

Dorothy Menasco

From: Trina Collins [TCollins@RSBattorneys.com]
Sent: Tuesday, April 06, 2010 4:54 PM
To: Filings@psc.state.fl.us
Cc: smlubertozzi@uiwater.com; keweeks@uiwater.com; jdwilliams@uiwater.com; pcflynn@uiwater.com; Curt Mouring; Stan Rieger; Jennifer Brubaker; Martin Friedman; Christian W. Marcelli; Trina Collins
Subject: Filing in Docket No.090349-WS; Cypress Lake Utilities, Inc.'s Application for a Limited Proceeding Water and Wastewater Rate Increase in Polk County, Florida
Importance: High
Attachments: PSC Clerk 19 (Response to Brubaker's 2d compliance letter).ltr.pdf

- a. Martin S. Friedman, Esq.
 Christian W. Marcelli, Esq.
 Rose, Sundstrom & Bentley, LLP
 Sanlando Center
 2180 W. State Road 434, Suite 2118
 Longwood, FL 32779
 Phone: (407) 830-6331
 Fax: (407) 830-8522
 Email: mfriedman@rsbattorneys.com
cmarcelli@rsbattorneys.com
- b. Docket No. 090349-WS; Cypress Lake Utilities, Inc.'s Application for a Limited Proceeding Water and Wastewater Rate Increase in Polk County, Florida - Filing correspondence in response to the March 30, 2010 letter from Jennifer Brubaker regarding the Utility's compliance with Order No. PSC-07-0199-PAA-WS.
- c. Cypress Lake Utilities, Inc.
- d. 24 Pages.
- e. Letter to Commission Clerk and response attachments - 24 pages.

DOCUMENT NUMBER - DATE
 02531 APR -6 2010
 FPSC-COMMISSION CLERK

LAW OFFICES
ROSE, SUNDBSTROM & BENTLEY, LLP
2548 BLAIRSTONE PINES DRIVE
TALLAHASSEE, FLORIDA 32301

FREDERICK L. ASCHAUER, JR.
CHRIS H. BENTLEY, P.A.
ROBERT C. BRANNAN
F. MARSHALL DETERDING
JOHN R. JENKINS, P.A.
KYLE L. KEMPER
STEVEN T. MINDLIN, P.A.
CHASITY H. O'STEEN
WILLIAM E. SUNDBSTROM, P.A.
DIANE D. TREMOR, P.A.
JOHN L. WHARTON

ROBERT M. C. ROSE (1924-2006)

(850) 877-6555
FAX (850) 656-4029
www.rsbatorneys.com

REPLY TO CENTRAL FLORIDA OFFICE

CENTRAL FLORIDA OFFICE
SANLANDO CENTER
2180 W. STATE ROAD 434, SUITE 2118
LONGWOOD, FLORIDA 32779
(407) 830-6331
FAX (407) 830-8522

MARTIN S. FRIEDMAN, P.A.
BRIDGET M. GRIMSLEY
CHRISTIAN W. MARCELLI
BRIAN J. STREET

April 6, 2010

E-FILING

Ann Cole, Commission Clerk
Office of Commission Clerk
Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, FL 32399

Re: Docket No. 090349-WS; Cypress Lake Utilities, Inc.'s Application for a Limited Proceeding Water and Wastewater Rate Increase in Polk County, Florida
Our File No. 30057.182

Dear Ms. Cole:

This correspondence is in response to the March 30, 2010 letter from Jennifer Brubaker regarding the Utility's compliance with Order No. PSC-07-0199-PAA-WS.

At the outset, it should be noted that Cypress Lakes Utilities, Inc. (the "Utility") filed a letter on January 15, 2010, addressing the Utility's compliance with Order No. PSC-07-0199-PAA-WS. That letter established that hydrogen sulfide is not and has never been a problem at any relevant time with the Utility's source water. Instead, the water quality issues concerned low chlorine residual and total sulfides. This was confirmed by the TBE Group, Inc. as well as testing results submitted with the January 15, 2010 letter.

The Utility disagrees with Staff's belief that the Utility is not in compliance with Order No. PSC-07-0199-PAA-WS. First, it is important to note that on December 20, 2007 (two months after the TBE Report was made available), by memorandum from Jay Revell, Regulatory Analyst, and Katherine Fleming, Senior Attorney, the Commission Clerk was notified that the Utility had met all requirements of the order and the docket should be closed (Document No. 11094, 12/20/07 in Docket No. 060257-WS). Between September 2007 and December 2009, a period of 27 months, the Utility received no notice or communication from the PSC, OPC or the Cypress Lakes HOA, regarding the TBE Report. It was not until December 14, 2009, in the middle of this limited proceeding, that there was any indication of concern by Staff that the report filed by the Utility might not be in compliance with Order No. PSC-07-0199-PAA-WS.

DOCUMENT NUMBER-DATE

02531 APR-6 09

FPSC-COMMISSION CLERK

In addition, the water quality evaluation conducted by TBE Group in 2007 confirmed that the sulfide concentration level in Cypress Lakes Utilities' source water was insignificant. Because the sulfide level was so low, TBE Group rightfully determined that sulfide was not contributing to the water quality issues as implied in Order No. PSC-07-0199-PAA-WS. As ordered by the Commission, TBE Group focused on the root cause of low chlorine residuals measured in the system at that time. It is the position of the Utility that the conclusions and recommendations provided by TBE Group in its 2007 report adequately addressed the cause of low chlorine residual and that no physical or operational changes to the Cypress Lakes water system were warranted. The Utility's subsequent implementation of those recommendations resulted in a resolution of the low chlorine residuals. To the extent that any sulfide issues existed at Well No. 2, they were a result of low chlorine residual problems.

Attached hereto as Exhibit "A" are the results of the triennial water quality sampling conducted in 2008. A review of the data shows that the water quality as it enters the distribution system meets all current regulatory standards. In addition, attached hereto as Exhibit "B", are the results of a water sample taken in March 2010 from Well No. 2 and tested for total sulfides and odor. The data indicates that no odors were detected. Sulfide (not solely hydrogen sulfide) was detected but at a value less than the laboratory's practical quantitation limit of 0.028 milligrams per liter. This indicates that there was an insignificant amount of sulfides present. By adding a strong oxidizing agent such as chlorine in the disinfection process, the amount of sulfide in water pumped into the distribution system is minimal.

