

ORIGINAL

Gibsonia Estates

Docket No. 060368-WS

Application to Increase Rates and Charges
For a "Class A" Utility
In

Florida

VOLUME 6

Book 7

Set 9 of 57

Containing
Additional Engineering Requirements

Monthly Operating Reports

- CMP _____
- COM _____
- CTR _____
- ECR 1 _____
- GCL _____
- OPC _____
- RCA _____
- SCR _____
- SGA _____
- SEC _____
- OTH _____

Aqua Utilities Florida, Inc.

DOCUMENT NUMBER-DATE

00839 JAN 26 8

FPSC-COMMISSION CLERK

Aqua Utilities Florida, Inc. Monthly Operating Reports

Gibsonia Estates

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

| | | | | | |
|--|---|--|--|--|-------------------------------------|
| PWS Name: | Gibsonia | | | PWS Identification Number: | 6530079 |
| PWS Type: | <input checked="" type="checkbox"/> Community | <input type="checkbox"/> Non-Transient Non-Community | <input type="checkbox"/> Transient Non-Community | <input type="checkbox"/> Consecutive | |
| Number of Service Connections at End of Month: | 175 | | | Total Population Served at End of Month: | 414 |
| PWS Owner: | Florida Water Services | | | | |
| Contact Person: | Craig Anderson | | | Contact Person's Title: | VP Environmental Services |
| Contact Person's Mailing Address: | P.O. Box 609520 | | City: | Orlando | State: Florida Zip Code: 32860-9520 |
| Contact Person's Telephone Number: | (407) 598-4199 | | | Contact Person's Fax Number: | (407) 598-4217 |
| Contact Person's E-Mail Address: | craiga@florida-water.com | | | | |

B. Water Treatment Plant Information

| | | | | | | |
|---|--|---|-----------------------|---|--------------------------------|--|
| Plant Name: | Gibsonia | | | Plant Telephone Number: | 863-858-2504 | |
| Plant Address: | 931 Gib-Galloway Road | | City: | Lakeland | State: Florida Zip Code: 33810 | |
| Type of Water Treatment by Plant: | <input checked="" type="checkbox"/> Raw Ground Water | <input type="checkbox"/> Purchased Finished Water | | | | |
| Permitted Maximum Day Operating Capacity of Plant, gallons per day: | 100,000 | | | | | |
| Plant Category (per subsection 62-699.310(4), F.A.C.): | V | | | Plant Class (per subsection 62-699.310(4), F.A.C.): | C | |
| Licensed Operators | Name | License Class | License Number | Day(s)/ Shift(s) Worked | | |
| Lead/Chief Operator: | David Ridriguez | A | 7880 | Days 1st Shift | | |
| Other Operators: | Steve Fuller | B | 7519 | Days 1st Shift | | |
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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 _____ David Rodriguez _____ A-7880 _____
 Printed or Typed Name License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonia

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

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

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

| Day of the Month | 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 Demostate 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 | | 24.0 | 56,000 | | | | | | | | | | | | |
| 2 | X | 24.0 | 56,000 | | 0.4 | | | | | | | | | 0.5 | |
| 3 | | 24.0 | 71,000 | | | | | | | | | | | | |
| 4 | | 24.0 | 71,000 | | | | | | | | | | | | |
| 5 | X | 24.0 | 71,000 | | 0.4 | | | | | | | | | 0.9 | |
| 6 | | 24.0 | 68,500 | | | | | | | | | | | | |
| 7 | X | 24.0 | 68,500 | | 1.2 | | | | | | | | | 1.0 | |
| 8 | | 24.0 | 58,500 | | | | | | | | | | | | |
| 9 | X | 24.0 | 58,500 | | 1.3 | | | | | | | | | 0.9 | |
| 10 | | 24.0 | 78,333 | | | | | | | | | | | | |
| 11 | | 24.0 | 78,333 | | | | | | | | | | | | |
| 12 | X | 24.0 | 80,333 | | 1.6 | | | | | | | | | 1.1 | |
| 13 | | 24.0 | 60,500 | | | | | | | | | | | | |
| 14 | X | 24.0 | 60,500 | | 1.5 | | | | | | | | | 1.0 | |
| 15 | | 24.0 | 59,500 | | | | | | | | | | | | |
| 16 | X | 24.0 | 59,500 | | 1.3 | | | | | | | | | 1.0 | |
| 17 | | 24.0 | 49,000 | | | | | | | | | | | | |
| 18 | | 24.0 | 49,000 | | | | | | | | | | | | |
| 19 | X | 24.0 | 50,000 | | 1.5 | | | | | | | | | 1.0 | |
| 20 | | 24.0 | 57,000 | | | | | | | | | | | | |
| 21 | X | 24.0 | 57,000 | | 1.5 | | | | | | | | | 1.0 | |
| 22 | | 24.0 | 45,000 | | | | | | | | | | | | |
| 23 | X | 24.0 | 45,000 | | 1.5 | | | | | | | | | 0.9 | |
| 24 | | 24.0 | 56,667 | | | | | | | | | | | | |
| 25 | | 24.0 | 56,667 | | | | | | | | | | | | |
| 26 | X | 24.0 | 57,667 | | 1.5 | | | | | | | | | 1.0 | |
| 27 | | 24.0 | 57,500 | | | | | | | | | | | | |
| 28 | X | 24.0 | 57,500 | | 1.5 | | | | | | | | | 1.1 | |
| 29 | | 24.0 | 49,500 | | | | | | | | | | | | |
| 30 | X | 24.0 | 49,500 | | 1.6 | | | | | | | | | 1.2 | |
| 31 | | 24.0 | | | | | | | | | | | | | |
| Total | | | 1,793,000 | | | | | | | | | | | | |
| Average | | | 57,839 | | | | | | | | | | | | |
| Maximum | | | 80,333 | | | | | | | | | | | | |

* Refer to the instructions for this report to determine which plants must provide this information.
DEP Form 62-885-900 (3) Effective August 28, 2003

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

| | | | | | | |
|--|---|--|--|--|---------------------------|---------|
| PWS Name: | Gibsonia | | | PWS Identification Number: | 6530079 | |
| PWS Type: | <input checked="" type="checkbox"/> Community | <input type="checkbox"/> Non-Transient Non-Community | <input type="checkbox"/> Transient Non-Community | <input type="checkbox"/> Consecutive | | |
| Number of Service Connections at End of Month: | 175 | | | Total Population Served at End of Month: | 414 | |
| PWS Owner: | Florida Water Services | | | | | |
| Contact Person: | Craig Anderson | | | Contact Person's Title: | VP Environmental Services | |
| Contact Person's Mailing Address: | P.O. Box 609520 | | City: | Orlando | State: | Florida |
| Contact Person's Telephone Number: | (407) 598-4199 | | Contact Person's Fax Number: | (407) 598-4217 | | |
| Contact Person's E-Mail Address: | craigca@florida-water.com | | | | | |

B. Water Treatment Plant Information

| | | | | | | |
|---|--|----------------------|---|---|--------------|---------|
| Plant Name: | Gibsonia | | | Plant Telephone Number: | 863-858-2504 | |
| Plant Address: | 931 Gib-Galloway Road | | City: | Lakeland | State: | Florida |
| Type of Water Treatment by Plant: | <input checked="" type="checkbox"/> Raw Ground Water | | <input type="checkbox"/> Purchased Finished Water | | | |
| Permitted Maximum Day Operating Capacity of Plant, gallons per day: | 100,000 | | | | | |
| Plant Category (per subsection 62-699.310(4), F.A.C.): | V | | | Plant Class (per subsection 62-699.310(4), F.A.C.): C | | |
| Licensed Operators: | Name | License Class | License Number | Day(s) / Shift(s) Worked | | |
| Lead/Chief Operator: | David Ridriguez | A | 7880 | Days 1st Shift | | |
| Other Operators: | Steve Fuller | B | 7519 | Days 1st Shift | | |
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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 | David Rodriguez | A-7880 |
| | Printed or Typed Name | License Number |

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

| | | | |
|---|--|---|----------------|
| PWS Name: Gibsonia | | PWS Identification Number: 6530079 | |
| PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community | | <input type="checkbox"/> Consecutive | |
| Number of Service Connections at End of Month: 175 | | Total Population Served at End of Month: 414 | |
| PWS Owner: Florida Water Services | | | |
| Contact Person: Craig Anderson | | Contact Person's Title: VP Environmental Services | |
| Contact Person's Mailing Address: P.O. Box 609520 | | City: Orlando | State: Florida |
| Contact Person's Telephone Number: (407) 598-4199 | | Zip Code: 32860-9520 | |
| Contact Person's E-Mail Address: craiga@florida-water.com | | Contact Person's Fax Number: (407) 598-4217 | |

B. Water Treatment Plant Information

| Plant Name: Gibsonia | | Plant Telephone Number: 863-858-2504 | |
|--|-----------------|---|----------------|
| Plant Address: 931 Gib-Galloway Road | | City: Lakeland | State: Florida |
| Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water | | Zip Code: 33810 | |
| Permitted Maximum Day Operating Capacity of Plant, gallons per day: 100,000 | | | |
| Plant Category (per subsection 62-699.310(4), F.A.C.): V | | Plant Class (per subsection 62-699.310(4), F.A.C.): C | |
| Licensed Operators | Name | License Class | License Number |
| Lead/Chief Operator: | David Ridriguez | A | 7880 |
| Other Operators: | Steve Fuller | B | 7519 |
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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 | David Rodriguez Printed or Typed Name | A-7880 License Number |
|--------------------|--|--------------------------|

MONTHLY OPERATION REPORT FOR PW"Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonia

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

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

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

| Day of the Month | 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 Demostate 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 | 24.0 | 148,000 | | 1.2 | | | | | | | | 1.0 | |
| 2 | | 24.0 | 47,000 | | | | | | | | | | | |
| 3 | X | 24.0 | 47,000 | | 2.0 | | | | | | | | 1.4 | |
| 4 | | 24.0 | 51,500 | | | | | | | | | | | |
| 5 | X | 24.0 | 51,500 | | 0.4 | | | | | | | | 0.6 | |
| 6 | | 24.0 | 59,333 | | | | | | | | | | | |
| 7 | | 24.0 | 59,333 | | | | | | | | | | | |
| 8 | X | 24.0 | 59,333 | | 1.4 | | | | | | | | 1.0 | |
| 9 | | 24.0 | 56,500 | | | | | | | | | | | |
| 10 | X | 24.0 | 56,500 | | 1.5 | | | | | | | | 1.1 | |
| 11 | | 24.0 | 49,000 | | | | | | | | | | | |
| 12 | X | 24.0 | 49,000 | | 0.4 | | | | | | | | 0.5 | |
| 13 | | 24.0 | 63,666 | | | | | | | | | | | |
| 14 | | 24.0 | 63,666 | | | | | | | | | | | |
| 15 | X | 24.0 | 63,666 | | 1.5 | | | | | | | | 1.0 | |
| 16 | | 24.0 | 49,000 | | | | | | | | | | | |
| 17 | X | 24.0 | 49,000 | | 1.0 | | | | | | | | 0.8 | |
| 18 | | 24.0 | 48,500 | | | | | | | | | | | |
| 19 | X | 24.0 | 48,500 | | 1.0 | | | | | | | | 0.6 | |
| 20 | | 24.0 | 58,667 | | | | | | | | | | | |
| 21 | | 24.0 | 58,667 | | | | | | | | | | | |
| 22 | X | 24.0 | 58,667 | | 1.1 | | | | | | | | 0.9 | |
| 23 | | 24.0 | 59,000 | | | | | | | | | | | |
| 24 | X | 24.0 | 59,000 | | 1.5 | | | | | | | | 1.0 | |
| 25 | | 24.0 | 55,500 | | | | | | | | | | | |
| 26 | X | 24.0 | 55,500 | | 1.0 | | | | | | | | 0.8 | |
| 27 | | 24.0 | 59,000 | | | | | | | | | | | |
| 28 | | 24.0 | 59,000 | | | | | | | | | | | |
| 29 | X | 24.0 | 59,000 | | 1.2 | | | | | | | | 0.9 | |
| 30 | | 24.0 | 65,500 | | | | | | | | | | | |
| 31 | X | 24.0 | 65,500 | | 1.0 | | | | | | | | 0.8 | |
| Total | | | 1,832,999 | | | | | | | | | | | |
| Average | | | 59,129 | | | | | | | | | | | |
| Maximum | | | 65,500 | | | | | | | | | | | |

