



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

See page 4 for instructions.

**I. General Information for the Month/Year of:** August, 2020

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

|  |  |  |                                |
|--|--|--|--------------------------------|
| PWS Name: Lake Tarpon Mobile Home Village  |  | PWS Identification Number: 6521000             |                                |
| PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> |  |  |                                |
| Number of Service Connections at End of Month: 513 C-23456   |  | Total Population Served at End of Month: 1,282 |                                |
| PWS Owner: Utilities, Inc of Florida   |  |  |                                |
| Contact Person: Patrick C. Flynn   |  | Contact Person's Title: Vice President         |                                |
| Contact Person's Mailing Address: 200 Weathersfield Ave.   |  | City: Altamonte Springs                        | State: Florida Zip Code: 32714 |
| Contact Person's Telephone Number: (866) 842-8432 Ext. 1359  |  | Contact Person's Fax Number: 407-869-6961      |                                |
| Contact Person's E-Mail Address: Patrick.Flynn@uiwater.com   |  |  |                                |

**B. Water Treatment Plant Information**

| Plant Name: Lake Tarpon  |                 | Plant Telephone Number: (866) 842-8432                |                                |                        |
|--|-----------------|---|--------------------------------|------------------------|
| Plant Address: 80 Liberty Way  |                 | City: Palm Harbor                                     | State: Florida Zip Code: 34684 |                        |
| Type of Water Treated 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: 720,000  |                 |   |                                |                        |
| Plant Category (per subsection 62-699.310(4), F.A.C.): IV  |                 | Plant Class (per subsection 62-699.310(4), F.A.C.): C |                                |                        |
| Licensed Operators   | Name            | License Class   | License Number                 | Day(s)/Shift(s) Worked |
| Lead/Chief Operator:   | Jeffrey Becker  | C   | 23456                          | Days: Mon - Sun        |
| Other Operators:   | William Stevens | C   | 14416                          | Days: Mon - Sun        |
|  |                 |   |                                |                        |
|  |                 |   |                                |                        |
|  |                 |   |                                |                        |
|  |                 |   |                                |                        |
|  |                 |   |                                |                        |
|  |                 |   |                                |                        |

**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 retain these additional operations records at the plant site for at least ten