In response to the Staff's request to provide "all of the possible improvement options, costs of each option, as well as an explanation of why the MIEX system, which has been used by other Utilities, Inc. subsidiaries with similar hydrogen sulfide issues, was not examined," it is important to emphasize that it is impossible to identify appropriate treatment options and their associated capital and operating costs without first identifying which specific water quality constituents in the Utility's source water are elevated above current regulatory standards. The laboratory analysis clearly identifies that no constituents present in the water sample warrant any additional treatment. As such, it would be imprudent for the Utility to propose any water treatment alternatives to meet aesthetic issues without a clear understanding of which measurable water quality values are associated with the concerns of the Cypress Lakes HOA. In order to identify the efficacy of a particular treatment technology, it is necessary to quantify which parameter or parameters are to be addressed and to what degree. In the case of Cypress Lakes, there is a complete absence of a water quality parameter that is elevated beyond a maximum contaminant level or other regulatory benchmark.

With regard to the applicability of MIEX treatment technology, a specific resin was utilized at the Wedgfield Utilities water treatment plant that was designed primarily to

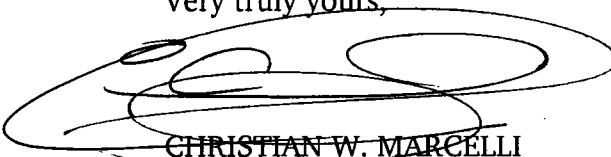
Ann Cole, Commission Clerk
Office of Commission Clerk
Florida Public Service Commission
April 6, 2010
Page 3

remove dissolved organic carbon, a precursor of trihalomethanes. The quality and composition of the source water at Wedgefield is substantially different from Cypress Lakes' source water. For this reason, a treatment technology that is successfully implemented in one location may not be an adequate, prudent or appropriate remedy in another. It was also the case at Wedgefield that the regulatory requirement to increase the water plant's permitted treatment capacity to meet customer demand triggered a requirement to upgrade the treatment process to further reduce sulfides. Wedgefield is an example of a situation where a regulatory mandate drove the need to enhance the treatment methods whereas at Cypress Lakes there is no evidence that the water quality is out of limits.

In summary, the Utility had no indication that there was a compliance issue with regard to the TBE Group's report. The failure of Staff to review the report before the docket in question was closed should not cause a delay in the Commission acting on this limited proceeding or affect it in any way.

Should you or the Staff have any questions regarding this filing, please do not hesitate to give me a call.

Very truly yours,



CHRISTIAN W. MARCELLI
For the Firm

CWM/tlc
Enclosures

cc: Steven M. Lubertozi, Executive Director of Regulatory Accounting and Affairs (w/enclosures) (via e-mail)
Kirsten E. Weeks, Manager of Regulatory Accounting (w/enclosures) (via e-mail)
John Williams, Director of Governmental Affairs (w/enclosures) (via e-mail)
Patrick C. Flynn, Regional Director (w/enclosures) (via e-mail)
Curt Mouring, Division of Economic Regulation (w/enclosures) (via e-mail)
Stan Rieger, Division of Economic Regulation (w/enclosures) (via e-mail)
Jennifer Brubaker, Esquire, Office of General Counsel (w/enclosures) (via e-mail)

M:\1 ALTAMONTE\1 ALTAMONTE\UTILITIES INC\CYPRESS LAKES\(.182) 2009 RATE CASE\PSC Clerk 19 (Response to Brubaker's 2d compliance letter).ltr.docx

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

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

System Name: Utilities, Inc. Cypress Lake PWS I.D.#:

System Type (check one): Community Nontransient Noncommunity Transient Noncommunity

Address: _____

City: _____ State: _____ ZIP Code: _____

Phone #: _____ Fax #: _____

E-Mail Address: _____

SAMPLE INFORMATION (to be completed by sampler)

Sample Number: T081077900+001-004 Location Code (if known) : _____

Sample Date: 08/13/2008 Sample Time: 15:00 AM PM (circle one)

Sample Location (be specific): SOC

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

Sample Type (Check Only One)

- Distribution
- Entry Point (to Distribution)
- Plant Tap (not for compliance with 62-550)
- Raw (at well or intake)
- Max Residence Time
- Ave Residence Time
- Near First Customer

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

- Routine Compliance (with 62-550)
- Confirmation of MCL Exceedance *
- Composite of Multiple Sites **
- Clearance (permitting)
- Other: _____
- Quarterly (Which Quarter? _____)
- Special (not for compliance with 62-550)
- Violation Resolution
- Replacement (of Invalidated Sample)

Sampling Procedure Used or Other Comments: _____

*See 62-550.500(6) for requirements and
NOTE: See 62-550.512(3) for additional
for nitrate or nitrite MCL exceedances.

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

Sampler's Name: David Shoffstall

Sampler's Phone #: _____ Sampler's Fax #: _____

Sampler's E-Mail Address: _____

CERTIFICATION (to be completed by sampler)

I, David Shoffstall, _____
(Print Name) (Print Title)

do HEREBY CERTIFY that the above public water system and sample collection information is complete and correct.

Signature: _____ Date: _____

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

LABORATORY CERTIFICATION INFORMATION (to be completed by lab – Please type or print legibly)
ATTACH CURRENT DOH ANALYTE SHEET *

Lab Name: Advanced Environmental Laboratories, Inc Florida Certification #: E84589
 Address: 9610 Princess Palm Avenue Certification Expiration Date: 06/30/2008
Tampa, FL 33619 Phone #: (813)630-9616

ANALYSIS INFORMATION (to be completed by lab) Date Sample(s) Received: 08/14/2008
 PWS ID (From Page 1): _____ Sample Number (From Page 1): T0810779001
 Lab Assigned Report Number or Job ID: T0810779001

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

- | | | | |
|---|---|---|--|
| <p><u>Inorganics</u></p> <input checked="" type="checkbox"/> All 17
<input type="checkbox"/> Partial
<input type="checkbox"/> Nitrate
<input type="checkbox"/> Nitrite
<input type="checkbox"/> Asbestos Only | <p><u>Synthetic Organics</u></p> <input type="checkbox"/> All 30
<input checked="" type="checkbox"/> All Except Dioxin
<input type="checkbox"/> Partial
<input type="checkbox"/> Dioxin Only | <p><u>Volatile Organics</u></p> <input checked="" type="checkbox"/> All 21
<input type="checkbox"/> Partial

<p><u>Radionuclides</u></p> <input checked="" type="checkbox"/> Single Sample
<input type="checkbox"/> Qtrly Composite** | <p><u>Disinfection Byproducts</u></p> <input type="checkbox"/> Trihalomethanes
<input type="checkbox"/> Haloacetic Acids
<input type="checkbox"/> Bromate
<input type="checkbox"/> Chlorite

<p><u>Secondaries</u></p> <input checked="" type="checkbox"/> All 14
<input type="checkbox"/> Partial |
|---|---|---|--|

Were any analyses subcontracted? Yes No

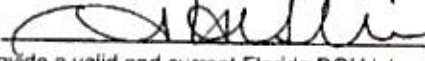
If yes, please provide DOH certification numbers: E82574, E83033

ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB *

CERTIFICATION

I, Tammie Heslin P.M.
(Print Name) (Print Title)

do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).