* Refer to the instructions for this report to determine which plants must provide this information.
 Effective August 28, 2003

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonsia

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

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

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

| Day of the Month | 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 Demostate 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 | | 24.0 | 59,000 | | | | | | | | | | | |
| 2 | X | 24.0 | 59,000 | | 0.4 | | | | | | | | 0.6 | |
| 3 | | 24.0 | 80,666 | | | | | | | | | | | |
| 4 | | 24.0 | 80,666 | | | | | | | | | | | |
| 5 | X | 24.0 | 80,666 | | 1.5 | | | | | | | | 1.0 | |
| 6 | | 24.0 | 90,500 | | | | | | | | | | | |
| 7 | X | 24.0 | 90,500 | | 2.2 | | | | | | | | 1.4 | |
| 8 | | 24.0 | 65,000 | | | | | | | | | | | |
| 9 | X | 24.0 | 65,000 | | 1.5 | | | | | | | | 1.1 | |
| 10 | | 24.0 | 66,333 | | | | | | | | | | | |
| 11 | | 24.0 | 66,333 | | | | | | | | | | | |
| 12 | X | 24.0 | 66,333 | | 0.5 | | | | | | | | 0.5 | |
| 13 | | 24.0 | 52,000 | | | | | | | | | | | |
| 14 | X | 24.0 | 52,000 | | 2.2 | | | | | | | | 1.2 | |
| 15 | | 24.0 | 58,500 | | | | | | | | | | | |
| 16 | X | 24.0 | 58,500 | | 2.0 | | | | | | | | 1.4 | |
| 17 | | 24.0 | 69,000 | | | | | | | | | | | |
| 18 | | 24.0 | 69,000 | | | | | | | | | | | |
| 19 | X | 24.0 | 69,000 | | 1.5 | | | | | | | | 1.2 | |
| 20 | | 24.0 | 81,000 | | | | | | | | | | | |
| 21 | X | 24.0 | 81,000 | | 1.5 | | | | | | | | 1.1 | |
| 22 | | 24.0 | 71,000 | | | | | | | | | | | |
| 23 | X | 24.0 | 71,000 | | 1.4 | | | | | | | | 1.0 | |
| 24 | | 24.0 | 85,667 | | | | | | | | | | | |
| 25 | | 24.0 | 85,667 | | | | | | | | | | | |
| 26 | X | 24.0 | 85,667 | | 0.7 | | | | | | | | 0.7 | |
| 27 | | 24.0 | 63,500 | | | | | | | | | | | |
| 28 | X | 24.0 | 63,500 | | 0.8 | | | | | | | | 0.7 | |
| 29 | | 24.0 | 67,500 | | | | | | | | | | | |
| 30 | X | 24.0 | 67,500 | | 0.5 | | | | | | | | 0.6 | |
| Total | | | 2,120,998 | | | | | | | | | | | |
| Average | | | 70,700 | | | | | | | | | | | |
| Maximum | | | 90,500 | | | | | | | | | | | |

* Refer to the instructions for this report to determine which plants must provide this information
 DEP Form 62-985,900(3)
 Effective August 28, 2003

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

| | | | |
|---|--|---|----------------|
| PWS Name: Gibsonia | | PWS Identification Number: 6530079 | |
| PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community | | <input type="checkbox"/> Consecutive | |
| Number of Service Connections at End of Month: 175 | | Total Population Served at End of Month: 414 | |
| PWS Owner: Florida Water Services | | | |
| Contact Person: Craig Anderson | | Contact Person's Title: VP Environmental Services | |
| Contact Person's Mailing Address: P.O. Box 609520 | | City: Orlando | State: Florida |
| Contact Person's Telephone Number: (407) 598-4199 | | Contact Person's Fax Number: (407) 598-4217 | |
| Contact Person's E-Mail Address: craiga@florida-water.com | | | |

B. Water Treatment Plant Information

| Plant Name: Gibsonia | | Plant Telephone Number: 863-858-2504 | | |
|--|-----------------|---|----------------|--------------------------|
| Plant Address: 931 Gib-Galloway Road | | City: Lakeland | State: Florida | |
| Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water | | | | |
| Permitted Maximum Day Operating Capacity of Plant, gallons per day: 100,000 | | | | |
| Plant Category (per subsection 62-699.310(4), F.A.C.): V | | Plant Class (per subsection 62-699.310(4), F.A.C.): C | | |
| Licensed Operators | Name | License Class | License Number | Day(s) / Shift(s) Worked |
| Lead/Chief Operator: | David Rodriguez | A | 7880 | Days 1st Shift |
| Other Operators: | Steve Fuller | B | 7519 | Days 1st Shift |
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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 | David Rodriguez Printed or Typed Name | A-7880 License Number |
|--------------------|--|--------------------------|

MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsontia May, 2004

III. Daily Data for the Month/Year of:

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

| 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 | Lowest CT Before or at First Customer During Peak Flow, mg-min/L | Temp of Water, °C | pH of Water, if Applicable | Minimum CT Required, mg-min/L | UV Dose, mW-sec/cm ² | Lowest UV Dose Required, mW-sec/cm ² | Minimum Disinfectant Concentration at Remote Point in Distribution System, mg/L | CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable* | | CT Calculations | |
|---|--------------------------|--|---------------------|---|------------------------------------|--|-------------------|----------------------------|-------------------------------|---------------------------------|---|---|---|---------|-----------------|---------|
| | | | | | | | | | | | | | UV Dose | UV Dose | UV Dose | UV Dose |
| 1 | | 53,000 | 24.0 | | | | | | | | | | | | | |
| 2 | | 53,000 | 24.0 | X | 1.2 | | | | | | | | | | | |
| 3 | | 53,000 | 24.0 | X | 1.2 | | | | | | | | | | | |
| 4 | | 54,000 | 24.0 | | | | | | | | | | | | | |
| 5 | | 54,000 | 24.0 | X | 1.5 | | | | | | | | | | | |
| 6 | | 61,000 | 24.0 | | | | | | | | | | | | | |
| 7 | | 61,000 | 24.0 | X | 1.5 | | | | | | | | | | | |
| 8 | | 65,000 | 24.0 | | | | | | | | | | | | | |
| 9 | | 65,000 | 24.0 | | | | | | | | | | | | | |
| 10 | | 65,000 | 24.0 | X | 1.0 | | | | | | | | | | | |
| 11 | | 67,500 | 24.0 | | | | | | | | | | | | | |
| 12 | | 67,500 | 24.0 | X | 0.5 | | | | | | | | | | | |
| 13 | | 66,000 | 24.0 | | | | | | | | | | | | | |
| 14 | | 66,000 | 24.0 | X | 1.2 | | | | | | | | | | | |
| 15 | | 74,000 | 24.0 | | | | | | | | | | | | | |
| 16 | | 74,000 | 24.0 | | | | | | | | | | | | | |
| 17 | | 74,000 | 24.0 | X | 1.2 | | | | | | | | | | | |
| 18 | | 79,500 | 24.0 | | | | | | | | | | | | | |
| 19 | | 79,500 | 24.0 | X | 1.0 | | | | | | | | | | | |
| 20 | | 65,000 | 24.0 | | | | | | | | | | | | | |
| 21 | | 65,000 | 24.0 | X | 1.1 | | | | | | | | | | | |
| 22 | | 105,000 | 24.0 | | | | | | | | | | | | | |
| 23 | | 105,000 | 24.0 | | | | | | | | | | | | | |
| 24 | | 105,000 | 24.0 | X | 0.6 | | | | | | | | | | | |
| 25 | | 83,000 | 24.0 | | | | | | | | | | | | | |
| 26 | | 83,000 | 24.0 | X | 0.7 | | | | | | | | | | | |
| 27 | | 90,000 | 24.0 | | | | | | | | | | | | | |
| 28 | | 90,000 | 24.0 | X | 1.0 | | | | | | | | | | | |
| 29 | | 84,667 | 24.0 | | | | | | | | | | | | | |
| 30 | | 84,667 | 24.0 | | | | | | | | | | | | | |
| 31 | | 84,667 | 24.0 | X | 1.6 | | | | | | | | | | | |
| Total | | 2,276,999 | | | | | | | | | | | | | | |
| Average | | 73,452 | | | | | | | | | | | | | | |
| Maximum | | 105,000 | | | | | | | | | | | | | | |

* Refer to DEPARTMENT 955 900(3) for this report to determine which plants must provide this information. Effective August 28, 2003

Docket No. 060368-WS

Application to Increase Rates and Charges
For a "Class A" Utility

In

Florida

Report Missing:

Gibsonia Estates

Month/Year

June 2004

Aqua Utilities Florida, Inc.

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

| | | | |
|--|--|--|----------------|
| PWS Name: | Gibsonia | PWS Identification Number: | 6530079 |
| PWS Type: | <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive | | |
| Number of Service Connections at End of Month: | 175 | Total Population Served at End of Month: | 414 |
| PWS Owner: | Aqua Utilities Florida | | |
| Contact Person: | Brian Heath | Contact Person's Title: | Area Manager |
| Contact Person's Mailing Address: | 2315 Griffin Rd | City: | Leesburg |
| | | State: | Florida |
| | | Zip Code: | 34748 |
| Contact Person's Telephone Number: | (352) 787-0980 | Contact Person's Fax Number: | (352) 787-6333 |
| Contact Person's E-Mail Address: | beheath@aquaaamerica.com | | |

B. Water Treatment Plant Information

| | | | |
|---|--|---|--------------|
| Plant Name: | Gibsonia | Plant Telephone Number: | 863-858-2504 |
| Plant Address: | 931 Gib-Galloway Road | City: | Lakeland |
| | | State: | Florida |
| | | Zip Code: | 33810 |
| Type of Water Treatment by Plant: | <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water | | |
| Permitted Maximum Day Operating Capacity of Plant, gallons per day: | 100,000 | | |
| Plant Category (per subsection 62-699.310(4), F.A.C.): | V | Plant Class (per subsection 62-699.310(4), F.A.C.): | C |

| Licensed Operators | Name | License Class | License Number | Day(s) / Shift(s) Worked |
|----------------------|-----------------|---------------|----------------|--------------------------|
| Lead/Chief Operator: | Will Fontaine | C | 6813 | Days 1st Shift |
| Other Operators: | David Rodriguez | A | 7880 | Days 1st Shift |
| | Steve Fuller | B | 7519 | Days 1st Shift |
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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 | Will Fontaine _____ Printed or Typed Name | C-6813 _____ License Number |
|-----------------------------|---|-----------------------------------|

