER			-30.64
								-30.64
4979	S02B014L0025	MEISENHEIMER.	09/20/2012	Adjustment				
					WATER			-51.35
								-51.35
5759	S02B017L0002	WILLIAMS. TINA	08/09/2012	Adjustment	LEAK ADJ			
					WATER			-120.92
								-120.92
80467	S02B019L0007	KURTH. BOB	03/23/2012	Adjustment	FROM 81543			
					WATER			42.98
								42.98
80467	S02B019L0007	KURTH. BOB	03/23/2012	Adjustment	BILL ERROR			
					WATER			-42.98
								-42.98
81543	S02B019L0007	BROWN. PENNY	03/23/2012	Adjustment	TO 80467			
					WATER			-22.98
					WATER Miscellanous			-20.00

Account No	Service ID	Customer Name	Trans. Date	Trans. Type	Reason	Batch	Amount
							-42.98
5916	S02B022L0019	BRYANT. LATONJA	12/10/2012	Adjustment			
					WATER		81.15
							81.15
5016	S02B022L0022	MEISENHEIMER.	10/22/2012	Adjustment			
					WATER Miscellanous		-20.00
							-20.00
4423	S03B025L0044	GONZALEZ. ERNEST	10/12/2012	Adjustment			
					WATER		31.90
							31.90
4347	S03B028L0013	PEREZ. OLGA	02/10/2012	Adjustment	LEAK ADJ		
					WATER		-17.98
							-17.98
81463	S03B032L0013	ESPINOZA. ELSIE	06/13/2012	Adjustment	FROM VANG		
					WATER		108.51
							108.51
6072	S03B034L0010	KIAUNTAE-ROBINSO	12/14/2012	Adjustment	ADJ		
					WATER		-321.22
							-321.22
3595	S04B037L0042	GAMIO. JOSE	09/17/2012	Adjustment	BAD METER		
					WATER		-12.43
							-12.43
5950	S04B037L0045	KANE. STEPHEN	06/28/2012	Adjustment	REF		
					WATER Redist		36.43
							36.43
6061	S04B037L0045	PRUITT. JOHN	12/14/2012	Adjustment	ADJ		
					WATER		-230.00
							-230.00
5087	S04B037L0056	BAIR. STEVEN	06/05/2012	Adjustment	MISS READ		
					WATER Miscellanous		-10.74
							-10.74
5305	S06B00AB0002	COMPTON. SUSAN L	07/16/2012	Adjustment	LEAK		
					WATER		-88.45
							-88.45
3112	S06B00AL0003	HARRIS. PAUL	07/05/2012	Adjustment	DIFF		
					WATER Redist		337.05
							337.05
5798	S06B00AL0006	RISK. LARRY	01/12/2012	Adjustment	FROM 5471		
					WATER		-2.72
							-2.72
81532	S06B00AL0007	MIDFLORIDA.	08/14/2012	Adjustment			
					WATER		-10.95
							-10.95
5471	S06B050L0002	RISK. LARRY	01/12/2012	Adjustment	TO 5798		
					WATER		2.72
							2.72
5471	S06B050L0002	RISK. LARRY	01/12/2012	Adjustment	SOLD PROP		
					WATER		-22.80

Account No	Service ID	Customer Name	Trans. Date	Trans. Type	Reason	Batch	Amount
							-22.80
3882	S06B051L0007	DIAZ. MAYRA	02/13/2012	Adjustment			
					WATER		0.20
							0.20
81558	S06B051L0007	BARRERA. DAVID	10/18/2012	Adjustment			
					WATER		69.59
							69.59
4572	S06B051L0060	ESKEW. CAROL	07/16/2012	Adjustment	ADJ		
					WATER		-48.19
							-48.19
3821	S06B053L0004	HIDALGO. PEGGY	04/12/2012	Adjustment	ACCT ERROR		
					WATER		-13.14
							-13.14
5878	S06B055L0006	BENVENUTO. VIVAN	04/19/2012	Adjustment	CRDT-BAD		
					WATER		-224.00
							-224.00
6070	S06B055L0006	LA MARIO. TERALD	10/19/2012	Adjustment			
					WATER		38.42
							38.42
6065	S06B055L0010	EIFLER. CHARLES	12/12/2012	Adjustment	AMOUNT		
					WATER		-16.24
					WATER Miscellanous		-20.00
							-36.24
81523	S06B055L0010	CALHOUN. EVON	11/26/2012	Adjustment			
					WATER Redist		-6.82
							-6.82
3034	S06B056L0020	CLARK. THOMAS A	11/19/2012	Adjustment	LEAK		
					WATER		-338.55
							-338.55
3034	S06B056L0020	CLARK. THOMAS A	12/14/2012	Adjustment	LEAK ADJ		
					WATER		-43.76
							-43.76
4423	S06B058L0006	GONZALEZ. ERNEST	10/12/2012	Adjustment			
					WATER		-31.90
							-31.90
2748	S06B059L0020	BERTESKA. GEORGE	12/13/2012	Adjustment	MIS READ		
					WATER		-5.45
							-5.45
5886	S06B062L0014	STARR. MIKE	04/12/2012	Adjustment	WRONG		
					WATER		13.14
							13.14
192	S06B063L0016	SAPP. LARRY	12/14/2012	Adjustment			
					WATER		-2.57
							-2.57
4925	S06B067L0004	WESTBROOK.	12/11/2012	Adjustment	WRONG		
					WATER		-43.67
							-43.67

Account No	Service ID	Customer Name	Trans. Date	Trans. Type	Reason	Batch	Amount
3114	S06B067L0008	RODRIGUEZ. RAUL	10/12/2012	Adjustment	NEW BILL		
					WATER		44.16
							44.16
3114	S06B067L0008	RODRIGUEZ. RAUL	11/09/2012	Adjustment			
					WATER		-45.98
							-45.98
5856	S06B068L0004	ASHLEY. JAMES	11/19/2012	Adjustment	ADJ		
					WATER		-6.84
							-6.84
5856	S06B068L0004	ASHLEY. JAMES	11/19/2012	Adjustment	MIS READ		
					WATER		-34.81
							-34.81
3859	S06B068L0008	WILDT. LARRY	05/24/2012	Adjustment	LEAK ADJ		
					WATER		-13.63
							-13.63
5989	S06B068L0010	TEMPLE. RICHARD	05/14/2012	Adjustment	DBL CHRG		
					WATER Miscellanous		-20.00
							-20.00
5792	S07B071L0005	GUIHER. ERIC S.	03/14/2012	Adjustment	FRM GATES		
					WATER		64.98
							64.98
5613	S07B075L0020	WOOD. BARBARA	07/13/2012	Adjustment			
					WATER		-61.40
							-61.40
81555	S07B079L004A	POST. AMANDA	09/14/2012	Adjustment			
					WATER		-17.40
							-17.40
81394	S07B079L012A	CHAPELIN. ENERIS	05/01/2012	Adjustment	LEAK		
					WATER		-17.98
							-17.98
81394	S07B079L012A	CHAPELIN. ENERIS	05/31/2012	Adjustment	LEAK ADJ		
					WATER		-90.32
							-90.32
80300	S07B080L0022	MCCRAY. MYTARA	08/15/2012	Adjustment			
					WATER		33.50
							33.50
80300	S07B080L022B	MCCRAY. MYTARA	08/15/2012	Adjustment			
					WATER		-33.50
							-33.50
4759	S07B080L024B	FILIP. CHRIS	11/09/2012	Adjustment			
					WATER		13.62
							13.62
3793	S08B067L0019	HARMON. DONALD	11/19/2012	Adjustment	MIS READ		
					WATER		-7.14
							-7.14
2796	S08B067L0025	ROWLANDS. DAVID	11/19/2012	Adjustment	ADJ		
					WATER		-13.43
							-13.43