Signature:  Date: 9/15/08

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

COMPLIANCE DETERMINATION (to be completed by DEP or DOH)

- Sample Collection Info Satisfactory: Yes No Sample Analysis Info Satisfactory: Yes No
 Replacement Sample(s) Requested (circle or highlight group(s) above) Revised Report Requested (circle or highlight group(s) above)
 Additional Monitoring Required (circle or highlight group(s) above)
 Reason(s): MCL(s) Exceeded Detection(s) Incomplete Report
 Missing Analyte Sheet(s) Location Unsatisfactory Analysis Unsatisfactory
 Other: _____

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

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

INORGANIC CONTAMINANTS

62-550.310(1)

Report Number / Job ID: T0810779001

PWS ID (From Page 1): _____

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification
1040	Nitrate (as N)	10	mg/L	0.047	U	SM 4500NO3-F	0.047	08/15/2008	09:43	E84589
1041	Nitrite (as N)	1	mg/L	0.039	U	SM 4500NO3-F	0.039	08/15/2008	09:43	E84589
1005	Arsenic	0.010	mg/L	0.00072	U	EPA 200.8	0.00072	08/20/2008	22:05	E82574
1010	Barium	2	mg/L	0.0057		EPA 200.8	0.00030	08/20/2008	22:05	E82574
1015	Cadmium	0.005	mg/L	0.0002	I	EPA 200.8	0.00016	08/26/2008	16:39	E82574
1020	Chromium	0.1	mg/L	0.00043	U	EPA 200.7	0.00043	08/18/2008	15:47	E82574
1024	Cyanide	0.2	mg/L	0.0014	U	SM 4500-CN-E	0.0014	08/26/2008	18:06	E84589
1025	Fluoride	4.0	mg/L	0.16	I	EPA 300.0	0.047	08/21/2008	12:11	E84589
1030	Lead	0.015	mg/L	0.0003	I	EPA 200.8	0.00012	08/20/2008	22:05	E82574
1035	Mercury	0.002	mg/L	0.000024	U	EPA 245.1	0.000024	08/27/2008	17:27	E82574
1036	Nickel	0.1	mg/L	0.00098	U	EPA 200.7	0.00098	08/20/2008	13:25	E82574
1045	Selenium	0.05	mg/L	0.001	I	EPA 200.8	0.00098	08/20/2008	22:05	E82574
1052	Sodium	160	mg/L	11		EPA 200.7	0.18	08/18/2008	15:47	E82574
1074	Antimony	0.006	mg/L	0.00018	U	EPA 200.8	0.00018	08/20/2008	22:05	E82574
1075	Beryllium	0.004	mg/L	0.00011	U	EPA 200.7	0.00011	08/18/2008	15:47	E82574
1085	Thallium	0.002	mg/L	0.000061	U	EPA 200.8	0.000061	08/20/2008	22:05	E82574

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

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

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

SECONDARY CONTAMINANTS
62-550.320

Report Number / Job ID: T0810779001

PWS ID (From Page 1): _____

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification #
1002	Aluminum	0.2	mg/L	0.058	I	EPA 200.7	0.056	08/18/2008	15:47	E82574
1017	Chloride	250	mg/L	13		EPA 300.0	2.7	08/21/2008	12:11	E84589
1022	Copper	1	mg/L	0.0038		EPA 200.8	0.00040	08/20/2008	22:05	E82574
1025	Fluoride	2.0	mg/L	0.16	I	EPA 300.0	0.047	08/21/2008	12:11	E84589
1028	Iron	0.3	mg/L	0.088	I	EPA 200.7	0.012	08/18/2008	15:47	E82574
1032	Manganese	0.05	mg/L	0.006		EPA 200.8	0.00023	08/20/2008	22:05	E82574
1050	Silver	0.1	mg/L	0.000062	U	EPA 200.8	0.000062	08/20/2008	22:05	E82574
1055	Sulfate	250	mg/L	3.3	U	EPA 300.0	3.3	08/21/2008	12:11	E84589
1095	Zinc	5	mg/L	0.022		EPA 200.8	0.0043	08/20/2008	22:05	E82574
1905	Color	15	Color Units	3.2	U	SM 2120B	3.2	08/14/2008	17:37	E84589
1920	Odor	3	T.O.N @	1.0	U	SM 2150B	1.0	08/14/2008	14:00	E84589
1925	pH	6.5 - 8.5	pH unit	7.8		EPA 150.1	0.10	08/22/2008	10:20	E84589
1930	Total Dissolved Solids	500	mg/L	250		EPA 160.1	10	08/15/2008	09:03	E84589
2905	Foaming Agents	0.5	mg/L	0.09	I	EPA 425.1	0.051	08/15/2008	10:05	E84589

	colonies is outside the method indicated ideal range. This code is not to be used if a 100 mL sample has been filtered and the colony count is less than the lower value of the ideal range.
F	When reporting species: F indicates the female sex.
H	Value based on field kit determination; results may not be accurate. This code shall be used if a field screening test (i.e., field gas chromatograph data, immunoassay, vendor-supplied field kit, etc.) was used to generate the value and the field kit or method has not been recognized by the Department as equivalent to laboratory methods.
I	The reported value is greater than or equal to the laboratory method detection limit but less than the laboratory practical quantitation limit.
J	Estimated value. A "J" value shall be accompanied by a detailed explanation to justify the reason(s) for designating the value as estimated. Where possible, the organization shall report whether the actual value is estimated to be less than or greater than the reported value. A "J" value shall not be used as a substitute for K, L, M, T, V, or Y, however, if additional reasons exist for identifying the value as an estimate (e.g., matrix spiked failed to meet acceptance criteria), the "J" code may be added to a K, L, M, T, V, or Y. Examples of situations in which a "J" code must be reported include: instances where a quality control item associated with the reported value failed to meet the established quality control criteria (the specific failure must be identified); instances when the sample matrix interfered with the ability to make any accurate determination; instances when data are questionable because of improper laboratory or field protocols (e.g., composite sample was collected instead of a grab sample); instances when the analyte was detected at or above the method detection limit in a blank other than the method blank (such as calibration blank or field-generated blanks and the value of 10 times the blank value was equal to or greater than the associated sample value); or instances when the field or laboratory calibrations or calibration verifications did not meet calibration acceptance criteria.
K	Off-scale low. Actual value is known to be less than the value given. This code shall be used if: 1. The value is less than the lowest calibration standard and the calibration curve is known to be non-linear; or 2. The value is known to be less than the reported value based on sample size, dilution. This code shall not be used to report values that are less than the laboratory practical quantitation limit or laboratory method detection limit.
L	Off-scale high. Actual value is known to be greater than value given. To be used when the concentration of the analyte is above the acceptable level for quantitation (exceeds the linear range or highest calibration standard) and the calibration curve is known to exhibit a negative deflection.
M	When reporting chemical analyses: presence of material is verified but not quantified; the actual value is less than the value given. The reported value shall be the laboratory practical quantitation limit. This code shall be used if the level is too low to permit accurate quantification, but the estimated concentration is greater than or equal to the method detection limit. If the value is less than the method detection limit use "T" below.
N	Presumptive evidence of presence of material. This qualifier shall be used if:

Effective 12-3-08

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

RADIONUCLIDES

62-550.310(6)

Report Number / Job

708/0779001

PWS ID (From Page 1):

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	RDL	Analysis Error	Analysis Date	Analysis Time	DOH Lab Certification #
4006	Combined Uranium (U-234, U-235, & U-238)	30	ug/L	0.038	U	EPA 200.8	0.038	0.038		08/20/2008	22:05	E82574

- ** If the results exceed 5 pCi/L, a measurement for radium-226 is required.
- *** If the results exceed 5 pCi/L, a measurement for radium-226 is required. If the results exceed 15 pCi/L, measurements for radium-226 and uranium are required.
- **** If uranium (U) is reported as a measurement of activity (pCi/L) it will be converted to a mass measurement (µg/L) by multiplying the result by 1.5.
- ***** Reserved

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

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

RADIONUCLIDES
62-550.310(6)

Report Number / Job ID: T0810779-002_____

PWS ID (From Page 1): _____

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	RDL	Analysis Error	Analysis Date	Analysis Time	DOH Lab Certification #
4000	Gross Alpha (Excl Uranium)	15**	pCi/L	2.1		EPA 900	0.9	3	0.7	08/23/08	10:06	E83033
4002	Gross Alpha (Incl Uranium)	***	pCi/L					1				E
4006	Combined Uranium (U-234, U-235, & U-238)	****	pCi/L					*****				E
		30	µg/L					1				E
4020	Radium-226	5	pCi/L	1.3		EPA 903.1	0.1	1	0.2	08/27/08	11:48	E83033
4030	Radium-228			0.7	U	EPA Ra-05	0.7	1	0.5	08/27/08	10:41	E83033

- ** If the results exceed 5 pCi/L, a measurement for radium-226 is required.
- *** If the results exceed 5 pCi/L, a measurement for radium-226 is required. If the results exceed 15 pCi/L, measurements for radium-226 and uranium are required.
- **** If uranium (U) is reported as a measurement of activity (pCi/L) it will be converted to a mass measurement (µg/L) by multiplying the result by 1.5.
- ***** Reserved

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

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

VOLATILE ORGANICS

62-550.310(4)(a)

Report Number / Job ID: T0810779003

PWS ID (From Page 1): _____

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier	Analytical Method	Lab MDL	RDL	Analysis Date	Analysis Time	DOH Lab Certification #
2378	1,2,4-Trichlorobenzene	70	ug/L	0.38	U	EPA 524.2	0.38	0.5	08/16/2008	01:20	E82574
2380	cis-1,2-Dichloroethylene	70	ug/L	0.22	U	EPA 524.2	0.22	0.5	08/16/2008	01:20	E82574
2955	Xylenes (total)	10,000	ug/L	0.50	U	EPA 524.2	0.50	0.5	08/16/2008	01:20	E82574
2964	Dichloromethane	5	ug/L	0.42	U	EPA 524.2	0.42	0.5	08/16/2008	01:20	E82574
2968	o-Dichlorobenzene	600	ug/L	0.21	U	EPA 524.2	0.21	0.5	08/16/2008	01:20	E82574
2969	para-Dichlorobenzene	75	ug/L	0.17	U	EPA 524.2	0.17	0.5	08/16/2008	01:20	E82574
2976	Vinyl Chloride	1	ug/L	0.19	U	EPA 524.2	0.19	0.5	08/16/2008	01:20	E82574
2977	1,1-Dichloroethylene	7	ug/L	0.19	U	EPA 524.2	0.19	0.5	08/16/2008	01:20	E82574
2979	trans-1,2-Dichloroethylene	100	ug/L	0.18	U	EPA 524.2	0.18	0.5	08/16/2008	01:20	E82574
2980	1,2-Dichloroethane	3	ug/L	0.23	U	EPA 524.2	0.23	0.5	08/16/2008	01:20	E82574
2981	1,1,1-Trichloroethane	200	ug/L	0.27	U	EPA 524.2	0.27	0.5	08/16/2008	01:20	E82574
2982	Carbon tetrachloride	3	ug/L	0.23	U	EPA 524.2	0.23	0.5	08/16/2008	01:20	E82574
2983	1,2-Dichloropropane	5	ug/L	0.18	U	EPA 524.2	0.18	0.5	08/16/2008	01:20	E82574
2984	Trichloroethylene	3	ug/L	0.37	U	EPA 524.2	0.37	0.5	08/16/2008	01:20	E82574
2985	1,1,2-Trichloroethane	5	ug/L	0.22	U	EPA 524.2	0.22	0.5	08/16/2008	01:20	E82574
2987	Tetrachloroethylene	3	ug/L	0.40	U	EPA 524.2	0.40	0.5	08/16/2008	01:20	E82574
2989	Monochlorobenzene	100	ug/L	0.19	U	EPA 524.2	0.19	0.5	08/16/2008	01:20	E82574
2990	Benzene	1	ug/L	0.20	U	EPA 524.2	0.20	0.5	08/16/2008	01:20	E82574
2991	Toluene	1,000	ug/L	0.18	U	EPA 524.2	0.18	0.5	08/16/2008	01:20	E82574
2992	Ethylbenzene	700	ug/L	0.19	U	EPA 524.2	0.19	0.5	08/16/2008	01:20	E82574
2996	Styrene	100	ug/L	0.18	U	EPA 524.2	0.18	0.5	08/16/2008	01:20	E82574

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

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

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

SYNTHETIC ORGANICS
62-550.310(4)(b)

Report Number / Job ID: T0810779004

PWS ID (From Page 1):