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonsia

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

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

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

| Day of the Month | 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 Demostate 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 | | 24.0 | 581,000 | | | | | | | | | | | |
| 2 | X | 24.0 | 581,000 | | 0.8 | | | | | | | | 0.6 | |
| 3 | | 24.0 | 41,000 | | | | | | | | | | | |
| 4 | | 24.0 | 41,000 | | | | | | | | | | | |
| 5 | X | 24.0 | 41,000 | | 0.6 | | | | | | | | 0.5 | |
| 6 | | 24.0 | 55,000 | | | | | | | | | | | |
| 7 | X | 24.0 | 55,000 | | 0.8 | | | | | | | | 0.6 | |
| 8 | | 24.0 | 38,500 | | | | | | | | | | | |
| 9 | X | 24.0 | 38,500 | | 0.8 | | | | | | | | 0.8 | |
| 10 | | 24.0 | 60,000 | | | | | | | | | | | |
| 11 | | 24.0 | 60,000 | | | | | | | | | | | |
| 12 | X | 24.0 | 60,000 | | 1.0 | | | | | | | | 0.8 | |
| 13 | | 24.0 | 52,500 | | | | | | | | | | | |
| 14 | X | 24.0 | 52,500 | | 1.5 | | | | | | | | 1.0 | |
| 15 | | 24.0 | 49,500 | | | | | | | | | | | |
| 16 | X | 24.0 | 49,500 | | 0.9 | | | | | | | | 0.9 | |
| 17 | | 24.0 | 45,333 | | | | | | | | | | | |
| 18 | | 24.0 | 45,333 | | | | | | | | | | | |
| 19 | X | 24.0 | 45,333 | | 0.9 | | | | | | | | 0.7 | |
| 20 | | 24.0 | 42,000 | | | | | | | | | | | |
| 21 | X | 24.0 | 42,000 | | 0.8 | | | | | | | | 0.8 | |
| 22 | | 24.0 | 51,500 | | | | | | | | | | | |
| 23 | X | 24.0 | 51,500 | | 0.9 | | | | | | | | 0.8 | |
| 24 | | 24.0 | 57,333 | | | | | | | | | | | |
| 25 | | 24.0 | 57,333 | | | | | | | | | | | |
| 26 | X | 24.0 | 57,333 | | 0.8 | | | | | | | | 0.8 | |
| 27 | | 24.0 | 51,000 | | | | | | | | | | | |
| 28 | X | 24.0 | 51,000 | | 2.0 | | | | | | | | 1.4 | |
| 29 | | 24.0 | 45,500 | | | | | | | | | | | |
| 30 | X | 24.0 | 45,500 | | 1.5 | | | | | | | | 1.1 | |
| 31 | | 24.0 | 45,500 | | | | | | | | | | | |
| Total | | | 2,589,500 | | | | | | | | | | | |
| Average | | | 83,532 | | | | | | | | | | | |
| Maximum | | | 581,000 | | | | | | | | | | | |

* Refer to the instructions for this report to determine which plants must provide this information.
 DEP Form 62-955 900(3)
 Effective August 28, 2003

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsomia

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

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

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

| Day of the Month | Operator (Place "X") | Hours plant in Operation | Net Quantity of Finished Water Produced, gal. | CT Calculations, or UV Dose, to Demostate 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 | | |
| 1 | | 24.0 | 68,000 | | | | | | | | | | |
| 2 | X | 24.0 | 68,000 | | 0.9 | | | | | | | 0.8 | |
| 3 | | 24.0 | 49,000 | | | | | | | | | | |
| 4 | X | 24.0 | 49,000 | | 0.9 | | | | | | | 0.8 | |
| 5 | | 24.0 | 46,500 | | | | | | | | | | |
| 6 | X | 24.0 | 46,500 | | 1.8 | | | | | | | 1.5 | |
| 7 | | 24.0 | 43,333 | | | | | | | | | | |
| 8 | | 24.0 | 43,333 | | | | | | | | | | |
| 9 | X | 24.0 | 43,333 | | 1.0 | | | | | | | 0.9 | |
| 10 | | 24.0 | 41,000 | | | | | | | | | | |
| 11 | X | 24.0 | 41,000 | | 1.2 | | | | | | | 1.0 | |
| 12 | | 24.0 | 41,500 | | | | | | | | | | |
| 13 | X | 24.0 | 41,500 | | 1.0 | | | | | | | 0.8 | |
| 14 | | 24.0 | 44,000 | | | | | | | | | | |
| 15 | | 24.0 | 44,000 | | | | | | | | | | |
| 16 | X | 24.0 | 44,000 | | 0.8 | | | | | | | 0.7 | |
| 17 | | 24.0 | 51,000 | | | | | | | | | | |
| 18 | X | 24.0 | 51,000 | | 1.2 | | | | | | | 1.0 | |
| 19 | | 24.0 | 50,500 | | | | | | | | | | |
| 20 | X | 24.0 | 50,500 | | 2.0 | | | | | | | 1.4 | |
| 21 | | 24.0 | 44,667 | | | | | | | | | | |
| 22 | | 24.0 | 44,667 | | | | | | | | | | |
| 23 | X | 24.0 | 44,667 | | 1.4 | | | | | | | 1.0 | |
| 24 | | 24.0 | 41,500 | | | | | | | | | | |
| 25 | X | 24.0 | 41,500 | | 0.8 | | | | | | | 0.8 | |
| 26 | | 24.0 | 38,500 | | | | | | | | | | |
| 27 | X | 24.0 | 38,500 | | 0.9 | | | | | | | 0.8 | |
| 28 | | 24.0 | 43,000 | | | | | | | | | | |
| 29 | | 24.0 | 43,000 | | | | | | | | | | |
| 30 | X | 24.0 | 43,000 | | 0.8 | | | | | | | 0.8 | |
| 31 | | 24.0 | | | | | | | | | | | |
| Total | | | 1,379,998 | | | | | | | | | | |
| Average | | | 44,516 | | | | | | | | | | |
| Maximum | | | 68,000 | | | | | | | | | | |

* Refer to the instructions for this report to determine which plants must provide this information
 DE Form 62-335 900(3)
 Effective August 28, 2003

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

| | | | |
|--|--|--|----------------|
| PWS Name: | Gibsonia | PWS Identification Number: | 6530079 |
| PWS Type: | <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive | | |
| Number of Service Connections at End of Month: | 175 | Total Population Served at End of Month: | 414 |
| PWS Owner: | Aqua Utilities Florida | | |
| Contact Person: | Brian Heath | Contact Person's Title: | Area Manager |
| Contact Person's Mailing Address: | 2315 Griffin Rd | City: | Leesburg |
| | | State: | Florida |
| | | Zip Code: | 34748 |
| Contact Person's Telephone Number: | (352) 787-0980 | Contact Person's Fax Number: | (352) 787-6333 |
| Contact Person's E-Mail Address: | beheath@aquaaamerica.com | | |

B. Water Treatment Plant Information

| | | | |
|---|--|---|--------------|
| Plant Name: | Gibsonia | Plant Telephone Number: | 863-858-2504 |
| Plant Address: | 931 Gib-Galloway Road | City: | Lakeland |
| | | State: | Florida |
| | | Zip Code: | 33810 |
| Type of Water Treatment by Plant: | <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water | | |
| Permitted Maximum Day Operating Capacity of Plant, gallons per day: | 100,000 | | |
| Plant Category (per subsection 62-699.310(4), F.A.C.): | V | Plant Class (per subsection 62-699.310(4), F.A.C.): | C |

| Licensed Operators | Name | License Class | License Number | Day(s) / Shift(s) Worked |
|----------------------|-----------------|---------------|----------------|--------------------------|
| Lead/Chief Operator: | Will Fontaine | C | 6813 | Days 1st Shift |
| Other Operators: | David Rodriguez | A | 7880 | Days 1st Shift |
| | Steve Fuller | B | 7519 | Days 1st Shift |
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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 _____ Will Fontaine _____ C-6813 _____
 Printed or Typed Name License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonsia

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

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

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

| Day of the Month | 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 Demostate 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 | 24.0 | 87,000 | | 1.0 | | | | | | | | 0.9 | |
| 2 | | 24.0 | 36,500 | | | | | | | | | | | |
| 3 | X | 24.0 | 36,500 | | 2.2 | | | | | | | | 1.2 | |
| 4 | | 24.0 | 40,333 | | | | | | | | | | | |
| 5 | | 24.0 | 40,333 | | | | | | | | | | | |
| 6 | X | 24.0 | 40,333 | | 1.8 | | | | | | | | 1.2 | |
| 7 | | 24.0 | 39,500 | | | | | | | | | | | |
| 8 | X | 24.0 | 39,500 | | 0.6 | | | | | | | | 0.5 | |
| 9 | | 24.0 | 38,000 | | | | | | | | | | | |
| 10 | X | 24.0 | 38,000 | | 0.7 | | | | | | | | 0.7 | |
| 11 | | 24.0 | 35,333 | | | | | | | | | | | |
| 12 | | 24.0 | 35,333 | | | | | | | | | | | |
| 13 | X | 24.0 | 35,333 | | 2.2 | | | | | | | | 1.4 | |
| 14 | | 24.0 | 42,000 | | | | | | | | | | | |
| 15 | X | 24.0 | 42,000 | | 1.0 | | | | | | | | 1.0 | |
| 16 | | 24.0 | 41,500 | | | | | | | | | | | |
| 17 | X | 24.0 | 41,500 | | 1.0 | | | | | | | | 0.9 | |
| 18 | | 24.0 | 39,000 | | | | | | | | | | | |
| 19 | | 24.0 | 39,000 | | | | | | | | | | | |
| 20 | X | 24.0 | 39,000 | | 1.0 | | | | | | | | 0.8 | |
| 21 | | 24.0 | 38,000 | | | | | | | | | | | |
| 22 | X | 24.0 | 38,000 | | 0.8 | | | | | | | | 0.7 | |
| 23 | | 24.0 | 42,500 | | | | | | | | | | | |
| 24 | X | 24.0 | 42,500 | | 0.7 | | | | | | | | 0.7 | |
| 25 | | 24.0 | 68,000 | | | | | | | | | | | |
| 26 | | 24.0 | 68,000 | | | | | | | | | | | |
| 27 | X | 24.0 | 68,000 | | 0.8 | | | | | | | | 0.8 | |
| 28 | | 24.0 | 46,500 | | | | | | | | | | | |
| 29 | X | 24.0 | 46,500 | | 0.9 | | | | | | | | 0.8 | |
| 30 | | 24.0 | | | | | | | | | | | | |
| 31 | | 24.0 | | | | | | | | | | | | |
| Total | | | 1,284,000 | | | | | | | | | | | |
| Average | | | 41,419 | | | | | | | | | | | |
| Maximum | | | 87,000 | | | | | | | | | | | |

* Refer to the instructions for this report to determine which plants must provide this information.
 Effective August 28, 2003

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

| | | | |
|---|--|--|----------------|
| PWS Name: Gibsonia | | PWS Identification Number: 6530079 | |
| PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community | | <input type="checkbox"/> Consecutive | |
| Number of Service Connections at End of Month: 175 | | Total Population Served at End of Month: 414 | |
| PWS Owner: Aqua Utilities Florida | | | |
| Contact Person: Brian Heath | | Contact Person's Title: Area Manager | |
| Contact Person's Mailing Address: 2315 Griffin Rd | | City: Leesburg | State: Florida |
| Contact Person's Telephone Number: (352) 787-0980 | | Contact Person's Fax Number: (352) 787-6333 | |
| Contact Person's E-Mail Address: beheath@aquaaamerica.com | | | |

B. Water Treatment Plant Information

| Plant Name: Gibsonia | | Plant Telephone Number: 863-858-2504 | |
|--|-----------------|---|----------------|
| Plant Address: 931 Gib-Galloway Road | | City: Lakeland | State: Florida |
| Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water | | | |
| Permitted Maximum Day Operating Capacity of Plant, gallons per day: 100,000 | | | |
| Plant Category (per subsection 62-699.310(4), F.A.C.): V | | Plant Class (per subsection 62-699.310(4), F.A.C.): C | |
| Licensed Operators | Name | License Class | License Number |
| Lead/Chief Operator: | Will Fontaine | C | 6813 |
| Other Operators: | David Rodriguez | A | 7880 |
| | Steve Fuller | B | 7519 |
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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 | Will Fontaine Printed or Typed Name | C-6813 License Number |
|--------------------|--|--------------------------|

