

ORIGINAL

Quail Ridge

Docket No. 060368-WS

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

Florida

VOLUME 6

Book 7

Set 38 of 57

Containing
Additional Engineering Requirements

Monthly Operating Reports

CMP _____

COM _____

CTR _____

ECR T

GCL _____

OPC _____

RCA _____

SCR _____

SGA _____

SEC _____

OTH _____

Aqua Utilities Florida, Inc.

DOCUMENT NUMBER-DATE

00868 JAN 26 5

FPSC-COMMISSION CLERK

Aqua Utilities Florida, Inc. Monthly Operating Reports

Quail Ridge

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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: Quail Ridge		PWS Identification Number: 3354867	
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: 65		Total Population Served at End of Month: 163	
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: Quail Ridge		Plant Telephone Number: 352-787-0980		
Plant Address: 37713 Quail Ridge Circle		City: Eustis	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: 468,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Brian Heath	C	5825	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift
	Gary Kissick	C	7846	Days 1st Shift
	Mike Ponticelli	C	8450	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.

2/9/2004 0:00	Will Fontaine	C-6813
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: 3354867 Plant Name: Quail Ridge

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

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

Days Plant Started or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Peak Flow Customer During Before or at First Disinfectant Concentration (C)	Measurement Point During Disinfectant (T) at Contact Time Before or at First Customer During Peak Flow, mg-min/L	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*		
														CT Calculations	UV Dose	UV Dose
1		11,000	24.0													
2		20,000	24.0													
3		12,000	24.0													
4		16,000	24.0													
5		16,000	24.0													
6		12,000	24.0													
7		11,000	24.0													
8		14,000	24.0													
9		10,000	24.0													
10		17,000	24.0													
11		12,000	24.0													
12		12,000	24.0													
13		11,000	24.0													
14		10,000	24.0													
15		16,000	24.0													
16		16,000	24.0													
17		13,000	24.0													
18		13,000	24.0													
19		14,000	24.0													
20		9,000	24.0													
21		13,000	24.0													
22		15,000	24.0													
23		14,000	24.0													
24		12,000	24.0													
25		14,500	24.0													
26		14,500	24.0													
27		13,000	24.0													
28		11,000	24.0													
29		14,000	24.0													
30		10,000	24.0													
31		2,600	24.0													
Total		398,600														
Average		12,858														
Maximum		20,000														

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name:	Quail Ridge			PWS Identification Number:	3354867
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:	66			Total Population Served at End of Month:	165
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:	Quail Ridge			Plant Telephone Number:	352-787-0980
Plant Address:	37713 Quail Ridge Circle			City:	Eustis
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:	468,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	
	C				
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked	
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift	
Other Operators:	Brian Heath	C	5825	Days 1st Shift	
	John Worrell	C	6597	Days 1st Shift	
	Gary Kissick	C	7846	Days 1st Shift	
	Mike Ponticelli	C	8450	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: 3/9/2004 0:00

Printed or Typed Name: Will Fontaine

License Number: C-6813

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

PWS Identification Number: 3354867 Plant Name: Quail Ridge

III. Daily Data for the Month/year of: February, 2004

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

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

Days Plant Started or Operator Visited by	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) at Customer Measurement Point During Peak Flow, mg/L	Disinfectant Contact Time 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 UV Dose, mW-sec/cm ²	Operating UV Dose, mW-sec/cm ²	System, mg/L	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24,000	24,000	1.4									
2	X	16,000	24,000	1.2									
3	X	12,000	24,000	1.5									
4	X	17,000	24,000	1.4									
5	X	16,000	24,000	1.4									
6	X	14,000	24,000	1.4									
7	X	16,500	24,000										
8	X	15,500	24,000	1.6									
9	X	17,000	24,000	1.3									
10	X	10,000	24,000	1.3									
11	X	14,000	24,000	1.3									
12	X	10,000	24,000	1.7									
13	X	12,000	24,000	1.8									
14	X	8,000	24,000	1.7									
15		12,000	24,000										
16	X	12,000	24,000	1.5									
17	X	9,000	24,000	1.5									
18	X	11,000	24,000	1.4									
19	X	10,000	24,000	1.5									
20	X	13,000	24,000	1.4									
21	X	10,000	24,000	1.5									
22		18,500	24,000										
23	X	18,500	24,000	1.4									
24	X	12,000	24,000	1.4									
25	X	8,000	24,000	1.3									
26	X	9,000	24,000	1.5									
27	X	10,000	24,000	1.4									
28	X	4,000	24,000	1.4									
29		14,000	24,000										
Total		376,000											
Average		12,966											
Maximum		26,000											

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Quail Ridge		PWS Identification Number: 3354867	
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: 64		Total Population Served at End of Month: 160	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
		Zip Code: 32860-9520	
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Quail Ridge		Plant Telephone Number: 352-787-0980		
Plant Address: 37713 Quail Ridge Circle		City: Eustis	State: Florida	
		Zip Code: 32726		
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: 468,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Brian Heath	C	5825	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift
	Gary Kissick	C	7846	Days 1st Shift
	Adam Michaelson		Trainee	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.

4/8/2004 0:00	Will Fontaine	C-6813
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 3354867 Plant Name: Quail Ridge

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	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	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 ²	Lowest UV Dose Required, mW-sec/cm ²	Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*			CT Calculations										
															Provided CT	Disinfectant Contact Time	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Measurement Point During Peak Flow, mg/L	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 ²	Lowest UV Dose Required, mW-sec/cm ²	Concentration at Remote Point in Distribution System, mg/L	Provided CT	Disinfectant Contact Time	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Measurement Point During Peak Flow, mg/L	
1	X		24,000	9,333	1.0										1.0	1.2	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1				
2	X		24,000	8,000	1.2										1.2	1.2	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1			
3	X		24,000	10,000	1.1										1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1			
4	X		24,000	16,000	1.1										1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1			
5	X		24,000	10,000	1.1										1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1			
6			24,000	14,000																								
7	X		24,000	14,000	1.3										1.3	1.3	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1			
8	X		24,000	16,000	1.1										1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1			
9	X		24,000	10,000	1.0										1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0			
10	X		24,000	10,000	1.0										1.0	1.0	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1			
11	X		24,000	11,000	1.3										1.3	1.3	1.3	1.3	1.3	1.3	1.3	1.3	1.3	1.3	1.3			
12	X		24,000	19,000	1.0										1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0			
13	X		24,000	15,000	1.4										1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.4			
14			24,000	14,500																								
15	X		24,000	14,500	1.0										1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0			
16	X		24,000	10,000	1.0										1.0	1.0	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1			
17	X		24,000	11,000	1.1										1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1			
18	X		24,000	10,000	1.1										1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1			
19	X		24,000	10,000	1.0										1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0			
20	X		24,000	11,000	1.0										1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0			
21	X		24,000	14,000																								
22	X		24,000	14,000	1.1										1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1			
23	X		24,000	12,000	1.1										1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1			
24	X		24,000	11,000	1.0										1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0			
25	X		24,000	13,000	1.2										1.2	1.2	1.2	1.2	1.2	1.2	1.2	1.2	1.2	1.2	1.2			
26	X		24,000	18,000	1.2										1.2	1.2	1.2	1.2	1.2	1.2	1.2	1.2	1.2	1.2	1.2			
27	X		24,000	5,000	1.1										1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1			
28			24,000	21,500																								
29	X		24,000	21,500	1.1										1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1			
30	X		24,000	8,000	1.2										1.2	1.2	1.2	1.2	1.2	1.2	1.2	1.2	1.2	1.2	1.2			
31	X		24,000	11,000	1.0										1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0			
Total			392,333																									
Average			12,656																									
Maximum			21,500																									

