

ORIGINAL

**Interlachen Lake/Park Manor**

Docket No. 060368-WS

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

Florida

**VOLUME 6**

**Book 7**

**Set 17 of 57**

Containing  
Additional Engineering Requirements

Monthly Operating Reports

CMP \_\_\_\_\_  
 COM \_\_\_\_\_  
 CTR \_\_\_\_\_  
 ECR / \_\_\_\_\_  
 GCL \_\_\_\_\_  
 OPC \_\_\_\_\_  
 RCA \_\_\_\_\_  
 SCR \_\_\_\_\_  
 SGA \_\_\_\_\_  
 SEC \_\_\_\_\_  
 OTH \_\_\_\_\_

**Aqua Utilities Florida, Inc.**

DOCUMENT NUMBER-DATE

00847 JAN 26 5

FPSC-COMMISSION CLERK

# Aqua Utilities Florida, Inc. Monthly Operating Reports

## Interlachen Lake/Park Manor

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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:	Interlachen Lakes Estates			PWS Identification Number:	2540545
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:	239			Total Population Served at End of Month:	593
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:	craig@florida-water.com				

**B. Water Treatment Plant Information**

Plant Name:	Interlachen Lakes Estates			Plant Telephone Number:	386-329-1122	
Plant Address:	Velvet Avenue			City:	Hollister	
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:	1,115,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s)/Shift(s) Worked</b>		
<b>Lead/Chief Operator:</b>	Paul Thompson	A	7251	Days 1st Shift		
<b>Other Operators:</b>	Donald Holcomb	A	5091	Days 1st Shift		

**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

Paul Thompson  
\_\_\_\_\_  
Printed or Typed Name

A-7251  
\_\_\_\_\_  
License Number

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

PWS Identification Number: 2540545	Plant Name: Interlachen Lakes Estates
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**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*										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 <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>				
1	X	24.0	39,200		1.8										1.0	
2	X	24.0	36,800		2.0										1.0	
3		24.0	37,133													
4		24.0	37,133													
5	X	24.0	37,133		1.8										1.0	
6	X	24.0	27,600		1.8										1.0	
7	X	24.0	41,100		2.2										1.0	
8	X	24.0	26,400		1.8										1.0	
9	X	24.0	41,100		1.9										1.0	
10		24.0	38,500													
11		24.0	38,500													
12	X	24.0	38,500		1.9										1.0	
13	X	24.0	31,800		1.8										0.9	
14	X	24.0	23,800		2.0										0.9	
15	X	24.0	39,000		1.8										0.9	
16	X	24.0	42,700		2.0										1.0	
17		24.0	37,000													
18		24.0	37,000													
19	X	24.0	37,000		1.9										1.0	
20	X	24.0	23,100		1.6										0.6	
21	X	24.0	41,600		2.3										1.1	
22	X	24.0	35,600		2.2										0.9	
23	X	24.0	36,300		2.2										0.9	
24		24.0	32,833													
25		24.0	32,833													
26	X	24.0	32,833		2.3										1.0	
27	X	24.0	24,600		2.0										0.9	
28	X	24.0	39,700		2.5										1.1	
29	X	24.0	27,000		2.2										1.0	
30	X	24.0	42,000		2.3										1.0	
31		24.0														
<b>Total</b>			1,055,800													
<b>Average</b>			34,058													
<b>Maximum</b>			42,700													

\* Refer to the instructions 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: 2540545 Plant Name: Interlachen Lakes Estates

III. Daily Data for the Month/year of: February, 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 Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement	Lowest CT Provided Before or at First Customer During Peak Flow, mg-minutes	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Required UV Dose, mW-sec/cm <sup>2</sup>	Remote Point in Distribution System, mg/L	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*		
													UV Dose	CT Calculations	
1	X	24.0	51,050	2.3											
2	X	24.0	51,050	2.3											
3	X	24.0	22,500	1.5											
4	X	24.0	41,100	2.3											
5	X	24.0	27,000	2.4											
6	X	24.0	36,100	2.3											
7		24.0	32,733												
8		24.0	32,733												
9	X	24.0	32,733	2.1											
10	X	24.0	18,700	2.2											
11	X	24.0	29,900	2.0											
12	X	24.0	32,700	2.1											
13	X	24.0	48,500	2.2											
14		24.0	32,767												
15		24.0	32,767												
16	X	24.0	32,767	2.3											
17	X	24.0	23,600	2.0											
18	X	24.0	31,300	2.3											
19	X	24.0	28,700	1.2											
20	X	24.0	31,300	1.0											
21		24.0	36,867												
22		24.0	36,867												
23	X	24.0	36,867	1.1											
24	X	24.0	22,000	1.1											
25	X	24.0	30,900	0.9											
26	X	24.0	22,700	1.1											
27	X	24.0	37,400	1.0											
28		24.0													
29		24.0													
Total		893,600													
Average		30,814													
Maximum		51,050													

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

DEF Form 62-555 900(3)1/01/01/01



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

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

**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 <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>			
1	X	24.0	101,600		2.0									1.0	
2	X	24.0	36,800		2.6									1.0	
3	X	24.0	29,900		2.4									1.1	
4	X	24.0	44,600		2.5									1.1	
5	X	24.0	61,800		2.6									1.1	
6		24.0	47,067												
7		24.0	47,067												
8	X	24.0	47,067		2.1									1.0	
9	X	24.0	39,100		2.0									1.4	
10	X	24.0	41,700		2.0									1.4	
11	X	24.0	32,100		2.0									1.2	
12	X	24.0	33,600		2.0									1.2	
13		24.0	53,700												
14		24.0	53,700												
15	X	24.0	53,700		2.4									1.4	
16	X	24.0	35,800		2.0									1.2	
17	X	24.0	34,500		2.0									1.2	
18	X	24.0	38,800		1.8									0.9	
19	X	24.0	56,300		2.3									1.1	
20		24.0	46,767												
21		24.0	46,767												
22	X	24.0	46,767		2.2									1.2	
23	X	24.0	22,900		2.0									1.1	
24	X	24.0	55,700		2.2									1.2	
25	X	24.0	27,400		3.0									1.5	
26	X	24.0	40,100		2.3									1.3	
27		24.0	51,500												
28		24.0	51,500												
29	X	24.0	51,500		2.5									1.3	
30	X	24.0	23,400		3.0									1.5	
31	X	24.0	67,100		2.8									1.3	
<b>Total</b>			1,420,300												
<b>Average</b>			45,816												
<b>Maximum</b>			101,600												

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



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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name:	Interlachen Lakes Estates			PWS Identification Number:	2540545
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:	239			Total Population Served at End of Month:	593
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:	Interlachen Lakes Estates			Plant Telephone Number:	386-329-1122
Plant Address:	Velvet Avenue			City:	Hollister
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:	1,115,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	
				C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s) / Shift(s) Worked</b>	
<b>Lead/Chief Operator:</b>	Paul Thompson	A	7251	Days 1st Shift	
<b>Other Operators:</b>	Donald Holcomb	A	5091	Days 1st Shift	