Account No	Service ID	Customer Name	Trans. Date	Trans. Type	Reason	Batch	Amount
3968	S08B067L0033	SANCHEZ. RICARDO	07/16/2012	Adjustment	LEAK		
					WATER		-10.95
							-10.95
5953	S08B069L0003	FELTON. MICHAEL	08/09/2012	Adjustment	LEAK ADJ		
					WATER		-31.67
							-31.67
5786	S08B087L0008	KRESS. LAWRENCE	11/14/2012	Adjustment			
					WATER Miscellanous		-5.00
							-5.00
81172	S09B121L0015	LINGLE. CALDERON/	05/22/2012	Adjustment	LEAK		
					WATER		-17.55
							-17.55
5981	S10B123L0015	KURPA. JONATHAN	05/14/2012	Adjustment	DBL CHRG		
					WATER Miscellanous		-20.00
							-20.00
99009	S11B0GVL01-S	GOLF VILLAS.	07/25/2012	Adjustment	LEAK ADJ		
					WATER		-67.64
					SEWER		-67.64
							-135.28
81150	S11B135L0013	MCMAHON. ARLENE	08/02/2012	Adjustment	LEAK		
					WATER		-6.69
							-6.69
81150	S11B135L0013	MCMAHON. ARLENE	08/09/2012	Adjustment	LEAK ADJ		
					WATER		-17.81
							-17.81
81347	S11B135L0031	BENNETTE. BRANDI	02/08/2012	Adjustment	MISREAD		
					WATER		-429.83
							-429.83
81478	S11B136L009A	WELSH II. PAUL	01/19/2012	Adjustment	BILL ERROR		
					WATER		-10.74
							-10.74
80155	S11B137L0005	WORLEY. KATHI	01/11/2012	Adjustment	READ ERRO		
					WATER		-421.46
							-421.46
80143	S11B137L0015	MITCHELL. RUTH	11/20/2012	Adjustment	BAD METER		
					WATER		-40.00
							-40.00
80143	S11B137L0015	MITCHELL. RUTH	12/13/2012	Adjustment	MIS READ		
					WATER		-88.67
							-88.67
81463	S11B137L009B	ESPINOZA. ELSIE	06/13/2012	Adjustment	TO 332 COOL		
					WATER		-108.51
							-108.51
5741	S11B139L0018	MELENDEZ.	09/13/2012	Adjustment			
					WATER		-9.92
							-9.92
2116	S11B143L0015	TICKNOR. HOWARD	07/13/2012	Adjustment	LEAK ADJ		
					WATER		-146.10

Account No	Service ID	Customer Name	Trans. Date	Trans. Type	Reason	Batch	Amount
							-146.10
80343	S11B143L0020	SANDLIN. JACK	10/26/2012	Adjustment	CORRECTION		
					WATER Redist		20.00
							20.00
5990	S11B143L0060	KONOZALLA.	05/14/2012	Adjustment	DBL CHRG		
					WATER Miscellanous		-20.00
							-20.00
5792	S11B143L0085	GUIHER. ERIC S.	03/14/2012	Adjustment	TO		
					WATER		-64.98
							-64.98
5916	S11B212L0011	BRYANT. LATONJA	01/12/2012	Adjustment	TO 121		
					WATER		-27.58
					WATER Miscellanous		-20.00
							-47.58
5916	S11B212L0018	BRYANT. LATONJA	01/12/2012	Adjustment	FROM 122		
					WATER		47.58
							47.58
5916	S11B212L0018	BRYANT. LATONJA	12/10/2012	Adjustment			
					WATER		-81.15
							-81.15
5549	S11B212L0019	MCNEELY. ROGER	06/19/2012	Adjustment			
					WATER		-10.94
							-10.94
4144	S12B151L8910	TELHIARD. MAX	10/16/2012	Adjustment	ADJ		
					WATER		-222.55
							-222.55
2490	S12B154L0017	KNIGHT. ROBERT J	04/12/2012	Adjustment	BAD METER		
					WATER		-23.63
							-23.63
4763	S12B154L0018	GOODRICH. MERLE	06/26/2012	Adjustment	CHG ERROR		
					WATER Miscellanous		-20.00
							-20.00
5613	S12B154L024A	WOOD. BARBARA	07/13/2012	Adjustment			
					WATER		61.40
							61.40
4263	S12B155L0010	MAZZEO. MICHAEL	06/11/2012	Adjustment	INCORRECT		
					WATER		-14.97
							-14.97
4717	S13B157L0009	BARAJAS. MARISOL	09/11/2012	Adjustment			
					WATER		-11.16
							-11.16
3681	S13B157L0011	LANGLEY. KEN	01/13/2012	Adjustment	MISREAD		
					WATER		-33.82
							-33.82
3681	S13B157L0011	LANGLEY. KEN	12/13/2012	Adjustment	LEAK ADJ		
					WATER		-20.00
							-20.00