* 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: April, 2004

A. Public Water System (PWS) Information

PWS Name: Quail Ridge		PWS Identification Number: 3354867	
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: 69		Total Population Served at End of Month: 173	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
		Zip Code: 32860-9520	
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Quail Ridge		Plant Telephone Number: 352-787-0980		
Plant Address: 37713 Quail Ridge Circle		City: Eustis	State: Florida	
		Zip Code: 32726		
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: 468,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s)/ Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Brian Heath	C	5825	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift
	Gary Kissick	C	7846	Days 1st Shift
	Adam Michaelsen		Trainee	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: 5/7/2004 0:00 Printed or Typed Name: Will Fontaine License Number: C-6813

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

PWS Identificaiton Number: 3354867 Plant Name: Quail Ridge

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*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	14,000		1.0									0.7	
2	X	24.0	15,000		1.1									0.7	
3	X	24.0	11,000		1.3										
4		24.0	19,000												
5	X	24.0	19,000		1.0									0.7	
6	X	24.0	14,000		1.1									0.8	
7	X	24.0	13,000		1.2									0.9	
8	X	24.0	16,000		1.0									0.7	
9	X	24.0	15,000		1.1									0.8	
10	X	24.0	17,000		1.2										
11		24.0	16,000												
12	X	24.0	16,000		1.2									0.8	
13	X	24.0	13,000		1.2									0.8	
14	X	24.0	9,000		1.1									0.8	
15	X	24.0	13,000		1.0									0.7	
16	X	24.0	18,000		1.0									0.7	
17	X	24.0	13,000		1.2										
18		24.0	19,000												
19	X	24.0	19,000		1.6									1.3	
20	X	24.0	15,000		1.3									1.0	
21	X	24.0	16,000		1.2									0.8	
22	X	24.0	17,000		1.3									0.9	
23	X	24.0	25,000		1.0									0.7	
24	X	24.0	16,000		1.3										
25		24.0	23,500												
26	X	24.0	23,500		1.0									0.7	
27	X	24.0	12,000		1.0									0.7	
28	X	24.0	10,000		1.5									1.1	
29	X	24.0	18,000		1.4									1.1	
30	X	24.0	19,000		1.4									1.0	

Total	484,000
Average	16,133
Maximum	25,000

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Quail Ridge		PWS Identification Number: 3354867	
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: 69		Total Population Served at End of Month: 173	
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: Quail Ridge		Plant Telephone Number: 352-787-0980		
Plant Address: 37713 Quail Ridge Circle		City: Eustis	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: 468,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Brian Heath	C	5825	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift
	Gary Kissick	C	7846	Days 1st Shift
	Adam Michaelsen		Trainee	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 6/8/2004 0:00

Printed or Typed Name Will Fontaine

License Number C-6813

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

PWS Identification Number: 3354867 Plant Name: Quail Ridge

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")	Operation in Hours plant	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Measurement Point During Peak Flow, mg/L	Disinfectant Contact Time Before or at First Measurement Point During Peak Flow, minutes	Lowest CT Disinfectant Provided Before or at Customer	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg·min/L	Lowest UV Dose Required, mW·sec/cm ²	UV Dose Required, mW·sec/cm ²	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation

Total	Average	Maximum
439,000	14,161	19,500
31	X	24.0
30		24.0
29	X	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	X	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	X	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	X	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	X	24.0

* 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, 2004

A. Public Water System (PWS) Information

PWS Name: Quail Ridge		PWS Identification Number: 3354867	
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: 64		Total Population Served at End of Month: 160	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
		Zip Code: 32860-9520	
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Quail Ridge		Plant Telephone Number: 352-787-0980	
Plant Address: 37713 Quail Ridge Circle		City: Eustis	State: Florida
		Zip Code: 32726	
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: 468,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Will Fontaine	C	6813
Other Operators:	Brian Heath	C	5825
	John Worrell	C	6597
	Gary Kissick	C	7846

II. Certification by Lead/Chief Operator

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

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3354867 Plant Name: Quail Ridge

III. Daily Data for the Month/year of: June, 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 Visted or Staffed 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	Measurement Point During (T) at C Disinfectant Contact Time	Lowest CT Provided Before or at First Customer During Peak Flow, mg-minutes	Temp of Water, °C	pH of Water, if Applicable	Required, mg/L	Minimum CT Operating UV Dose, mW-sec/cm ²	Lowest UV Dose Required, mW-sec/cm ²	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	UV Dose	
1	X	24,000	24,000	1.1												
2	X	13,000	24,000	1.0												
3	X	20,000	24,000	0.9												
4	X	11,000	24,000	0.9												
5	X	8,000	24,000	0.9												
6		18,000	24,000													
7	X	18,000	24,000	1.0												
8	X	11,000	24,000	0.9												
9	X	18,000	24,000	1.7												
10	X	22,000	24,000	1.5												
11	X	11,000	24,000	1.5												
12	X	14,000	24,000	1.5												
13		15,500	24,000													
14	X	15,500	24,000	1.1												
15	X	10,000	24,000	1.0												
16	X	10,000	24,000	1.0												
17	X	17,000	24,000	1.4												
18	X	15,000	24,000	1.4												
19		15,500	24,000													
20	X	15,500	24,000	1.4												
21	X	12,000	24,000	1.3												
22	X	13,000	24,000	1.3												
23	X	11,000	24,000	1.4												
24	X	16,000	24,000	1.0												
25	X	11,000	24,000	1.1												
26	X	17,000	24,000	1.3												
27		15,000	24,000													
28	X	15,000	24,000	1.4												
29	X	10,000	24,000	1.3												
30	X	20,000	24,000	1.3												
Total		435,000														
Average		14,500														
Maximum		22,000														

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name:	Quail Ridge			PWS Identification Number:	3354867
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:	64			Total Population Served at End of Month:	160
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	2315 Griffin Rd	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com				

B. Water Treatment Plant Information

Plant Name:	Quail Ridge			Plant Telephone Number:	352-787-0980	
Plant Address:	37713 Quail Ridge Circle			City:	Eustis	
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:	468,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift		
Other Operators:	Brian Heath	C	5825	Days 1st Shift		
	John Worrell	C	6597	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

