

FLORIDA UTILITY SERVICES 1, LLC  
5911 TROUBLE CREEK RD.  
NEW PORT RICHEY, FL. 34652  
863-904-5574

December 16, 2024

Commission Clerk  
Florida Public Service Commission  
2540 Shumard Oak Blvd.  
Tallahassee, FL. 32399

RECEIVED-FPSC  
2024 DEC 18 PM 3:34  
COMMISSION  
CLERK

**Re: Docket # 20240105**

Dear Commission Clerk:

Enclosed please the company response to Staff's second data request for the above docket file for West Lakeland Wastewater in Polk County Florida.

On behalf of the utility,



Mike Smallridge

1. Please provide an explanation for the sludge removal late fees paid from January 2024 through September 2024.

**Company Response:** A-1 Quality Services, Inc. (A-1) the contractor providing sludge haul service to West Lakeland Wastewater LLC (WLW), charges a 1.5% late fee for each month an invoice is past due. The 1.5% is calculated from the previous month balance that includes previously added late fees.

Given the amount and frequency of sludge hauling required for WLW, the charges have often been more than the Utility can pay within 30 days of invoicing.

Long-term debt is used for purchasing equipment rather than paying operating expenses. Short-term debt in the form of cash loans from the management company is used for unexpected expenses. For this reason, instead of incurring debt, WLW has chosen to incur the late fees while making monthly payments on invoices. In previous years, WLW made partial payments. In 2024, cash flow improved to allow payment in full, though late.

**A-1 recently increased pricing for sludge haul at WLW to \$3520 for all 3 lift stations, before late fees.**

At this time, WLW has only one unpaid sludge haul invoice: **A-1, Invoice 33956, dated 11/25/24, for \$3520** (see attached).

2. Please provide copies of discharge monitoring reports for wastewater from July 1, 2023, through June 30, 2024, (test year) in Microsoft Excel format, if available, which includes the total treated, total wash water, total of each chemical in points, and chemical dosage rates (average).

**Company Response:** Enclosed please find reports.

3. Please provide a written summary, by permit number, of all Department of Environmental Protection, Water Management District, and/or County Health Department permits.

**Company Response:** I have enclosed a copy of the recently renewed DEP permit. FLA-013009

4. Please indicate if any plant addition has been made or will be required due to a written order from a governmental agency, please provide a copy of that order. Please explain if the inflow defender was a plant addition due to a written order, if so please provide the order.

**Company Response:** The utility entered into a settlement agreement with DEP and elected to do in kind projects to upgrade the utility. I have enclosed a copy of the agreement along with a copy of the letter stating the projects are complete.

The Inflow defender was a plant addition made in an effort to combat I & I issues. These were part of the possible solutions after we conducted smoke testing with FRWA.

5. Please provide a list of the remaining service complaints received from July 2019 through October 2021. Please include the date of complaint, an explanation of how each complaint was resolved, and the date of resolution.

**Company Response:** See enclosed.

6. Please provide a list of all wastewater assets owned by the utility, including sewer piping, lift stations, etc.

Example:     200' – 8" PVC (Sewer)  
              250' – 6" PVC Pipe (Sewer)

**Company Response:** See enclosed

7. Please fill out the attached spreadsheet concerning any pro forma items the utility is requesting. Please include any bid proposals or estimates for the pro forma items. If less than three bid proposals were requested for each pro forma item, please explain why. If none, please state so in response to this request.

**Company Response:** None as of this time.

On behalf of the utility,

A handwritten signature in blue ink, appearing to be 'MS', is written over the text 'On behalf of the utility,'.

Michael Smallridge

711

**A-1 QUALITY SERVICES, INC.**  
750 ARIANA AVE.  
AUBURNDALE, FL.33823 US  
+1 8639675150  
aletaburgett@yahoo.com

# Invoice

**BILL TO**  
WEST LAKELAND WASTEWATER  
5911 TROUBLE CREEK RD.  
NEW PORT RICHEY, FL 34652

**SHIP TO**  
WEST LAKELAND WASTEWATER  
5911 TROUBLE CREEK RD.  
NEW PORT RICHEY, FL 34652

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED
33956	11/25/2024	\$3,520.00	12/10/2024	Net 15	