**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	Paul Thompson	A-7251
	Printed or Typed Name	License Number

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

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

**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 <sup>2</sup>			Minimum UV Dose Required, mW-sec/cm <sup>2</sup>
1	X	24.0	37,800		3.0								1.5	
2	X	24.0	44,200		3.5								2.0	
3		24.0	42,233											
4		24.0	42,233											
5	X	24.0	42,233		2.2								1.5	
6	X	24.0	59,700		2.5								1.5	
7	X	24.0	37,100		2.3								1.5	
8	X	24.0	41,500		1.8								1.3	
9	X	24.0	47,800		1.2								0.8	
10		24.0	54,867											
11		24.0	54,867											
12	X	24.0	54,867		2.0								1.0	
13	X	24.0	43,800		2.5								1.4	
14	X	24.0	42,900		2.2								1.2	
15	X	24.0	22,300		2.3								1.3	
16	X	24.0	46,800		2.5								1.1	
17		24.0	53,567											
18		24.0	53,567											
19	X	24.0	53,567		2.2								1.2	
20	X	24.0	21,600		2.3								1.2	
21	X	24.0	58,400		2.0								1.0	
22	X	24.0	44,400		2.2								1.0	
23	X	24.0	58,600		1.9								1.0	
24		24.0	50,367											
25		24.0	50,367											
26	X	24.0	50,367		2.5								1.4	
27	X	24.0	36,000		2.3								1.3	
28	X	24.0	39,200		2.4								1.4	
29	X	24.0	46,400		2.4								1.3	
30	X	24.0	56,300		2.3								1.2	
<b>Total</b>			1,387,900											
<b>Average</b>			46,263											
<b>Maximum</b>			59,700											

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name: Interlachen Lakes Estates		PWS Identification Number: 2540545	
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: 239		Total Population Served at End of Month: 593	
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: Interlachen Lakes Estates		Plant Telephone Number: 386-329-1122	
Plant Address: Velvet Avenue		City: Hollister	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: 1,115,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
<b>Lead/Chief Operator:</b>	Paul Thompson	A	7251
<b>Other Operators:</b>	Donald Holcomb	A	5091

**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.

	Paul Thompson	A-7251
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

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

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

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

Day of the Month	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	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum CT Required, mg-min/L	Temp of Water, °C	pH of Water, if Applicable		
1		24.0	36,933										
2		24.0	36,933										
3	X	24.0	36,933		2.0								1.0
4	X	24.0	28,700		2.2								1.0
5	X	24.0	43,700		2.3								1.1
6	X	24.0	29,100		2.4								1.1
7	X	24.0	59,100		2.3								1.1
8		24.0	50,233										
9		24.0	50,233										
10	X	24.0	50,233		2.1								1.1
11	X	24.0	36,800		2.0								1.0
12	X	24.0	37,500		2.0								1.0
13	X	24.0	48,700		2.2								1.1
14	X	24.0	54,200		2.4								1.2
15		24.0	54,967										
16		24.0	54,967										
17	X	24.0	54,967		2.5								1.2
18	X	24.0	49,000		2.4								1.1
19	X	24.0	48,800		2.4								1.1
20	X	24.0	37,600		2.2								1.0
21	X	24.0	60,700		2.4								1.2
22		24.0	52,533										
23		24.0	52,533										
24	X	24.0	52,533		2.4								1.0
25	X	24.0	53,600		2.5								1.2
26	X	24.0	56,900		2.4								1.0
27	X	24.0	51,200		2.5								1.1
28	X	24.0	85,000		2.5								1.2
29		24.0	62,800										
30		24.0	62,800										
31	X	24.0	62,800		2.3								1.2
<b>Total</b>			1,553,000										
<b>Average</b>			50,097										
<b>Maximum</b>			85,000										

\* Refer to the instructions for this report to determine which plants must provide this information.  
 DEP Form 62-555 900(3)Alternate Page 2

**Docket No. 060368-WS**

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

**In**

**Florida**

**Report Missing:**

**Monthly Operating Report**

**Interlachen Lake Estates**

**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:	Interlachen Lakes Estates	PWS Identification Number:	2540545
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:	239	Total Population Served at End of Month:	593
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Mike Fitzgerald	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	1343 NE 17th Road	City:	Ocala
		State:	Florida
		Zip Code:	34472
Contact Person's Telephone Number:	(352) 732-6027	Contact Person's Fax Number:	(352) 732-3213
Contact Person's E-Mail Address:	mvfitzgerald@aquamerica.com		

**B. Water Treatment Plant Information**

Plant Name:	Interlachen Lakes Estates	Plant Telephone Number:	386-329-1122
Plant Address:	Velvet Avenue	City:	Hollister
		State:	Florida
		Zip Code:	32177
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:	1,115,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV	Plant Class (per subsection 62-699.310(4), F.A.C.):	C
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>
<b>Lead/Chief Operator:</b>	Mark March	C	8287
<b>Other Operators:</b>	Paul Thompson	A	7251
			Days 1st Shift

**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

Mark March  
\_\_\_\_\_  
Printed or Typed Name

C-8287  
\_\_\_\_\_  
License Number

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

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

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*										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 <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	51,100		2.4									1.2	
2	X	24.0	38,000		2.4									1.2	
3		24.0	34,000												
4		24.0	34,000												
5	X	24.0	34,000		2.2									1.2	
6	X	24.0	51,200		2.2									1.2	
7	X	24.0	33,000		2.1									1.2	
8	X	24.0	36,900		2.3									1.2	
9	X	24.0	38,300		2.1									1.2	
10		24.0	59,233												
11		24.0	59,233												
12	X	24.0	59,233		1.2									0.7	
13	X	24.0	36,900		2.0									1.0	
14	X	24.0	33,100		2.1									1.1	
15	X	24.0	37,400		2.0									1.0	
16	X	24.0	35,600		2.1									1.0	
17		24.0	33,400												
18		24.0	33,400												
19	X	24.0	33,400		1.7									0.8	
20	X	24.0	27,800		1.7									0.8	
21	X	24.0	36,700		1.7									0.8	
22	X	24.0	43,300		2.4									1.1	
23	X	24.0	41,000		2.5									1.1	
24		24.0	37,567												
25		24.0	37,567												
26	X	24.0	37,567		2.5									1.2	
27	X	24.0	34,500		2.4									1.2	
28	X	24.0	30,300		2.5									1.2	
29	X	24.0	37,700		2.3									1.2	
30	X	24.0	32,200		2.3									1.2	
31		24.0	34,200												
Total			1,201,800												
Avgerage			38,768												
Maximum			59,233												

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

St. John's River Water Management District

**Pumpage Report**

This report must be completed and submitted monthly to the St. John's River Water Management District as required by Water Shortage Order F.O.R. 2000-62.