Jeffrey S Becker 9/2/20  
Signature and Date

Jeffrey S Becker  
Printed or Typed Name

C-23456  
License Number

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

PWS Identification Number: 6521000 Plant Name: Lake Tarpon

III. Daily Data for the Month/Year of: August, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: \*  Free Chlorine  Chlorine Dioxide  Ozone  Combine Chlorine (Choramines)  
 Ultraviolet Radiation  Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:  Free Chlorine  Combine Chlorine (Choramines)  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 Demonstrate 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/cm2 | Minimum UV Dose Required, mW-sec/cm2 |  |   |  |
| 1                | X   | 24                       | 26,000                                       |   | 2.8   |  |   |                   |                            |                               |                                      |                                      |  | 1.4   |  |
| 2                |   | 24                       |  |   |   |  |   |                   |                            |                               |                                      |                                      |  |   |  |
| 3                | X   | 24                       | 87,000                                       |   | 2.7   |  |   |                   |                            |                               |                                      |                                      |  | 1.2   |  |
| 4                | X   | 24                       | 32,000                                       |   | 2.9   |  |   |                   |                            |                               |                                      |                                      |  | 1.4   |  |
| 5                | X   | 24                       | 37,000                                       |   | 2.9   |  |   |                   |                            |                               |                                      |                                      |  | 1.4   |  |
| 6                | X   | 24                       | 30,000                                       |   | 2.8   |  |   |                   |                            |                               |                                      |                                      |  | 1.5   |  |
| 7                | X   | 24                       | 28,000                                       |   | 2.9   |  |   |                   |                            |                               |                                      |                                      |  | 1.4   |  |
| 8                | X   | 24                       | 25,000                                       |   | 2.8   |  |   |                   |                            |                               |                                      |                                      |  | 1.4   |  |
| 9                |   | 24                       |  |   |   |  |   |                   |                            |                               |                                      |                                      |  |   |  |
| 10               | X   | 24                       | 90,000                                       |   | 2.9   |  |   |                   |                            |                               |                                      |                                      |  | 1.1   |  |
| 11               | X   | 24                       | 33,000                                       |   | 2.9   |  |   |                   |                            |                               |                                      |                                      |  | 1.3   |  |
| 12               | X   | 24                       | 38,000                                       |   | 2.8   |  |   |                   |                            |                               |                                      |                                      |  | 1.3   |  |
| 13               | X   | 24                       | 38,000                                       |   | 2.9   |  |   |                   |                            |                               |                                      |                                      |  | 1.2   |  |
| 14               | X   | 24                       | 34,000                                       |   | 2.8   |  |   |                   |                            |                               |                                      |                                      |  | 1.3   |  |
| 15               | X   | 24                       | 15,000                                       |   | 2.8   |  |   |                   |                            |                               |                                      |                                      |  | 1.2   |  |
| 16               |   | 24                       |  |   |   |  |   |                   |                            |                               |                                      |                                      |  |   |  |
| 17               | X   | 24                       | 63,000                                       |   | 2.8   |  |   |                   |                            |                               |                                      |                                      |  | 1.3   |  |
| 18               | X   | 24                       | 28,000                                       |   | 2.9   |  |   |                   |                            |                               |                                      |                                      |  | 1.2   |  |
| 19               | X   | 24                       | 24,000                                       |   | 2.8   |  |   |                   |                            |                               |                                      |                                      |  | 1.2   |  |
| 20               | X   | 24                       | 24,000                                       |   | 2.8   |  |   |                   |                            |                               |                                      |                                      |  | 1.3   |  |
| 21               | X   | 24                       | 17,000                                       |   | 2.6   |  |   |                   |                            |                               |                                      |                                      |  | 1.1   |  |
| 22               | X   | 24                       | 26,000                                       |   | 2.7   |  |   |                   |                            |                               |                                      |                                      |  | 1.2   |  |
| 23               |   | 24                       |  |   |   |  |   |                   |                            |                               |                                      |                                      |  |   |  |
| 24               | X   | 24                       | 48,000                                       |   | 2.7   |  |   |                   |                            |                               |                                      |                                      |  | 1.1   |  |
| 25               | X   | 24                       | 20,000                                       |   | 2.7   |  |   |                   |                            |                               |                                      |                                      |  | 1.3   |  |
| 26               | X   | 24                       | 21,000                                       |   | 2.8   |  |   |                   |                            |                               |                                      |                                      |  | 1.0   |  |
| 27               | X   | 24                       | 23,000                                       |   | 2.7   |  |   |                   |                            |                               |                                      |                                      |  | 1.1   |  |
| 28               | X   | 24                       | 25,000                                       |   | 2.7   |  |   |                   |                            |                               |                                      |                                      |  | 1.2   |  |
| 29               | X   | 24                       | 14,000                                       |   | 2.8   |  |   |                   |                            |                               |                                      |                                      |  | 1.3   |  |
| 30               |   | 24                       |  |   |   |  |   |                   |                            |                               |                                      |                                      |  |   |  |
| 31               | X   | 24                       | 57,000                                       |   | 2.7   |  |   |                   |                            |                               |                                      |                                      |  | 1.2   |  |
| Total            |   |                          | 903,000                                      |   |   |  |   |                   |                            |                               |                                      |                                      |  |   |  |
| Average          |   |                          | 30,100                                       |   |   |  |   |                   |                            |                               |                                      |                                      |  |   |  |
| Maximum          |   |                          | 45,000                                       |   |   |  |   |                   |                            |                               |                                      |                                      |  |   |  |

**DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT**

- 6681 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82574
- 4965 SW 41st Blvd • Gainesville, FL 32608 • 352.377.2349 • Fax 352.395.6639 • E82001
- 10200 USA Today Way • Miramar, FL 33025 • 954.889.2288 • Fax 954.889.2281 • E82535
- 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327 • E84589
- 380 Northlake Blvd., Suite 1048 • Altamonte Springs, FL 32701 • 407.937.1594 • E53076
- 2639 N. Monroe St., Suite D, Tallahassee, FL 32303 • 850.219.6274 • Fax 850.219.6275 • E811095
- 13100 Westlinks Terrace, Unit 10, Fort Myers, FL 33913 • 239-674-8130 • Fax 239-674-8128 • E84492



**Advanced Environmental Laboratories, Inc.**

Lab Receipt Date & Time: 06 AUG '20 . 1400

Analysis Date & Time: 8/4/20 1550

Sample Acceptance Criteria:  
 Sample Preservation:  On Ice  Not On Ice  6 °C

Disinfectant Check:  Not Detected  \_\_\_\_\_  
 This Sample does not meet the following NELAC requirements:

Report Number: \_\_\_\_\_ Sub-Contract Lab ID: \_\_\_\_\_

**Analysis Requested:** (check all that apply)

- Total Coliform/*E. coli*  Total Coliform/Fecal  Enterococci  Coliphage  HPC  Other: \_\_\_\_\_

Public Water System (PWS) Name: Lake Tarpon MHP PWS I.D.: 16521000

PWS Address: 36235 US 19 N City: Palm Harbor

PWS or PWS Owner's Phone #: 727-934-9137 Fax #: \_\_\_\_\_

Collector: Jess Becker Collector's Phone #: 410-808-7988

**Type of Supply:** (check only one)

- Community Water System  Non-Transient Non-community Water System  Transient Non-community Water System  
 Limited Use System  Bottled Water  Private Well  Swimming Pool  Other: \_\_\_\_\_

**Reason for Sampling:** (check all that apply)

- Distribution Routine  Distribution Repeat  Raw (triggered or assessment)  Raw (triggered or assessment) additional  Well Survey  
 Clearance  Replacement (also check type of sample being replaced)  Boil Water Notice  Other: \_\_\_\_\_

Sample Collection Date: 8/3/20

DCN#: AD-D045 Effective 01/95, Printable Revision 4/11/17

| Sample # | Sample Point (Location or Specific Address) | Sample Collection Time (24 hr clock) | Sample Type | Disinfectant Residual (mg/L) | pH | To be completed by lab |                |  |                                 |                             |              |
|----------|---|--------------------------------------|-------------|------------------------------|----|------------------------|----------------|--|---------------------------------|-----------------------------|--------------|
|          |   |                                      |             |                              |    | Non-Coliform           | Total Coliform | Fecal/ <i>E. coli</i> , Enterococci, or Coliphage <sup>3</sup> | Analysis Method(s) <sup>2</sup> | Data Qualifier <sup>4</sup> | Lab Sample # |
| 1        | Well 1                                      | 1405                                 | R           | 0                            |    | A                      | A              |  | SM9223B                         |                             | 01           |
| 2        | 37 William Penn                             | 1420                                 | D           | 1.4                          |    | A                      | A              |  |                                 |                             | 02           |
| 3        | 56 Harbor Wy                                | 1430                                 | D           | 1.2                          |    | A                      | A              |  |                                 |                             | 03           |
| 4        | 149 Lake Tarpon                             | 1435                                 | D           | 1.3                          |    | A                      | A              |  |                                 |                             | 04           |

Average of disinfectant residuals for distribution routine & repeat samples.<sup>5</sup>  Free chlorine or  Total chlorine (check one).

**Disinfectant Residual Analysis Method:**  
 DPD Colorimetric  Other: \_\_\_\_\_

**Person performing disinfectant analysis is (Check one of below):**  
 A certified operator (# 23456)  
 Supervised by certified operator (# \_\_\_\_\_)  
 Employed by a certified lab  Employed by DEP or DOH  
 Authorized representative of supplier of water

(INSERT NAME AND MAILING ADDRESS OF PERSON TO RECEIVE REPORT)

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Date and time PWS notified by lab of positive results: \_\_\_\_\_  
 Date and time DEP/DOH notified by lab of positive results: \_\_\_\_\_  
**Lab Signature:** [Signature]  
**Title:** \_\_\_\_\_  
 Date & Time Report Issued: 8/5/20

- Satisfactory DEP/DOH USE ONLY  
 Incomplete Collection Information  
 Repeat Samples Required  
 Replacement Samples Required  
 Date Reviewed by DEP/DOH: \_\_\_\_\_  
 DEP/DOH Reviewing Official: \_\_\_\_\_

1. Indicate the sample type for each sample collected. Sample type codes are: D = Distribution (routine compliance), C = Repeat/Check, R = Raw, N = Entry Point to Distribution, P = Plant Tap, S = Special (clearance, etc.).  
 2. Lab certification number for the listed method is included at top with the laboratory address.  
 3. Please circle appropriate selection.  
 4. Defined in Florida Administrative Code Rule 62-160, Table 1.  
 5. Complete for community & non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.  
 Results Key: A = Coliforms are absent; P = Coliforms are present; C = confluent growth; TNTC = too numerous to count (62-550.730 Reporting Format).

Relinquish By: [Signature]  
 Date: 8/4/20 Time: 1045  
 Received By: [Signature]  
 Date: 8/4/2020 Time: 1150