

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PERMITTEE NAME: Utilities Inc of Florida ADDRESS: 200 Weathersfield Ave Altamonte Springs, FL 32714 FACILITY: Lake Groves WWTF LOCATION: 2425 US Highway 27 Clermont, FL 34714 COUNTY: LAKE	PERMIT NUMBER: FLA010630 LIMIT: FINAL REPORT: Monthly FACILITY TYPE: DW GROUP: Domestic MONITORING GROUP: R-001 DESCRIPTION: R001, Flow to Rapid infiltration basins 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
Flow PARM Code 50050 Y Mon. Site: FLW-4	Sample Measurement	.216				0	5 Days/Week	Calculated
	Permit Requirement	0.5 (Annl Avg)	MGD				(5 Days/Week)	(Calculated)
Flow PARM Code 50050 1 Mon. Site: FLW-4	Sample Measurement	.325				0	5 Days/Week	Calculated
	Permit Requirement	Report (Mo Avg)	MGD				(5 Days/Week)	(Calculated)
BOD, Carbonaceous 5 day, 20C PARM Code 80082 Y Mon. Site: EFA-1	Sample Measurement			8.2		0	1 Weekly	8-hr Flow Proportioned Composite
	Permit Requirement			20.0 (Annl Avg)	mg/L		(1 Weekly)	(8-hr Flow Proportioned Composite)
BOD, Carbonaceous 5 day, 20C PARM Code 80082 A Mon. Site: EFA-1	Sample Measurement			10.0	10.0	8.3	1 Weekly	8-hr Flow Proportioned Composite
	Permit Requirement			60.0 (Maximum)	45.0 (Wkly Avg)	30.0 (Mo Avg)	mg/L	(1 Weekly)

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-1	Sample Measurement					1.9			0	1 Weekly	8-hr Flow Proportioned Composite
	Permit Requirement					20.0 (Annl Avg)		mg/L		(1 Weekly)	(8-hr Flow Proportioned Composite)
Solids, Total Suspended PARM Code 00530 A Mon. Site: EFA-1	Sample Measurement				1.6	1.6	1.2		0	1 Weekly	8-hr Flow Proportioned Composite
	Permit Requirement				60.0 (Maximum)	45.0 (Wkly Avg)	30.0 (Mo Avg)	mg/L		(1 Weekly)	(8-hr Flow Proportioned Composite)
Coliform, Fecal PARM Code 74055 Y Mon. Site: EFA-1	Sample Measurement					<1.0			0	1 Weekly	Grab
	Permit Requirement					200.0 (Annl Avg)		#/100mL		(1 Weekly)	(Grab)
Coliform, Fecal PARM Code 74055 A Mon. Site: EFA-1	Sample Measurement					<1.0	<1.0		0	1 Weekly	Grab
	Permit Requirement					200.0 (Mo Geomn)	800.0 (Maximum)	#/100mL		(1 Weekly)	(Grab)
pH PARM Code 00400 A Mon. Site: EFA-1	Sample Measurement				6.1		8.5		0	5 Days/Week	Grab
	Permit Requirement				6.0 (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-1	Sample Measurement				0.6				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-1	Sample Measurement						15.0		1	1 Weekly	8-hr Flow Proportioned Composite
	Permit Requirement						12.0 (Maximum)	mg/L		(1 Weekly)	(8-hr Flow Proportioned Composite)
Flow PARM Code 50050 Q Mon. Site: FLW-3	Sample Measurement		.589						0	5 Days/Week	Recording Flow Meter with Totalizer
	Permit Requirement		0.999 (Annl Avg)	MGD						(5 Days/Week)	(Recording Flow Meter with Totalizer)
Flow PARM Code 50050 R Mon. Site: FLW-3	Sample Measurement	.654	.642						0	5 Days/Week	Recording Flow Meter with Totalizer
	Permit Requirement	Report (Mo Avg)	Report (Qtr Avg)	MGD						(5 Days/Week)	(Recording Flow Meter with Totalizer)
Percent Capacity, (TMADF/Permitted Capacity) x 100 PARM Code 00180 P Mon. Site: CAL-1	Sample Measurement						64		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 Q Mon. Site: INF-1	Sample Measurement						210		0	1 Weekly	8-hr Flow Proportioned Composite
	Permit Requirement						Report (Maximum)	mg/L		(1 Weekly)	(8-hr Flow Proportioned Composite)
Solids, Total Suspended PARM Code 00530 Q Mon. Site: INF-1	Sample Measurement						250		0	1 Weekly	8-hr Flow Proportioned Composite
	Permit Requirement						Report (Maximum)	mg/L		(1 Weekly)	(8-hr Flow Proportioned Composite)
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT James Kilgore	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 (985) 520-2204	SUBMITTED ON 09/25/2020

Parameter	Monitoring Site	Comments for Monitoring Group - R-001
00620 A	EFA-1	High Nitrate Due to possible toxic Influent causing plant upset.