**PLEASE COMPLETE ITEMS 1 THRU 8.**

1. App. Number 7986

2. Issued to: Florida Water Services - Interlachen  
 Address: 255 Enterprise Rd.  
 City, State, Zip: Deltona, FL 32725  
 Phone Number: (407) 574-6691

3. Recording Period: AS REQUIRED BY: Water Shortage Order F.O.R. 2000-62

4. Report Due: By the 10th day of the preceding month.

5. Month July 2004

Total System:		16	35,600 Gallons
1	51,100 Gallons	17	33,400 Gallons
2	38,000 Gallons	18	33,400 Gallons
3	34,000 Gallons	19	33,400 Gallons
4	34,000 Gallons	20	27,800 Gallons
5	34,000 Gallons	21	36,700 Gallons
6	51,200 Gallons	22	43,300 Gallons
7	33,000 Gallons	23	41,000 Gallons
8	36,900 Gallons	24	37,567 Gallons
9	38,300 Gallons	25	37,567 Gallons
10	59,233 Gallons	26	37,567 Gallons
11	59,233 Gallons	27	34,500 Gallons
12	59,233 Gallons	28	30,300 Gallons
13	36,900 Gallons	29	37,700 Gallons
14	33,100 Gallons	30	32,200 Gallons
15	37,400 Gallons	31	34,200 Gallons

**TOTAL MONTHLY PUMPAGE** 1,201,800 Gallons

6. ACCOUNTING METHOD : FLOW METER(S) \_\_\_\_\_

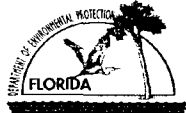
7. Name of Person Completing Form: Mark March

8. Signature: \_\_\_\_\_ Date \_\_\_\_\_

**RETURN TO: SJRWMD Orlando Service Center**  
**ATTN: Permit Data Services,**  
**975 Keller Rd.**  
**Altamonte Springs, Florida 32714**



**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:	Interlachen Lakes Estates			PWS Identification Number:	2540545
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:	239			Total Population Served at End of Month:	593
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Mike Fitzgerald			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	1343 NE 17th Road	City:	Ocala	State:	Florida
Contact Person's Telephone Number:	(352) 732-6027			Contact Person's Fax Number:	(352) 732-3213
Contact Person's E-Mail Address:	mvfitzgerald@aquaaamerica.com				

**B. Water Treatment Plant Information**

Plant Name:	Interlachen Lakes Estates			Plant Telephone Number:	386-329-1122
Plant Address:	Velvet Avenue			City:	Hollister
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:	1,115,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	
				C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s) / Shift(s) Worked</b>	
<b>Lead/Chief Operator:</b>	Mark March	C	8287		
<b>Other Operators:</b>	Paul Thompson	A	7251	Days 1st Shift	

**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

Mark March  
Printed or Typed Name

C-8287  
License Number

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

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

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	Minimum CT Required, mg-min/L	Temp of Water, °C if Applicable	pH of Water, if Applicable	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>			Minimum UV Dose Required, mW-sec/cm <sup>2</sup>
1	X	24.0	51,100		2.4								1.2	
2	X	24.0	38,000		2.4								1.2	
3		24.0	34,000											
4		24.0	34,000											
5	X	24.0	34,000		2.2								1.2	
6	X	24.0	51,200		2.2								1.2	
7	X	24.0	33,000		2.1								1.2	
8	X	24.0	36,900		2.3								1.2	
9	X	24.0	38,300		2.1								1.2	
10		24.0	59,233											
11		24.0	59,233											
12	X	24.0	59,233		1.2								0.7	
13	X	24.0	36,900		2.0								1.0	
14	X	24.0	33,100		2.1								1.1	
15	X	24.0	37,400		2.0								1.0	
16	X	24.0	35,600		2.1								1.0	
17		24.0	33,400											
18		24.0	33,400											
19	X	24.0	33,400		1.7								0.8	
20	X	24.0	27,800		1.7								0.8	
21	X	24.0	36,700		1.7								0.8	
22	X	24.0	43,300		2.4								1.1	
23	X	24.0	41,000		2.5								1.1	
24		24.0	37,567											
25		24.0	37,567											
26	X	24.0	37,567		2.5								1.2	
27	X	24.0	34,500		2.4								1.2	
28	X	24.0	30,300		2.5								1.2	
29	X	24.0	37,700		2.3								1.2	
30	X	24.0	32,200		2.3								1.2	
31		24.0	34,200											
<b>Total</b>			1,201,800											
<b>Average</b>			38,768											
<b>Maximum</b>			59,233											

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

St. John's River Water Management District

**Pumpage Report**

This report must be completed and submitted monthly to the St. John's River Water Management District as required by Water Shortage Order F.O.R. 2000-62.

**PLEASE COMPLETE ITEMS 1 THRU 8.**

1. App. Number 7986

2. Issued to: Florida Water Services - Interlachen

Address: 255 Enterprise Rd.

City, State, Zip: Deltona, FL 32725

Phone Number: (407) 574-6691

3. Recording Period: AS REQUIRED BY: Water Shortage Order F.O.R. 2000-62

4. Report Due: By the 10th day of the preceding month.

5. Month July 2004

Total System:		16	35,600 Gallons
1	51,100 Gallons	17	33,400 Gallons
2	38,000 Gallons	18	33,400 Gallons
3	34,000 Gallons	19	33,400 Gallons
4	34,000 Gallons	20	27,800 Gallons
5	34,000 Gallons	21	36,700 Gallons
6	51,200 Gallons	22	43,300 Gallons
7	33,000 Gallons	23	41,000 Gallons
8	36,900 Gallons	24	37,567 Gallons
9	38,300 Gallons	25	37,567 Gallons
10	59,233 Gallons	26	37,567 Gallons
11	59,233 Gallons	27	34,500 Gallons
12	59,233 Gallons	28	30,300 Gallons
13	36,900 Gallons	29	37,700 Gallons
14	33,100 Gallons	30	32,200 Gallons
15	37,400 Gallons	31	34,200 Gallons

**TOTAL MONTHLY PUMPAGE** 1,201,800 Gallons

6. ACCOUNTING METHOD : FLOW METER(S)

7. Name of Person Completing Form: Mark March

8. Signature: \_\_\_\_\_ Date \_\_\_\_\_

**RETURN TO: SJRWMD Orlando Service Center**

**ATTN: Permit Data Services,**

**975 Keller Rd.**

**Altamonte Springs, Florida 32714**

**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, 2004

**A. Public Water System (PWS) Information**

PWS Name:	Interlachen Lakes Estates	PWS Identification Number:	2540545
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:	239	Total Population Served at End of Month:	593
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Mike Fitzgerald	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	1343 NE 17th Road	City:	Ocala
		State:	Florida
		Zip Code:	34472
Contact Person's Telephone Number:	(352) 732-6027	Contact Person's Fax Number:	(352) 732-3213
Contact Person's E-Mail Address:	mvfitzgerald@aquaamerica.com		

**B. Water Treatment Plant Information**

Plant Name:	Interlachen Lakes Estates	Plant Telephone Number:	386-329-1122
Plant Address:	Velvet Avenue	City:	Hollister
		State:	Florida
		Zip Code:	32177
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:	1,115,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	
Other Operators:	Paul Thompson	A	7251	Days 1st Shift

**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

Mark March  
\_\_\_\_\_  
Printed or Typed Name

C-8287  
\_\_\_\_\_  
License Number

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

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates August, 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

Month	Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Peak Flow, mg/L	Customer During Peak Flow, mg/L	Point During Peak Flow, minutes	Disinfectant Contact Time Before or at Customer First	Disinfectant Provided Lowest CT	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm <sup>2</sup>	Lowest UV Dose Required, mW-sec/cm <sup>2</sup>	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*	
																		UV Dose	CT Calculations