Will Fontaine

Printed or Typed Name

C-6813

License Number

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

PWS Identification Number: 3354867 Plant Name: Quail Ridge

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

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) (T) at C	Disinfectant Contact Time Before or at First Measurement	Disinfectant (T) at C	Flow, mg-min/L	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*		CT Calculations		UV Dose			
															Peak Flow, mg-min/L	Peak Flow, minutes	Lowest CT	Lowest CT	UV Dose	UV Dose		
1	X	16,000	24.0	1.3											1.3	1.3					1.0	
2	X	18,000	24.0	1.3											1.3	1.3					0.9	
3		10,500	24.0	1.3																		
4	X	10,500	24.0	1.3																		
5	X	18,000	24.0	1.4																		1.0
6	X	18,000	24.0	1.4																		1.0
7	X	13,000	24.0	1.2																		0.8
8	X	23,000	24.0	1.3																		0.8
9	X	16,000	24.0	1.3																		0.8
10	X	12,000	24.0	1.3																		9.0
11		22,000	24.0	1.5																		
12	X	22,000	24.0	1.5																		1.1
13	X	17,000	24.0	1.5																		1.2
14	X	17,000	24.0	1.4																		1.1
15	X	19,000	24.0	1.5																		1.1
16	X	16,000	24.0	1.5																		1.2
17	X	8,000	24.0	1.5																		
18		18,000	24.0	1.5																		
19	X	18,000	24.0	1.5																		1.2
20	X	9,000	24.0	1.5																		1.2
21	X	10,000	24.0	1.4																		1.0
22	X	18,000	24.0	1.4																		1.1
23	X	13,000	24.0	1.4																		1.0
24	X	14,000	24.0	1.4																		
25		15,500	24.0	1.2																		
26	X	15,500	24.0	1.2																		1.0
27	X	10,000	24.0	1.0																		0.7
28	X	11,000	24.0	1.5																		1.1
29	X	12,000	24.0	1.4																		1.2
30	X	12,000	24.0	1.6																		
31	X	12,000	24.0	1.6																		1.1
Total		464,000																				
Average		14,968																				
Maximum		23,000																				

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name:	Quail Ridge	PWS Identification Number:	3354867
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:	64	Total Population Served at End of Month:	160
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	2315 Griffin Rd	City:	Leesburg
		State:	Florida
		Zip Code:	34748
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaamerica.com		

B. Water Treatment Plant Information

Plant Name:	Quail Ridge	Plant Telephone Number:	352-787-0980
Plant Address:	37713 Quail Ridge Circle	City:	Eustis
		State:	Florida
		Zip Code:	32726
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:	468,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Brian Heath	C	5825	Days 1st Shift
	John Worrell	C	6597	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

Will Fontaine
Printed or Typed Name

C-6813
License Number

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

PWS Identification Number: 3354867 | Plant Name: Quail Ridge

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1		24.0	12,500												
2	X	24.0	12,500		1.2										1.0
3	X	24.0	12,000		1.2										1.1
4	X	24.0	9,000		1.1										1.1
5	X	24.0	14,000		1.0										0.9
6	X	24.0	12,000		1.0										0.8
7	X	24.0	9,000		1.2										
8		24.0	14,500												
9	X	24.0	14,500		1.1										0.8
10	X	24.0	10,000		1.2										0.8
11	X	24.0	11,000		1.3										1.0
12	X	24.0	13,000		1.3										1.0
13	X	24.0	12,000		1.4										1.1
14	X	24.0	11,000		1.2										1.0
15		24.0	14,500												
16	X	24.0	14,500		1.2										1.1
17	X	24.0	15,000		1.6										1.2
18	X	24.0	16,000		1.5										1.2
19	X	24.0	14,000		1.1										0.9
20	X	24.0	13,000		2.2										1.8
21	X	24.0	10,000		2.0										1.7
22		24.0	14,000												
23	X	24.0	14,000		2.2										2.0
24	X	24.0	17,000		2.0										1.8
25	X	24.0	10,000		1.6										1.4
26	X	24.0	8,000		1.2										1.2
27	X	24.0	14,000		1.1										1.0
28	X	24.0	8,000		1.0										
29		24.0	14,000												
30	X	24.0	14,000		1.1										0.9
31	X	24.0	9,000												
Total			386,000												
Average			12,452												
Maximum			17,000												

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Quail Ridge		PWS Identification Number: 3354867	
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: 64		Total Population Served at End of Month: 160	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 2315 Griffin Rd		City: Leesburg	State: Florida Zip Code: 34748
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Quail Ridge		Plant Telephone Number: 352-787-0980	
Plant Address: 37713 Quail Ridge Circle		City: Eustis	State: Florida Zip Code: 32726
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: 468,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813 Days 1st Shift
Other Operators:	Marty Neal	C	10027 Days 1st Shift
	John Worrell	C	6597 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	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3354867 Plant Name: Quail Ridge
 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
 Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Started or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Disinfectant Contact Time	Disinfectant Provided Before or at First Customer Measurement Point During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*						
												CT Calculations	UV Dose	UV Dose	UV Dose			
1	X	24.0	9,000	1.0	1.0							0.7						
2	X	24.0	10,000	1.4	1.4							1.0						
3	X	24.0	9,000	1.4	1.4							1.2						
4	X	24.0	8,000	1.5	1.5							1.1						
5		24.0	4,500															
6	X	24.0	4,500	1.4	1.4							1.0						
7	X	24.0	10,000	1.4	1.4							1.1						
8	X	24.0	10,000	1.2	1.2							1.0						
9	X	24.0	13,000	1.4	1.4							1.1						
10	X	24.0	8,000	1.4	1.4							1.2						
11	X	24.0	9,000	1.4	1.4													
12		24.0	11,500	1.3	1.3							1.1						
13	X	24.0	11,500	1.3	1.3							1.1						
14	X	24.0	8,000	1.5	1.5							1.2						
15	X	24.0	9,000	1.4	1.4							1.2						
16	X	24.0	13,000	1.4	1.4							1.2						
17	X	24.0	9,000	1.4	1.4							1.3						
18	X	24.0	9,000	1.4	1.4													
19		24.0	16,000															
20	X	24.0	16,000	1.5	1.5							1.2						
21	X	24.0	10,000	1.6	1.6							1.4						
22	X	24.0	10,000	1.5	1.5							1.2						
23	X	24.0	18,000	1.3	1.3							1.1						
24	X	24.0	16,000	1.4	1.4							1.1						
25	X	24.0	12,000	1.4	1.4													
26		24.0	11,000															
27	X	24.0	11,000	1.4	1.4							1.2						
28	X	24.0	16,000	1.3	1.3							1.0						
29	X	24.0	27,000	1.3	1.3							1.0						
30	X	24.0	14,000	1.4	1.4							1.1						
31		24.0																
Total			343,000															
Average			11,065															
Maximum			27,000															