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifie	Analytical Method	Lab MDL	RDL	Extraction Date	Analysis Date	Analysis Time	DOH Lab Certification
2005	Endrin	2	ug/L	0.0020	U	EPA 508	0.0020	0.01	08/18/2008	08/21/2008	15:07	E82574
2010	Lindane	0.2	ug/L	0.0033	U	EPA 508	0.0033	0.02	08/18/2008	08/21/2008	15:07	E82574
2015	Methoxychlor	40	ug/L	0.011	U	EPA 508	0.011	0.1	08/18/2008	08/21/2008	15:07	E82574
2020	Toxaphene	3	ug/L	0.091	U	EPA 508	0.091	1	08/18/2008	08/21/2008	15:07	E82574
2031	Dalapon	200	ug/L	1.0	U	EPA 515.3	1.0	1	08/18/2008	08/25/2008	14:32	E82574
2032	Diquat	20	ug/L	7.6	U	EPA 549.2	7.6	0.4	08/19/2008	08/19/2008	17:36	E82574
2033	Endothal	100	ug/L	4.8	U	EPA 548.1	4.8	9	08/19/2008	08/20/2008	13:18	E82574
2034	Glyphosate	700	ug/L	6.5	U	EPA 547	6.5	6	08/26/2008	08/26/2008	18:59	E82574
2035	Di(2-ethylhexyl)adipate	400	ug/L	0.95	U	EPA 525.2	0.95	0.6	08/25/2008	08/25/2008	23:17	E82574
2036	Oxamyl (Vydate)	200	ug/L	0.57	U	EPA 531.1	0.57	2	08/21/2008	08/21/2008	19:56	E82574
2037	Simazine	4	ug/L	0.19	U	EPA 525.2	0.19	0.07	08/25/2008	08/25/2008	23:17	E82574
2039	Di(2-Ethylhexyl)phthalate	6	ug/L	0.77	U	EPA 525.2	0.77	0.6	08/25/2008	08/25/2008	23:17	E82574
2040	Picloram	500	ug/L	0.23	U	EPA 515.3	0.23	0.1	08/23/2008	08/25/2008	14:32	E82574
2041	Dinoseb	7	ug/L	0.67	U	EPA 515.3	0.67	0.2	08/23/2008	08/25/2008	14:32	E82574
2042	Hexachlorocyclopentadiene	50	ug/L	0.015	U	EPA 508	0.015	0.1	08/18/2008	08/21/2008	15:07	E82574
2046	Carbofuran	40	ug/L	0.28	U	EPA 531.1	0.28	0.9	08/21/2008	08/21/2008	19:56	E82574
2050	Atrazine	3	ug/L	0.16	U	EPA 525.2	0.16	0.1	08/25/2008	08/25/2008	23:17	E82574
2051	Alachlor	2	ug/L	0.26	U	EPA 525.2	0.26	0.2	08/25/2008	08/25/2008	23:17	E82574
2065	Heptachlor	0.4	ug/L	0.0063	U	EPA 508	0.0063	0.04	08/18/2008	08/21/2008	15:07	E82574
2067	Heptachlor Epoxide	0.2	ug/L	0.0028	U	EPA 508	0.0028	0.02	08/18/2008	08/21/2008	15:07	E82574
2105	2,4-D	70	ug/L	0.55	U	EPA 515.3	0.55	0.1	08/23/2008	08/25/2008	14:32	E82574
2110	2,4,5-TP (Silvex)	50	ug/L	0.32	U	EPA 515.3	0.32	0.2	08/23/2008	08/25/2008	14:32	E82574
2274	Hexachlorobenzene	1	ug/L	0.0027	U	EPA 508	0.0027	0.1	08/18/2008	08/21/2008	15:07	E82574
2306	Benzo(a)pyrene	0.2	ug/L	0.096	U	EPA 525.2	0.096	0.02	08/25/2008	08/25/2008	23:17	E82574
2326	Pentachlorophenol	1	ug/L	0.069	U	EPA 515.3	0.069	0.04	08/23/2008	08/25/2008	14:32	E82574
2383	Polychlorinated biphenyls(PCB)	0.5	ug/L	0.11	U	EPA 508	0.11	0.1	08/18/2008	08/21/2008	15:07	E82574
2931	Dibromochloropropane	0.2	ug/L	0.0082	U	EPA 504.1	0.0082	0.02	08/19/2008	08/19/2008	15:31	E82574
2946	Ethylene Dibromide (EDB)	0.02	ug/L	0.0091	U	EPA 504.1	0.0091	0.01	08/19/2008	08/19/2008	15:31	E82574
2959	Chlordane	2	ug/L	0.048	U	EPA 508	0.048	0.2	08/18/2008	08/21/2008	15:07	E82574

NOTE: Effective January 1, 2004, results indicating non-detection with a reported lab MDL >50% of the MCL will not be accepted for compliance with 62-550.310(4)(b).

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

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



Florida Radiochemistry Services, Inc.

Contact: Michael J. Neumann
5456 Hoffner Ave., Suite 201 Orlando, FL 32812
Phone: (407) 382-7733 Fax: (407)382-7744
Certification I. D. # E83033

Work Order #: 0808100
Report Date: 08/28/08

Report to:

Advanced Environmental Laboratories, Inc.
9610 Princess Palm Ave.
Tampa, FL 33619
Attention: Tammie Heslin

I do hereby affirm that this record contains no willful misrepresentations and that this information given by me is true to the best of my knowledge and belief. I further certify that the methods and quality control measures used to produce these laboratory results were implemented in accordance with the requirements of this laboratory's certification and NELAC Standards. The test results in this report relate only to the samples received.

Signed Michael J. Neumann
Michael J. Neumann - President

Date 8-28-08

P.7 P.9



Florida Radiochemistry Services, Inc.

Sample Login

Client:	Advanced Environmental Laboratories, Inc.	Date / Time Received	Work order #
		08/16/08 15:10	0808100
Client Contact:	Tammie Heslin		
Client P.O.			
Project I.D.	T0810778		
Lab Sample I.D.	Client Sample I.D.	Sample Date/Time	Analysis Requested
0808100-01	T0810778-002	08/13/08 14:00	Ga, Ra226, Ra228

Analysis Results

Gross Alpha	2.1
Error +/-	0.7
MDL	0.9
EPA Method	900.0
Prep Date	08/21/08
Prep Time	06:38
Analysis Date	08/23/08
Analysis Time	10:06
Analyst	MJN

Radium 226	1.3
Error +/-	0.2
MDL	0.1
EPA Method	903.1
Prep Date	08/20/08
Prep Time	05:15
Analysis Date	08/27/08
Analysis Time	11:48
Analyst	MJN

Radium 228	0.7U
Error +/-	0.8
MDL	0.7
EPA Method	Ra-05
Prep Date	08/20/08
Prep Time	05:16
Analysis Date	08/27/08
Analysis Time	10:41
Analyst	PJ

Units **pCi/l**

Units **pCi/l**

JSP.10



Florida Radiochemistry Services, Inc.