1	X			24.0	52,500	24.0														
2	X			24.0	52,500	24.0	2.6													1.2
3	X			24.0	31,500	24.0	2.5													1.2
4	X			24.0	36,300	24.0	2.5													1.4
5	X			24.0	33,400	24.0	2.4													1.4
6	X			24.0	36,100	24.0	2.5													1.4
7				24.0	35,800	24.0														
8				24.0	35,800	24.0														
9	X			24.0	35,800	24.0	2.4													1.2
10	X			24.0	38,100	24.0	1.0													1.0
11	X			24.0	43,800	24.0	2.2													1.2
12	X			24.0	26,900	24.0	2.0													1.0
13	X			24.0	26,900	24.0	2.0													1.0
14				24.0	31,067	24.0														
15				24.0	31,067	24.0														
16	X			24.0	31,067	24.0	1.8													1.0
17	X			24.0	37,400	24.0	2.2													1.2
18	X			24.0	29,300	24.0	2.0													1.2
19	X			24.0	35,700	24.0	2.0													1.0
20	X			24.0	31,100	24.0	2.0													1.1
21				24.0	31,500	24.0														
22				24.0	31,500	24.0														
23	X			24.0	31,500	24.0	2.0													1.0
24	X			24.0	28,800	24.0	2.0													1.0
25	X			24.0	35,600	24.0	2.0													1.0
26	X			24.0	32,000	24.0	2.0													1.0
27	X			24.0	34,300	24.0	2.0													1.0
28				24.0	35,733	24.0														
29				24.0	35,733	24.0														
30	X			24.0	35,733	24.0	1.6													0.8
31	X			24.0	46,400	24.0	1.8													0.8
Total				1,090,900																
Average				35,190																
Maximum				52,500																

\* Refer to the instructions for this report to determine which plants must provide this information  
 DEP Form 62-555 900(3) Alternate

**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: Interlachen Lakes Estates		PWS Identification Number: 2540545	
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: 239		Total Population Served at End of Month: 593	
PWS Owner: Aqua Utilities Florida			
Contact Person: Mike Fitzgerald		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
Contact Person's Telephone Number: (352) 732-6027		Zip Code: 34472	
Contact Person's E-Mail Address: mvfitzgerald@aguaamerica.com		Contact Person's Fax Number: (352) 732-3213	

**B. Water Treatment Plant Information**

Plant Name: Interlachen Lakes Estates		Plant Telephone Number: 386-329-1122	
Plant Address: Velvet Avenue		City: Hollister	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32177	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,115,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Mark March	C	8287
Other Operators:	Paul Thompson	A	7251
			Day(s) / Shift(s) Worked
			Days 1st Shift

**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	Mark March Printed or Typed Name	C-8287 License Number
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MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

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	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 Before or at First Customer During Peak Flow, minutes	Lowest CT	Temp of Water, °C if Applicable	pH of Water, mm/L	Minimum CT Required, mg-mw-sec/cm <sup>2</sup>	Lowest UV Dose, mW-sec/cm <sup>2</sup>	Required UV Dose, mW-sec/cm <sup>2</sup>	Remote Point in Distribution System, mg/L	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
														UV Dose	UV Dose	
1	X		37,600	24.0	1.5											
2	X		45,800	24.0	2.5											
3	X		35,700	24.0	2.6											
4			30,533	24.0												
5			30,533	24.0												
6	X		30,533	24.0	2.2											
7	X		16,800	24.0	2.8											
8	X		34,100	24.0	2.6											
9	X		29,700	24.0	2.8											
10	X		29,200	24.0	2.8											
11			38,667	24.0												
12			38,667	24.0												
13	X		38,667	24.0	2.3											
14	X		41,700	24.0	2.5											
15	X		28,700	24.0	2.4											
16	X		45,900	24.0	2.4											
17	X		28,300	24.0	2.0											
18			48,933	24.0												
19			48,933	24.0												
20	X		48,933	24.0	2.6											
21	X		27,400	24.0	2.8											
22	X		34,800	24.0	2.2											
23	X		36,500	24.0	2.4											
24	X		34,100	24.0	2.4											
25			41,467	24.0												
26			41,467	24.0												
27	X		41,467	24.0	2.1											
28	X		24,000	24.0	2.4											
29	X		48,600	24.0	2.3											
30	X		24,100	24.0	2.4											
31			1,081,800	24.0												
Total			1,081,800													
Average			34,897													
Maximum			48,933													

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name: Interlachen Lakes Estates		PWS Identification Number: 2540545	
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: 239		Total Population Served at End of Month: 593	
PWS Owner: Aqua Utilities Florida			
Contact Person: Mike Fitzgerald		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
		Zip Code: 34472	
Contact Person's Telephone Number: (352) 732-6027		Contact Person's Fax Number: (352) 732-3213	
Contact Person's E-Mail Address: mvfitzgerald@aquaaamerica.com			

**B. Water Treatment Plant Information**

Plant Name: Interlachen Lakes Estates		Plant Telephone Number: 386-329-1122	
Plant Address: Velvet Avenue		City: Hollister	State: Florida
		Zip Code: 32177	
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: 1,115,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
<b>Lead/Chief Operator:</b>	Mark March	C	8287
<b>Other Operators:</b>	Paul Thompson	A	7251
			Days 1st Shift

**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	Mark March Printed or Typed Name	C-8287 License Number
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## MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

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)

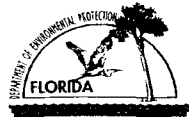
Ultraviolet Radiation  Other (Describe):

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 <sup>2</sup>			Minimum UV Dose Required, mW-sec/cm <sup>2</sup>
1	X	24.0	32,700		3.0								1.6	
2		24.0	31,967											
3		24.0	31,967											
4	X	24.0	31,967		1.8								1.0	
5	X	24.0	33,300		2.3								1.4	
6	X	24.0	34,900		2.4								2.0	
7	X	24.0	40,600		2.2								1.4	
8	X	24.0	29,900		2.3								1.4	
9		24.0	35,433											
10		24.0	35,433											
11	X	24.0	35,433		2.2								1.4	
12	X	24.0	39,100		2.0								1.2	
13	X	24.0	43,000		1.8								1.2	
14	X	24.0	50,500		2.0								1.2	
15	X	24.0	54,700		1.8								1.2	
16		24.0	57,167											
17		24.0	57,167											
18	X	24.0	57,167		1.9								0.8	
19	X	24.0	57,100		1.4								0.5	
20	X	24.0	61,700		1.9								0.8	
21	X	24.0	64,300		1.6								0.6	
22	X	24.0	52,800		2.4								1.2	
23		24.0	61,900											
24		24.0	61,900											
25	X	24.0	61,900		2.6								1.2	
26	X	24.0	67,200		2.6								1.2	
27	X	24.0	62,700		2.3								1.2	
28	X	24.0	76,600		2.0								1.1	
29	X	24.0	47,700		2.2								1.0	
30		24.0	55,033											
31		24.0	55,033											
Total			1,518,266											
Average			48,976											
Maximum			76,600											

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name: Interlachen Lakes Estates		PWS Identification Number: 2540545	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community
Number of Service Connections at End of Month: 239		Total Population Served at End of Month: 593	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address:	1343 NE 17th Road	City: Ocala	State: Florida
Contact Person's Telephone Number:	(352) 732-6027	Contact Person's Fax Number: (352) 732-3213	
Contact Person's E-Mail Address: beheath@aquaamerica.com			