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Quail Ridge		PWS Identification Number: 3354867	
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: 64		Total Population Served at End of Month: 160	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 2315 Griffin Rd		City: Leesburg	State: Florida
		Zip Code: 34748	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Quail Ridge		Plant Telephone Number: 352-787-0980		
Plant Address: 37713 Quail Ridge Circle		City: Eustis	State: Florida	
		Zip Code: 32726		
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: 468,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Marty Neal	C	10027	Days 1st Shift
	John Worrell	C	6597	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	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3354867 Plant Name: Quail Ridge

III. Daily Data for the Month/Vear 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

Days Plant Started 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	Disinfectant Residual Concentration (C) Before or at First Customer Measurement Point During Peak Flow, minutes	Lowest CT 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 UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, If Applicable*	
													UV Dose	UV Dose
1	X	24.0	12,000	1.2										
2	X	24.0	10,000	1.3										
3		24.0	17,500											
4	X	24.0	17,500	1.4										
5	X	24.0	14,000	1.5										
6	X	24.0	14,000	1.4										
7	X	24.0	16,000	1.4										
8	X	24.0	16,000	1.4										
9	X	24.0	12,000	1.3										
10		24.0	18,000											
11	X	24.0	18,000	0.7										
12	X	24.0	11,000	0.7										
13	X	24.0	26,000	1.4										
14	X	24.0	14,000	1.4										
15	X	24.0	13,000	1.3										
16	X	24.0	8,000	1.3										
17		24.0	18,000											
18	X	24.0	18,000	1.4										
19	X	24.0	15,000	1.3										
20	X	24.0	16,000	1.5										
21	X	24.0	11,000	1.4										
22	X	24.0	9,000	1.2										
23		24.0	15,000											
24	X	24.0	15,000	1.5										
25	X	24.0	12,000	1.1										
26	X	24.0	21,000	1.5										
27	X	24.0	11,000	1.4										
28	X	24.0	13,000	0.9										
29	X	24.0	14,000	0.8										
30	X	24.0	13,000	1.3										
31	X	24.0	16,000											
Total		454,000												
Average		14,645												
Maximum		26,000												

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Quail Ridge		PWS Identification Number: 3354867	
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: 64		Total Population Served at End of Month: 160	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 2315 Griffin Rd		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34748	
Contact Person's E-Mail Address: beheath@aquaaamerica.com		Contact Person's Fax Number: (352) 787-6333	

B. Water Treatment Plant Information

Plant Name: Quail Ridge		Plant Telephone Number: 352-787-0980	
Plant Address: 37713 Quail Ridge Circle		City: Eustis	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32726	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 468,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Will Fontaine	C	6813
Other Operators:	Marty Neal	C	10027
	John Worrell	C	6597

II. Certification by Lead/Chief Operator

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

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3354867 Plant Name: Quail Ridge

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

Days Plant Staffed or Visited by Operator ("X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Disinfectant Residual Concentration (C) Before or at First Measurement During Peak Flow, mg/L	Disinfectant (T) at C Contact Time Before or at First Customer Measurement During Peak Flow, minutes	Lowest CT Before or at First Customer Measurement During Peak Flow, min/L	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg·min/L	Lowest UV Dose, mW-sec/cm ²	UV Dose Required, mW-sec/cm ²	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*	
												Minimum UV Dose	UV Dose
1	X	16,000	24.0	1.0	1.0	1.0							
2	X	10,000	24.0	1.4	1.4	1.0							
3	X	10,000	24.0	1.5	1.5	1.1							
4	X	16,000	24.0	1.3	1.3	1.1							
5	X	9,000	24.0	1.2	1.2	1.0							
6	X	10,000	24.0	1.2	1.2								
7		17,000	24.0										
8	X	17,000	24.0	1.4	1.4	1.1							
9	X	11,000	24.0	1.6	1.6	1.3							
10	X	10,000	24.0	1.1	1.1	1.1							
11	X	14,000	24.0	1.4	1.4	1.2							
12	X	16,000	24.0	1.4	1.4	1.2							
13	X	7,000	24.0	1.3	1.3								
14		15,000	24.0										
15	X	15,000	24.0	1.4	1.4	1.0							
16	X	7,000	24.0	1.3	1.3	1.0							
17	X	15,000	24.0	1.3	1.3	1.0							
18	X	11,000	24.0	1.4	1.4	1.1							
19	X	16,000	24.0	1.5	1.5	1.3							
20	X	9,000	24.0	1.5	1.5								
21		20,000	24.0										
22	X	20,000	24.0	1.5	1.5	1.3							
23	X	10,000	24.0	1.6	1.6	1.3							
24	X	14,000	24.0	1.4	1.4	1.3							
25	X	12,000	24.0	1.4	1.4	1.2							
26	X	13,000	24.0	1.4	1.4	1.1							
27	X	15,000	24.0	1.4	1.4	1.1							
28		11,000	24.0										
29	X	11,000	24.0	1.4	1.4	1.1							
30	X	9,000	24.0	1.2	1.2	0.9							
31		24.0											
Total		386,000											
Average		12.452											
Maximum		20,000											

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

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



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:	Quail Ridge	PWS Identification Number:	3354867
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:	64	Total Population Served at End of Month:	160
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	2315 Griffin Rd	City:	Leesburg
		State:	Florida
		Zip Code:	34748
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com		

B. Water Treatment Plant Information

Plant Name:	Quail Ridge	Plant Telephone Number:	352-787-0980
Plant Address:	37713 Quail Ridge Circle	City:	Eustis
		State:	Florida
		Zip Code:	32726
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:	468,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Marty Neal	C	10027	Days 1st Shift
	John Worrell	C	6597	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.

	Will Fontaine	C-6813
Signature and Date	Printed or Typed Name	License Number

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

PWS Identificaiton Number: 3354867 Plant Name: Quail Ridge

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*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²			
1	X	24.0	11,000		1.2									0.8	
2	X	24.0	12,000		1.3									0.8	
3	X	24.0	11,000		1.6									1.0	
4	X	24.0	9,000		1.5										
5		24.0	15,000												
6	X	24.0	15,000		1.5									1.3	
7	X	24.0	11,000		1.4									1.2	
8	X	24.0	10,000		1.5									1.2	
9	X	24.0	15,000		1.7									1.5	
10	X	24.0	12,000		1.5									1.4	
11	X	24.0	9,000		1.5										
12		24.0	14,000												
13	X	24.0	14,000		1.5									1.3	
14	X	24.0	10,000		1.5									1.2	
15	X	24.0	11,000		1.4									1.2	
16	X	24.0	11,000		1.5									1.2	
17	X	24.0	13,000		1.6									1.4	
18	X	24.0	15,000		1.4										
19		24.0	15,500												
20	X	24.0	15,500		1.3									1.0	
21	X	24.0	11,000		1.6									1.5	
22	X	24.0	12,000		1.5									1.3	
23	X	24.0	12,000		1.4									1.1	
24	X	24.0	9,000		1.4									1.2	
25		24.0	10,000												
26	X	24.0	10,000		1.3										
27	X	24.0	13,000		1.3									1.0	
28	X	24.0	8,000		1.3									1.1	
29	X	24.0	10,000		1.2									1.0	
30	X	24.0	13,000		1.0									0.9	
31	X	24.0	13,000												
Total			370,000												
Average			11,935												
Maximum			15,500												