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonsia

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

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

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

| Day of the Month | 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 Demostate 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 | 24.0 | 174,000 | | 2.5 | | | | | | | | 2.0 | |
| 2 | | 24.0 | 41,333 | | | | | | | | | | | |
| 3 | | 24.0 | 41,333 | | | | | | | | | | | |
| 4 | X | 24.0 | 41,333 | | 2.2 | | | | | | | | 1.8 | |
| 5 | | 24.0 | 41,500 | | | | | | | | | | | |
| 6 | X | 24.0 | 41,500 | | 1.2 | | | | | | | | 1.0 | |
| 7 | | 24.0 | 41,000 | | | | | | | | | | | |
| 8 | X | 24.0 | 41,000 | | 0.7 | | | | | | | | 0.7 | |
| 9 | | 24.0 | 41,333 | | | | | | | | | | | |
| 10 | | 24.0 | 41,333 | | | | | | | | | | | |
| 11 | X | 24.0 | 41,333 | | 2.0 | | | | | | | | 1.4 | |
| 12 | | 24.0 | 48,000 | | | | | | | | | | | |
| 13 | X | 24.0 | 48,000 | | 2.0 | | | | | | | | 1.4 | |
| 14 | | 24.0 | 41,000 | | | | | | | | | | | |
| 15 | X | 24.0 | 41,000 | | 2.0 | | | | | | | | 1.2 | |
| 16 | | 24.0 | 39,000 | | | | | | | | | | | |
| 17 | | 24.0 | 39,000 | | | | | | | | | | | |
| 18 | X | 24.0 | 39,000 | | 1.1 | | | | | | | | 0.9 | |
| 19 | | 24.0 | 53,500 | | | | | | | | | | | |
| 20 | X | 24.0 | 53,500 | | 0.8 | | | | | | | | 0.6 | |
| 21 | | 24.0 | 36,000 | | | | | | | | | | | |
| 22 | X | 24.0 | 36,000 | | 1.0 | | | | | | | | 0.8 | |
| 23 | | 24.0 | 50,666 | | | | | | | | | | | |
| 24 | | 24.0 | 50,666 | | | | | | | | | | | |
| 25 | X | 24.0 | 50,666 | | 1.0 | | | | | | | | 0.9 | |
| 26 | | 24.0 | 54,000 | | | | | | | | | | | |
| 27 | X | 24.0 | 54,000 | | 0.9 | | | | | | | | 0.9 | |
| 28 | | 24.0 | 51,500 | | | | | | | | | | | |
| 29 | X | 24.0 | 51,500 | | 1.2 | | | | | | | | 1.0 | |
| 30 | | 24.0 | | | | | | | | | | | | |
| 31 | | 24.0 | | | | | | | | | | | | |
| Total | | | 1,423,998 | | | | | | | | | | | |
| Average | | | 45,935 | | | | | | | | | | | |
| Maximum | | | 174,000 | | | | | | | | | | | |

* Refer to the instructions for this report to determine which plants must provide this information.
 Effective August 28, 2003

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonia

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

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

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

| Day of the Month | 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 Demostate 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 | 24.0 | 147,000 | | 1.0 | | | | | | | | | 0.9 | |
| 2 | | 24.0 | 50,000 | | | | | | | | | | | | |
| 3 | X | 24.0 | 50,000 | | 1.8 | | | | | | | | | 1.4 | |
| 4 | | 24.0 | 54,000 | | | | | | | | | | | | |
| 5 | X | 24.0 | 54,000 | | 0.8 | | | | | | | | | 0.8 | |
| 6 | | 24.0 | 49,667 | | | | | | | | | | | | |
| 7 | | 24.0 | 49,667 | | | | | | | | | | | | |
| 8 | X | 24.0 | 49,667 | | 0.8 | | | | | | | | | 0.7 | |
| 9 | | 24.0 | 51,000 | | | | | | | | | | | | |
| 10 | X | 24.0 | 51,000 | | 0.8 | | | | | | | | | 0.8 | |
| 11 | | 24.0 | 53,000 | | | | | | | | | | | | |
| 12 | X | 24.0 | 53,000 | | 1.0 | | | | | | | | | 0.8 | |
| 13 | | 24.0 | 45,667 | | | | | | | | | | | | |
| 14 | | 24.0 | 45,667 | | | | | | | | | | | | |
| 15 | X | 24.0 | 45,667 | | 1.5 | | | | | | | | | 1.2 | |
| 16 | | 24.0 | 52,000 | | | | | | | | | | | | |
| 17 | X | 24.0 | 52,000 | | 1.0 | | | | | | | | | 0.8 | |
| 18 | | 24.0 | 48,000 | | | | | | | | | | | | |
| 19 | X | 24.0 | 48,000 | | 0.9 | | | | | | | | | 0.8 | |
| 20 | | 24.0 | 67,333 | | | | | | | | | | | | |
| 21 | | 24.0 | 67,333 | | | | | | | | | | | | |
| 22 | X | 24.0 | 67,333 | | 1.4 | | | | | | | | | 1.0 | |
| 23 | | 24.0 | 58,500 | | | | | | | | | | | | |
| 24 | X | 24.0 | 58,500 | | 0.5 | | | | | | | | | 0.6 | |
| 25 | | 24.0 | 45,500 | | | | | | | | | | | | |
| 26 | X | 24.0 | 45,500 | | 1.4 | | | | | | | | | 1.0 | |
| 27 | | 24.0 | 48,000 | | | | | | | | | | | | |
| 28 | | 24.0 | 48,000 | | | | | | | | | | | | |
| 29 | X | 24.0 | 48,000 | | 1.2 | | | | | | | | | 1.0 | |
| 30 | | 24.0 | | | | | | | | | | | | | |
| 31 | | 24.0 | | | | | | | | | | | | | |
| Total | | | 1,603,000 | | | | | | | | | | | | |
| Average | | | 51,710 | | | | | | | | | | | | |
| Maximum | | | 147,000 | | | | | | | | | | | | |

* Refer to the instructions for this report to determine which plants must provide this information.
 Effective August 28, 2003

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonsia
 III. Daily Data for the Month/year of: December, 2004

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

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

| 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 Provided Before or at Disinfectant Contact Time | Disinfectant Measurement (T) at C | Customer Flow, mg-min/L | Temp of Water, °C if Applicable | pH of Water | Minimum CT Required, mg-min/L | Lowest UV Dose, mW-sec/cm ² | Operating UV Dose, mW-sec/cm ² | 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 | 24,000 | 88,000 | 24,000 | 0.5 | | | | | | | | | |
| 2 | | 24,000 | 43,500 | 24,000 | | | | | | | | | | |
| 3 | X | 24,000 | 43,500 | 24,000 | 1.6 | | | | | | | | 1.2 | |
| 4 | | 24,000 | 46,333 | 24,000 | | | | | | | | | | |
| 5 | | 24,000 | 46,333 | 24,000 | | | | | | | | | | |
| 6 | X | 24,000 | 46,333 | 24,000 | 1.4 | | | | | | | | 1.0 | |
| 7 | | 24,000 | 54,500 | 24,000 | | | | | | | | | | |
| 8 | X | 24,000 | 54,500 | 24,000 | 0.7 | | | | | | | | 0.7 | |
| 9 | | 24,000 | 49,500 | 24,000 | | | | | | | | | | |
| 10 | X | 24,000 | 49,500 | 24,000 | 0.8 | | | | | | | | 0.8 | |
| 11 | | 24,000 | 44,333 | 24,000 | | | | | | | | | | |
| 12 | | 24,000 | 44,333 | 24,000 | | | | | | | | | | |
| 13 | X | 24,000 | 44,333 | 24,000 | 0.8 | | | | | | | | 0.7 | |
| 14 | | 24,000 | 42,500 | 24,000 | | | | | | | | | | |
| 15 | X | 24,000 | 42,500 | 24,000 | 0.7 | | | | | | | | 0.7 | |
| 16 | | 24,000 | 42,500 | 24,000 | | | | | | | | | | |
| 17 | X | 24,000 | 42,500 | 24,000 | 0.9 | | | | | | | | 0.8 | |
| 18 | | 24,000 | 47,666 | 24,000 | | | | | | | | | | |
| 19 | | 24,000 | 47,666 | 24,000 | | | | | | | | | | |
| 20 | X | 24,000 | 47,666 | 24,000 | 0.8 | | | | | | | | 0.8 | |
| 21 | | 24,000 | 48,500 | 24,000 | | | | | | | | | | |
| 22 | X | 24,000 | 48,500 | 24,000 | 1.0 | | | | | | | | 0.9 | |
| 23 | | 24,000 | 46,500 | 24,000 | | | | | | | | | | |
| 24 | X | 24,000 | 46,500 | 24,000 | 1.0 | | | | | | | | 0.8 | |
| 25 | | 24,000 | 45,667 | 24,000 | | | | | | | | | | |
| 26 | | 24,000 | 45,667 | 24,000 | | | | | | | | | | |
| 27 | X | 24,000 | 45,667 | 24,000 | 0.6 | | | | | | | | 0.5 | |
| 28 | | 24,000 | 40,000 | 24,000 | | | | | | | | | | |
| 29 | X | 24,000 | 40,000 | 24,000 | 0.7 | | | | | | | | 0.6 | |
| 30 | | 24,000 | 47,000 | 24,000 | | | | | | | | | | |
| 31 | X | 24,000 | 47,000 | 24,000 | 1.0 | | | | | | | | 0.8 | |
| Total | | | 1,468,999 | | | | | | | | | | | |
| Average | | | 47,387 | | | | | | | | | | | |
| Maximum | | | 88,000 | | | | | | | | | | | |

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

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonia

III. Daily Data for the Month/Year of: January, 2005

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 Demostate 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. | Minimum CT Required, mg-min/L | Lowest Operating UV Dose, mW-sec/cm ² | Minimum UV Dose Required, mW-sec/cm ² | | | |
| 1 | | 24.0 | 44,000 | | | | | | | | | | |
| 2 | | 24.0 | 44,000 | | | | | | | | | | |
| 3 | X | 24.0 | 44,000 | | 1.0 | | | | | | | | 0.8 |
| 4 | | 24.0 | 51,500 | | | | | | | | | | |
| 5 | X | 24.0 | 51,500 | | 0.4 | | | | | | | | 0.4 |
| 6 | | 24.0 | 49,000 | | | | | | | | | | |
| 7 | X | 24.0 | 49,000 | | 0.9 | | | | | | | | 0.8 |
| 8 | | 24.0 | 52,667 | | | | | | | | | | |
| 9 | | 24.0 | 52,667 | | | | | | | | | | |
| 10 | X | 24.0 | 52,667 | | 1.2 | | | | | | | | 1.0 |
| 11 | | 24.0 | 45,000 | | | | | | | | | | |
| 12 | X | 24.0 | 45,000 | | 0.8 | | | | | | | | 0.7 |
| 13 | | 24.0 | 44,000 | | | | | | | | | | |
| 14 | X | 24.0 | 44,000 | | 0.8 | | | | | | | | 0.8 |
| 15 | | 24.0 | 37,333 | | | | | | | | | | |
| 16 | | 24.0 | 37,333 | | | | | | | | | | |
| 17 | X | 24.0 | 37,333 | | 0.6 | | | | | | | | 0.6 |
| 18 | | 24.0 | 39,000 | | | | | | | | | | |
| 19 | X | 24.0 | 39,000 | | 1.2 | | | | | | | | 1.0 |
| 20 | | 24.0 | 47,000 | | | | | | | | | | |
| 21 | X | 24.0 | 47,000 | | 0.5 | | | | | | | | 0.5 |
| 22 | | 24.0 | 39,666 | | | | | | | | | | |
| 23 | | 24.0 | 39,666 | | | | | | | | | | |
| 24 | X | 24.0 | 39,666 | | 1.4 | | | | | | | | 1.0 |
| 25 | | 24.0 | 59,000 | | | | | | | | | | |
| 26 | X | 24.0 | 59,000 | | 1.5 | | | | | | | | 1.0 |
| 27 | | 24.0 | 42,500 | | | | | | | | | | |
| 28 | X | 24.0 | 42,500 | | 1.5 | | | | | | | | 1.0 |
| 29 | | 24.0 | 44,666 | | | | | | | | | | |
| 30 | | 24.0 | 44,666 | | | | | | | | | | |
| 31 | X | 24.0 | 44,666 | | 1.5 | | | | | | | | 1.0 |
| Total | | | 1,408,998 | | | | | | | | | | |
| Average | | | 45,452 | | | | | | | | | | |
| Maximum | | | 59,000 | | | | | | | | | | |

* Refer to the instructions on this report to determine which plants must provide this information.
 Effective August 28, 2003

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



I. General Information for the Month/Year of: February, 2005

A. Public Water System (PWS) Information

| | | | | | |
|--|---|--|--|--|--------------------------------|
| PWS Name: | Gibsonia | | | PWS Identification Number: | 6530079 |
| PWS Type: | <input checked="" type="checkbox"/> Community | <input type="checkbox"/> Non-Transient Non-Community | <input type="checkbox"/> Transient Non-Community | <input type="checkbox"/> Consecutive | |
| Number of Service Connections at End of Month: | 175 | | | Total Population Served at End of Month: | 414 |
| PWS Owner: | Aqua Utilities Florida | | | | |
| Contact Person: | Carolyn McFalls | | | Contact Person's Title: | Area Manager |
| Contact Person's Mailing Address: | 6960 Professional Parkway East, Suite 400 | | City: | Sarasota | State: Florida Zip Code: 34240 |
| Contact Person's Telephone Number: | (941) 907-7400 | | | Contact Person's Fax Number: | (941) 907-7401 |
| Contact Person's E-Mail Address: | cfmcfalls@aquaamerica.com | | | | |