Account No	Service ID	Customer Name	Trans. Date	Trans. Type	Reason	Batch	Amount
2559	S13B157L0025	SALGADO. AURELIO	01/18/2012	Adjustment			
					WATER		-26.85
							-26.85
5870	S13B159L0019	RAMIREZ. MICHELLE	09/11/2012	Adjustment			
					WATER		-55.32
							-55.32
5565	S14B101L0013	BELOFF. CRAIG	07/16/2012	Adjustment	SM LEAK		
					WATER		-10.95
							-10.95
5543	S16B114L0044	COLDWELL BANKER	01/19/2012	Adjustment	BILL ERROR		
					WATER		-10.74
							-10.74
4271	S17B179L0007	WENDORFF.	02/13/2012	Adjustment			
					WATER		-0.74
							-0.74
2541	S19B046L0024	BROWN. LINGLE/	11/20/2012	Adjustment	ADJ		
					WATER		-19.02
							-19.02
5529	S19B054L0010	STOKER. PAT	03/19/2012	Adjustment			
					WATER		-34.10
							-34.10
81523	S19B088L008C	CALHOUN. EVON	11/26/2012	Adjustment			
					WATER Redist		6.82
							6.82
4759	S20B240L0009	FILIP. CHRIS	11/09/2012	Adjustment			
					WATER		-13.62
							-13.62
5870	S20B247L0019	RAMIREZ. MICHELLE	09/11/2012	Adjustment			
					WATER		55.32
							55.32
5971	S20B250L0018	TAYLOR. DANIELLA	06/05/2012	Adjustment	LEAK ADJ		
					WATER		-24.54
							-24.54
3114	S20B251L0022	RODRIGUEZ. RAUL	10/12/2012	Adjustment			
					WATER		-16.41
							-16.41
6064	S20B251L0022	RODRIGUEZ. RAUL	10/12/2012	Adjustment			
					WATER		16.41
							16.41
5653	S20B252L0023	MARONE. STEPHEN	08/15/2012	Adjustment	LEAK ADJ		
					WATER		-1.44
							-1.44
5626	S20B252L3233	CONKLIN. ERIC	08/09/2012	Adjustment	LEAK		
					WATER		-3.13
							-3.13
4941	S20B296L0009	MOREJON. OSVALDO	06/28/2012	Adjustment	POST ERROR		
					WATER		-209.18
							-209.18

Account No	Service ID	Customer Name	Trans. Date	Trans. Type	Reason	Batch	Amount
81531	S20B296L0009	MIDFLORIDA.	06/28/2012	Adjustment	POST ERROR		
					WATER Redist		209.18
							209.18
99020	S20BTRAL0000	ST JAMES CHURCH.	06/21/2012	Adjustment	LEAK ADJ		
					WATER		-199.99
							-199.99
80526	S3B36L0+1718	COUNCIL. MICHELE	07/12/2012	Adjustment	ADJ		
					WATER		-50.90
							-50.90
81489	S5B49L++1617	DUFFY. MAXINE	01/12/2012	Adjustment	ACCT		
					WATER		-10.74
							-10.74
81552	S5B49L++1617	HILL. PERCOIUS	11/26/2012	Adjustment			
					WATER		22.19
							22.19
81558	S5B49L++1617	BARRERA. DAVID	05/14/2012	Adjustment	DBL CHRG		
					WATER Miscellanous		-20.00
							-20.00
81558	S5B49L++1617	BARRERA. DAVID	10/18/2012	Adjustment			
					WATER		-69.59
							-69.59
81552	S5B49L001617	HILL. PERCOIUS	11/26/2012	Adjustment			
					WATER		-22.19
							-22.19
1557	S5B49L171800	WHITE. JAMIE	05/14/2012	Adjustment	DBL CHRG		
					WATER Miscellanous		-20.00
							-20.00
4369	SPVB00AL0034	MUIR. BOB	08/15/2012	Adjustment			
					WATER		-25.98
							-25.98

Grand Totals

Adjustment		
	WATER	-4237.80
	SEWER	-67.64
	WATER Miscellanous	-215.74
	WATER Redist	633.30
		-3887.88

PLACID LAKES UTILITIES, INC.

Docket No.: 130025-WU

Highlands County

25-30.440 (9)
VEHICLES

Test Year Ended December 31, 2012

Vehicle Listing

Florida Public Service Commission

Company: Placid Lakes Utilities, Inc.
Docket No.: 130025-WU
Test Year Ended: 12/31/12
Interim [ ] Final [X]
Historical [X] Projected [ ]

Schedule IX
Page 1 of 5
Preparer: Larry P. King, Treasurer

Year		Type	Model	VIN #	Cost	Assignees	Allocation to Utility
2003	*	Ford Truck	F-150	1FTRF172X3NB58940	13,967	James Reed	100%
2008		Ford Truck	F-150	1FTRF12248KF06697	15,880	William Powers	100%
2005		Golf Cart			6,266	General Use	100%
2012		Kawasaki SXS	KAF620MCF	JKLAFCM1XCB511368	10,988	General Use	100%
2013	*	Replace 2003 Truck	F-150	Proposal from Dealer	22,030	4x2 Regular Cab; 2 Door	
2013	#	Add Truck to Fleet	F-150	Proposal from Dealer	32,158	4x4 Super Cab; 4 Door	

Needed to haul heavy equipment for Utility maintenance & construction projects. Currently the Utility has to borrow a 4 wheel drive truck from it Parent Company to haul the heavy equipment.

Depreciation Adjustment	Proposals from Dealer attached		
Replace 2003 Truck:	Cost of new 2013 Form F-150 4x2	22,030	
	Cost of old 2003 Ford F-150	-13,967	
	Net change in Transportation Account	8,063	Supports Sch. A-3
	Annual depreciation rate	16.67%	
	Change in depreciation	1,344	Supports Sch. B-3
Add Truck to Fleet:	Cost of new 2013 Form F-150 4x4	32,158	Supports Sch. A-3
	Annual depreciation rate	16.67%	
	Change in depreciation	5,361	Supports Sch. B-3

Sch. TX
P. 2 of 5

BUYERS ORDER

ALAN JAY Automotive Network

D.O.B.: _____
D/L/C.: _____
D.O.B.: _____
D/L/C.: _____

REFERRAL

NAME: _____
ADDRESS: _____

DATE: _____
STOCK NO: _____
SALESMAN: _____

EMAIL

SOLD TO BUYER	CO-BUYER
BUYER'S SOC. SEC. #	CO-BUYER'S SOC. SEC. #

STREET ADDRESS _____ CITY _____ COUNTY _____

STATE _____ ZIP CODE _____ HOME PHONE _____ WORK PHONE _____

YEAR	MAKE	MODEL	CYLS.	WT.	BODY TYPE	COLOR

ID NUMBER _____ MILEAGE _____

TRADE-IN DESCRIPTION

YR _____ MAKE _____ CYL.# _____
MODEL _____ COLOR _____
BODY _____ MILES _____
VIN # _____
STOCK # _____

SECOND TRADE-IN

YR _____ MAKE _____ CYL.# _____
MODEL _____ COLOR _____
BODY _____ MILES _____
VIN # _____
STOCK # _____

PAY OFF VERIFICATION

ON _____ GOOD UNTIL _____
ADDRESS _____
CITY/STATE/ZIP _____
DATE VERIFIED _____ AMT. $ _____
QUOTED BY _____ TAKEN BY _____
ACCOUNT # _____
TELEPHONE # _____

INSURANCE VERIFICATION

COMPANY _____
AGENT _____ PHONE _____
ADDRESS _____
VERIFIED BY _____ COLL DED. _____
EFF DATE _____ COMP DED. _____
POLICY # _____

UNDER THE FAIR CREDIT REPORTING ACT, I GRANT PERMISSION TO CHECK MY CREDIT SOURCES AND REFERENCES.