* 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:	Quail Ridge			PWS Identification Number:	3354867
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:	64			Total Population Served at End of Month:	160
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@aquaaamerica.com				

B. Water Treatment Plant Information

Plant Name:	Quail Ridge			Plant Telephone Number:	352-787-0980
Plant Address:	37713 Quail Ridge Circle			City:	Eustis
		State:	Florida	Zip Code:	32726
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:	468,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked	
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift	
Other Operators:	Marty Neal	C	10027	Days 1st Shift	
	John Worrell	C	6597	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	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3354867 Plant Name: Quail Ridge

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	x	24.0	10,000		1.3								
2		24.0	16,500										
3	x	24.0	16,500		1.2							0.9	
4	x	24.0	13,000		1.4							0.8	
5	x	24.0	11,000		1.3							0.9	
6	x	24.0	11,000		1.4							1.1	
7	x	24.0	16,000		1.4							1.1	
8	x	24.0	11,000		1.4								
9		24.0	15,500										
10	x	24.0	15,500		1.4							1.0	
11	x	24.0	11,000		1.4							1.0	
12	x	24.0	11,000		1.3							0.9	
13	x	24.0	12,000		1.2							0.9	
14	x	24.0	11,000		1.2							1.0	
15	x	24.0	10,000		1.3								
16		24.0	11,500										
17	x	24.0	11,500		1.3							1.0	
18	x	24.0	20,000		1.3							1.2	
19	x	24.0	10,000		1.5							1.3	
20	x	24.0	10,000		1.4							1.2	
21	x	24.0	15,000		1.5							1.3	
22	x	24.0	13,000		1.5								
23		24.0	13,500										
24	x	24.0	13,500		1.4							1.2	
25	x	24.0	11,000		1.4							1.1	
26	x	24.0	11,000		1.5							1.3	
27	x	24.0	16,000		1.6							1.4	
28	x	24.0	14,000		1.3							1.2	
29	x	24.0	12,000		1.3								
30		24.0	12,000										
31		24.0	12,000										
Total			397,000										
Average			12,806										
Maximum			20,000										

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Quail Ridge		PWS Identification Number: 3354867	
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: 77		Total Population Served at End of Month: 231	
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: Quail Ridge		Plant Telephone Number: 352-787-0980	
Plant Address: 37713 Quail Ridge Circle		City: Eustis	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32726	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 468,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Marty Neal	C	10027	Days 1st Shift
	John Worrell	C	6597	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

Will Fontaine
Printed or Typed Name

C-6813
License Number

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

PWS Identification Number: 3354867 Plant Name: Quail Ridge

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 ²	Minimum UV Dose Required, mW-sec/cm ²			
1	X	24.0	16,000		1.2									1.0	
2	X	24.0	10,000		1.2									0.9	
3	X	24.0	9,000		1.2									1.0	
4	X	24.0	12,000		1.3									1.0	
5	X	24.0	10,000		1.4										
6		24.0	15,000												
7	X	24.0	15,000		1.3									1.0	
8	X	24.0	10,000		1.4									1.2	
9	X	24.0	11,000		1.4									1.1	
10	X	24.0	13,000		1.3									1.1	
11	X	24.0	13,000		1.3									1.0	
12	X	24.0	11,000		1.3										
13		24.0	15,000												
14	X	24.0	15,000		1.3									1.0	
15	X	24.0	11,000		1.4									1.2	
16	X	24.0	11,000		1.4									1.1	
17	X	24.0	13,000		1.3									1.1	
18	X	24.0	16,000		1.4									1.1	
19	X	24.0	14,000		1.4										
20		24.0	15,500												
21	X	24.0	15,500		1.4									1.2	
22	X	24.0	8,000		1.3									1.1	
23	X	24.0	19,000		1.2									1.0	
24	X	24.0	14,000		1.2									0.9	
25	X	24.0	14,000		1.2									0.9	
26		24.0	12,000												
27	X	24.0	12,000		1.1										
28	X	24.0	15,000		1.1									0.9	
29		24.0													
30		24.0													
31		24.0													
Total			365,000												
Average			11,774												
Maximum			19,000												

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Quail Ridge		PWS Identification Number: 3354867	
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: 77		Total Population Served at End of Month: 231	
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@aquamerica.com			

B. Water Treatment Plant Information

Plant Name: Quail Ridge		Plant Telephone Number: 352-787-0980	
Plant Address: 37713 Quail Ridge Circle		City: Eustis	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: 468,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Marty Neal	C	10027	Days 1st Shift
	John Worrell	C	6597	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.

	Will Fontaine	C-6813
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: 3354867 Plant Name: Quail Ridge

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	Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Concentration (C) Before or at First Customer During Peak Flow, mg/L	Measurement (T) at C During Peak Flow, minutes	Lowest CT Provided Before or at Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Minimum UV Dose, mW-sec/cm ²	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	UV Dose
1	X		14,000	24.0	1.1									0.8	
2	X		13,000	24.0	1.4									0.8	
3	X		13,000	24.0	1.5									1.0	
4	X		13,000	24.0	1.5									1.1	
5	X		13,000	24.0	1.5									1.1	
6			16,500	24.0											
7	X		16,500	24.0	1.5									1.1	
8	X		15,000	24.0	1.4									1.1	
9	X		11,000	24.0	1.7									1.2	
10	X		15,000	24.0	1.5									1.2	
11	X		13,000	24.0	1.5									1.1	
12	X		11,000	24.0	1.5									1.1	
13			18,500	24.0											
14	X		18,500	24.0	1.5									1.2	
15	X		20,000	24.0	1.5									1.2	
16	X		14,000	24.0	1.5									1.3	
17	X		20,000	24.0	1.5									1.3	
18	X		10,000	24.0	1.4									1.2	
19	X		9,000	24.0	1.4									1.2	
20			21,000	24.0											
21	X		21,000	24.0	1.4									1.1	
22	X		9,000	24.0	1.5									1.2	
23	X		13,000	24.0	1.5									1.0	
24	X		14,000	24.0	1.5									1.3	
25	X		14,000	24.0	1.5									1.0	
26	X		11,000	24.0	1.5									1.0	
27			14,500	24.0											
28	X		14,500	24.0	1.5									1.2	
29	X		12,000	24.0	1.9									1.4	
30	X		18,000	24.0	1.4									1.3	
31	X		13,000	24.0	1.4									1.3	
Total			449,000												
Average			14,484												
Maximum			21,000												