B. Water Treatment Plant Information

| | | | | | |
|---|--|----------------------|---|---|--------------------------------|
| Plant Name: | Gibsonia | | | Plant Telephone Number: | 863-858-2504 |
| Plant Address: | 931 Gib-Galloway Road | | City: | Lakeland | State: Florida Zip Code: 33810 |
| Type of Water Treatment by Plant: | <input checked="" type="checkbox"/> Raw Ground Water | | <input type="checkbox"/> Purchased Finished Water | | |
| Permitted Maximum Day Operating Capacity of Plant, gallons per day: | 100,000 | | | | |
| Plant Category (per subsection 62-699.310(4), F.A.C.): | V | | | Plant Class (per subsection 62-699.310(4), F.A.C.): C | |
| Licensed Operators | Name | License Class | License Number | Day(s) / Shift(s) Worked | |
| Lead/Chief Operator: | David Rodriguez | A | 7880 | Days 1st Shift | |
| Other Operators: | Steve Fuller | B | 7519 | Days 1st Shift | |
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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 | David Rodriguez Printed or Typed Name | A-7880 License Number |
|--------------------|--|--------------------------|

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonia

III. Daily Data for the Month/Year of: February, 2005

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 Demstrate 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 | Minimum CT Required, mg-min/L | Lowest Operating UV Dose, mW-sec/cm ² | Minimum UV Dose Required, mW-sec/cm ² | | | |
| 1 | | 24.0 | 45,500 | | | | | | | | | 0.8 | |
| 2 | X | 24.0 | 45,500 | | 0.9 | | | | | | | | |
| 3 | | 24.0 | 50,000 | | | | | | | | | 1.0 | |
| 4 | X | 24.0 | 50,000 | | 1.5 | | | | | | | | |
| 5 | | 24.0 | 44,000 | | | | | | | | | | |
| 6 | | 24.0 | 44,000 | | | | | | | | | | |
| 7 | X | 24.0 | 44,000 | | 2.0 | | | | | | | 1.7 | |
| 8 | | 24.0 | 56,000 | | | | | | | | | 1.4 | |
| 9 | X | 24.0 | 56,000 | | 1.8 | | | | | | | | |
| 10 | | 24.0 | 49,500 | | | | | | | | | 1.4 | |
| 11 | X | 24.0 | 49,500 | | 1.6 | | | | | | | | |
| 12 | | 24.0 | 44,667 | | | | | | | | | | |
| 13 | | 24.0 | 44,667 | | | | | | | | | 1.4 | |
| 14 | X | 24.0 | 44,667 | | 1.6 | | | | | | | | |
| 15 | | 24.0 | 51,500 | | | | | | | | | 1.4 | |
| 16 | X | 24.0 | 51,500 | | 1.8 | | | | | | | | |
| 17 | | 24.0 | 50,500 | | | | | | | | | 1.0 | |
| 18 | X | 24.0 | 50,500 | | 1.1 | | | | | | | | |
| 19 | | 24.0 | 58,667 | | | | | | | | | | |
| 20 | | 24.0 | 58,667 | | | | | | | | | 1.0 | |
| 21 | X | 24.0 | 58,667 | | 2.5 | | | | | | | | |
| 22 | | 24.0 | 60,500 | | | | | | | | | 1.2 | |
| 23 | X | 24.0 | 60,500 | | 2.0 | | | | | | | | |
| 24 | | 24.0 | 56,500 | | | | | | | | | 1.4 | |
| 25 | X | 24.0 | 56,500 | | 2.2 | | | | | | | | |
| 26 | | 24.0 | 40,000 | | | | | | | | | | |
| 27 | | 24.0 | 40,000 | | | | | | | | | 1.2 | |
| 28 | X | 24.0 | 40,000 | | 1.6 | | | | | | | | |
| 29 | | 24.0 | | | | | | | | | | | |
| 30 | | 24.0 | | | | | | | | | | | |
| 31 | | 24.0 | | | | | | | | | | | |
| Total | | | 1,402,000 | | | | | | | | | | |
| Average | | | 45,226 | | | | | | | | | | |
| Maximum | | | 60,500 | | | | | | | | | | |

* Refer to the instructions for this report to determine which plants must provide this information
 DE Form 62-300 (8/03)
 Effective August 28, 2003

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonia

III. Daily Data for the Month/Year of: March, 2005

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 Demostate 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 | Minimum CT Required, mg-min/L | Lowest Operating UV Dose, mW-sec/cm ² | Minimum UV Dose Required, mW-sec/cm ² | Temp of Water, °C | | |
| 1 | | 24.0 | 45,000 | | | | | | | | | | |
| 2 | X | 24.0 | 45,000 | | 1.0 | | | | | | | 0.8 | |
| 3 | | 24.0 | 40,500 | | | | | | | | | | |
| 4 | X | 24.0 | 40,500 | | 0.9 | | | | | | | 0.9 | |
| 5 | | 24.0 | 50,666 | | | | | | | | | | |
| 6 | | 24.0 | 50,666 | | | | | | | | | | |
| 7 | X | 24.0 | 50,666 | | 0.4 | | | | | | | 0.4 | |
| 8 | | 24.0 | 42,500 | | | | | | | | | | |
| 9 | X | 24.0 | 42,500 | | 0.8 | | | | | | | 0.6 | |
| 10 | | 24.0 | 56,500 | | | | | | | | | | |
| 11 | X | 24.0 | 56,500 | | 0.9 | | | | | | | 0.8 | |
| 12 | | 24.0 | 47,333 | | | | | | | | | | |
| 13 | | 24.0 | 47,333 | | | | | | | | | | |
| 14 | X | 24.0 | 47,333 | | 2.3 | | | | | | | 2.0 | |
| 15 | | 24.0 | 41,500 | | | | | | | | | | |
| 16 | X | 24.0 | 41,500 | | 2.1 | | | | | | | 1.9 | |
| 17 | | 24.0 | 50,000 | | | | | | | | | | |
| 18 | X | 24.0 | 50,000 | | 2.5 | | | | | | | 1.6 | |
| 19 | | 24.0 | 38,666 | | | | | | | | | | |
| 20 | | 24.0 | 38,666 | | | | | | | | | | |
| 21 | X | 24.0 | 38,666 | | 2.5 | | | | | | | 1.9 | |
| 22 | | 24.0 | 35,500 | | | | | | | | | | |
| 23 | X | 24.0 | 35,500 | | 2.2 | | | | | | | 2.0 | |
| 24 | | 24.0 | 43,000 | | | | | | | | | | |
| 25 | X | 24.0 | 43,000 | | 2.5 | | | | | | | 1.8 | |
| 26 | | 24.0 | 39,333 | | | | | | | | | | |
| 27 | | 24.0 | 39,333 | | | | | | | | | | |
| 28 | X | 24.0 | 39,333 | | 1.9 | | | | | | | 1.6 | |
| 29 | | 24.0 | 57,000 | | | | | | | | | | |
| 30 | X | 24.0 | 57,000 | | 2.0 | | | | | | | 1.4 | |
| 31 | | 24.0 | | | | | | | | | | | |
| Total | | | 1,350,998 | | | | | | | | | | |
| Average | | | 43,581 | | | | | | | | | | |
| Maximum | | | 57,000 | | | | | | | | | | |

* Refer to the instructions on this report to determine which plants must provide this information.
 Effective August 28, 2003

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



#VALUE!

See Pages 4 for Instructions.

I. General Information for the Month/Year of: April, 2005

A. Public Water System (PWS) Information

| | | | |
|--|--|--|----------------|
| PWS Name: | Gibsonia | PWS Identification Number: | 6530079 |
| PWS Type: | <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive | | |
| Number of Service Connections at End of Month: | 175 | Total Population Served at End of Month: | 414 |
| PWS Owner: | Aqua Utilities Florida | | |
| Contact Person: | Brian Heath | Contact Person's Title: | Area Manager |
| Contact Person's Mailing Address: | 2315 Griffin Rd | City: | Leesburg |
| | | State: | Florida |
| | | Zip Code: | 34748 |
| Contact Person's Telephone Number: | (352) 787-0980 | Contact Person's Fax Number: | (352) 787-6333 |
| Contact Person's E-Mail Address: | beheath@aquaaamerica.com | | |

B. Water Treatment Plant Information

| | | | |
|---|--|---|--------------|
| Plant Name: | Gibsonia | Plant Telephone Number: | 863-858-2504 |
| Plant Address: | 931 Gib-Galloway Road | City: | Lakeland |
| | | State: | Florida |
| | | Zip Code: | 33810 |
| Type of Water Treatment by Plant: | <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water | | |
| Permitted Maximum Day Operating Capacity of Plant, gallons per day: | 100,000 | | |
| Plant Category (per subsection 62-699.310(4), F.A.C.): | V | Plant Class (per subsection 62-699.310(4), F.A.C.): | C |

| Licensed Operators | Name | License Class | License Number | Day(s) / Shift(s) Worked |
|----------------------|-----------------|---------------|----------------|--------------------------|
| Lead/Chief Operator: | David Rodriguez | A | 7880 | Days 1st Shift |
| Other Operators: | Steve Fuller | B | 7519 | Days 1st Shift |
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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 | David Rodriguez _____ Printed or Typed Name | A-7880 _____ License Number |
|-----------------------------|---|-----------------------------------|

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonia

III. Daily Data for the Month/Year of: April, 2005

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 Demostate 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 | Minimum CT Required, mg-min/L | Temp of Water, °C | pH of Water, if Applicable | Lowest Operating UV Dose, mW-sec/cm ² | Minimum UV Dose Required, mW-sec/cm ² | | | | |
| 1 | X | 24.0 | 109,000 | | 1.6 | | | | | | | | | | 1.1 | |
| 2 | | 24.0 | 45,667 | | | | | | | | | | | | | |
| 3 | | 24.0 | 45,667 | | | | | | | | | | | | | |
| 4 | X | 24.0 | 45,667 | | 0.8 | | | | | | | | | | 0.8 | |
| 5 | | 24.0 | 57,500 | | | | | | | | | | | | | |
| 6 | X | 24.0 | 57,500 | | 0.6 | | | | | | | | | | 0.5 | |
| 7 | | 24.0 | 47,500 | | | | | | | | | | | | | |
| 8 | X | 24.0 | 47,500 | | 0.8 | | | | | | | | | | 0.7 | |
| 9 | | 24.0 | 56,000 | | | | | | | | | | | | | |
| 10 | | 24.0 | 56,000 | | | | | | | | | | | | | |
| 11 | X | 24.0 | 56,000 | | 1.4 | | | | | | | | | | 1.0 | |
| 12 | | 24.0 | 77,000 | | | | | | | | | | | | | |
| 13 | X | 24.0 | 77,000 | | 0.9 | | | | | | | | | | 0.8 | |
| 14 | | 24.0 | 48,500 | | | | | | | | | | | | | |
| 15 | X | 24.0 | 48,500 | | 1.2 | | | | | | | | | | 1.1 | |
| 16 | | 24.0 | 64,333 | | | | | | | | | | | | | |
| 17 | | 24.0 | 64,333 | | | | | | | | | | | | | |
| 18 | X | 24.0 | 64,333 | | 2.0 | | | | | | | | | | 1.6 | |
| 19 | | 24.0 | 89,000 | | | | | | | | | | | | | |
| 20 | X | 24.0 | 89,000 | | 1.8 | | | | | | | | | | 1.5 | |
| 21 | | 24.0 | 64,000 | | | | | | | | | | | | | |
| 22 | X | 24.0 | 64,000 | | 0.6 | | | | | | | | | | 0.8 | |
| 23 | | 24.0 | 49,000 | | | | | | | | | | | | | |
| 24 | | 24.0 | 49,000 | | | | | | | | | | | | | |
| 25 | X | 24.0 | 49,000 | | 2.0 | | | | | | | | | | 1.4 | |
| 26 | | 24.0 | 54,000 | | | | | | | | | | | | | |
| 27 | X | 24.0 | 54,000 | | 2.0 | | | | | | | | | | 1.6 | |
| 28 | | 24.0 | 50,500 | | | | | | | | | | | | | |
| 29 | X | 24.0 | 50,500 | | 2.8 | | | | | | | | | | 1.9 | |
| 30 | | 24.0 | | | | | | | | | | | | | | |
| 31 | | 24.0 | | | | | | | | | | | | | | |
| Total | | | 1,730,000 | | | | | | | | | | | | | |
| Average | | | 55,806 | | | | | | | | | | | | | |
| Maximum | | | 109,000 | | | | | | | | | | | | | |