**PMT METHOD**  
Check

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
11/21/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO INTEGRATED WATER SYSTEMS IN PLANT CITY	4,000	0.22	880.00
11/21/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO INTEGRATED WATER SYSTEMS IN PLANT CITY	4,000	0.22	880.00
11/21/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO INTEGRATED WATER SYSTEMS IN PLANT CITY	4,000	0.22	880.00
11/21/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO INTEGRATED WATER SYSTEMS IN PLANT CITY	4,000	0.22	880.00

BALANCE DUE

**\$3,520.00**

**A-1 QUALITY SERVICES, INC.**  
 750 ARIANA AVE.  
 AUBURNDALE, FL.33823 US  
 +1 8639675150  
 aletaburgett@yahoo.com

PAID 6-18-24  
 WITH LATE FEES

711

**Invoice**

**BILL TO**  
 WEST LAKELAND WASTEWATER  
 WEST LAKELAND WASTEWATER,  
 LLC  
 5911 TROUBLE CREEK RD.  
 NEW PORT RICHEY, FL 34652

**SHIP TO**  
 WEST LAKELAND WASTEWATER  
 WEST LAKELAND WASTEWATER,  
 LLC  
 5911 TROUBLE CREEK RD.  
 NEW PORT RICHEY, FL 34652

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED
33711	02/09/2024	\$2,509.62	02/24/2024	Net 15	

**PMT METHOD**  
 Check

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
02/05/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
02/05/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
02/05/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
03/05/2024	LATE FEE 1.5%		1	36.00	36.00
04/05/2024	LATE FEE 1.5%		1	36.54	36.54
05/05/2024	LATE FEE 1.5%		1	37.08	37.08

BALANCE DUE

**\$2,509.62**

PAID →

**A-1 QUALITY SERVICES, INC.**  
 750 ARIANA AVE.  
 AUBURNDALE, FL.33823 US  
 +1 8639675150  
 aletaburgett@yahoo.com

PAID 6-18-24  
 WITH LATE FEES

711

**Invoice**

BILL TO  
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 WEST LAKELAND WASTEWATER,  
 LLC  
 5911 TROUBLE CREEK RD.  
 NEW PORT RICHEY, FL 34652

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 WEST LAKELAND WASTEWATER  
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 LLC  
 5911 TROUBLE CREEK RD.  
 NEW PORT RICHEY, FL 34652

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED
33721	02/22/2024	\$627.40	03/08/2024	Net 15	

**PMT METHOD**  
 Check

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
02/18/2024	<b>EMERGENCY</b>	EMERGENCY CALL TO PUMP LIFTSTATION FOR REPAIR	1	150.00	150.00
02/18/2024	<b>HOURLY TIME</b>	HOURLY TIME ON SITE TO PUMP LIFTSTATION FOR REPAIR	3	150.00	450.00
03/18/2024	<b>LATE FEE 1.5%</b>		1	9.00	9.00
04/18/2024	<b>LATE FEE 1.5%</b>		1	9.13	9.13
05/18/2024	<b>LATE FEE 1.5%</b>		1	9.27	9.27

BALANCE DUE

**\$627.40**

A-1 QUALITY SERVICES, INC.  
750 ARIANA AVE.  
AUBURNDALE, FL.33823 US  
+1 8639675150  
aletaburgett@yahoo.com

PAID 6-18-24  
WITH LATE FEES

711

**Invoice**

BILL TO  
WEST LAKELAND WASTEWATER  
WEST LAKELAND WASTEWATER,  
LLC  
5911 TROUBLE CREEK RD.  
NEW PORT RICHEY, FL 34652

SHIP TO  
WEST LAKELAND WASTEWATER  
WEST LAKELAND WASTEWATER,  
LLC  
5911 TROUBLE CREEK RD.  
NEW PORT RICHEY, FL 34652

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED
33730	02/26/2024	\$810.38	03/12/2024	Net 15	

**PMT METHOD**  
Check

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
02/22/2024	<b>EMERGENCY</b>	EMERGENCY CALL TO PUMP LIFT STATION FOR REPAIR	1	150.00	150.00
02/22/2024	<b>LIFT STATION</b>	LIFTSTATION PUMPED FOR REPAIR AND DISPOSED OF ONSITE - 2.5 HOURS ONSITE	2.50	250.00	625.00
03/22/2024	<b>LATE FEE 1.5%</b>		1	11.62	11.62
04/22/2024	<b>LATE FEE 1.5%</b>		1	11.79	11.79
05/22/2024	<b>LATE FEE 1.5%</b>		1	11.97	11.97