**B. Water Treatment Plant Information**

Plant Name: Interlachen Lakes Estates		Plant Telephone Number: 386-329-1122	
Plant Address: Velvet Avenue		City: Hollister	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: 1,115,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>
<b>Lead/Chief Operator:</b>	Mark March	C	8287
<b>Other Operators:</b>	Paul Thompson	A	7251
			Days 1st Shift

**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.

	Mark March	C-8287
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

**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 <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>			
1	X	24.0	184,500		1.0									0.6	
2	X	24.0	64,500		1.5									0.6	
3	X	24.0	52,900		1.9									0.9	
4	X	24.0	76,600		1.5									0.6	
5	X	24.0	67,600		1.8									0.7	
6		24.0	64,167												
7		24.0	64,167												
8	X	24.0	64,167		1.9									1.2	
9	X	24.0	59,800		1.4									0.6	
10	X	24.0	62,600		2.0									1.0	
11	X	24.0	67,700		1.5									0.6	
12	X	24.0	75,900		1.7									0.6	
13		24.0	62,333												
14		24.0	62,333												
15	X	24.0	62,333		1.5									0.4	
16	X	24.0	84,600		1.4									0.5	
17	X	24.0	74,800		1.6									0.5	
18	X	24.0	74,500		1.6									0.5	
19	X	24.0	54,700		1.7									0.6	
20		24.0	73,533												
21		24.0	73,533												
22	X	24.0	73,533		2.6									0.7	
23	X	24.0	71,100		2.4									0.8	
24	X	24.0	56,700		2.3									0.7	
25	X	24.0	60,100		2.5									0.7	
26	X	24.0	79,200		2.2									0.6	
27		24.0	63,567												
28		24.0	63,567												
29	X	24.0	63,567		2.3									0.7	
30	X	24.0	53,400		2.5									0.7	
31		24.0													
<b>Total</b>			2,112,000												
<b>Average</b>			68,129												
<b>Maximum</b>			184,500												

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

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



Polymer Page 3 Due in December

See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Interlachen Lakes Estates, PWS Identification Number: 2540545, PWS Type: Community, Contact Person: Brian Heath, Contact Person's Title: Area Manager, Contact Person's Mailing Address: 1343 NE 17th Road, City: Ocala, State: Florida, Zip Code: 34472, Contact Person's Telephone Number: (352) 732-6027, Contact Person's Fax Number: (352) 732-3213, Contact Person's E-Mail Address: beheath@aquaaamerica.com

B. Water Treatment Plant Information

Plant Name: Interlachen Lakes Estates, Plant Telephone Number: 386-329-1122, Plant Address: Velvet Avenue, City: Hollister, State: Florida, Zip Code: 32177, Type of Water Treatment by Plant: Raw Ground Water, Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,115,000, Plant Category (per subsection 62-699.310(4), F.A.C.): IV, Plant Class (per subsection 62-699.310(4), F.A.C.): C, Licensed Operators: Mark March (License Class: C, License Number: 8287), Paul Thompson (License Class: A, License Number: 7251)

II. Certification by Lead/Chief Operator

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

Signature and Date: \_\_\_\_\_ Printed or Typed Name: Mark March License Number: C8287

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

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

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

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

Ultraviolet Radiation  Other (Describe):

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

Day of the Month	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 <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	59,700		2.5									0.7	
2	X	24.0	80,400		2.2									0.8	
3	X	24.0	49,200		2.3									0.8	
4		24.0	64,200												
5		24.0	64,200												
6	X	24.0	64,200		2.4									0.8	
7	X	24.0	84,500		2.0									0.7	
8	X	24.0	52,900		2.1									0.7	
9	X	24.0	69,400		2.2									0.8	
10	X	24.0	57,700		2.0									0.7	
11		24.0	59,533												
12		24.0	59,533												
13	X	24.0	59,533		2.3									0.8	
14	X	24.0	72,200		2.1									0.8	
15	X	24.0	80,200		2.4									1.0	
16	X	24.0	68,600		2.0									0.8	
17	X	24.0	42,700		2.5									0.8	
18		24.0	69,333												
19		24.0	69,333												
20	X	24.0	69,333		2.4									0.8	
21	X	24.0	58,500		2.8									2.4	
22	X	24.0	74,100		2.7									1.6	
23	X	24.0	79,800		2.8									1.8	
24	X	24.0	37,900		2.0									1.4	
25		24.0	62,233												
26		24.0	62,233												
27	X	24.0	62,233		2.0									1.0	
28	X	24.0	65,000		2.2									1.0	
29	X	24.0	60,100		2.2									0.9	
30	X	24.0	81,500		2.3									1.0	
31	X	24.0	51,300		2.4									1.0	
<b>Total</b>			1,991,600												
<b>Average</b>			64,245												
<b>Maximum</b>			84,500												

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name:	Interlachen Lakes Estates			PWS Identification Number:	2540545
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:	239			Total Population Served at End of Month:	593
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Zip Code:	34749
Contact Person's E-Mail Address:	beheath@aquaamerica.com			Contact Person's Fax Number:	(352) 787-6333

**B. Water Treatment Plant Information**

Plant Name:	Interlachen Lakes Estates			Plant Telephone Number:	(352) 787-0980
Plant Address:	Velvet Avenue			City:	Hollister
		State:	Florida	Zip Code:	32177
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:	1,115,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	
				C	
<b>Licensed Operators:</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s) / Shift(s) Worked</b>	
<b>Lead/Chief Operator:</b>	Paul Thompson	A	7251	Days 1st Shift	
<b>Other Operators:</b>					

**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	Paul Thompson Printed or Typed Name	A7251 License Number
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MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

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

Days Plant Visited or Operator in (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	Measurement (T) at C	First Customer Flow, mg-min/L	Temp. of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm <sup>2</sup>	Required UV Dose, mW-sec/cm <sup>2</sup>	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		24.0	62,667											
2		24.0	62,667											
3	X	24.0	62,667	2.0										0.9
4	X	24.0	79,600	2.2										0.9
5	X	24.0	49,600	1.9										0.8
6	X	24.0	70,400	1.9										0.7
7	X	24.0	57,400	2.1										0.7
8		24.0	64,900											
9		24.0	64,900											
10	X	24.0	64,900	1.9										0.7
11	X	24.0	80,200	2.0										1.0
12	X	24.0	45,300	2.2										1.0
13	X	24.0	65,900	2.0										0.5
14	X	24.0	75,200	2.2										0.6
15		24.0	54,033											
16		24.0	54,033											
17	X	24.0	54,033	2.0										0.8
18	X	24.0	66,700	1.8										1.0
19	X	24.0	68,000	1.8										0.8
20	X	24.0	84,400	2.0										1.2
21	X	24.0	44,500	1.8										0.8
22		24.0	67,033											
23		24.0	67,033											
24	X	24.0	67,033	2.0										0.7
25	X	24.0	78,600	1.8										0.7
26	X	24.0	53,700	1.8										0.6
27	X	24.0	87,500	1.8										0.7
28	X	24.0	53,400	1.8										0.6
29		24.0	62,633											
30		24.0	62,633											
31	X	24.0	62,633	1.8										0.6
Total		1,994,200												
Average		64,329												
Maximum		87,500												