* Refer to the instructions for this report to determine which plants must provide this information.
 DEP Form 6285-0003
 Effective August 28, 2003

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonia

III. Daily Data for the Month/Year of: May, 2005

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 Demostate 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 | | |
| 1 | | 24.0 | 73,500 | | | | | | | | | | |
| 2 | X | 24.0 | 73,500 | | 2.0 | | | | | | | 1.5 | |
| 3 | | 24.0 | 43,000 | | | | | | | | | | |
| 4 | X | 24.0 | 43,000 | | 2.2 | | | | | | | 2.0 | |
| 5 | | 24.0 | 44,500 | | | | | | | | | | |
| 6 | X | 24.0 | 44,500 | | 2.5 | | | | | | | 1.5 | |
| 7 | | 24.0 | 56,000 | | | | | | | | | | |
| 8 | | 24.0 | 56,000 | | | | | | | | | | |
| 9 | X | 24.0 | 56,000 | | 2.2 | | | | | | | 1.2 | |
| 10 | | 24.0 | 54,500 | | | | | | | | | | |
| 11 | X | 24.0 | 54,500 | | 1.8 | | | | | | | 1.2 | |
| 12 | | 24.0 | 47,500 | | | | | | | | | | |
| 13 | X | 24.0 | 47,500 | | 2.8 | | | | | | | 2.0 | |
| 14 | | 24.0 | 50,000 | | | | | | | | | | |
| 15 | | 24.0 | 50,000 | | | | | | | | | | |
| 16 | X | 24.0 | 50,000 | | 0.8 | | | | | | | 1.0 | |
| 17 | | 24.0 | 53,500 | | | | | | | | | | |
| 18 | X | 24.0 | 53,500 | | 0.4 | | | | | | | 0.5 | |
| 19 | | 24.0 | 42,500 | | | | | | | | | | |
| 20 | X | 24.0 | 42,500 | | 1.0 | | | | | | | 0.8 | |
| 21 | | 24.0 | 54,667 | | | | | | | | | | |
| 22 | | 24.0 | 54,667 | | | | | | | | | | |
| 23 | X | 24.0 | 54,667 | | 0.5 | | | | | | | 0.6 | |
| 24 | | 24.0 | 58,500 | | | | | | | | | | |
| 25 | X | 24.0 | 58,500 | | 0.5 | | | | | | | 0.5 | |
| 26 | | 24.0 | 56,000 | | | | | | | | | | |
| 27 | X | 24.0 | 56,000 | | 0.7 | | | | | | | 0.5 | |
| 28 | | 24.0 | 68,000 | | | | | | | | | | |
| 29 | | 24.0 | 68,000 | | | | | | | | | | |
| 30 | X | 24.0 | 68,000 | | 0.8 | | | | | | | 0.6 | |
| 31 | | 24.0 | | | | | | | | | | | |
| Total | | | 1,632,999 | | | | | | | | | | |
| Average | | | 52,677 | | | | | | | | | | |
| Maximum | | | 73,500 | | | | | | | | | | |

* Refer to the instructions for this report to determine which plants must provide this information.
 Effective August 28, 2003

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: June, 2005

A. Public Water System (PWS) Information

| | | | |
|---|--|--|----------------|
| PWS Name: Gibsonia | | PWS Identification Number: 6530079 | |
| PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community | | <input type="checkbox"/> Consecutive | |
| Number of Service Connections at End of Month: 175 | | Total Population Served at End of Month: 414 | |
| PWS Owner: Aqua Utilities Florida | | | |
| Contact Person: Brian Heath | | Contact Person's Title: Area Manager | |
| Contact Person's Mailing Address: 2315 Griffin Rd | | City: Leesburg | State: Florida |
| Contact Person's Telephone Number: (352) 787-0980 | | Zip Code: 34748 | |
| Contact Person's E-Mail Address: beheath@aquaaamerica.com | | Contact Person's Fax Number: (352) 787-6333 | |

B. Water Treatment Plant Information

| Plant Name: Gibsonia | | Plant Telephone Number: 863-858-2504 | |
|--|-----------------|---|----------------|
| Plant Address: 931 Gib-Galloway Road | | City: Lakeland | State: Florida |
| Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water | | Zip Code: 33810 | |
| Permitted Maximum Day Operating Capacity of Plant, gallons per day: 100,000 | | | |
| Plant Category (per subsection 62-699.310(4), F.A.C.): V | | Plant Class (per subsection 62-699.310(4), F.A.C.): C | |
| Licensed Operators | Name | License Class | License Number |
| Lead/Chief Operator: | Will Fontaine | C | 6813 |
| Other Operators: | David Rodriguez | A | 7880 |
| | Steve Fuller | B | 7519 |
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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 | Will Fontaine Printed or Typed Name | C-6813 License Number |
|--------------------|--|--------------------------|

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonia

III. Daily Data for the Month/Year of: June, 2005

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 Demostate 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 | 24.0 | 111,000 | | 0.6 | | | | | | | | | | 0.6 | |
| 2 | | 24.0 | 45,500 | | | | | | | | | | | | | |
| 3 | X | 24.0 | 45,500 | | 2.2 | | | | | | | | | | 1.4 | |
| 4 | | 24.0 | 52,667 | | | | | | | | | | | | | |
| 5 | | 24.0 | 52,667 | | | | | | | | | | | | | |
| 6 | X | 24.0 | 52,667 | | 0.9 | | | | | | | | | | 0.7 | |
| 7 | | 24.0 | 48,000 | | | | | | | | | | | | | |
| 8 | X | 24.0 | 48,000 | | 0.6 | | | | | | | | | | 0.8 | |
| 9 | | 24.0 | 42,000 | | | | | | | | | | | | | |
| 10 | X | 24.0 | 42,000 | | 0.7 | | | | | | | | | | 0.7 | |
| 11 | | 24.0 | 41,333 | | | | | | | | | | | | | |
| 12 | | 24.0 | 41,333 | | | | | | | | | | | | | |
| 13 | X | 24.0 | 41,333 | | 1.0 | | | | | | | | | | 0.8 | |
| 14 | | 24.0 | 54,500 | | | | | | | | | | | | | |
| 15 | X | 24.0 | 54,500 | | 0.6 | | | | | | | | | | 0.7 | |
| 16 | | 24.0 | 55,500 | | | | | | | | | | | | | |
| 17 | X | 24.0 | 55,500 | | 1.2 | | | | | | | | | | 1.0 | |
| 18 | | 24.0 | 52,000 | | | | | | | | | | | | | |
| 19 | | 24.0 | 52,000 | | | | | | | | | | | | | |
| 20 | X | 24.0 | 52,000 | | 0.5 | | | | | | | | | | 0.6 | |
| 21 | | 24.0 | 53,000 | | | | | | | | | | | | | |
| 22 | X | 24.0 | 53,000 | | 1.0 | | | | | | | | | | 0.8 | |
| 23 | | 24.0 | 43,000 | | | | | | | | | | | | | |
| 24 | X | 24.0 | 43,000 | | 0.8 | | | | | | | | | | 0.8 | |
| 25 | | 24.0 | 66,000 | | | | | | | | | | | | | |
| 26 | | 24.0 | 66,000 | | | | | | | | | | | | | |
| 27 | X | 24.0 | 66,000 | | 0.6 | | | | | | | | | | 0.6 | |
| 28 | | 24.0 | 46,500 | | | | | | | | | | | | | |
| 29 | X | 24.0 | 46,500 | | 0.8 | | | | | | | | | | 0.8 | |
| 30 | | 24.0 | | | | | | | | | | | | | | |
| 31 | | 24.0 | | | | | | | | | | | | | | |
| Total | | | 1,523,000 | | | | | | | | | | | | | |
| Average | | | 49,129 | | | | | | | | | | | | | |
| Maximum | | | 111,000 | | | | | | | | | | | | | |

* Refer to the instructions for this report to determine which plants must provide this information.
Effective August 28, 2003

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: July, 2005

A. Public Water System (PWS) Information

| | | | | | |
|--|---|--|--|--|----------------|
| PWS Name: | Gibsonia | | | PWS Identification Number: | 6530079 |
| PWS Type: | <input checked="" type="checkbox"/> Community | <input type="checkbox"/> Non-Transient Non-Community | <input type="checkbox"/> Transient Non-Community | <input type="checkbox"/> Consecutive | |
| Number of Service Connections at End of Month: | 175 | | | Total Population Served at End of Month: | 414 |
| PWS Owner: | Aqua Utilities Florida | | | | |
| Contact Person: | Brian Heath | | | Contact Person's Title: | Area Manager |
| Contact Person's Mailing Address: | 2315 Griffin Rd | City: | Leesburg | State: | Florida |
| Contact Person's Telephone Number: | (352) 787-0980 | | | Zip Code: | 34748 |
| Contact Person's E-Mail Address: | beheath@aquaaamerica.com | | | Contact Person's Fax Number: | (352) 787-6333 |

B. Water Treatment Plant Information

| | | | | | |
|---|--|---|-----------------------|---|--------------|
| Plant Name: | Gibsonia | | | Plant Telephone Number: | 863-858-2504 |
| Plant Address: | 931 Gib-Galloway Road | | | City: | Lakeland |
| Type of Water Treatment by Plant: | <input checked="" type="checkbox"/> Raw Ground Water | <input type="checkbox"/> Purchased Finished Water | | | |
| Permitted Maximum Day Operating Capacity of Plant, gallons per day: | 100,000 | | | | |
| Plant Category (per subsection 62-699.310(4), F.A.C.): | V | | | Plant Class (per subsection 62-699.310(4), F.A.C.): | |
| | | | | C | |
| Licensed Operators | Name | License Class | License Number | Day(s) / Shift(s) Worked | |
| Lead/Chief Operator: | Will Fontaine | C | 6813 | Days 1st Shift | |
| Other Operators: | David Rodriguez | A | 7880 | Days 1st Shift | |
| | Steve Fuller | B | 7519 | Days 1st Shift | |
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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 _____ Will Fontaine _____ C-6813 _____
 Printed or Typed Name License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonsia

III. Daily Data for the Month/year of: July, 2005

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 | Operator (Place "X") | Hours plant in Operation | Net Quantity of Finished Water Produced, gal. | Peak Flow Rate, gpd. | Lowest Residual Disinfectant Concentration (C) at C | Disinfectant Contact Time | 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 | UV Dose Required, mW-sec/cm ² | 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, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable* | | CT Calculations | |
|------------------|----------------------|--------------------------|---|----------------------|---|---------------------------|---|-------------------|----------------------------|-------------------------------|--|--|---|--|---|---------------------------|-----------------|----------------|
| | | | | | | | | | | | | | | | Lowest Residual Disinfectant Concentration (T) at C | Disinfectant Contact Time | Lowest CT | Lowest UV Dose |
| 1 | | X | 24.0 | 89,000 | | | | | | | | | | | | | | |
| 2 | | | 24.0 | 43,666 | | | | | | | | | | | | | | |
| 3 | | | 24.0 | 43,666 | | | | | | | | | | | | | | |
| 4 | X | | 24.0 | 43,666 | | | | | | | | | | | | | | |
| 5 | | | 24.0 | 53,500 | | | | | | | | | | | | | | |
| 6 | X | | 24.0 | 53,500 | | | | | | | | | | | | | | |
| 7 | | | 24.0 | 47,000 | | | | | | | | | | | | | | |
| 8 | X | | 24.0 | 47,000 | | | | | | | | | | | | | | |
| 9 | | | 24.0 | 50,667 | | | | | | | | | | | | | | |
| 10 | | | 24.0 | 50,667 | | | | | | | | | | | | | | |
| 11 | X | | 24.0 | 50,667 | | | | | | | | | | | | | | |
| 12 | | | 24.0 | 57,500 | | | | | | | | | | | | | | |
| 13 | X | | 24.0 | 57,500 | | | | | | | | | | | | | | |
| 14 | | | 24.0 | 52,000 | | | | | | | | | | | | | | |
| 15 | X | | 24.0 | 52,000 | | | | | | | | | | | | | | |
| 16 | | | 24.0 | 52,333 | | | | | | | | | | | | | | |
| 17 | | | 24.0 | 52,333 | | | | | | | | | | | | | | |
| 18 | X | | 24.0 | 52,333 | | | | | | | | | | | | | | |
| 19 | | | 24.0 | 56,500 | | | | | | | | | | | | | | |
| 20 | X | | 24.0 | 56,500 | | | | | | | | | | | | | | |
| 21 | | | 24.0 | 58,000 | | | | | | | | | | | | | | |
| 22 | X | | 24.0 | 58,000 | | | | | | | | | | | | | | |
| 23 | | | 24.0 | 55,333 | | | | | | | | | | | | | | |
| 24 | | | 24.0 | 55,333 | | | | | | | | | | | | | | |
| 25 | X | | 24.0 | 55,333 | | | | | | | | | | | | | | |
| 26 | | | 24.0 | 50,500 | | | | | | | | | | | | | | |
| 27 | X | | 24.0 | 50,500 | | | | | | | | | | | | | | |
| 28 | | | 24.0 | 55,000 | | | | | | | | | | | | | | |
| 29 | X | | 24.0 | 55,000 | | | | | | | | | | | | | | |
| 30 | | | 24.0 | | | | | | | | | | | | | | | |
| 31 | | | 24.0 | | | | | | | | | | | | | | | |
| | | | Total | 1,554,998 | | | | | | | | | | | | | | |
| | | | Average | 50,161 | | | | | | | | | | | | | | |
| | | | Maximum | 89,000 | | | | | | | | | | | | | | |

* Refer to the instructions for this report to determine which plants must provide this information
 Effective August 28, 2003

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: August, 2005

A. Public Water System (PWS) Information

| | | | | | |
|--|---|--|--|--|----------------|
| PWS Name: | Gibsonia | | | PWS Identification Number: | 6530079 |
| PWS Type: | <input checked="" type="checkbox"/> Community | <input type="checkbox"/> Non-Transient Non-Community | <input type="checkbox"/> Transient Non-Community | <input type="checkbox"/> Consecutive | |
| Number of Service Connections at End of Month: | 175 | | | Total Population Served at End of Month: | 414 |
| PWS Owner: | Aqua Utilities Florida | | | | |
| Contact Person: | Brian Heath | | | Contact Person's Title: | Area Manager |
| Contact Person's Mailing Address: | 2315 Griffin Rd | City: | Leesburg | State: | Florida |
| Contact Person's Telephone Number: | (352) 787-0980 | | | Contact Person's Fax Number: | (352) 787-6333 |
| Contact Person's E-Mail Address: | beheath@aquaaamerica.com | | | | |

B. Water Treatment Plant Information

| | | | | | | |
|---|--|---|-----------------------|---|--------------|--|
| Plant Name: | Gibsonia | | | Plant Telephone Number: | 863-858-2504 | |
| Plant Address: | 931 Gib-Galloway Road | | | City: | Lakeland | |
| Type of Water Treatment by Plant: | <input checked="" type="checkbox"/> Raw Ground Water | <input type="checkbox"/> Purchased Finished Water | | | | |
| Permitted Maximum Day Operating Capacity of Plant, gallons per day: | 100,000 | | | | | |
| Plant Category (per subsection 62-699.310(4), F.A.C.): | V | | | Plant Class (per subsection 62-699.310(4), F.A.C.): | C | |
| Licensed Operators | Name | License Class | License Number | Day(s) / Shift(s) Worked | | |
| Lead/Chief Operator: | Will Fontaine | C | 6813 | Days 1st Shift | | |
| Other Operators: | David Rodriguez | A | 7880 | Days 1st Shift | | |
| | Steve Fuller | B | 7519 | Days 1st Shift | | |
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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 | <u>Will Fontaine</u> Printed or Typed Name | <u>C-6813</u> License Number |
|-----------------------------|---|---------------------------------|

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

PWS Identification Number: 6530079 Plant Name: Gibsonsia August, 2005

III. Daily Data for the Month/Year of:

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

| Days Plant Started 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 | Lowest CT | Provided Before or at Customer First | Point 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 | Required UV Dose, mW-sec/cm ² | 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, or UV Dose, to Demolstrate Four-Log Virus Inactivation, if Applicable* | | |
|---|--------------------------|--|---------------------|---|------------------------------------|-----------|--------------------------------------|----------------------------------|-------------------|----------------------------|-------------------------------|--|--|--|--|---|---------|---------|
| | | | | | | | | | | | | | | | | CT Calculations | UV Dose | UV Dose |
| 1 | X | 24.0 | 167,000 | 1.3 | | | | | | | | | | | | | | |
| 2 | | 24.0 | 59,000 | | | | | | | | | | | | | | | |
| 3 | X | 24.0 | 59,000 | 1.1 | | | | | | | | | | | | | | |
| 4 | | 24.0 | 51,000 | | | | | | | | | | | | | | | |
| 5 | X | 24.0 | 51,000 | 0.8 | | | | | | | | | | | | | | |
| 6 | | 24.0 | 49,666 | | | | | | | | | | | | | | | |
| 7 | | 24.0 | 49,666 | | | | | | | | | | | | | | | |
| 8 | X | 24.0 | 49,666 | 1.0 | | | | | | | | | | | | | | |
| 9 | | 24.0 | 43,500 | | | | | | | | | | | | | | | |
| 10 | X | 24.0 | 43,500 | 0.9 | | | | | | | | | | | | | | |
| 11 | | 24.0 | 45,000 | | | | | | | | | | | | | | | |
| 12 | X | 24.0 | 45,000 | 0.8 | | | | | | | | | | | | | | |
| 13 | | 24.0 | 43,333 | | | | | | | | | | | | | | | |
| 14 | | 24.0 | 43,333 | | | | | | | | | | | | | | | |
| 15 | X | 24.0 | 43,333 | 0.7 | | | | | | | | | | | | | | |
| 16 | | 24.0 | 54,500 | | | | | | | | | | | | | | | |
| 17 | X | 24.0 | 54,500 | 0.8 | | | | | | | | | | | | | | |
| 18 | | 24.0 | 48,500 | | | | | | | | | | | | | | | |
| 19 | X | 24.0 | 48,500 | 1.1 | | | | | | | | | | | | | | |
| 20 | | 24.0 | 53,000 | | | | | | | | | | | | | | | |
| 21 | | 24.0 | 53,000 | | | | | | | | | | | | | | | |
| 22 | X | 24.0 | 53,000 | 1.2 | | | | | | | | | | | | | | |
| 23 | | 24.0 | 54,000 | | | | | | | | | | | | | | | |
| 24 | X | 24.0 | 54,000 | 1.0 | | | | | | | | | | | | | | |
| 25 | | 24.0 | 45,500 | | | | | | | | | | | | | | | |
| 26 | X | 24.0 | 45,500 | 1.0 | | | | | | | | | | | | | | |
| 27 | | 24.0 | 44,000 | | | | | | | | | | | | | | | |
| 28 | | 24.0 | 44,000 | | | | | | | | | | | | | | | |
| 29 | X | 24.0 | 44,000 | 0.7 | | | | | | | | | | | | | | |
| 30 | | 24.0 | 52,500 | | | | | | | | | | | | | | | |
| 31 | X | 24.0 | 52,500 | 0.8 | | | | | | | | | | | | | | |
| Total | | | 1,643,999 | | | | | | | | | | | | | | | |
| Average | | | 53,032 | | | | | | | | | | | | | | | |
| Maximum | | | 167,000 | | | | | | | | | | | | | | | |

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

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonia

III. Daily Data for the Month/Year of: September, 2005

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 Demostate 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 | | 24.0 | 50,500 | | | | | | | | | | | | |
| 2 | X | 24.0 | 50,500 | | 0.8 | | | | | | | | | 0.7 | |
| 3 | | 24.0 | 42,333 | | | | | | | | | | | | |
| 4 | | 24.0 | 42,333 | | | | | | | | | | | | |
| 5 | X | 24.0 | 42,333 | | 1.0 | | | | | | | | | 0.8 | |
| 6 | | 24.0 | 49,000 | | | | | | | | | | | | |
| 7 | X | 24.0 | 49,000 | | 1.0 | | | | | | | | | 0.8 | |
| 8 | | 24.0 | 50,000 | | | | | | | | | | | | |
| 9 | X | 24.0 | 50,000 | | 0.8 | | | | | | | | | 0.7 | |
| 10 | | 24.0 | 46,000 | | | | | | | | | | | | |
| 11 | | 24.0 | 46,000 | | | | | | | | | | | | |
| 12 | X | 24.0 | 46,000 | | 0.8 | | | | | | | | | 0.6 | |
| 13 | | 24.0 | 55,000 | | | | | | | | | | | | |
| 14 | X | 24.0 | 55,000 | | 1.0 | | | | | | | | | 0.7 | |
| 15 | | 24.0 | 57,000 | | | | | | | | | | | | |
| 16 | X | 24.0 | 57,000 | | 1.1 | | | | | | | | | 0.9 | |
| 17 | | 24.0 | 62,000 | | | | | | | | | | | | |
| 18 | | 24.0 | 62,000 | | | | | | | | | | | | |
| 19 | X | 24.0 | 62,000 | | 1.6 | | | | | | | | | 1.3 | |
| 20 | | 24.0 | 46,500 | | | | | | | | | | | | |
| 21 | X | 24.0 | 46,500 | | 1.5 | | | | | | | | | 1.2 | |
| 22 | | 24.0 | 46,000 | | | | | | | | | | | | |
| 23 | X | 24.0 | 46,000 | | 1.1 | | | | | | | | | 0.9 | |
| 24 | | 24.0 | 46,333 | | | | | | | | | | | | |
| 25 | | 24.0 | 46,333 | | | | | | | | | | | | |
| 26 | X | 24.0 | 46,333 | | 0.6 | | | | | | | | | 0.6 | |
| 27 | | 24.0 | 52,000 | | | | | | | | | | | | |
| 28 | X | 24.0 | 52,000 | | 0.9 | | | | | | | | | 0.8 | |
| 29 | | 24.0 | 55,500 | | | | | | | | | | | | |
| 30 | X | 24.0 | 55,500 | | 0.8 | | | | | | | | | 0.6 | |
| 31 | | 24.0 | | | | | | | | | | | | | |
| Total | | | 1,512,999 | | | | | | | | | | | | |
| Average | | | 48,806 | | | | | | | | | | | | |
| Maximum | | | 62,000 | | | | | | | | | | | | |

* Refer to the instructions for this report to determine which plants must provide this information.
DEP Form 62-995 900(3)
 Effective August 28, 2003

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: October, 2005

A. Public Water System (PWS) Information

| | | | |
|---|--|--|----------------|
| PWS Name: Gibsonia | | PWS Identification Number: 6530079 | |
| PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community | | <input type="checkbox"/> Consecutive | |
| Number of Service Connections at End of Month: 175 | | Total Population Served at End of Month: 414 | |
| PWS Owner: Aqua Utilities Florida | | | |
| Contact Person: Brian Heath | | Contact Person's Title: Area Manager | |
| Contact Person's Mailing Address: 2315 Griffin Rd | | City: Leesburg | State: Florida |
| | | Zip Code: 34748 | |
| Contact Person's Telephone Number: (352) 787-0980 | | Contact Person's Fax Number: (352) 787-6333 | |
| Contact Person's E-Mail Address: beheath@aguaamerica.com | | | |