BALANCE DUE

**\$810.38**





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Close

<b>Payee</b>	<b>Amount</b>	<b>Process</b>	<b>Additional items</b>	
A-1 Quality Services <input type="button" value="View"/>	\$3,947.40	6/18/2024	<b>Confirmation #</b>	5266
			<b>From account</b>	West Lakeland
			<b>Est arrival</b>	6/27/2024
			<b>Delivery</b>	Standard
			<b>Invoice/Comment</b>	
			<b>Memo</b>	None

PAD 7-8-24

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A-1 QUALITY SERVICES, INC.  
750 ARIANA AVE.  
AUBURNDALE, FL.33823 US  
+1 8639675150  
aletaburgett@yahoo.com

# Invoice

BILL TO  
WEST LAKELAND WASTEWATER  
WEST LAKELAND WASTEWATER,  
LLC  
5911 TROUBLE CREEK RD.  
NEW PORT RICHEY, FL 34652

SHIP TO  
WEST LAKELAND WASTEWATER  
WEST LAKELAND WASTEWATER,  
LLC  
5911 TROUBLE CREEK RD.  
NEW PORT RICHEY, FL 34652

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED
33744	03/15/2024	\$3,346.17	03/30/2024	Net 15	

**PMT METHOD**  
Check

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
03/05/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
03/05/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
03/05/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
03/05/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
04/05/2024	LATE FEE 1.5%		1	48.00	48.00
05/05/2024	LATE FEE 1.5%		1	48.72	48.72
06/05/2024	LATE FEE 1.5%		1	49.45	49.45

BALANCE DUE

**\$3,346.17**



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Payee	Amount	Process	Additional items	
A-1 Quality Services <input type="text"/>	\$3,346.17	7/8/2024	<b>Confirmation #</b>	5317
			<b>From account</b>	West Lakeland
			<b>Est arrival</b>	7/15/2024
			<b>Delivery</b>	Standard
			<b>Invoice/Comment</b>	
			<b>Memo</b>	None

PAID 8-14-24

711

**A-1 QUALITY SERVICES, INC.**  
750 ARIANA AVE.  
AUBURNDALE, FL.33823 US  
+1 8639675150  
aletaburgett@yahoo.com

# Invoice

**BILL TO**  
WEST LAKELAND WASTEWATER  
5911 TROUBLE CREEK RD.  
NEW PORT RICHEY, FL 34652

**SHIP TO**  
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NEW PORT RICHEY, FL 34652

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED
33787	04/19/2024	\$3,346.17	05/04/2024	Net 15	

**PMT METHOD**  
Check

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
04/16/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
04/16/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
04/16/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
04/16/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
05/16/2024	LATE FEE 1.5%		1	48.00	48.00
06/16/2024	LATE FEE 1.5%		1	48.72	48.72
07/16/2024	LATE FEE 1.5%		1	49.45	49.45

BALANCE DUE

**\$3,346.17**



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Payee	Amount	Process	Additional items	
A-1 Quality Services <input type="button" value="A-1"/>	\$3,346.17	8/15/2024	Confirmation #	5458
			From account	West Lakeland
			Est arrival	8/22/2024
			Delivery	Standard
			Invoice/Comment	
			Memo	None

PAYD 9-6-24

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**A-1 QUALITY SERVICES, INC.**  
750 ARIANA AVE.  
AUBURNDALE, FL.33823 US  
+1 8639675150  
aletaburgett@yahoo.com

# Invoice

**BILL TO**  
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NEW PORT RICHEY, FL 34652

**SHIP TO**  
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NEW PORT RICHEY, FL 34652

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED
33819	05/24/2024	\$3,296.72	06/08/2024	Net 15	

**PMT METHOD**  
Check

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
05/22/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
05/22/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
05/22/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
05/22/2024	Truck Load	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
06/24/2024	LATE FEE 1.5%		1	48.00	48.00
07/24/2024	LATE FEE 1.5%		1	48.72	48.72

BALANCE DUE

**\$3,296.72**



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Payee	Amount	Process	Additional items	
A-1 Quality Services <input type="button" value="Menu"/>	\$3,296.72	9/6/2024	Confirmation #	5522
			From account	West Lakeland
			Est arrival	9/13/2024
			Delivery	Standard
			Invoice/Comment	
			Memo	None