QA Page

Analyte	Sample #	Date Analyzed	Sample Result	Amount Spiked	Spike Result	Spike /Dup Result	Spike % Rec.	Spike Dup % Rpd
Gross Alpha	0808103-01	08/22/08	<1.4	10.2	9.6	10.4	94	8.0
Radium 226	0808100-01	08/27/08	1.3	25.2	26.0	22.8	98	13.1
Radium 228	0808100-01	08/27/08	<0.7	6.0	6.0	6.3	100	12.4

	Quality Control	Limits
	% RPD	% Rec.
Gross Alpha	23.5	62-121
Radium 226	26.0	72-125
Radium 228	20.5	80-123

P.9 P.11

Chain of Custody

NO. 341 P. 4

Circle if Applicable:

RUSH

SHORT HOLD



Advanced Environmental Laboratories, Inc.

Document 72265 - HBN 33181

Project Reference Number : T0810779

2008

Results Requested By 8/29/2008

Tammie Heslin
Advanced Environmental Laboratories, Inc
9610 Princess Palm Avenue
Tampa, FL 33619
Phone (813)630-9618
Fax (813)630-4327

Sub to Fl. Radiochem

Not J
Hb 8/1
2008
EPA Method
EPA Method
EPA Method
EPA Method
EPA Method

Corex Alpt
Rad 22
Rad 228

NO.	DATE	TIME	INITIALS	DESCRIPTION	LAB USE ONLY
2					
4					
6					
8					

Comments:

Preservative Codes	Transfers	Released By	Date/Time	Received By	Date/Time
F000 - HCN	1	<i>He [Signature]</i>	8/14/08 18:00	<i>Rwards</i>	8/15/08 15:10
	2				
	3				
	4				
	5				

P.F.O

P.12

AUG. 28. 2008 11:05AM

Internal Transfer Chain of Custody



Advanced Environmental Laboratories, Inc.

Transfer From AEL-Tampa

Circle if applicable:
(If SHORT HOLD is circled, these samples must be batched for receiving immediately and managers notified)

RUSH

Transfer To Ship Work to AEL/Jacksonville

SHORT HOLD

Chain 72244 - HBN 33178

Pos	Container	Type	Preserv	Matrix	Collected	Received	RM	Utilization
✓ 1	T0810702001-A	LP	HNO3	DW	8/11/2008 15:30	8/13/2008 12:40	MP	1801-W, 2008-D
	Previous Location - RECEIVING							
✓ 2	T0810702002-A	LP	HNO3	DW	8/11/2008 16:05	8/13/2008 12:40	MP	1801-W, 2008-D
	Previous Location - RECEIVING							
✓ 3	T0810702003-A	LP	HNO3	DW	8/11/2008 15:45	8/13/2008 12:40	MP	1801-W, 2008-D
	Previous Location - RECEIVING							
✓ 4	T0810702004-A	LP	HNO3	DW	8/11/2008 16:05	8/13/2008 12:40	MP	1801-W, 2008-D
	Previous Location - RECEIVING							
✓ 5	T0810702005-A	LP	HNO3	DW	8/11/2008 14:50	8/13/2008 12:40	MP	1801-W, 2008-D
	Previous Location - RECEIVING							
✓ 6	T0810702006-A	LP	HNO3	DW	8/12/2008 07:10	8/13/2008 12:40	MP	1801-W, 2008-D
	Previous Location - RECEIVING							
✓ 7	T0810702007-A	LP	HNO3	DW	8/11/2008 15:00	8/13/2008 12:40	MP	1801-W, 2008-D
	Previous Location - RECEIVING							
✓ 8	T0810702008-A	LP	HNO3	DW	8/11/2008 15:20	8/13/2008 12:40	MP	1801-W, 2008-D
	Previous Location - RECEIVING							
✓ 9	T0810702009-A	LP	HNO3	DW	8/11/2008 14:00	8/13/2008 12:40	MP	1801-W, 2008-D
	Previous Location - RECEIVING							
✓ 10	T0810702010-A	LP	HNO3	DW	8/12/2008 16:30	8/13/2008 12:40	MP	1801-W, 2008-D
	Previous Location - RECEIVING							
✓ 11	T0810707001-A	40CVOA	HCl	DW	8/12/2008 09:56	8/13/2008 12:40	MP	5242-W
	Previous Location - RECEIVING							
✓ 12	T0810741001-A	LP	HNO3	DW	8/13/2008 08:30	8/13/2008 14:30	MAL	1801-W, 2008-D
	Previous Location - RECEIVING							
✓ 13	T0810741002-A	LP	HNO3	DW	8/13/2008 06:30	8/13/2008 14:30	MAL	1801-W, 2008-D
	Previous Location - RECEIVING							
✓ 14	T0810741003-A	LP	HNO3	DW	8/13/2008 06:30	8/13/2008 14:30	MAL	1801-W, 2008-D
	Previous Location - RECEIVING							
✓ 15	T0810741004-A	LP	HNO3	DW	8/13/2008 06:00	8/13/2008 14:30	MAL	1801-W, 2008-D
	Previous Location - RECEIVING							
✓ 16	T0810741005-A	LP	HNO3	DW	8/13/2008 06:40	8/13/2008 14:30	MAL	1801-W, 2008-D
	Previous Location - RECEIVING							
✓ 17	T0810741006-A	LP	HNO3	DW	8/13/2008 06:30	8/13/2008 14:30	MAL	1801-W, 2008-D
	Previous Location - RECEIVING							
✓ 18	T0810754001-A	500P	HNO3	SL	8/13/2008 09:30	8/13/2008 16:59	MFC	3050BSR, 6010BS, 7471AS, P, HG7471AS
	Previous Location - RECEIVING							
✓ 19	T0810779001-A	LP	HNO3	DW	8/13/2008 14:15	8/14/2008 13:00	TMH	1801-W, 2007-D, 2008-D, 2451-W-P, HG2451-W
	Previous Location - RECEIVING							
✓ 20	T0810779002-B	LP	HNO3	DW	8/13/2008 14:00	8/14/2008 13:00	TMH	1801-W, 2008-D, R228-B
	Previous Location - RECEIVING							
✓ 21	T0810779003-A	40CVOA	HCl	DW	8/13/2008 14:30	8/14/2008 13:00	TMH	5242-W
	Previous Location - RECEIVING							
✓ 22	T0810779004-A	32ozAGT	Na2SO4	DW	8/13/2008 15:00	8/14/2008 13:00	TMH	E508-W, E508-W-P

Not yours
HS
8/14/08

R.H P.13

Internal Transfer Chain of Custody



Advanced Environmental Laboratories, Inc.

