

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

See page 4 for instructions.

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. General Information for t	he Month/Year of:	August, 2020			, ×	<u> </u>					
A. Public Water System (PWS	S) Information										
PWS Name: UIF - Sanlando PWS Identification Number: 3591121											
PWS Type:	X Community	Non-Transient Non-Commu	mity Tra	Transient Non-Community Consecutive							
Number of Service Connections at End of Month: 7,950				Total Population Served at End of Month: 27,825							
PWS Owner: Utilities Inc.	of Florida										
Contact Person: Patrick Fly											
Contact Person's Mailing A	Address: 200 Weather	rsfield Ave.		: Altamonte Springs	State: Florida	Zip Code: 32714					
Contact Person's Telephone	e Number: (866) 842	2-8432, Ext 1359	Con	Contact Person's Fax Number: (407) 869-6961							
Contact Person's E-Mail A	tact Person's E-Mail Address: Patrick.Flynn@uiwater.com										
3. Water Treatment Plant Info	Water Treatment Plant Information										
Plant Name: Wekiva Hunt Club Plant Telephone Number: (407) 260-5065											
Plant Address: 144 Ledbur	nt Address: 144 Ledbury Dr.			: Longwood	State: Florida	Zip Code: 32779					
Type of Water Treated by I		X Raw Ground Water	Purchased Finished Water								
Permitted Maximum Day (	mitted Maximum Day Operating Capacity of Plant, gallons per day: 11,088,000										
Plant Category (per subsec	tion 62-699.310(4), 1	F.A.C.): V	Plan	Plant Class (per subsection 62-699.310(4), F.A.C.): C							
Licensed Operato	rs	Name	License Cla	ss License Nun		/Shift(s) Worked					
Lead/Chief Operat	or:	Barner Cooks	В	22170	Monday - Frida	у					
Other Operators		Frederick Rodgers	В	13175	Monday - Frida						
Dean Cowart Claude Kirk Stone		Dean Cowart	C	23912		Sunday - Thursday					
		Claude Kirk Stone	C	23200	Monday - Frida	у					
			والمراقع								
			<u> </u>								

## H. 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 years and to make them available for review upon request.

ENVIC C

9/3/20

**Barner Cooks** 

B22170

Signature and Date

Printed or Typed Name

License Number

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PWS I	PWS Identification Number: 3591121 Plant Name: Wekiva Hunt Club									
III. Da	ily Data	for the	Month/Year o	of:	August, 2020					
Means	Means of Achieving Four-Log Virus Inactivation/Removal: *					Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide	Ozone	Ultrafiltration		
	anofiltratio	nn.		Reverse Osmos	is IIV Light Disir	fection Conventional Filtration, Including Lime Softening	Other (Describe)			
			sidual Maintair	ned in Distribution		Free Chlorine Chlorine (Choramines)	Chlorine Dioxide			
1)100	Distinct		Januar Ivianian			onitoring for Systems Using Chemical Disinfection for Virus Inactivation*				
						]				
						Disinfection Segment 1  • DEP-specified minimum residual disinfectant concentration at end of segment:	Larrage Davidsol			
	Days plant			Lowest Residual	Lowest Residual	1.48 mg/l	Lowest Residual Disinfectant			
	staffed or			Disinfectant	Disinfectant	Was the disinfectant residual concentration at the end of the segment ever less	Concentration at			
Day of	Visited by Operator	Hours Plant in	Net Quantity of Finished Water	Concentration at end of Disinfection	Concentration at end of Disinfection	than the DEP-specified minimum during the reporting month? No	Remote Point in Distribution	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System		
Month	(place x )	Operation	Produced, gal	Segment 1, mg/l	Segment 2, mg/l	If yes,	System, mg/L	Components Out of Operation		
1	X	24	4,600,600	2.9		Was it monitored at least every 4 hours until it returned to a value greater than	2.8			
2	X	24	5,069,700			or equal to the DEP-specified minimum?	2.2			
3	X	24	3,173,000	1.9		Was it ever less than the DEP-specified minimum for more than 4 consecutive	2.4			
4	X	24	3,964,000	2.3		hours?	3.3			
5	X	24	4,401,200	2.5		If yes,	3.5			
6	X	24	4,104,800			What was the date and duration of this treatment technique violation?	3.4			
7	X	24	3,335,100	3.2			3.3			
8	X	24	4,293,700			Disinfection Segment 2	1.4			
9	X	24	4,327,700	1.6		<ul> <li>DEP-specified minimum residual disinfectant concentration at end of segment:</li> <li>Was the disinfectant residual concentration at the end of the segment ever less</li> </ul>	2.0			
10	X	24	3,173,000	2.4		than the DEP-specified minimum during the reporting month?	2.7	g 11		
11	X	24	3,964,000	3.0 2.4		If yes, Was it monitored at least every 4 hours until it returned to a value greater than	3.2	Collected bactes #1 - #14		
12	X	24	4,307,200 2,334,800	3.2		or equal to the DEP-specified minimum?	3.5	Collected bactes #15 - #21		
14	X	24	3,219,400			Was it ever less than the DEP-specified minimum for more than 4 consecutive hours?  If yes,	3.5	Collected bactes #15 - #21		
15	X	24	3,896,200	2.7		What was the date and duration of this treatment technique violation?	3.5			
16	X	14	4,081,900	2.6			3.5			
17	X	24	4,429,000			On-Line Disinfectant Analyzers	3.5			
18	X	24	3,566,000			Was continuous residual disinfectant monitoring equipment used during the reporting month? Yes	3.5	Collected bactes #22 - #32		
19	X	24	3,412,100	2.6		reporting monary <u>res</u>	2.8			
20	X	24	4,285,200	3.6		If yes,	2.4			
21	X	24	3,516,600	4.1		Was the calibration of the equipment verified during the month? Yes	2.6			
22	X	24	3,808,800	3.1		Did the equipment fail during the month? No	3.3			
23	X	24	3,759,100	3.6		If yes,	2.5			
24	X	24	3,489,800	2.5		Were grab samples collected every 4 hours until the equipment was returned to	1.8			
25	X	24	3,101,400	4.5		service?	3.5			
26	X	24	3,824,700	3.7		Date the equipment failed:	3.5			
27	X	24	4,224,100	3.5		Date the equipment was returned to service:	3.4			
28	X	24	3,806,600	2.3		Date the equipment was retained to convice.	2.0			
29	X	24	4,277,400				2.0			
30	X	24	4,130,000	2.3			1.8			
31	X	24	3,067,200	2.4			2.2			
Total			118,944,300	-						
Averag	ge		3,836,913	1						

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5,069,700

Maximum