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Quail Ridge		PWS Identification Number: 3354867	
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: 77		Total Population Served at End of Month: 231	
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@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Quail Ridge		Plant Telephone Number: 352-787-0980	
Plant Address: 37713 Quail Ridge Circle		City: Eustis	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: 468,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Will Fontaine	C	6813
Other Operators:	Marty Neal	C	10027
	John Worrell	C	6597

II. Certification by Lead/Chief Operator

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

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identificaiton Number: 3354867 Plant Name: Quail Ridge

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 Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	18,000		1.4										1.2	
2	X	24.0	13,000		1.4											
3		24.0	18,500													
4	X	24.0	18,500		1.3										1.0	
5	X	24.0	13,000		1.5										1.3	
6	X	24.0	15,000		1.3										1.2	
7	X	24.0	18,000		1.4										1.1	
8	X	24.0	14,000		1.2										1.0	
9		24.0	17,000													
10	X	24.0	17,000		1.3											
11	X	24.0	22,000		1.2										1.0	
12	X	24.0	16,000		1.2										1.0	
13	X	24.0	15,000		1.1										1.1	
14	X	24.0	13,000		1.2										1.1	
15	X	24.0	16,000		1.4										1.2	
16	X	24.0	10,000		1.4											
17		24.0	22,500													
18	X	24.0	22,500		1.4										1.2	
19	X	24.0	20,000		1.3										1.2	
20	X	24.0	18,000		1.5										1.3	
21	X	24.0	22,000		1.4										1.3	
22	X	24.0	30,000		1.3										1.1	
23	X	24.0	24,000		1.4											
24		24.0	18,000													
25	X	24.0	18,000		1.0										0.8	
26	X	24.0	15,000		1.3										1.0	
27	X	24.0	10,000		1.7										1.3	
28	X	24.0	20,000		1.8										1.5	
29	X	24.0	24,000		1.7										1.5	
30	X	24.0	21,000		1.6											
31		24.0														
Total			539,000													
Average			17,387													
Maximum			30,000													

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Quail Ridge		PWS Identification Number: 3354867	
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: 77		Total Population Served at End of Month: 270	
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@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Quail Ridge		Plant Telephone Number: 352-787-0980	
Plant Address: 37713 Quail Ridge Circle		City: Eustis	State: Florida
		Zip Code: 32726	
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: 468,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): V			

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Marty Neal	C	10027	Days 1st Shift
	John Worrell	C	6597	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	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3354867 Plant Name: Quail Ridge May, 2005

III. Daily Data for the Month/Year of:

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

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

Days Plant 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 (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Lowest UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*		Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
													UV Dose	CT Calculations	
1	X	24,000	24.0	28,000											
2	X	24,000	24.0	28,000	1.3										
3	X	19,000	24.0	19,000	1.5										
4	X	14,000	24.0	14,000	1.6										
5	X	14,000	24.0	14,000	1.5										
6	X	7,000	24.0	7,000	1.4										
7	X	11,000	24.0	11,000	1.5										
8		21,500	24.0	21,500	1.3										
9	X	21,500	24.0	21,500	1.3										
10	X	21,000	24.0	21,000	1.3										
11	X	19,000	24.0	19,000	1.5										
12	X	13,000	24.0	13,000	1.3										
13	X	13,000	24.0	13,000	1.2										
14	X	18,000	24.0	18,000	1.3										
15		23,000	24.0	23,000											
16	X	23,000	24.0	23,000	1.3										
17	X	14,000	24.0	14,000	1.4										
18	X	17,000	24.0	17,000	1.3										
19	X	19,000	24.0	19,000	1.3										
20	X	36,000	24.0	36,000	1.3										
21	X	23,000	24.0	23,000	1.3										
22		24,000	24.0	24,000											
23	X	24,000	24.0	24,000	1.3										
24	X	24,000	24.0	24,000	1.3										
25	X	24,000	24.0	24,000	0.8										
26	X	25,000	24.0	25,000	1.4										
27	X	28,000	24.0	28,000	1.5										
28	X	17,000	24.0	17,000	1.5										
29		28,500	24.0	28,500											
30	X	28,500	24.0	28,500	1.4										
31	X	31,000	24.0	31,000											
		Total	657,000												
		Average	21,194												
		Maximum	36,000												

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Quail Ridge		PWS Identification Number: 3354867	
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: 77		Total Population Served at End of Month: 270	
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@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Quail Ridge		Plant Telephone Number: 352-787-0980	
Plant Address: 37713 Quail Ridge Circle		City: Eustis	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: 468,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): V			
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Will Fontaine	C	6813
Other Operators:	Marty Neal	C	10027
	John Worrell	C	6597

II. Certification by Lead/Chief Operator

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

Signature and Date

Will Fontaine

Printed or Typed Name

C-6813

License Number

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

PWS Identificaiton Number: 3354867 Plant Name: Quail Ridge

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 ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	15,000		1.5										1.2	
2	X	24.0	20,000		1.5										1.3	
3	X	24.0	19,000		1.4										1.3	
4	X	24.0	15,000		1.5											
5		24.0	20,000													
6	X	24.0	20,000		1.3										1.0	
7	X	24.0	22,000		1.4										1.1	
8	X	24.0	19,000		1.2										1.0	
9	X	24.0	17,000		1.4										1.1	
10	X	24.0	14,000		1.3										1.0	
11	X	24.0	11,000		1.2											
12		24.0	14,000													
13	X	24.0	14,000		0.8										0.6	
14	X	24.0	18,000		0.9										0.7	
15	X	24.0	16,000		1.0										0.7	
16	X	24.0	19,000		1.3										0.9	
17	X	24.0	14,000		1.3										1.0	
18	X	24.0	13,000		1.3											
19		24.0	17,000													
20	X	24.0	17,000		1.3										1.0	
21	X	24.0	13,000		1.2										0.9	
22	X	24.0	15,000		0.6										0.8	
23	X	24.0	25,000		0.8										0.6	
24	X	24.0	13,000		0.8										0.6	
25	X	24.0	10,000		1.1											
26		24.0	16,000													
27	X	24.0	16,000		1.0										0.7	
28	X	24.0	10,000		0.9										0.7	
29	X	24.0	10,000		1.0										0.7	
30	X	24.0	12,000		1.3										0.8	
31		24.0														
Total			474,000													
Average			15,290													
Maximum			25,000													

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Quail Ridge	PWS Identification Number: 3354867
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: 77	Total Population Served at End of Month: 270
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@aquaaamerica.com	

B. Water Treatment Plant Information

Plant Name: Quail Ridge	Plant Telephone Number: 352-787-0980
Plant Address: 37713 Quail Ridge Circle	City: Eustis State: Florida Zip Code: 32726
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: 468,000	
Plant Category (per subsection 62-699.310(4), F.A.C.): V	Plant Class (per subsection 62-699.310(4), F.A.C.): C
Licensed Operators	Name License Class License Number Day(s) / Shift(s) Worked
Lead/Chief Operator: Will Fontaine	C 6813 Days 1st Shift
Other Operators:	Marty Neal C 10027 Days 1st Shift
	John Worrell C 6597 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 _____ Will Fontaine _____ C-6813 _____
 Printed or Typed Name License Number