Transfer From AEL-Tampa

Circle if applicable:
(If SHORT HOLD is circled, these samples must be batched for receiving immediately and managers notified)

RUSH

Transfer To Ship Work to AEL/Jacksonville

SHORT HOLD

Chain 72244 - HBN 33178

#	Pos Container	Type	Preserv	Matrix	Collected	Received	MP	Utilization
✓ 23	T0810779004-C	40CVOA	Na2S2O4M	DW	8/13/2008 15:00	8/14/2008 13:00	TMH	5311-W
	Previous Location - RECEIVING							
✓ 24	T0810779004-D	40CVOA	4C	DW	8/13/2008 15:00	8/14/2008 13:00	TMH	5153-W, 5153-W-P
	Previous Location - RECEIVING							
✓ 25	T0810779004-G	32ozAGT	Na2SO4	DW	8/13/2008 15:00	8/14/2008 13:00	TMH	5252-W, 5252-W-P
	Previous Location - RECEIVING							
✓ 26	T0810779004-I	32ozAGT	Na2SO4	DW	8/13/2008 15:00	8/14/2008 13:00	TMH	5481-W, 5481-W-P
	Previous Location - RECEIVING							
✓ 27	T0810779004-J	40CVOA	Na2SO4	DW	8/13/2008 15:00	8/14/2008 13:00	TMH	5041-W, 5041-W-P
	Previous Location - RECEIVING							
✓ 28	T0810779004-K	40CVOA	Na2SO4	DW	8/13/2008 15:00	8/14/2008 13:00	TMH	E-57-W
	Previous Location - RECEIVING							
✓ 29	T0810779004-N	LAP	Na2SO4	DW	8/13/2008 15:00	8/14/2008 13:00	TMH	5492-W, 5492-W-P
	Previous Location - RECEIVING							
✓ 30	T0810779004-A	UP	HNO3	DW	8/14/2008 09:30	8/14/2008 13:00	TMH	1601-W, 2007-D
	Previous Location - RECEIVING							
✓ 31	T0810796001-A	500P	HNO3	SL	8/14/2008 09:30	8/14/2008 13:20	MP	3050B5-P, 6010B5, 7471AS-P, HG7471AS
	Previous Location - RECEIVING							

Transfers

#	Released By	Released To	Date/Time	Location
1	<i>Alex O...</i>	B/S	8/14/08 18:00	RECEIVING
2	B/S	D. Hatcher	8-15-08 08:30	AEL TAX
3				
4				

R-12 P.14



Advanced Environmental Laboratories, Inc.

- 6601 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82574
- 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327 • E84586
- 6815 SW Archer Road • Gainesville, FL 32608 • 352.377.2349 • Fax 352.395.6639 • E82001
- 528 S. North Lake Blvd., Ste. 1016 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597 • E53076

Page _____ of _____

LAB NUMBER:

TO 810779

CLIENT NAME: Cypress Lake Utilities		PROJECT NAME: <i>Cypress Lake</i>		BOTTLE SIZE & TYPE: <i>40 mL 1 LT</i>		ANALYSIS REQUIRED <i>Primary & Secondary RADs VOC SOC</i>	LABORATORY I.D. NUMBER	
ADDRESS: 10000 US Hwy 98 North Lakeland, FL 33809		P.O. NUMBER/PROJECT NUMBER: <i>248100</i>						
PHONE:		PROJECT LOCATION: <i>C/L</i>						
FAX: <i>863-815-1521</i>		REMARKS/SPECIAL INSTRUCTIONS:						
CONTACT: <i>D.E. Shaffers</i>								
SAMPLED BY: <i>DES</i>								
TURN AROUND TIME: <input checked="" type="checkbox"/> STANDARD <input type="checkbox"/> RUSH								
SAMPLE ID	SAMPLE DESCRIPTION	Grab Comp	SAMPLING		MATRIX	NO. COUNT	PRESERVATION	
			DATE	TIME				
<i>P.O.#</i>	<i>Primary & Secondary</i>	<i>G</i>	<i>8/13/08</i>	<i>1415</i>	<i>DW</i>		<input checked="" type="checkbox"/>	<i>001</i>
<i>P.O.#</i>	<i>RADs</i>	<i>G</i>	<i>8/13/08</i>	<i>1400</i>	<i>DW</i>		<input checked="" type="checkbox"/>	<i>002</i>
<i>P.O.#</i>	<i>VOC</i>	<i>G</i>	<i>8/13/08</i>	<i>1430</i>	<i>DW</i>	<i>3</i>	<input checked="" type="checkbox"/>	<i>003</i>
<i>P.O.#</i>	<i>SOC</i>	<i>G</i>	<i>8/13/08</i>	<i>1500</i>	<i>DW</i>	<i>9</i>	<input checked="" type="checkbox"/>	<i>004</i>
<i>P.O.#</i>	<i>SOC</i>	<i>G</i>	<i>8/13/08</i>	<i>1500</i>	<i>DW</i>	<i>6</i>	<input checked="" type="checkbox"/>	<i>005</i>

Matrix Code: WW = wastewater SW = surface water GW = ground water DW = drinking water O = oil A = air SO = soil SL = sludge Preservation Code: I = ice H = (HCl) S = (H2SO4) N = (HNO3) T = (Sodium Thiosulfate)

Received on Ice No Temp taken from sample Temp from blank Where required, pH checked Temperature when received *3* (in degrees celsius)

Form revised 2/8/08

Device used for measuring Temp by unique identifier (circle IR temp gun used) J: 9A G: LT-1 LT-2 T: 10A A: 3A

Relinquished by:	Date	Time	Received by:	Date	Time
<i>[Signature]</i>	<i>8/14/08</i>	<i>12:00</i>	<i>[Signature]</i>	<i>8/14/08</i>	<i>12:00</i>
<i>[Signature]</i>	<i>8/14/08</i>		<i>[Signature]</i>	<i>8/14/08</i>	<i>13:00</i>

FOR DRINKING WATER USE:
(When PWS information not otherwise supplied) PWS ID: _____

Contact Person: _____ Phone: _____

Supplier of Water: _____

Site Address: _____

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

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

System Name: Cypress Lake PWS I.D.#:

System Type (check one): Community Nontransient Noncommunity Transient Noncommunity

Address: _____

City: _____ State: _____ ZIP Code: _____

Phone #: _____ Fax #: _____

E-Mail Address: _____

ODOR
AND SULFIDES
FOR WELL #2

SAMPLE INFORMATION (to be completed by sampler)

Sample Number: T1003820001 Location Code (if known): _____

Sample Date: 03/22/2010 Sample Time: 08:00 AM PM (circle one)

Sample Location (be specific): Well # 2

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

Sample Type (Check Only One)

- Distribution
- Entry Point (to Distribution)
- Plant Tap (not for compliance with 62-550)
- Raw (at well or intake)
- Max Residence Time
- Ave Residence Time
- Near First Customer

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

- Routine Compliance (with 62-550) Quarterly (Which Quarter? _____)
- Confirmation of MCL Exceedance * Special (not for compliance with 62-550)
- Composite of Multiple Sites ** Violation Resolution
- Clearance (permitting) Replacement (of Invalidated Sample)
- Other: _____

Sampling Procedure Used or Other Comments: _____

*See 62-550.500(6) for requirements and
NOTE: See 62-550.512(3) for additional
for nitrate or nitrite MCL exceedances.