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Parameter	Sample Measurement / Permit Requirement	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow PARM Code 50050 Y Mon. Site: FLW-2	Sample Measurement	.303				0	5 Days/Week	Recording Flow Meter with Totalizer
	Permit Requirement	0.999 (Annl Avg)	MGD				(5 Days/Week)	(Recording Flow Meter with Totalizer)
Flow PARM Code 50050 1 Mon. Site: FLW-2	Sample Measurement	.216				0	5 Days/Week	Recording Flow Meter with Totalizer
	Permit Requirement	Report (Mo Avg)	MGD				(5 Days/Week)	(Recording Flow Meter with Totalizer)
BOD, Carbonaceous 5 day, 20C PARM Code 80082 Y Mon. Site: EFA-1	Sample Measurement			8.2		0	1 Weekly	8-hr Flow Proportioned Composite
	Permit Requirement			20.0 (Annl Avg)	mg/L		(1 Weekly)	(8-hr Flow Proportioned Composite)
BOD, Carbonaceous 5 day, 20C PARM Code 80082 A Mon. Site: EFA-1	Sample Measurement			10.0	10.0	8.3	1 Weekly	8-hr Flow Proportioned Composite
	Permit Requirement			60.0 (Maximum)	45.0 (Wkly Avg)	30.0 (Mo Avg)	1 Weekly	(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 B Mon. Site: EFB-1	Sample Measurement						<1.0		0	4 Days/Week	Grab
	Permit Requirement						5.0 (Maximum)	mg/L		(4 Days/Week)	(Grab)
Coliform, Fecal PARM Code 74055 A Mon. Site: EFA-1	Sample Measurement						<1.0		0	4 Days/Week	Grab
	Permit Requirement						25.0 (Maximum)	#/100mL		(4 Days/Week)	(Grab)
Coliform, Fecal, % less than detection PARM Code 51005 A Mon. Site: EFA-1	Sample Measurement				100				0	4 Days/Week	Calculated
	Permit Requirement				75.0 (MinTotMo)			percent		(4 Days/Week)	(Calculated)
pH PARM Code 00400 A Mon. Site: EFA-1	Sample Measurement				6.1		8.5		0	5 Days/Week	Grab
	Permit Requirement				6.0 (Minimum)		8.5 (Maximum)	s.u.		(5 Days/Week)	(Grab)
Chlorine, Total Residual PARM Code 50060 A Mon. Site: EFA-1	Sample Measurement				1.0				0	1 Continuous	Meter
	Permit Requirement				1.0 (Minimum)			mg/L		(1 Continuous)	(Meter)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended PARM Code 00530 Q Mon. Site: EFB-1	Sample Measurement						5.000		0	1 Continuous	Meter
	Permit Requirement						Report (Maximum)	mg/L		(1 Continuous)	(Meter)
Nitrogen, Total PARM Code 00600 A Mon. Site: EFA-1	Sample Measurement						17.2		0	1 Bi-weekly; every 2 weeks	16-hr Flow Proportioned Composite
	Permit Requirement						Report (Maximum)	mg/L		(1 Bi-weekly; every 2 weeks)	(16-hr Flow Proportioned Composite)
Phosphorus, Total (as P) PARM Code 00665 A Mon. Site: EFA-1	Sample Measurement						5.1		0	1 Bi-weekly; every 2 weeks	16-hr Flow Proportioned Composite
	Permit Requirement						Report (Maximum)	mg/L		(1 Bi-weekly; every 2 weeks)	(16-hr Flow Proportioned Composite)
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Parameter	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type	
Biosolids Quantity (Transferred)	8.96				0	1 Monthly	Calculated	
PARM Code B0007 + Mon. Site: RMP-1	Report (Mo Total)	ton (d)				(1 Monthly)	(Calculated)	
Biosolids Quantity (Landfilled)	0				0	1 Monthly	Calculated	
PARM Code B0008 + Mon. Site: RMP-1	Report (Mo Total)	ton (d)				(1 Monthly)	(Calculated)	
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