

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PERMITTEE NAME: Utilities, Inc. of Florida	PERMIT NUMBER: FLA012801
ADDRESS: 200 Weathersfield Ave Altamonte Springs, FL 32714	LIMIT: FINAL REPORT: Monthly
FACILITY: Forest Lake Estates WWTP	FACILITY TYPE: DW GROUP: Domestic
LOCATION: 41311 Paquette Way Zephyrhills, FL 33540	MONITORING GROUP: R-001
COUNTY: PASCO	DESCRIPTION: R-001, including Influent
	MONITORING PERIOD: From: 08/01/2020 To: 08/31/2020

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement		.056177						0	5 Days/Week	Recording Flow Meter with Totalizer
PARM Code 50050 Y Mon. Site: FLW-01	Permit Requirement		0.216 (Annl Avg)	MGD						(5 Days/Week)	(Recording Flow Meter with Totalizer)
Flow	Sample Measurement		.042220						0	5 Days/Week	Recording Flow Meter with Totalizer
PARM Code 50050 1 Mon. Site: FLW-01	Permit Requirement		Report (Mo Avg)	MGD						(5 Days/Week)	(Recording Flow Meter with Totalizer)
BOD, Carbonaceous 5 day, 20C	Sample Measurement					2.70			0	1 Bi-weekly; every 2 weeks	8-hr Flow Proportioned Composite
PARM Code 80082 Y Mon. Site: EFA-01	Permit Requirement					20.0 (Annl Avg)		mg/L		(1 Bi-weekly; every 2 weeks)	(8-hr Flow Proportioned Composite)
BOD, Carbonaceous 5 day, 20C	Sample Measurement					2.1	2.2		0	1 Bi-weekly; every 2 weeks	8-hr Flow Proportioned Composite
PARM Code 80082 A Mon. Site: EFA-01	Permit Requirement					30.0 (Mo Avg)	60.0 (Maximum)	mg/L		(1 Bi-weekly; every 2 weeks)	(8-hr Flow Proportioned Composite)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended PARM Code 00530 Y Mon. Site: EFA-01	Sample Measurement					1.31			0	1 Bi-weekly; every 2 weeks	8-hr Flow Proportioned Composite
	Permit Requirement					20.0 (Annl Avg)		mg/L		(1 Bi-weekly; every 2 weeks)	(8-hr Flow Proportioned Composite)
Solids, Total Suspended PARM Code 00530 A Mon. Site: EFA-01	Sample Measurement					1	1		0	1 Bi-weekly; every 2 weeks	8-hr Flow Proportioned Composite
	Permit Requirement					30.0 (Mo Avg)	60.0 (Maximum)	mg/L		(1 Bi-weekly; every 2 weeks)	(8-hr Flow Proportioned Composite)
Coliform, Fecal PARM Code 74055 Y Mon. Site: EFA-01	Sample Measurement					1			0	1 Bi-weekly; every 2 weeks	Grab
	Permit Requirement					200.0 (Annl Avg)		#/100mL		(1 Bi-weekly; every 2 weeks)	(Grab)
Coliform, Fecal PARM Code 74055 A Mon. Site: EFA-01	Sample Measurement					1	1		0	1 Bi-weekly; every 2 weeks	Grab
	Permit Requirement					Report (Mo Geomn)	800.0 (Maximum)	#/100mL		(1 Bi-weekly; every 2 weeks)	(Grab)
pH PARM Code 00400 A Mon. Site: EFA-01	Sample Measurement				7.17		7.61		0	5 Days/Week	Grab
	Permit Requirement				4.0 (Minimum)		8.5 (Maximum)	s.u.		(5 Days/Week)	(Grab)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Chlorine, Total Residual PARM Code 50060 A Mon. Site: EFA-01	Sample Measurement				0.85				0	5 Days/Week	Grab
	Permit Requirement				0.5 (Minimum)			mg/L		(5 Days/Week)	(Grab)
Nitrogen, Nitrate, Total (as N) PARM Code 00620 A Mon. Site: EFA-01	Sample Measurement						18		0	1 Monthly	8-hr Flow Proportioned Composite
	Permit Requirement						Report (Maximum)	mg/L		(1 Monthly)	(8-hr Flow Proportioned Composite)
Phosphorus, Total (as P) PARM Code 00665 A Mon. Site: EFA-01	Sample Measurement						5.0		0	1 Monthly	8-hr Flow Proportioned Composite
	Permit Requirement						Report (Maximum)	mg/L		(1 Monthly)	(8-hr Flow Proportioned Composite)
Flow PARM Code 50050 P Mon. Site: FLW-01	Sample Measurement	.042220	.037723						0	5 Days/Week	Recording Flow Meter with Totalizer
	Permit Requirement	Report (Mo Avg)	0.216 (3MonAvg)	MGD						(5 Days/Week)	(Recording Flow Meter with Totalizer)
Percent Capacity, (TMADF/Permitted Capacity) x 100 PARM Code 00180 1 Mon. Site: FLW-01	Sample Measurement						19		0	1 Monthly	Calculated
	Permit Requirement						Report (Mo Avg)	percent		(1 Monthly)	(Calculated)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C PARM Code 80082 G Mon. Site: INF-01	Sample Measurement						270		0	1 Monthly	8-hr Flow Proportioned Composite
	Permit Requirement						Report (Maximum)	mg/L		(1 Monthly)	(8-hr Flow Proportioned Composite)
Solids, Total Suspended PARM Code 00530 G Mon. Site: INF-01	Sample Measurement						200		0	1 Monthly	8-hr Flow Proportioned Composite
	Permit Requirement						Report (Maximum)	mg/L		(1 Monthly)	(8-hr Flow Proportioned Composite)
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Jason Woods	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Electronically Signed			TELEPHONE (352) 424-1673	SUBMITTED ON 09/24/2020