B. Water Treatment Plant Information

| Plant Name: Gibsonia | | Plant Telephone Number: 863-858-2504 | | |
|--|-----------------|---|----------------|--------------------------|
| Plant Address: 931 Gib-Galloway Road | | City: Lakeland | State: Florida | |
| | | Zip Code: 33810 | | |
| Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water | | | | |
| Permitted Maximum Day Operating Capacity of Plant, gallons per day: 100,000 | | | | |
| Plant Category (per subsection 62-699.310(4), F.A.C.): V | | Plant Class (per subsection 62-699.310(4), F.A.C.): C | | |
| Licensed Operators | Name | License Class | License Number | Day(s) / Shift(s) Worked |
| Lead/Chief Operator: | Will Fontaine | C | 6813 | Days 1st Shift |
| Other Operators: | David Rodriguez | A | 7880 | Days 1st Shift |
| | Steve Fuller | B | 7519 | Days 1st Shift |
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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 | Will Fontaine Printed or Typed Name | C-6813 License Number |
|--------------------|--|--------------------------|

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonia

III. Daily Data for the Month/Year of: October, 2005

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 Demostate 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 | | |
| 1 | | 24.0 | 47,000 | | | | | | | | | | |
| 2 | | 24.0 | 47,000 | | | | | | | | | | |
| 3 | X | 24.0 | 47,000 | | 0.8 | | | | | | | 0.7 | |
| 4 | | 24.0 | 48,000 | | | | | | | | | | |
| 5 | X | 24.0 | 48,000 | | 0.9 | | | | | | | 0.8 | |
| 6 | | 24.0 | 39,500 | | | | | | | | | | |
| 7 | X | 24.0 | 39,500 | | 0.8 | | | | | | | 0.7 | |
| 8 | | 24.0 | 44,333 | | | | | | | | | | |
| 9 | | 24.0 | 44,333 | | | | | | | | | | |
| 10 | X | 24.0 | 44,333 | | 1.1 | | | | | | | 0.9 | |
| 11 | | 24.0 | 53,000 | | | | | | | | | | |
| 12 | X | 24.0 | 53,000 | | 1.2 | | | | | | | 0.9 | |
| 13 | | 24.0 | 39,500 | | | | | | | | | | |
| 14 | X | 24.0 | 39,500 | | 1.2 | | | | | | | 1.0 | |
| 15 | | 24.0 | 57,333 | | | | | | | | | | |
| 16 | | 24.0 | 57,333 | | | | | | | | | | |
| 17 | X | 24.0 | 57,333 | | 1.1 | | | | | | | 0.9 | |
| 18 | | 24.0 | 58,500 | | | | | | | | | | |
| 19 | X | 24.0 | 58,500 | | 0.9 | | | | | | | 0.7 | |
| 20 | | 24.0 | 38,000 | | | | | | | | | | |
| 21 | X | 24.0 | 38,000 | | 1.5 | | | | | | | 1.2 | |
| 22 | | 24.0 | 40,333 | | | | | | | | | | |
| 23 | | 24.0 | 40,333 | | | | | | | | | | |
| 24 | X | 24.0 | 40,333 | | 1.2 | | | | | | | 1.0 | |
| 25 | | 24.0 | 50,000 | | | | | | | | | | |
| 26 | X | 24.0 | 50,000 | | 1.8 | | | | | | | 1.4 | |
| 27 | | 24.0 | 51,000 | | | | | | | | | | |
| 28 | X | 24.0 | 51,000 | | 1.1 | | | | | | | 0.9 | |
| 29 | | 24.0 | 80,667 | | | | | | | | | | |
| 30 | | 24.0 | 80,667 | | | | | | | | | | |
| 31 | X | 24.0 | 80,667 | | 1.2 | | | | | | | 0.8 | |
| Total | | | 1,564,000 | | | | | | | | | | |
| Average | | | 50,452 | | | | | | | | | | |
| Maximum | | | 80,667 | | | | | | | | | | |

* Refer to the instructions for this report to determine which plants must provide this information
 DE Form 62-355 900(3)
 Effective August 28, 2003

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



#VALUE!

See Pages 4 for Instructions.

I. General Information for the Month/Year of: November, 2005

A. Public Water System (PWS) Information

| | | | |
|--|--|---|--|
| PWS Name: <u>Gibsonia</u> | | PWS Identification Number: <u>6530079</u> | |
| PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive | | | |
| Number of Service Connections at End of Month: <u>175</u> | | Total Population Served at End of Month: <u>414</u> | |
| PWS Owner: <u>Aqua Utilities Florida</u> | | | |
| Contact Person: <u>Brian Heath</u> | | Contact Person's Title: <u>Area Manager</u> | |
| Contact Person's Mailing Address: <u>2315 Griffin Rd</u> | | City: <u>Leesburg</u> | State: <u>Florida</u> Zip Code: <u>34748</u> |
| Contact Person's Telephone Number: <u>(352) 787-0980</u> | | Contact Person's Fax Number: <u>(352) 787-6333</u> | |
| Contact Person's E-Mail Address: <u>beheath@aquaaamerica.com</u> | | | |

B. Water Treatment Plant Information

| Plant Name: <u>Gibsonia</u> | | Plant Telephone Number: <u>863-858-2504</u> | |
|--|---------------------|--|--|
| Plant Address: <u>931 Gib-Galloway Road</u> | | City: <u>Lakeland</u> | State: <u>Florida</u> Zip Code: <u>33810</u> |
| Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water | | | |
| Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>100,000</u> | | | |
| Plant Category (per subsection 62-699.310(4), F.A.C.): <u>V</u> | | Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u> | |
| Licensed Operators | Name | License Class | License Number / Day(s) / Shift(s) Worked |
| Lead/Chief Operator: | <u>Steve Fuller</u> | <u>B</u> | <u>7519</u> / Days 1st Shift |
| 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 | <u>Steve Fuller</u> Printed or Typed Name | <u>B-7519</u> License Number |
|--------------------|--|---------------------------------|

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonia

III. Daily Data for the Month/Year of: November, 2005

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 Demostate 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 | | |
| 1 | | 24.0 | 72,500 | | | | | | | | | | |
| 2 | X | 24.0 | 72,500 | | 1.1 | | | | | | | 0.8 | |
| 3 | | 24.0 | 58,000 | | | | | | | | | | |
| 4 | X | 24.0 | 58,000 | | 1.4 | | | | | | | 0.9 | |
| 5 | | 24.0 | 46,667 | | | | | | | | | | |
| 6 | | 24.0 | 46,667 | | | | | | | | | | |
| 7 | X | 24.0 | 46,667 | | 2.2 | | | | | | | 2.0 | |
| 8 | | 24.0 | 56,500 | | | | | | | | | | |
| 9 | X | 24.0 | 56,500 | | 0.9 | | | | | | | 0.8 | |
| 10 | | 24.0 | 36,500 | | | | | | | | | | |
| 11 | X | 24.0 | 36,500 | | 1.2 | | | | | | | 1.0 | |
| 12 | | 24.0 | 55,333 | | | | | | | | | | |
| 13 | | 24.0 | 55,333 | | | | | | | | | | |
| 14 | X | 24.0 | 55,333 | | 1.1 | | | | | | | 0.8 | |
| 15 | | 24.0 | 46,500 | | | | | | | | | | |
| 16 | X | 24.0 | 46,500 | | 1.0 | | | | | | | 0.7 | |
| 17 | | 24.0 | 37,500 | | | | | | | | | | |
| 18 | X | 24.0 | 37,500 | | 1.2 | | | | | | | 1.0 | |
| 19 | | 24.0 | 47,333 | | | | | | | | | | |
| 20 | | 24.0 | 47,333 | | | | | | | | | | |
| 21 | X | 24.0 | 47,333 | | 1.5 | | | | | | | 1.2 | |
| 22 | | 24.0 | 49,000 | | | | | | | | | | |
| 23 | X | 24.0 | 49,000 | | 1.3 | | | | | | | 1.0 | |
| 24 | | 24.0 | 43,500 | | | | | | | | | | |
| 25 | X | 24.0 | 43,500 | | 1.2 | | | | | | | 1.0 | |
| 26 | | 24.0 | 53,667 | | | | | | | | | | |
| 27 | | 24.0 | 53,667 | | | | | | | | | | |
| 28 | X | 24.0 | 53,667 | | 1.0 | | | | | | | 0.8 | |
| 29 | | 24.0 | 38,000 | | | | | | | | | | |
| 30 | X | 24.0 | 38,000 | | 1.0 | | | | | | | 0.8 | |
| 31 | | 24.0 | | | | | | | | | | | |
| Total | | | 1,485,000 | | | | | | | | | | |
| Average | | | 47,903 | | | | | | | | | | |
| Maximum | | | 72,500 | | | | | | | | | | |

* Refer to the instructions for this report to determine which plants must provide this information.
 Effective August 28, 2003

MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6530079 Plant Name: Gibsonsia

III. Daily Data for the Month/year of: December, 2005

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

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

| 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 Measurement Point During Peak Flow, mg/L | Disinfectant Contact Time (T) at C | Lowest CT Before or at First Customer Measurement Point During Peak Flow, mg-minutes | Temp of Water, °C | pH of Water, if Applicable | Minimum CT Required, mg-min/L | Lowest 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 | CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable* | |
|---|--------------------------|---|----------------------|---|------------------------------------|--|-------------------|----------------------------|-------------------------------|--|--|---|---|-----------------|
| | | | | | | | | | | | | | UV Dose | CT Calculations |
| 1 | | 41,500 | 24.0 | | | | | | | | | | | |
| 2 | X | 24.0 | 41,500 | | | | | | | | | | | 1.6 |
| 3 | | 24.0 | 47,333 | | | | | | | | | | | |
| 4 | | 24.0 | 47,333 | | | | | | | | | | | |
| 5 | X | 24.0 | 47,333 | | | | | | | | | | | 1.0 |
| 6 | | 24.0 | 54,500 | | | | | | | | | | | |
| 7 | X | 24.0 | 54,500 | | | | | | | | | | | 1.5 |
| 8 | | 24.0 | 43,000 | | | | | | | | | | | |
| 9 | X | 24.0 | 43,000 | | | | | | | | | | | 1.2 |
| 10 | | 24.0 | 44,000 | | | | | | | | | | | |
| 11 | | 24.0 | 44,000 | | | | | | | | | | | |
| 12 | X | 24.0 | 44,000 | | | | | | | | | | | 1.4 |
| 13 | | 24.0 | 45,500 | | | | | | | | | | | |
| 14 | X | 24.0 | 45,500 | | | | | | | | | | | 1.5 |
| 15 | | 24.0 | 43,500 | | | | | | | | | | | |
| 16 | X | 24.0 | 43,500 | | | | | | | | | | | 1.6 |
| 17 | | 24.0 | 44,333 | | | | | | | | | | | |
| 18 | | 24.0 | 44,333 | | | | | | | | | | | |
| 19 | X | 24.0 | 44,333 | | | | | | | | | | | 1.8 |
| 20 | | 24.0 | 43,500 | | | | | | | | | | | |
| 21 | X | 24.0 | 43,500 | | | | | | | | | | | 2.2 |
| 22 | | 24.0 | 45,000 | | | | | | | | | | | |
| 23 | X | 24.0 | 45,000 | | | | | | | | | | | 2.1 |
| 24 | | 24.0 | 46,000 | | | | | | | | | | | |
| 25 | | 24.0 | 46,000 | | | | | | | | | | | |
| 26 | X | 24.0 | 46,000 | | | | | | | | | | | 1.2 |
| 27 | | 24.0 | 47,500 | | | | | | | | | | | |
| 28 | X | 24.0 | 47,500 | | | | | | | | | | | 1.1 |
| 29 | | 24.0 | 48,000 | | | | | | | | | | | |
| 30 | X | 24.0 | 48,000 | | | | | | | | | | | 1.4 |
| 31 | | 24.0 | 54,500 | | | | | | | | | | | |
| Total | | 1,369,000 | | | | | | | | | | | | |
| Average | | 44,161 | | | | | | | | | | | | |
| Maximum | | 54,500 | | | | | | | | | | | | |

* Refer to the Plant Records for this report to determine which plants must provide this information. DEP Form 82-995 (9/00/03) Effective August 28, 2003