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

DEP Form 62-555 900(3)/alternate





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

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

**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 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 <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>			
1	X	24.0	77,900		1.8									1.0	
2	X	24.0	50,100		1.8									1.0	
3	X	24.0	49,300		1.8									1.2	
4	X	24.0	81,400		1.8									1.0	
5		24.0	54,700												
6		24.0	54,700												
7	X	24.0	54,700		2.3									1.0	
8	X	24.0	72,000		2.1									0.8	
9	X	24.0	49,300		1.8									0.8	
10	X	24.0	61,300		1.7									0.8	
11	X	24.0	61,100		1.8									0.8	
12		24.0	60,733												
13		24.0	60,733												
14	X	24.0	60,733		0.7									0.4	
15	X	24.0	61,600		1.2									0.6	
16	X	24.0	63,800		1.2									0.6	
17	X	24.0	73,200		1.4									0.6	
18	X	24.0	57,000		1.8									0.7	
19		24.0	64,800												
20		24.0	64,800												
21	X	24.0	64,800		1.6									0.7	
22	X	24.0	82,400		1.4									0.7	
23	X	24.0	54,500		1.5									0.7	
24	X	24.0	108,600		1.4									0.7	
25	X	24.0	55,200		1.6									0.7	
26		24.0	103,100												
27		24.0	103,100												
28	X	24.0	103,100		1.6									0.7	
29		24.0													
30		24.0													
31		24.0													
<b>Total</b>			1,908,700												
<b>Average</b>			61,571												
<b>Maximum</b>			108,600												

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name: Interlachen Lakes Estates		PWS Identification Number: 2540545	
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: 251		Total Population Served at End of Month: 753	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aquaaamerica.com		Contact Person's Fax Number: (352) 787-6333	

**B. Water Treatment Plant Information**

Plant Name: Interlachen Lakes Estates		Plant Telephone Number: (352) 787-0980		
Plant Address: Velvet Avenue		City: Hollister	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32177		
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,115,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251	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	Paul Thompson Printed or Typed Name	A7251 License Number
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## MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

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	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>			Minimum UV Dose Required, mW-sec/cm <sup>2</sup>
1	X	24.0	97,200		1.6								0.8	
2	X	24.0	89,500		1.6								0.7	
3	X	24.0	110,100		1.4								0.7	
4	X	24.0	84,500		1.6								0.7	
5		24.0	98,333											
6		24.0	98,333											
7	X	24.0	98,333		1.7								0.8	
8	X	24.0	122,200		1.8								1.4	
9	X	24.0	68,000		1.7								0.8	
10	X	24.0	100,200		1.6								1.0	
11	X	24.0	93,700		1.8								0.6	
12		24.0	99,967											
13		24.0	99,967											
14	X	24.0	99,967		1.7								0.6	
15	X	24.0	76,500		1.3								0.7	
16	X	24.0	70,700		1.8								0.5	
17	X	24.0	59,800		1.8								1.1	
18	X	24.0	69,300		1.5								1.4	
19		24.0	66,567											
20		24.0	66,567											
21	X	24.0	66,567		1.8								1.2	
22	X	24.0	63,100		1.7								1.0	
23	X	24.0	83,400		1.8								1.2	
24	X	24.0	56,100		1.7								1.0	
25	X	24.0	55,700		1.6								1.0	
26		24.0	65,867											
27		24.0	65,867											
28	X	24.0	65,867		1.9								1.1	
29	X	24.0	74,400		1.6								0.9	
30	X	24.0	45,600		1.6								1.0	
31	X	24.0	80,900		1.7								1.1	
Total			2,493,100											
Average			80,423											
Maximum			122,200											

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name: Interlachen Lakes Estates		PWS Identification Number: 2540545	
PWS Type: <input checked="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: 251		Total Population Served at End of Month: 753	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida    Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: <a href="mailto:beheath@aquaaamerica.com">beheath@aquaaamerica.com</a>			

**B. Water Treatment Plant Information**

Plant Name: Interlachen Lakes Estates		Plant Telephone Number: (352) 787-0980	
Plant Address: Velvet Avenue		City: Hollister	State: Florida    Zip Code: 32177
Type of Water Treatment by Plant: <input checked="checked" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,115,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number    Day(s) / Shift(s) Worked
Lead/Chief Operator:	Larry White	C	7082    Days 1st Shift
Other Operators:	Paul Thompson	A	7251    Days 1st Shift

**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

Larry White  
\_\_\_\_\_  
Printed or Typed Name

C7082  
\_\_\_\_\_  
License Number

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

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

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	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>				
1	X	24.0	56,800		1.6										1.0	
2		24.0	57,433													
3		24.0	57,433													
4	X	24.0	57,433		1.8										0.9	
5	X	24.0	72,400		1.8										1.5	
6	X	24.0	65,400		1.6										1.3	
7	X	24.0	57,100		1.6										1.3	
8	X	24.0	65,300		1.4										1.0	
9		24.0	58,300													
10		24.0	58,300													
11	X	24.0	58,300		1.7										1.2	
12	X	24.0	62,500		1.7										1.1	
13	X	24.0	69,200		1.7										1.0	
14	X	24.0	66,500		1.6										1.1	
15	X	24.0	52,700		1.7										0.8	
16		24.0	71,233													
17		24.0	71,233													
18	X	24.0	71,233		1.5										0.9	
19	X	24.0	61,800		1.5										1.2	
20	X	24.0	89,600		1.6										1.1	
21	X	24.0	46,800		1.4										1.1	
22	X	24.0	70,100		1.6										1.0	
23		24.0	63,700													
24		24.0	63,700													
25	X	24.0	63,700		1.8										1.3	
26	X	24.0	71,300		1.4										1.0	
27	X	24.0	59,400		1.5										1.0	
28	X	24.0	59,900		1.4										1.1	
29	X	24.0	62,600		1.5										1.1	
30		24.0	63,000													
31		24.0														
<b>Total</b>			1,904,400													
<b>Average</b>			61,432													
<b>Maximum</b>			89,600													

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name:	Interlachen Lakes Estates	PWS Identification Number:	2540545
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:	251	Total Population Served at End of Month:	753
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
Contact Person's Telephone Number:	(352) 787-0980	Zip Code:	34749
Contact Person's E-Mail Address:	beheath@aquaaamerica.com	Contact Person's Fax Number:	(352) 787-6333

**B. Water Treatment Plant Information**

Plant Name:	Interlachen Lakes Estates	Plant Telephone Number:	(352) 787-0980
Plant Address:	Velvet Avenue	City:	Hollister
		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:	1,115,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251	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.