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PERMITTEE NAME: Utilities, Inc. of Florida ADDRESS: 200 Weathersfield Ave Altamonte Springs, FL 32714 FACILITY: Forest Lake Estates WWTP LOCATION: 41311 Paquette Way Zephyrhills, FL 33540 COUNTY: PASCO	PERMIT NUMBER: FLA012801 LIMIT: FINAL REPORT: Monthly FACILITY TYPE: DW GROUP: Domestic MONITORING GROUP: RMP-Q DESCRIPTION: Biosolids Quantity MONITORING PERIOD: From: 08/01/2020 To: 08/31/2020
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Parameter	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	0				0	1 Monthly	Calculated
PARM Code B0008 + Mon. Site: RMP-2	Report (Mo Total)	dry tons				(1 Monthly)	(Calculated)
Biosolids Quantity (Transferred)	0				0	1 Monthly	Calculated
PARM Code B0007 + Mon. Site: RMP-1	Report (Mo Total)	dry tons				(1 Monthly)	(Calculated)
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DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA012801** Facility: **Labrador/Forest Lake Estates WWTF**
 Monitoring Period: **From: August 1, 2020 To: August 31, 2020**

	Flow (MGD) R-001	CBOD5 (mg/L)	TSS (mg/L)	Fecal Coliform Bacteria (#/100ml)	pH (SU)	TRC (For Disinfect.) (mg/L)			
Code	50050.000000	80082	530.0	74055	00406	50060			
Mon. Site	FLW-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	Notes		
1	0.0361				7.49	8.8			
2	0.0361								
3	0.0365				7.34	8.8			
4	0.0389				7.44	8.8			
5	0.0351				7.51	8.8			
6	0.0355				7.49	8.8			
7	0.0426				7.39	6.1			
8	0.0325				7.44	8.8			
9	0.0325								
10	0.0271				7.5	8.8			
11	0.0296	2.0	1.0	1	7.49	8.8	INF CBOD 270 & T.S.S 200 T.N. 18 & T.P. 5		
12	0.0335				7.41	8.8			
13	0.0283				7.61	8.8			
14	0.0366				7.52	1			
15	0.0292				7.22	0.92			
16	0.0292								
17	0.0505				7.35	0.85			
18	0.0366				7.27	2.01			
19	0.0399				7.39	0.95			
20	0.0481				7.58	0.93			
21	0.0732				7.32	1.01			
22	0.0468				7.22	1.05			
23	0.0468								
24	0.0606				7.33	0.98			
25	0.039	2.2	1.0	1	7.3	1.24			
26	0.0361				7.24	1.02			
27	0.0504				7.17	1.72			
28	0.0463				7.29	1.86			
29	0.0474				7.3	1.99			
30	0.0474								
31	0.1005				7.41	2.11			
Total	1.308900	4.2	2.0	2					
Mo. Avg.	0.042223	2.1	1.0	1		4.37			

PLANT STAFFING:

Lead Operator	Class: <u> C </u>	Certificate No: <u> 25736 </u>	Name: <u> Jason Woods </u>
Day Shift Operator	Class: <u> A </u>	Certificate No: <u> 9151 </u>	Name: <u> Lee Neal </u>
Evening Shift Operator	Class: <u> </u>	Certificate No: <u> </u>	Name: <u> </u>
Night Shift Operator	Class: <u> </u>	Certificate No: <u> </u>	Name: <u> </u>