Signature _____ Date _____

On a cash transaction, this offer is not valid unless signed and accepted by an officer of the company or sales manager. On a credit transaction the Purchaser's offer is not accepted and the transaction is not consummated until (a) approved in writing by a dealer and a responsible bank or finance company, and (b) all disclosures required by the Federal Consumer Protection Act (Truth-in-Lending Act) have been given, and (c) Purchaser(s) and dealer have signed an Installment Sales Contract.

THIS IS NOT AN INVOICE. THIS IS A CONTRACT ONLY AND DOES NOT EVIDENCE THAT PAYMENT HAS BEEN MADE BY THE PURCHASER NAMED HEREIN. I HAVE READ THE MATTER PRINTED ON THE BACK HEREOF AND AGREE TO IT AS A PART OF THIS ORDER THE SAME AS IF IT WERE PRINTED ABOVE MY SIGNATURE.

CASH DELIVERED PRICE OF UNIT	25340.-
Discount	2667.08
SUBTOTAL	22672.92
LESS TRADE ALLOWANCE	
NET DIFFERENCE	
SERVICES — This charge represents costs and profit to the seller/dealer for items such as inspecting, cleaning and adjusting new and used vehicle and preparing documents related to the sale	699.00
FLORIDA BATTERY ($1.50) & TIRE ($5.00) FEE FLORIDA STATUTE #403.717	6.50
SUBTOTAL	23378.42
SALES TAX ON ABOVE	1452.71
CVR FEE (Computerized Vehicle Registration)	99.-
TITLE TRANSFER, LICENSE, REG. Transfer	100.-
BALANCE OWNED ON TRADE-IN	—
CASH SALE PRICE	25030.13
Rebate	2000.-
Ford Fin.	1000.-
SUB-TOTAL	22030.13
CASH DOWN / RECEIPT #	
BAL. DUE ON DELIVERY	
LIENHOLDER	

BUYER'S ACCEPTANCE _____ Accepted: Alan Jay _____ Date _____

THERE WILL BE A 10 WORKING DAY WAITING PERIOD FOR REFUNDS WHEN A CHECK HAS BEEN GIVEN AS A DEPOSIT.

KAN-006070 FL 9-NORMAL,NB,106070,DC181 3483 228130325 3113 AFV 1FTMF1C88 DKE59936 NB

Ford
Go Further
ford.com

VEHICLE DESCRIPTION
F-150
DK E59936

EXTERIOR
OXFORD WHITE
INTERIOR
GRAY VINYL 40/20/40

STANDARD EQUIPMENT
EXTERIOR
• DOOR HANDLES - BODY-COLOR
• LOCKING REMOVABLE SPARE TIRE
• REAR SOLAR TINTED GLASS
• SPARE TIRE & WHEEL LOCK
• 3YR/36K WARRANTY, CLASS 8
• CONTROL, SINGLE ZONE
• BLACK VINYL 3 DOOR 40/20/40 STRAIGHT BENCH SEAT
• TILT STEERING WHEEL
• 4-WHEEL DISC BRAKES W/ABS
• 12V AUXILIARY POWER POINT
• CUSTOMIZABLE TIE DOWN HOOKS
• FUEL CAPLESS FILLER
• FASTBACK COOLING SYSTEM
• FULLY BOXED FRAME
• HILL START ASSIST
• INTERVAL WIPERS
• MAINT FREE BATTERY
• MANUAL WINDOWS / LOCKS
• OUTBOARD MNTD REAR HEAD RESTRAINTS
• RWD RACK AND PINION STEER
• STABILIZER BAR, FRONT
• TRAILER SWAY CONTROL
• AM/FM STEREO
• ARMREST, FRONT CENTER
• MONOTONE PAINT
• AIR CONDITIONING
• REAR WINDOW DEFROSTER
• SECURITY ANTI-THEFT
• SOLID STATE ENTERTAINMENT SYS
• TIRE PRESSURE MONITOR SYS
• SYNCHRONIZED MANUAL TRANS
• SYNCHRONIZED POWER TAKE-OFF
• SYNCHRONIZED REVERSE MANUAL

INCLUDED ON THIS VEHICLE
EQUIPMENT GROUP 100A
XL SERIES

OPTIONAL EQUIPMENT
AM/FM RADIO W/CLOCK
17" GREY STYLED STEEL WHEELS
ELECTRONIC 6-SPD AUTO
P235/75R17 BSW ALL-TERRAIN
3.55 RATIO REGULAR AXLE
6750# GVWR PACKAGE
SELECT SHIFT TRANSMISSION
98 GALLON FUEL TANK
FRONT LICENSE PLATE BRACKET
TRAILER TOW PACKAGE

PRICE INFORMATION
BASE PRICE
TOTAL OPTIONS
TOTAL VEHICLE & OPTIONS
DESTINATION & DELIVERY

TOTAL MSRP $25,340.00

CONVOY

DC181 N RB 2X 335 606070

EPA DOT Fuel Economy and Environment

Fuel Economy
19 MPG
combined city/hwy
17 city
23 highway
5.3 gallons per 100 miles

Standard Pickups range from 13 to 21 MPG. The best vehicle rates 112 MPGe. Values are based on gasoline and do not reflect performance and ratings based on E85.

You spend $2,400 more in fuel costs over 5 years compared to the average new vehicle.

Annual fuel cost
$2,800

Fuel Economy & Greenhouse Gas Rating (air pollution only) 4 (1 Worst, 10 Best)
Smog Rating (tailpipe only) 6 (1 Worst, 10 Best)

This vehicle emits 430 grams CO_2 per mile. The best ranks 8 grams per mile (tailpipe only). Producing and distributing fuel also create emissions; learn more at fueleconomy.gov

fueleconomy.gov
The official U.S. government source for fuel economy information

Smartphone QR Code

GOVERNMENT 5-STAR SAFETY RATINGS

Overall Vehicle Score ★★★★
Based on the combined ratings of frontal, side and rollover.
Should ONLY be compared to other vehicles of similar size and weight.

Frontal Crash — Driver ★★★★ Passenger ★★★
Based on the risk of injury in a frontal impact.
Should ONLY be compared to other vehicles of similar size and weight.

Side Crash — Front seat ★★★★★ Rear seat Not Rated
Based on the risk of injury in a side impact.

Rollover ★★★★
Based on the risk of rollover in a single-vehicle crash.