	Paul Thompson	A7251
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

**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 Producted, 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 <sup>2</sup>			Minimum UV Dose Required, mW-sec/cm <sup>2</sup>
1		24.0	93,650											
2	X	24.0	93,650		1.7								1.1	
3	X	24.0	65,100		1.0								0.5	
4	X	24.0	63,400		0.7								0.6	
5	X	24.0	63,900		1.6								1.0	
6	X	24.0	54,200		1.4								1.0	
7		24.0	60,233											
8		24.0	60,233											
9	X	24.0	60,233		1.3								0.8	
10	X	24.0	75,500		0.4								0.4	
11	X	24.0	50,100		1.6								0.9	
12	X	24.0	63,200		1.5								1.0	
13	X	24.0	55,600		1.4								1.0	
14		24.0	71,133											
15		24.0	71,133											
16	X	24.0	71,133		1.5								0.9	
17	X	24.0	74,100		1.8								1.0	
18	X	24.0	62,200		1.6								1.2	
19	X	24.0	61,100		1.5								1.2	
20	X	24.0	86,100		2.0								1.5	
21		24.0	62,333											
22		24.0	62,333											
23	X	24.0	62,333		1.7								1.1	
24	X	24.0	100,100		1.9								1.7	
25	X	24.0	59,000		2.0								1.6	
26	X	24.0	64,900		1.8								1.6	
27	X	24.0	77,600		2.0								1.5	
28		24.0	84,600											
29		24.0	84,600											
30	X	24.0	84,600		1.7								0.9	
31	X	24.0	45,500		1.6								1.0	
<b>Total</b>			2,143,800											
<b>Average</b>			69,155											
<b>Maximum</b>			100,100											

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name:	Interlachen Lakes Estates			PWS Identification Number:	2540545
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:	251			Total Population Served at End of Month:	753
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	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@aquaamerica.com				

**B. Water Treatment Plant Information**

Plant Name:	Interlachen Lakes Estates			Plant Telephone Number:	(352) 787-0980
Plant Address:	Velvet Avenue	City:	Hollister	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:	1,115,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.): C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s) / Shift(s) Worked</b>	
<b>Lead/Chief Operator:</b>	Larry White	C	7082	Days 1st Shift	
<b>Other Operators:</b>	Paul Thompson	A	7251	Days 1st Shift	

**II. Certification by Lead/Chief Operator**

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

Signature and Date: \_\_\_\_\_ Printed or Typed Name: Larry White License Number: C7082



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

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

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*										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 <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>			
1	X	24.0	73,500		1.4									1.0	
2	X	24.0	66,600		1.4									1.1	
3	X	24.0	60,800		1.6									1.3	
4		24.0	63,033												
5		24.0	63,033												
6	X	24.0	63,033		1.4									0.9	
7	X	24.0	64,700		1.2									0.8	
8	X	24.0	70,600		1.5									1.2	
9	X	24.0	56,300		1.5									1.1	
10	X	24.0	71,200		1.2									1.0	
11		24.0	66,900												
12		24.0	66,900												
13	X	24.0	66,900		1.6									1.2	
14	X	24.0	81,900		1.7									1.4	
15	X	24.0	49,100		1.7									1.2	
16	X	24.0	77,600		2.0									1.7	
17	X	24.0	54,700		1.9									1.7	
18		24.0	61,800												
19		24.0	61,800												
20	X	24.0	61,800		1.9									1.6	
21	X	24.0	63,200		1.8									1.6	
22	X	24.0	66,100		2.0									1.5	
23	X	24.0	72,600		2.0									1.5	
24	X	24.0	85,100		1.9									1.5	
25		24.0	62,467												
26		24.0	62,467												
27	X	24.0	62,467		1.8									1.4	
28	X	24.0	51,400		1.6									1.3	
29	X	24.0	69,700		1.4									1.1	
30	X	24.0	59,300		1.5									1.1	
31		24.0													
<b>Total</b>			1,957,000												
<b>Average</b>			63,129												
<b>Maximum</b>			85,100												

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name:	Interlachen Lakes Estates			PWS Identification Number:	2540545
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:	251			Total Population Served at End of Month:	753
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Zip Code:	34749
Contact Person's E-Mail Address:	beheath@aquaaamerica.com			Contact Person's Fax Number:	(352) 787-6333

**B. Water Treatment Plant Information**

Plant Name:	Interlachen Lakes Estates			Plant Telephone Number:	(352) 787-0980
Plant Address:	Velvet Avenue		City:	Hollister	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:	1,115,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.): C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s) / Shift(s) Worked</b>	
<b>Lead/Chief Operator:</b>	Paul Thompson	A	7251	Days 1st Shift	
<b>Other Operators:</b>	Larry White	C	7082	Days 1st Shift	
	David Haring	C	14091	Days 1st Shift	

**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	Paul Thompson	A7251
	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:** August, 2005

**A. Public Water System (PWS) Information**

PWS Name:	Interlachen Lakes Estates	PWS Identification Number:	2540545
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:	251	Total Population Served at End of Month:	753
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
Contact Person's Telephone Number:	(352) 787-0980	Zip Code:	34749
Contact Person's E-Mail Address:	beheath@aquaaamerica.com	Contact Person's Fax Number:	(352) 787-6333

**B. Water Treatment Plant Information**

Plant Name:	Interlachen Lakes Estates	Plant Telephone Number:	(352) 787-0980
Plant Address:	Velvet Avencue	City:	Hollister
		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:	1,115,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251	Days 1st Shift
Other Operators:	Larry White	C	7082	Days 1st Shift
	David Haring	C	14091	Days 1st Shift

**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 \_\_\_\_\_ Paul Thompson \_\_\_\_\_ A7251 \_\_\_\_\_  
 Printed or Typed Name License Number

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

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

III. Daily Data for the Month/Year of: August, 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 <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>		
1	X	24.0	92,500		1.1								0.7	
2	X	24.0	54,400		1.1								1.1	
3	X	24.0	50,700		1.1								1.0	
4	X	24.0	87,900		1.0								0.9	
5	X	24.0	46,700		1.0								0.8	
6		24.0	63,167											
7		24.0	63,167											
8	X	24.0	63,167		1.0								0.8	
9	X	24.0	56,500		1.0								0.8	
10	X	24.0	58,900		1.0								0.8	
11	X	24.0	75,500		1.0								0.8	
12	X	24.0	52,000		0.9								0.8	
13		24.0	68,967											
14		24.0	68,967											
15	X	24.0	68,967		1.0								0.8	
16	X	24.0	79,900		0.9								0.7	
17	X	24.0	55,500		1.0								1.0	
18	X	24.0	65,500		1.0								0.8	
19	X	24.0	65,900		1.0								0.8	
20		24.0	58,133											
21		24.0	58,133											
22	X	24.0	58,133		0.8								0.7	
23	X	24.0	63,000		1.1								1.0	
24	X	24.0	59,100		1.0								0.9	
25	X	24.0	64,000		1.2								1.0	
26	X	24.0	56,800		1.2								1.1	
27		24.0	66,467											
28		24.0	66,467											
29	X	24.0	66,467		1.1								0.9	
30	X	24.0	45,400		1.0								0.9	
31	X	24.0	58,500		1.2								1.2	
Total			1,958,900											
Average			63,190											
Maximum			92,500											

\* Refer to the instructions for this report to determine which plants must provide this information.  
 DEP Form 62-555.900(3)Alternate Page 2