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

PWS Identification Number: 3354867 Plant Name: Quail Ridge July, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):
 Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Staffed or Visited by Operator in Hours plant Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) (T) at C	Measurement Point During Peak Flow, mg-Flow, mg-ml/L	Disinfectant Provided Before or at Customer First	Lowest CT Disinfectant Contact Time	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm ²	Required UV Dose, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation

Day of the Month	Days Staffed or Visited by Operator in Hours plant Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) (T) at C	Measurement Point During Peak Flow, mg-Flow, mg-ml/L	Disinfectant Provided Before or at Customer First	Lowest CT Disinfectant Contact Time	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm ²	Required UV Dose, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	12,000											
2	X	9,500	24.0											
3	X	24.0	9,500											
4	X	13,000	24.0											
5	X	18,000	24.0											
6	X	17,000	24.0											
7	X	13,000	24.0											
8	X	19,000	24.0											
9	X	11,000	24.0											
10		13,500	24.0											
11	X	13,500	24.0											
12	X	13,000	24.0											
13	X	12,000	24.0											
14	X	16,000	24.0											
15	X	12,000	24.0											
16	X	12,000	24.0											
17		19,000	24.0											
18	X	19,000	24.0											
19	X	16,000	24.0											
20	X	12,000	24.0											
21	X	15,000	24.0											
22	X	14,000	24.0											
23	X	15,000	24.0											
24		19,500	24.0											
25	X	19,500	24.0											
26	X	13,000	24.0											
27	X	14,000	24.0											
28	X	16,000	24.0											
29	X	11,000	24.0											
30	X	19,000	24.0											
31		15,000	24.0											
Total		451,000												
Average		14,548												
Maximum		19,500												

* 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: August, 2005

A. Public Water System (PWS) Information

PWS Name: Quail Ridge		PWS Identification Number: 3354867	
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: 77		Total Population Served at End of Month: 270	
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@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Quail Ridge		Plant Telephone Number: 352-787-0980		
Plant Address: 37713 Quail Ridge Circle		City: Eustis	State: Florida	
		Zip Code: 32726		
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: 468,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Marty Neal	C	10027	Days 1st Shift
	John Worrell	C	6597	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	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identificaiton Number: 3354867 Plant Name: Quail Ridge

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 ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	15,000		1.0								0.8	
2	X	24.0	12,000		1.0								0.7	
3	X	24.0	13,000		1.1								1.0	
4	X	24.0	17,000		1.1								0.9	
5	X	24.0	15,000		1.4								1.1	
6	X	24.0	12,000		1.4									
7		24.0	17,500											
8	X	24.0	17,500		1.2								1.0	
9	X	24.0	14,000		1.3								1.0	
10	X	24.0	20,000		1.1								1.2	
11	X	24.0	16,000		1.2								1.1	
12	X	24.0	12,000		1.2								1.0	
13	X	24.0	14,000		1.1									
14		24.0	22,500											
15	X	24.0	22,500		1.2								1.0	
16	X	24.0	18,000		1.2								0.9	
17	X	24.0	14,000		1.9								1.5	
18	X	24.0	16,000		1.3								1.2	
19	X	24.0	19,000		1.3								1.1	
20	X	24.0	14,000		1.4									
21		24.0	16,500											
22	X	24.0	16,500		1.3								1.2	
23	X	24.0	15,000		1.4								1.2	
24	X	24.0	9,000		1.4								1.1	
25	X	24.0	17,000		1.4								1.2	
26	X	24.0	15,000		1.3								1.1	
27	X	24.0	10,000		1.3									
28		24.0	17,500											
29	X	24.0	17,500		1.3								1.0	
30	X	24.0	15,000		1.3								1.0	
31	X	24.0	10,000											
Total			480,000											
Average			15,484											
Maximum			22,500											

* 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: September, 2005

A. Public Water System (PWS) Information

PWS Name: Quail Ridge		PWS Identification Number: 3354867	
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: 77		Total Population Served at End of Month: 270	
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: Quail Ridge		Plant Telephone Number: 352-787-0980	
Plant Address: 37713 Quail Ridge Circle		City: Eustis	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32726	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 468,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Marty Neal	C	10027	Days 1st Shift
	John Worrell	C	6597	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.

	Will Fontaine	C-6813
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: 3354867 Plant Name: Quail Ridge

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

Days Plant Started or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) (T at C)	Disinfectant Measurement (T) at C	Contact Time Before or at Customer	Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	CT Calculations			Lowest CT Provided	Type of Disinfectant Residual Maintained in Distribution System
											Lowest UV Dose, sec/cm ²	Operating UV Dose, mW-sec/cm ²	Required UV Dose, mW-sec/cm ²		
1	X	24.0	14,000	1.3											
2	X	24.0	12,000	1.4											
3	X	24.0	12,000	1.4											
4		24.0	14,500												
5	X	24.0	14,500	1.4											
6	X	24.0	17,000	1.5											
7	X	24.0	11,000	1.3											
8	X	24.0	13,000	1.2											
9	X	24.0	11,000	1.3											
10	X	24.0	15,000	1.3											
11		24.0	18,000												
12	X	24.0	18,000	1.3											
13	X	24.0	15,000	1.1											
14	X	24.0	15,000	1.1											
15	X	24.0	18,000	1.5											
16	X	24.0	21,000	1.5											
17	X	24.0	24,000	1.5											
18		24.0	28,000												
19	X	24.0	28,000	1.3											
20	X	24.0	21,000	1.3											
21	X	24.0	19,000	1.5											
22	X	24.0	22,000	1.3											
23	X	24.0	18,000	1.3											
24	X	24.0	22,000	1.4											
25		24.0	17,500												
26	X	24.0	17,500	1.5											
27	X	24.0	15,000	1.5											
28	X	24.0	12,000	1.5											
29	X	24.0	17,000	1.3											
30	X	24.0	12,000	1.0											
31		24.0													
		Total	512,000												
		Average	16,516												
		Maximum	28,000												

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Quail Ridge		PWS Identification Number: 3354867	
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: 77		Total Population Served at End of Month: 270	
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@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Quail Ridge		Plant Telephone Number: 352-787-0980	
Plant Address: 37713 Quail Ridge Circle		City: Eustis	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: 468,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Will Fontaine	C	6813
Other Operators:	Marty Neal	C	10027
	John Worrell	C	6597

II. Certification by Lead/Chief Operator

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

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3354867 Plant Name: Quail Ridge