Star ratings range from 1 to 5 stars (★★★★★), with 5 being the highest.
Source: National Highway Traffic Safety Administration (NHTSA)
www.safercar.gov or 1-888-327-4236

36 YEARS
FORD F-SERIES AMERICA'S BEST-SELLING TRUCK

1FTMF1C88

Ford Extended Service Plan

Ford ESP is the only extended service plan honored at every Ford dealership in the U.S. and Canada. See your dealer for additional details or visit www.FordDealer.com for more information.

FordCredit

Choose the vehicle you want. Whether you decide to lease or finance, you'll find the choice that's right for you. See your Ford Dealer for details or visit www.FordCredit.com.

04/04/2013 www.d2d.dealerconnection.com 22013032531 13

SCH. IX
P. 4 of 5

BUYERS ORDER

ALAN JAY Automotive Network

D.O.B.: _____
D/LIC.: _____
D.O.B.: _____
D/LIC.: _____

REFERRAL

NAME: _____
ADDRESS: _____
DATE: _____
STOCK NO. _____
SALESMAN: _____

EMAIL:
SOLD TO BUYER | CO-BUYER
BUYER'S SOC. SEC. # | CO-BUYER'S SOC. SEC. #
STREET ADDRESS | CITY | COUNTY
STATE | ZIP CODE | HOME PHONE | WORK PHONE

YEAR	MAKE	MODEL	CYLS.	WT.	BODY TYPE	COLOR
		I.D. NUMBER				MILEAGE

TRADE-IN DESCRIPTION
YR: _____ MAKE: _____ CYL#: _____
MODEL: _____ COLOR: _____
BODY: _____ MILES: _____
VIN #: _____
STOCK #: _____

SECOND TRADE-IN
YR: _____ MAKE: _____ CYL#: _____
MODEL: _____ COLOR: _____
BODY: _____ MILES: _____
VIN #: _____
STOCK #: _____

PAY OFF VERIFICATION
A/C: _____ GOOD UNTIL: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
DATE VERIFIED: _____ AMT: $ _____
QUOTED BY: _____ TAKEN BY: _____
ACCOUNT #: _____
TELEPHONE #: _____

INSURANCE VERIFICATION
COMPANY: _____
AGENT: _____ PHONE: _____
ADDRESS: _____
VERIFIED BY: _____ COLL DED: _____
EFF DATE: _____ COMP DED: _____
POLICY #: _____

UNDER THE FAIR CREDIT REPORTING ACT, I GRANT PERMISSION TO CHECK MY CREDIT SOURCES AND REFERENCES.

Signature _____ Date _____

On a cash transaction, this offer is not valid unless signed and accepted by an officer of the company or sales manager. On a credit transaction, the Purchaser's offer is not accepted and the transaction is not consummated until (a) approved in writing by a dealer and a responsible bank or finance company, and (b) all disclosures required by the Federal Consumer Protection Act (Truth-In-Lending Act) have been given, and (c) Purchaser(s) and dealer have signed an Installment Sales Contract.

THIS IS NOT AN INVOICE. THIS IS A CAR ORDER ONLY AND DOES NOT EVIDENCE THAT PAYMENT HAS BEEN MADE BY THE PURCHASER NAMED HEREIN. I HAVE READ THE MATTER PRINTED ON THE BACK HEREOF AND AGREE TO IT AS A PART OF THIS ORDER THE SAME AS IF IT WERE PRINTED ABOVE MY SIGNATURE

CASH DELIVERED PRICE OF UNIT	39325.-
Discount	4738.84
SUBTOTAL	34586.16
LESS TRADE ALLOWANCE	
NET DIFFERENCE	
SERVICES This charge represents costs and profit to the seller/dealer for items such as inspecting, cleaning and adjusting new and used vehicle and preparing documents related to the sale	699.00
FLORIDA BATTERY ($1.50) & TIRE ($5.00) FEE FLORIDA STATUTE #403.717	6.50
SUBTOTAL	35291.66
SALES TAX ON ABOVE	2167.50
CVR FEE (Computerized Vehicle Registration)	99.-
TITLE TRANSFER, LICENSE, REG. Transfer	100.-
BALANCE OWNED ON TRADE-IN	—
CASH SALE PRICE	37658.16
Rebate	4500.-
Ford Fin	1000.-
SUB-TOTAL	32158.16
CASH DOWN / RECEIPT #	
BAL. DUE ON DELIVERY	
LIENHOLDER	

BUYER'S ACCEPTANCE _____ Accepted: Alan Jay _____ Date _____

THERE WILL BE A 10 WORKING DAY WAITING PERIOD FOR REFUNDS WHEN A CHECK HAS BEEN GIVEN AS A DEPOSIT.

DRB-004224 FL 9-NORMAL,MB,104224,CL161 9575 220121126 1050 AFV 1FTFX1EF2 DFA86911 NB

Ford
Go Further
ford.com

VEHICLE DESCRIPTION
F-150
DF A86911

EXTERIOR
OXFORD WHITE
INTERIOR
GRAY CLOTH BUCKET SEATS

STANDARD EQUIPMENT

EXTERIOR
• CHROME TOW HOOKS
• DOOR HANDLES - CHROME
• EASY FUEL CAPLESS FILLER
• FOG LAMPS
• LOCKING REMOVABLE TAILGATE H
• POWER SLIDING REAR WINDOW
• W/DEFROST & PRIVACY TINT
• RUNNING BOARDS
• SPARE TIRE & WHEEL LOCK

INTERIOR
• 1 TOUCH DRIVER WIN
• 4.2" LCD CLUSTER SCREEN
• AUXILIARY AUDIO INPUT JACK
• COLOR COORDINATED CARPET AND FLOOR MATS
• CRUISE CONTROL/TILT WHEEL
• LEATHER WRAPPED STR WHEEL
• POWER DRIV SEAT - 6-WAY
• SIRIUS SAT RDO N/A AK/HI

ELECTRONIC
• 7 PIN TRAILER WY ASS
• 12V AUXILIARY POWER POINT
• 2 WAY REMOTE KEYLESS ENTRY
• AUTO HEADLAMP ON/OFF HOLMP
• AUTOLAMP CONTROL
• HEAT SEAT ASSIST
• POWER ADJUSTABLE PEDALS
• POWERHEATED MIRRORS
• PWR LOCKS, MIRRORS, WINDOWS
• PWR RACK AND PINION STEER
• REAR VIEW CAMERA
• SELECTSHIFT TRANSMISSION
• SYNCW MYFORD
• TRAILER BRAKE CONTROLLER
• TRAILER SWAY CONTROL
• TRAILER TOW PKG