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

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

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*								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 <sup>2</sup>			Minimum UV Dose Required, mW-sec/cm <sup>2</sup>
1	X	24.0	59,300		1.2								1.1	
2	X	24.0	84,900		1.2								1.0	
3		24.0	53,700											
4		24.0	53,700											
5	X	24.0	53,700		0.9								0.8	
6	X	24.0	60,400		1.0								0.8	
7	X	24.0	55,500		1.0								0.8	
8	X	24.0	90,000		1.0								0.9	
9	X	24.0	45,400		1.0								0.8	
10		24.0	61,733											
11		24.0	61,733											
12	X	24.0	61,733		0.6								0.4	
13	X	24.0	59,100		0.9								0.6	
14	X	24.0	48,600		0.9								0.7	
15	X	24.0	73,400		0.9								0.7	
16	X	24.0	64,600		1.0								0.7	
17		24.0	65,800											
18		24.0	65,800											
19	X	24.0	65,800		1.5								1.4	
20	X	24.0	62,600		1.9								1.6	
21	X	24.0	60,700		1.5								1.5	
22	X	24.0	95,400		1.4								1.1	
23	X	24.0	54,900		1.5								1.3	
24		24.0	55,867											
25		24.0	55,867											
26	X	24.0	55,867		1.4								1.2	
27	X	24.0	65,100		1.4								1.2	
28	X	24.0	66,800		1.1								1.1	
29	X	24.0	79,000		1.1								1.0	
30	X	24.0	126,600		1.2								1.0	
31		24.0												
<b>Total</b>			1,963,600											
<b>Average</b>			63,342											
<b>Maximum</b>			126,600											

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name: Interlachen Lakes Estates		PWS Identification Number: 2540545	
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: 251		Total Population Served at End of Month: 753	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		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@aguaamerica.com			

**B. Water Treatment Plant Information**

Plant Name: Interlachen Lakes Estates		Plant Telephone Number: (352) 787-0980	
Plant Address: Velvet Avenue		City: Hollister	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: 1,115,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Paul Thompson	A	7251
Other Operators:	Larry White	C	7082
	David Haring	C	14091

**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	Paul Thompson Printed or Typed Name	A7251 License Number
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**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**

PWS Identification Number 2540545 Plant Name: Interlachen Lakes Estates

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	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 Before or at First Customer Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer Measurement Point During Peak Flow, min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	UV Dose Required, mW-sec/cm <sup>2</sup>	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

Total	Average	Maximum
1,872,800	60.413	87,200
31	X	24.0
30		24.0
29		24.0
28	X	24.0
27	X	24.0
26	X	24.0
25	X	24.0
24	X	24.0
23		24.0
22		24.0
21	X	24.0
20	X	24.0
19	X	24.0
18	X	24.0
17	X	24.0
16		24.0
15		24.0
14	X	24.0
13	X	24.0
12	X	24.0
11	X	24.0
10	X	24.0
9		24.0
8		24.0
7	X	24.0
6	X	24.0
5	X	24.0
4	X	24.0
3	X	24.0
2		24.0
1		24.0

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

DEP Form 62-555 900(3)A/temate

**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:** November, 2005

**A. Public Water System (PWS) Information**

PWS Name:	Interlachen Lakes Estates	PWS Identification Number:	2540545
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:	251	Total Population Served at End of Month:	753
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
		Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaamerica.com		

**B. Water Treatment Plant Information**

Plant Name:	Interlachen Lakes Estates	Plant Telephone Number:	(352) 787-0980
Plant Address:	Velvet Avenue	City:	Hollister
		State:	Florida
		Zip Code:	32177
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:	1,115,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators:	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251	Days 1st Shift
Other Operators:	Larry White	C	7082	Days 1st Shift
	David Haring	C	14091	Days 1st Shift

**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>Paul Thompson</u>	License Number
	Printed or Typed Name	A7251

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

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

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*										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 <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	64,300		1.2									0.8	
2	X	24.0	74,100		1.0									1.0	
3	X	24.0	48,300		1.0									0.9	
4	X	24.0	54,400		1.0									0.7	
5		24.0	65,467												
6		24.0	65,467												
7	X	24.0	65,467		1.1									0.8	
8	X	24.0	57,300		1.3									0.7	
9	X	24.0	54,500		1.0									0.7	
10	X	24.0	65,800		1.1									0.8	
11	X	24.0	75,400		1.1									1.0	
12		24.0	50,700												
13		24.0	50,700												
14	X	24.0	50,700		1.7									1.5	
15	X	24.0	68,500		1.6									1.2	
16	X	24.0	53,400		1.3									1.0	
17	X	24.0	65,800		1.2									1.2	
18	X	24.0	66,100		1.2									1.0	
19		24.0	59,700												
20		24.0	59,700												
21	X	24.0	59,700		1.2									0.6	
22	X	24.0	56,600		1.2									0.8	
23	X	24.0	73,700		1.4									0.9	
24	X	24.0	56,000		1.4									1.0	
25	X	24.0	56,200		1.4									1.1	
26		24.0	65,000												
27		24.0	65,000												
28	X	24.0	65,000		1.3									0.8	
29	X	24.0	55,200		1.2									0.6	
30	X	24.0	67,000		1.2									1.2	
31		24.0													
<b>Total</b>			1,835,200												
<b>Average</b>			59,200												
<b>Maximum</b>			75,400												

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

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



Polymer Page 3 Due in December

See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name:	Interlachen Lakes Estates			PWS Identification Number:	2540545
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:	251			Total Population Served at End of Month:	753
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	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@aquaamerica.com				

**B. Water Treatment Plant Information**

Plant Name:	Interlachen Lakes Estates			Plant Telephone Number:	(352) 787-0980
Plant Address:	Velvet Avenue	City:	Hollister	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:	1,115,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s)/Shift(s) Worked</b>	
<b>Lead/Chief Operator:</b>	Paul Thompson	A	7251	Days 1st Shift	
<b>Other Operators:</b>	Larry White	C	7082	Days 1st Shift	
	David Haring	C	14091	Days 1st Shift	

**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	Paul Thompson Printed or Typed Name	A7251 License Number
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## MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2540545 Plant Name: Interlachen Lakes Estates

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)  
 Ultraviolet Radiation  Other (Describe):

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

Day of the Month	Days 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 <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1	X	24.0	38,150		1.4										1.2	
2	X	24.0	45,400		1.4										1.0	
3		24.0	58,767													
4		24.0	58,767													
5	X	24.0	58,767		1.3										0.8	
6	X	24.0	73,000		1.8										1.0	
7		24.0	31,400		1.7										1.0	
8	X	24.0	65,400		1.6										0.8	
9	X	24.0	54,400		1.4										0.8	
10		24.0	53,733													
11		24.0	53,733													
12	X	24.0	53,733		1.8										1.3	
13	X	24.0	40,000		1.6										1.0	
14	X	24.0	70,200		1.5										1.0	
15	X	24.0	59,200		1.2										0.7	
16	X	24.0	55,500		1.2										0.6	
17		24.0	57,566													
18		24.0	57,566													
19	X	24.0	57,566		1.2										0.8	
20	X	24.0	54,000		1.2										0.8	
21	X	24.0	55,500		1.4										0.7	
22	X	24.0	65,000		1.4										1.0	
23	X	24.0	52,600		1.2										0.7	
24		24.0	60,733													
25		24.0	60,733													
26	X	24.0	60,733		1.4										0.7	
27	X	24.0	46,600		1.4										0.6	
28	X	24.0	56,900		1.4										0.7	
29	X	24.0	49,400		1.4										1.0	
30	X	24.0	51,100		1.3										1.0	
31		24.0	95,800													
<b>Total</b>			1,751,946													
<b>Average</b>			56,514													
<b>Maximum</b>			95,800													

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