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

Days Plant Started or Visited by Operator	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	First Customer Before or at Lowest CT	Flow, mg-min/L During Peak	Temp of Water, °C If Applicable	pH of Water, If Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm ²	Lowest UV Dose, mW-sec/cm ²	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demostatate Four-Log Virus Inactivation, if Applicable*	
														UV Dose	CT Calculations
1	X	24.0	15,000	1.0											
2		24.0	17,000												
3	X	24.0	17,000	1.2											
4	X	24.0	15,000	1.5											
5	X	24.0	13,000	1.6											
6	X	24.0	15,000	1.7											
7	X	24.0	9,000	1.5											
8	X	24.0	8,000	1.3											
9		24.0	19,500												
10	X	24.0	19,500	1.3											
11	X	24.0	11,000	1.3											
12	X	24.0	15,000	1.5											
13	X	24.0	12,000	1.6											
14	X	24.0	16,000	1.6											
15	X	24.0	14,000	1.5											
16		24.0	18,500												
17	X	24.0	18,500	1.7											
18	X	24.0	17,000	2.2											
19	X	24.0	11,000	1.9											
20	X	24.0	17,000	1.5											
21	X	24.0	11,000	1.7											
22	X	24.0	12,000	1.5											
23		24.0	13,000												
24	X	24.0	13,000	1.5											
25	X	24.0	19,000	1.5											
26	X	24.0	12,000	1.4											
27	X	24.0	15,000	1.3											
28	X	24.0	13,000	1.3											
29	X	24.0	12,000	1.3											
30		24.0	18,500												
31	X	24.0	18,500												
Total			455,000												
Average			14,677												
Maximum			19,500												

* 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: November, 2005

A. Public Water System (PWS) Information

PWS Name: <u>Quail Ridge</u>		PWS Identification Number: <u>3354867</u>	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: <u>77</u>		Total Population Served at End of Month: <u>270</u>	
PWS Owner: <u>Aqua Utilities Florida</u>			
Contact Person: <u>Brian Heath</u>		Contact Person's Title: <u>Area Manager</u>	
Contact Person's Mailing Address: <u>PO Box 490310</u>		City: <u>Leesburg</u>	State: <u>Florida</u> Zip Code: <u>34749</u>
Contact Person's Telephone Number: <u>(352) 787-0980</u>		Contact Person's Fax Number: <u>(352) 787-6333</u>	
Contact Person's E-Mail Address: <u>beheath@aquaaamerica.com</u>			

B. Water Treatment Plant Information

Plant Name: <u>Quail Ridge</u>		Plant Telephone Number: <u>352-787-0980</u>		
Plant Address: <u>37713 Quail Ridge Circle</u>		City: <u>Eustis</u>	State: <u>Florida</u> Zip Code: <u>32726</u>	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>468,000</u>				
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>V</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	<u>Will Fontaine</u>	<u>C</u>	<u>6813</u>	<u>Days 1st Shift</u>
Other Operators:	<u>Marty Neal</u>	<u>C</u>	<u>10027</u>	<u>Days 1st Shift</u>
	<u>John Worrell</u>	<u>C</u>	<u>6597</u>	<u>Days 1st Shift</u>

II. Certification by Lead/Chief Operator

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

Signature and Date	<u>Will Fontaine</u> Printed or Typed Name	<u>C-6813</u> License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identificaiton Number: 3354867	Plant Name: Quail Ridge
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III. Daily Data for the Month/Year of: November, 2005

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

Ultraviolet Radiation Other (Describe):

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	X	24.0	14,000		1.3							1.1	
2	X	24.0	13,000		1.3							1.1	
3	X	24.0	14,000		1.3							1.0	
4	X	24.0	10,000		1.5							1.1	
5	X	24.0	14,000		1.3								
6		24.0	18,000										
7	X	24.0	18,000		1.3							1.0	
8	X	24.0	19,000		1.3							1.0	
9	X	24.0	14,000		1.5							1.1	
10	X	24.0	16,000		1.5							1.3	
11	X	24.0	14,000		1.5							1.1	
12	X	24.0	14,000		1.5								
13		24.0	19,500										
14	X	24.0	19,500		1.5							1.3	
15	X	24.0	11,000		1.4							1.2	
16	X	24.0	12,000		1.0							0.8	
17	X	24.0	15,000		1.2							0.8	
18	X	24.0	11,000		1.2							0.8	
19	X	24.0	12,000		1.3								
20		24.0	17,500										
21	X	24.0	17,500		1.3							1.0	
22	X	24.0	11,000		1.4							1.0	
23	X	24.0	10,000		1.3							1.0	
24	X	24.0	14,000		1.3							1.1	
25	X	24.0	16,000		1.3							1.2	
26	X	24.0	18,000		1.3								
27		24.0	17,000										
28	X	24.0	17,000		1.8							1.6	
29	X	24.0	11,000		1.5							1.3	
30	X	24.0	10,000		1.3							1.1	
31		24.0											
Total			437,000										
Average			14,097										
Maximum			19,500										

* 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, 2005

A. Public Water System (PWS) Information

PWS Name:	Quail Ridge	PWS Identification Number:	3354867
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:	77	Total Population Served at End of Month:	270
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:	Quail Ridge	Plant Telephone Number:	352-787-0980
Plant Address:	37713 Quail Ridge Circle	City:	Eustis
		State:	Florida
		Zip Code:	32726
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:	468,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators:	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Marty Neal	C	10027	Days 1st Shift
	John Worrell	C	6597	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

Will Fontaine

Printed or Typed Name

C-6813

License Number

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

PWS Identificaiton Number: 3354867 Plant Name: Quail Ridge

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 Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	15,000		1.2									0.9	
2	X	24.0	13,000		1.2									0.9	
3	X	24.0	11,000		1.3										
4		24.0	16,000												
5	X	24.0	16,000		1.3									0.9	
6	X	24.0	12,000		1.5									1.1	
7	X	24.0	14,000		1.5									1.2	
8	X	24.0	12,000		1.5									1.1	
9	X	24.0	11,000		1.5									1.1	
10	X	24.0	9,000		1.5										
11		24.0	16,000												
12	X	24.0	16,000		1.5									1.2	
13	X	24.0	12,000		1.6									1.1	
14	X	24.0	11,000		1.7									1.5	
15	X	24.0	13,000		1.6									1.4	
16	X	24.0	12,000		1.5									1.3	
17	X	24.0	14,000		1.5										
18		24.0	14,500												
19	X	24.0	14,500		1.5									1.3	
20	X	24.0	11,000		1.5									1.2	
21	X	24.0	13,000		1.5									1.2	
22	X	24.0	17,000		1.6									1.4	
23	X	24.0	13,000		1.6									1.3	
24	X	24.0	11,000		1.5										
25		24.0	15,500												
26	X	24.0	15,500		1.5									1.3	
27	X	24.0	17,000		1.5									1.3	
28	X	24.0	9,000		1.4									1.2	
29	X	24.0	17,000		1.5									1.3	
30	X	24.0	12,000		1.5									1.2	
31	X	24.0	10,000												
Total			413,000												
Average			13,323												
Maximum			17,000												

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