SAFETY/SECURITY
• ADVANCETRAC WITH RSC
• AIRBAGS - FRONT SEAT
• MOUNTED SIDE IMPACT
• AIRBAGS - SAFETY CANOPY
• MYKEY
• PERIMETER ALARM
• SECURICODE KEYLESS KEYPAD
• SECURILOCK PASS ANTI THEFT
• SOS POST CRASH ALERT SYS
• TIRE PRESSURE MONITOR SYS

WARRANTY
• 5YR/36,000 BUMPER / BUMPER
• 5YR/60,000 POWERTRAIN
• 5YR/60,000 ROADSIDE ASSIST

INCLUDED ON THIS VEHICLE	(MSRP)
EQUIPMENT GROUP 302A	1,750.00
XLT SERIES	
XLT CONVENIENCE PACKAGE	
PWR DRIVER SEAT	
POWER ADJUSTABLE PEDALS	
SELECT SHIFT TRANSMISSION	
TRAILER BRAKE CONTROLLER	
XM RADIO W/6 MOS SERVICE	
XLT PLUS PACKAGE	
REVERSE SENSING SYSTEM	
POWER SLIDING REAR WINDOW	
REAR DEFROST/DEFOGGER	
XLT CHROME PACKAGE	
REAR VIEW CAMERA	
OPTIONAL EQUIPMENT	
SINGLE CD W/CD/SYNC BASIC	
5.0L V8 FFV ENGINE	NO CHARGE
3.55 RATIO REGULAR AXLE	NO CHARGE
76604 DWR PACKAGE	
36 GALLON FUEL TANK	
CLOTH BUCKET SEATS	300.00

PRICE INFORMATION	
BASE PRICE	35,700.00
TOTAL OPTIONS	4,350.00
TOTAL VEHICLE & OPTIONS	40,050.00
DESTINATION & DELIVERY	995.00
TOTAL BEFORE DISCOUNTS	41,075.00
302A EQUIPMENT GROUP DI	- 1,750.00
TOTAL SAVINGS	- 1,750.00

TOTAL MSRP $39,325.00

EPA DOT Fuel Economy and Environment

Fuel Economy
16 MPG
combined city/hwy
14 city
19 highway
6.2 gallons per 100 miles

Standard Pickups range from 13 to 21 MPG. The best vehicle rates 112 MPGe. Values are for fuel economy and do not reflect performance and ratings based on E85.

You spend $5,150 more in fuel costs over 5 years compared to the average new vehicle.

Annual fuel cost $3,350

Fuel Economy & Greenhouse Gas Rating (1=Worst, 10=Best): 3
Smog Rating (1=Worst, 10=Best): 6

This vehicle emits 561 grams CO_2 per mile. The best emits 0 grams per mile (tailpipe only). Producing and distributing fuel also create emissions. Learn more at fueleconomy.gov

Actual results will vary for many reasons, including driving conditions and how you drive and maintain your vehicle. The average new vehicle gets 23 MPG combined city/hwy. Cost estimates are based on 15,000 miles driven over 5 years. Cost estimates assume $3.25 per gallon for regular unleaded gasoline. Tailpipe CO_2 estimates are based on EPA's emissions factor for gasoline. Your results may differ depending on how and where you drive.

fueleconomy.gov
Calculate personalized estimates and compare vehicles

Smartphone QR Code

GOVERNMENT 5-STAR SAFETY RATINGS

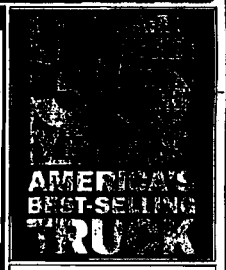
Overall Vehicle Score ★★★★
Based on the combined ratings of frontal, side and rollover. Should ONLY be compared to other vehicles of similar size and weight.

Frontal Crash — Driver ★★★★ — Passenger ★★★
Based on the risk of injury in a frontal impact. Should ONLY be compared to other vehicles of similar size and weight.

Side Crash — Front seat ★★★★★ — Rear seat ★★★★★
Based on the risk of injury in a side impact.

Rollover ★★★
Based on the risk of rollover in a single-vehicle crash.

Star ratings range from 1 to 5 stars (★★★★★), with 5 being the highest. Source: National Highway Traffic Safety Administration (NHTSA). www.safercar.gov or 1-888-327-4236



1FTFX1EF2DFA86911

Genuine Service Plan — Ford ESP is the only extended service plan featured at every Ford dealership in the U.S. and Canada. See your dealer for additional details or visit www.FordOwner.com for more information.

FordCredit — Choose the vehicle you want. Whether you decide to lease or finance, you'll find the choices that are right for you. See your Ford Dealer for details or visit www.FordCredit.com.

04/04/2013 www.d2d.dealerconnection.com 220121126 1050

EMPLOYEE LISTING
Schedule X

PLACID LAKES UTILITIES, INC.

Docket No.: 130025-WU

Highlands County

25-30.440 (8)
FIELD EMPLOYEES

Test Year Ended December 31, 2012

Employee Wage Schedule

Florida Public Service Commission

Company: Placid Lakes Utilities, Inc.
Docket No.: 130025-WU
Test Year Ended: 12/31/12
Interim [ ] Final [X]
Historical [X] Projected [ ]

Schedule X
Page 1 of 7
Preparer: Larry P. King, Treasurer

Payroll Tax	Wages	Rate	Payroll Tax
FICA	293,686.71	7.65%	22,467.03
UTA			392.98
Total			22,860.01
	Wage Limits		
# Employees	9		
FUTA	7,000	0.60%	378.00
SUTA	8,000	0.02%	14.98
Total		A	392.98

Employee	Function	Pay Rate	Hours Expensed	Expensed Wages	Expensed Bonuses	Capitalized / Wastewater	Annual Wages
C. Conklin	Clerical	$12.00	2,120.0	26,344.00	552.00		26,896.00
N. Brewer	Field	$20.19	2,120.0	40,299.57	807.60	7,599.63	48,706.80
P. Brewer	Officer	N/A	.0	10,000.00			10,000.00
P. Brewer	Admin. & Custome	$34.14	1,590.0	53,132.70	1,024.10		54,156.80
L. Buell	Customer	$16.71	588.5	9,787.83			9,787.83
L. Elowsky	Officer	N/A	.0	10,000.00			10,000.00
L. Elowsky	Administration	$32.00	848.0	26,566.35	512.05		27,078.40
B. Jones	Field	$9.81	2,122.0	19,363.33	392.40	1,008.69	20,764.42
L. King	Officer	N/A	.0	10,000.00			10,000.00
L. King	Accounting	$52.49	260.0	12,572.80	1,049.80		13,622.60
W. Powers	Field	$15.69	2,123.0	29,127.73	627.60	4,980.07	34,735.40
J. Reed	Field	$12.43	2,122.0	26,191.94	497.20	1,249.32	27,938.46
Annual Wages per W-2's				273,386.25	5,462.75	14,837.71	293,686.71
	FICA		7.650% B	22,467.03	2013 CPI-U (2.41%) pay raises		7,078
							Sch. B-3