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

Sampler's Name: D.E. Shoffstall

Sampler's Phone #: _____ Sampler's Fax #: _____

Sampler's E-Mail Address: _____

CERTIFICATION (to be completed by sampler)

I, D.E. Shoffstall, _____
(Print Name) (Print Title)

do HEREBY CERTIFY that the above public water system and sample collection information is complete and correct.

Signature: _____ Date: _____

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

LABORATORY CERTIFICATION INFORMATION (to be completed by lab - Please type or print legibly)
ATTACH CURRENT DOH ANALYTE SHEET *

Lab Name: Advanced Environmental Laboratories, Inc Florida Certification #: E84589
 Address: 9610 Princess Palm Avenue Certification Expiration Date: 06/30/2010
Tampa, FL 33619 Phone #: (813)630-9616

ANALYSIS INFORMATION (to be completed by lab) Date Sample(s) Received: 03/22/2010
 PWS ID (From Page 1): _____ Sample Number (From Page 1): T1003820001
 Lab Assigned Report Number or Job ID: T1003820001

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

- | | | | |
|--|--|---|--|
| <p><u>Inorganics</u></p> <input type="checkbox"/> All 17
<input type="checkbox"/> Partial
<input type="checkbox"/> Nitrate
<input type="checkbox"/> Nitrite
<input type="checkbox"/> Asbestos Only | <p><u>Synthetic Organics</u></p> <input type="checkbox"/> All 30
<input type="checkbox"/> All Except Dioxin
<input type="checkbox"/> Partial
<input type="checkbox"/> Dioxin Only | <p><u>Volatile Organics</u></p> <input type="checkbox"/> All 21
<input type="checkbox"/> Partial

<p><u>Radionuclides</u></p> <input type="checkbox"/> Single Sample
<input type="checkbox"/> Qtrly Composite** | <p><u>Disinfection Byproducts</u></p> <input type="checkbox"/> Trihalomethanes
<input type="checkbox"/> Haloacetic Acids
<input type="checkbox"/> Bromate
<input type="checkbox"/> Chlorite

<p><u>Secondaries</u></p> <input type="checkbox"/> All 14
<input checked="" type="checkbox"/> Partial <u>odor / sulfide</u> |
|--|--|---|--|

Were any analyses subcontracted? Yes No

If yes, please provide DOH certification numbers: _____

ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB *

CERTIFICATION

I, Tammie Heslin _____, _____
 (Print Name) (Print Title)

do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).

Signature: [Signature] Date: 3/30/10

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

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

COMPLIANCE DETERMINATION (to be completed by DEP or DOH)

Sample Collection Info Satisfactory: Yes No Sample Analysis Info Satisfactory: Yes No

Replacement Sample(s) Requested (circle or highlight group(s) above) Revised Report Requested (circle or highlight group(s) above)

Additional Monitoring Required (circle or highlight group(s) above)

- Reason(s): MCL(s) Exceeded Detection(s) Incomplete Report
 Missing Analyte Sheet(s) Location Unsatisfactory Analysis Unsatisfactory
 Other: _____

Person Notified: _____ Date Notified: _____

Comments: _____

Date Reviewed: _____ DEP/DOH Reviewing Official: _____

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

SECONDARY CONTAMINANTS
62-550.320

Report Number / Job ID: T1003820001

PWS ID (From Page 1): _____

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification #
1920	Odor	3	T.O.N. @	1.0	U	SM 2150B	1.0	03/23/2010	08:30	E84589

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



**Advanced
Environmental Laboratories, Inc.**

Page _____ of _____

LAB NUMBER: 71003820

- Jacksonville:** 8601 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354
- Tampa:** 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327
- Gainesville:** 6815 SW Archer Road • Gainesville, FL 32608 • 352.377.2349 • Fax 352.395.6639
- Miramar:** 10200 USA Today Way, Miramar, FL 33025 • 954.889.2288 • Fax 954.889.2281
- Altamonte Springs:** 528 S. North Lake Blvd., Ste. 1016 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1567

CLIENT NAME: <u>Cypress Lake Utilities</u>		PROJECT NAME: <u>Cypress Lake</u>				BOTTLE SIZE & TYPE	ANALYSIS REQUIRED	<u>odor/sulfide</u>	LABORATORY I.D. NUMBER
ADDRESS: <u>10000 US Hwy 98 North Lakeland, FL 33809</u>		P.O. NUMBER/PROJECT NUMBER: <u>248100</u>							
PHONE: <u>707-948-6510</u>		PROJECT LOCATION: <u>WTP</u>							
FAX: <u>863-815-1524</u>		REMARKS/SPECIAL INSTRUCTIONS:							
CONTACT: <u>D.E. Hoffstall</u>									
SAMPLED BY: <u>AS</u>									
TURN AROUND TIME: <input checked="" type="checkbox"/> STANDARD <input type="checkbox"/> RUSH									
SAMPLE ID	SAMPLE DESCRIPTION	Grab Comp	SAMPLING		MATRIX	NO. COUNT	PRESERVATION		
			DATE	TIME					
	<u>Well #2</u>	<u>G</u>	<u>3/22/10</u>	<u>0900</u>	<u>DW</u>	<u>2</u>		<u>0-1</u>	

Matrix Code: **WW** = wastewater **SW** = surface water **GW** = ground water **DW** = drinking water **O** = oil **A** = air **SO** = soil **SL** = sludge
 Preservation Code: **I** = ice **H** = (HCl) **S** = (H2SO4) **N** = (HNO3) **T** = (Sodium Thiosulfate)

Received on Ice Yes No Temp taken from sample Temp from blank
 Where required, pH checked Temperature when received 5 (in degrees celcius)

Form revised 11/18/2009

Device used for measuring Temp by unique identifier (circle IR temp gun used) **J: 9A G: LT-1 LT-2 T: 10A A: 3A M: 1A**

Relinquished by:	Date	Time	Received by:	Date	Time
<u>D. Hoffstall</u>	<u>3/22/10</u>	<u>0950</u>	<u>J. Hoffstall</u>	<u>03/22/10</u>	<u>0930</u>
<u>J. Hoffstall</u>	<u>03/22/10</u>		<u>J. Hoffstall</u>	<u>03/22/10</u>	<u>1030</u>

FOR DRINKING WATER USE:
 (When PWS information not otherwise supplied) PWS ID: _____
 Contact Person: _____ Phone: _____
 Supplier of Water: _____
 Site Address: _____