	Payroll Taxes – Calculated (A + B)	22,860.01	
Sch. B-3, B-15	Adjust prior year payroll tax liabilities	1,487.00	603 - Salaries & Wages Officers 30,000.00
	Payroll Taxes – Per Books	24,347.01	601 - Salaries & Wages Employees 248,849.00
			Wages Capitalized & Wastewater 14,837.71
			Total Wages per W-2's 293,686.71

Sch. X
p. 2 of 7

9:10 PM
04/03/13

Placid Lakes Utilities, Inc.
Payroll Summary
January through December 2012

	Brewer, Nathan			Brewer, Peggy A			Buell, Lucille J			Conklin, Courtney A			Elowsky, Laura L		
	Hours	Rate	Jan - Dec 12	Hours	Rate	Jan - Dec 12	Hours	Rate	Jan - Dec 12	Hours	Rate	Jan - Dec 12	Hours	Rate	Jan - Dec 12
Employee Wages, Taxes and Adjustments															
Gross Pay															
Officer's Salary			0.00			10,000.00			0.00			0.00			10,000.00
Salary			6,800.00			0.00			0.00			0.00			0.00
Salary - Admin. & General			0.00			27,078.40			0.00			0.00			27,078.40
Salary - Customer Accounts			0.00			27,078.40			0.00			0.00			0.00
Hourly - Admin. & General			0.00			0.00			0.00			0.00			0.00
Hourly - Customer Accounts			0.00			0.00	588.5	16.71	9,787.83	2,120	13.80	26,896.00			0.00
Hourly - Distribution - Capital			0.00			0.00			0.00			0.00			0.00
Hourly - Distribution - Maint.	417	20.18	8,400.03			0.00			0.00			0.00			0.00
Hourly - Distribution - Oper.			0.00			0.00			0.00			0.00			0.00
Hourly - Meters - Capital			0.00			0.00			0.00			0.00			0.00
Hourly - Supply - Maintenance	481	20.19	9,689.79			0.00			0.00			0.00			0.00
Hourly - Supply - Operations	952	20.19	19,177.68			0.00			0.00			0.00			0.00
Hourly - Treatment - Operations			0.00			0.00			0.00			0.00			0.00
Hourly - Wastewater	270	20.19	5,439.30			0.00			0.00			0.00			0.00
Total Gross Pay	2,120		48,706.80			64,156.80	588.5		9,787.83	2,120		26,896.00			37,078.40
Deductions from Gross Pay															
Wage Garnishment			-15,572.96			0.00			0.00			0.00			0.00
Total Deductions from Gross Pay			-15,572.96			0.00			0.00			0.00			0.00
Adjusted Gross Pay	2,120		33,133.84			64,156.80	588.5		9,787.83	2,120		26,896.00			37,078.40
Taxes Withheld															
Federal Withholding			-6,792.00			-9,721.00			-1,360.00			-3,245.00			-3,560.00
Medicare Employee			-706.25			-930.27			-141.92			-389.99			-537.84
Social Security Employee			-2,045.69			-2,694.59			-411.09			-1,129.63			-1,557.29
Total Taxes Withheld			-9,543.94			-13,345.86			-1,913.01			-4,764.62			-5,654.93
Net Pay	2,120		23,589.90			50,810.94	588.5		7,874.82	2,120		22,131.38			31,423.47
Employer Taxes and Contributions															
Federal Unemployment			42.00			42.00			42.00			42.00			42.00
Medicare Company			706.25			930.27			141.92			389.99			537.64
Social Security Company			3,019.62			3,977.72			608.85			1,667.55			2,298.86
FL - Unemployment Company			1.72			1.72			1.62			1.62			1.72
Total Employer Taxes and Contributions			3,768.79			4,951.71			792.39			2,101.16			2,880.22

Sch. X
P. 3 of 7

Placid Lakes Utilities, Inc.
Payroll Summary
January through December 2012

	Jones, Brandon N			King, Larry P			Powers, Jr., William T.			Reed, James D.			TOTAL		
	Hours	Rate	Jan - Dec 12	Hours	Rate	Jan - Dec 12	Hours	Rate	Jan - Dec 12	Hours	Rate	Jan - Dec 12	Hours	Rate	Jan - Dec 12
Employee Wages, Taxes and Adjustments															
Gross Pay															
Officer's Salary			0.00			10,000.00			0.00			0.00			30,000.00
Salary			0.00			0.00			1,500.00			1,620.00			9,120.00
Salary - Admin. & General			0.00			0.00			0.00			0.00			54,156.80
Salary - Customer Accounts			0.00			0.00			0.00			0.00			27,078.40
Hourly - Admin. & General			0.00	260	52.49	13,622.60			0.00			0.00	260.00		13,622.60
Hourly - Customer Accounts	348	9.81	3,411.26			0.00	528	15.89	8,262.98	1,418	12.43	17,599.02	5,003.50		65,957.09
Hourly - Distribution - Capital			0.00			0.00			0.00	2	12.43	24.86	2.00		24.86
Hourly - Distribution - Maint.	1,455	9.81	14,231.63			0.00	860	15.66	13,462.71	562	12.43	6,966.81	3,294.00		43,061.18
Hourly - Distribution - Oper.	319	9.81	3,121.53			0.00	449	15.69	7,031.72	139	12.43	1,727.77	907.00		11,881.02
Hourly - Meters - Capital		9.81	0.00			0.00			0.00			0.00			0.00
Hourly - Supply - Maintenance			0.00			0.00			0.00			0.00	481.00		8,689.79
Hourly - Supply - Operations			0.00			0.00			0.00			0.00	952.00		19,177.68
Hourly - Treatment - Operations			0.00			0.00	24	15.69	376.56			0.00	24.00		376.56
Hourly - Wastewater			0.00			0.00	262	15.89	4,101.43			0.00	532.00		9,540.73
Total Gross Pay	2,122		20,764.42	260		23,622.60	2,123		34,735.40	2,122		27,938.46	11,455.50		293,686.71
Deductions from Gross Pay															
Wage Garnishment			0.00			0.00			0.00			0.00			-15,572.96
Total Deductions from Gross Pay			0.00			0.00			0.00			0.00			-15,572.96
Adjusted Gross Pay	2,122		20,764.42	260		23,622.60	2,123		34,735.40	2,122		27,938.46	11,455.50		278,113.75
Taxes Withheld															
Federal Withholding			-1,747.00			-2,105.00			-4,457.00			-1,214.00			-34,201.00
Medicare Employee			-301.08			-342.53			-503.66			-405.11			-4,258.45
Social Security Employee			-872.11			-992.15			-1,458.89			-1,173.42			-12,334.86
Total Taxes Withheld			-2,920.19			-3,439.68			-6,419.55			-2,792.53			-50,794.31
Net Pay	2,122		17,844.23	260		20,182.92	2,123		28,315.85	2,122		25,145.93	11,455.50		227,319.44
Employer Taxes and Contributions															
Federal Unemployment			42.00			42.00			42.00			42.00			378.00
Medicare Company			301.08			342.53			503.66			405.11			4,258.45
Social Security Company			1,287.39			1,464.60			2,153.59			1,732.18			18,208.56
FL - Unemployment Company			1.62			1.62			1.72			1.62			14.98
Total Employer Taxes and Contributions			1,632.09			1,850.75			2,700.97			2,180.91			22,859.99

Employee Bonuses – 4 Years

Company: Placid Lakes Utilities, Inc.
Docket No.: 130025-WU
Test Year Ended: 12/31/12
Interim [ ] Final [X]
Historical [X] Projected [ ]

Florida Public Service Commission

Schedule X
Page 4 of 7
Preparer: Larry P. King, Treasurer

Employee	Bonuses Paid 2009 to 2012			
	2009	2010	2011	2012
C. Conklin	0.00	0.00	0.00	552.00
D. Berrios	520.40	533.60	0.00	0.00
N. Brewer	760.00	779.20	788.40	807.60
P. Brewer	0.00	0.00	1,000.00	1,024.10
L. Buell	629.33	0.00	652.80	0.00
L. Elowsky	0.00	0.00	500.00	512.05
B. Jones	368.80	378.00	382.40	392.40
L. King	375.00	0.00	1,025.00	1,049.80
W. Powers	590.80	605.60	612.80	627.60
J. Reed	468.40	480.00	485.60	497.20
Total	3,712.73	2,776.40	5,447.00	5,462.75

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p. 5 of 7

PLACID LAKES UTILITIES, INC.				
FIELD EMPLOYEES				
NAME	DUTIES/ RESPONSIBILITIES	CERTIFICATES		ALLOCATION
				COPY OF TIME SHEET AND WORKSHEET
Nathan Brewer	Licensed Operator/	DW0014995		ARE ATTACHED.
	Supervisor	WW0014987		Hours are kept and billed according the
		Hazardous Materials		employees hourly rate.
		Operations/OSHA Level II		
		MOT		Worksheet gives job description for employee
		Underground Utility License		Correct account # for bookkeeper
William T Powers, Jr.	Assistant Supervisor	WW0015264		
	Inventory control	Hazardous Materials		
	Valve Locate/Exercise	Operations/OSHA Level II		
	Meter Reading, Meter	FW&PCOA Systems		
	Installation, General	Operators Course		
	labor	Distribution Manager Level III		
James D. Reed	General Labor,	Hazardous Materials		
	Meter Reading	Operations/OSHA Level II		
	Meter Install	FW&PCOA Systems		
	Valve Exercise	Operators Course		
		Distribution Manager Level III		
Brandon Jones	General Labor,			
	Meter Reading			
	Meter Install			
	Valve Exercise			

Sch. X
P. 6 of 7

EXAMPLE TIME SHEET

PLACID LAKES UTILITIES TIME SHEET WORKSHEET

ACCT#	JOB DESCRIPTIONS	THURSDAY	FRIDAY	SATURDAY	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	[redacted]
426.1	Sewer Plant								NEW SERVICE
601.1	Daily Water Plant Readings								day/hours
601.1	NATHAN/vacation,holiday,sick								
601.2	Emergency Maint. / Plant								NEW SERVICE
601.2	Annual Tank Maint.								day/hours
601.3	Daily Water Plant Tests								
601.3	Monthly Water Samples								NEW SERVICE
601.3	Monthly Water Operation Report								day/hours
601.3	DEP visits								
601.3	BILLY/vacation, holiday, sick								METER REPLACEMENT
601.4	Emergency Maint. / Treatment								day/hours
601.5	Locates								
601.5	Flushing Lines								METER REPLACEMENT
601.5	Emergency Locates								day/hours
601.5	Valve Exercising								
601.6	Vehicle Maint. / Trucks								METER REPLACEMENT
601.6	Barn Maintenance								day/hours
601.6	Emergency Maint. / Distribution								
601.6	Water Line Break								METER REPLACEMENT
601.6	Paper Work								day/hours
601.6	Clean Up Around Meters								
601.6	Check Auto Flushes								METER REPLACEMENT
601.6	Clean Up Around Blow-Offs								day/hours
601.6	Burying Y's								
601.6	Inventory								
601.6	MISC / ADMINISTRATION								LINE REPAIR
601.6	GENERAL MAINTENANCE								day/hours
601.6	TIDYING UP BARN								
601.7	Customer Work Orders								LINE REPAIR
601.7	Emergency Customer Orders								day/hours
601.7	Monthly Meter Reading								
601.7	Vehicle Maint. / Golf Cart								LINE REPAIR
601.7	BRANDON/vacation, holiday, sick								day/hours
601.7	JD/vacation, holiday, sick								
601.8	pick Up Supplies								LINE REPAIR
601.8	CEU Classes								day/hours
601.8	OSH / Post if not specific								
601.8	PSC Meetings								VALVE REPLACEMENT
FOR ANY OF THE BELOW CAPITALIZATION ACCOUNTS——PLEASE MAKE NOTES ON RIGHT SIDE OF PAGE as to hours spent on each job and location of job									day/hours
333.4 / 334.4	New Meter Services								VALVE REPLACEMENT
333.4 / 334.4	Polytubing								day/hours
334.4	Valve Replacements								
334.4	Meter Replacements								POLYTUBING
334.4	Meter & Access Assembly								day/hours
331.4	Meet w/County — Line Extensions								
331.4	Line Repairs								INSTALL PIPE UNDER DRIVE
331.4	Install Pipe Under Driveway								day/hours

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Example Time Sheet

Placid Lakes Utilities, Inc.
Weekly Time Sheet

Week of

Employee	601.1 Supply Source Operations	601.2 Supply Source Maintenance	Supply Source Capital (Pwr Gen Eq-310.2; Strct Imprv-304.3; Pump Eq -311.2; Other Pmt Misc Eq-33)	601.3 Treatment Operations	601.4 Treatment Maintenance	320.3 Treatment Capital	601.5 Distribution Operations	601.6 Distribution Maintenance	Distribution Capital (Serv-333.4; m-334.4/L-331.4)	601.7 Customer Accounts	601.8 Administrative & General	340.5 General Plant Capital	426.1 Waste Water	Total
Nathan Brewer														
THURSDAY														0
FRIDAY														0
SATURDAY														0
SUNDAY														0
MONDAY														0
TUESDAY														0
WEDNESDAY														0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0