PAID 10-22-24

711

**A-1 QUALITY SERVICES, INC.**  
750 ARIANA AVE.  
AUBURNDALE, FL.33823 US  
+1 8639675150  
aletaburgett@yahoo.com

# Invoice

BILL TO  
**WEST LAKELAND WASTEWATER**  
5911 TROUBLE CREEK RD.  
NEW PORT RICHEY, FL 34652

SHIP TO  
**WEST LAKELAND WASTEWATER**  
5911 TROUBLE CREEK RD.  
NEW PORT RICHEY, FL 34652

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED
33847	07/15/2024	\$3,346.17	07/30/2024	Net 15	

**PMT METHOD**  
Check

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
07/10/2024	<b>Truck Load</b>	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
07/10/2024	<b>Truck Load</b>	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
07/11/2024	<b>Truck Load</b>	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
07/11/2024	<b>Truck Load</b>	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
08/15/2024	<b>LATE FEE 1.5%</b>		1	48.00	48.00
09/15/2024	<b>LATE FEE 1.5%</b>		1	48.72	48.72
10/15/2024	<b>LATE FEE 1.5%</b>		1	49.45	49.45
<b>BALANCE DUE</b>					<b>\$3,346.17</b>





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Payee	Amount	Process	Additional items	
A-1 Quality Services <input type="button" value="back"/>	\$3,346.17	10/22/2024	<b>Confirmation #</b>	5648
			<b>From account</b>	West Lakeland
			<b>Est arrival</b>	10/29/2024
			<b>Delivery</b>	Standard
			<b>Invoice/Comment</b>	
			<b>Memo</b>	None

PAID 11-14-24

711

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AUBURNDALE, FL.33823 US  
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NEW PORT RICHEY, FL 34652

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NEW PORT RICHEY, FL 34652

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED
33886	09/08/2024	\$3,248.00	09/23/2024	Net 15	

**PMT METHOD**  
Check

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
08/30/2024	<b>Truck Load</b>	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
08/30/2024	<b>Truck Load</b>	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
08/30/2024	<b>Truck Load</b>	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
09/02/2024	<b>Truck Load</b>	GALLONS HAULED BY A-1 QUALITY SERVICES TO RMF PLANT FLAO16228 FOR STABILIZATION	4,000	0.20	800.00
10/02/2024	<b>LATE FEE 1.5%</b>		1	48.00	48.00
<b>BALANCE DUE</b>					<b>\$3,248.00</b>



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Payee	Amount	Process	Additional items	
A-1 Quality Services <input type="button" value="Details"/>	\$3,248.00	11/14/2024	Confirmation #	5730
			From account	West Lakeland
			Est arrival	11/21/2024
			Delivery	Standard
			Invoice/Comment	
			Memo	None

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

**When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926**

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A

REPORT: Monthly  
 GROUP: Domestic


MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Restricted Spray field (R-001)  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 7/01/23 TO 7/31/23

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, To R-001	Sample Measurement	0.055				0		
PARM No. 50050 Y Mon. Site No. FLW-01	Permit Measurement	0.070 (An Avg.)	MGD				5 days/week	Calculation
Flow	Sample Measurement	0.067				0		
PARM No. 50050 Mon. Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	MGD				5 days/week	Meter
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.69		0		
PARM No. 80082 Y Mon. Site No. EFA-01	Permit Measurement			20.0 (An. Avg.)	mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			<2.0	<2.0	0		
PARM No. 80082 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.) mg/L		Monthly	Grab
Solids, Total Suspended	Sample Measurement			4.33		0		
PARM No. 00530 Y Mon. Site No. EFA-01	Permit Measurement			30.0 (An. Avg.)	mg/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement			2.2	2.2	0		
PARM No. 00530 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.) mg/L		Monthly	Grab

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS /OPERATOR		863-965-2599	08/22/23

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Village of Lakeland WWTF

MONITORING GROUP NUMBER: R-001

PERMIT NO.: FLA013009-009-DW3P/NRL

Monitoring Period 7/01/23 TO 7/31/23

Parameter		Quality or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					1.00		0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Measurement					200 (An. Avg.)	#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement					<1		0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Measurement					800 (Max.)	#/100mL		Monthly	Grab
PH	Sample Measurement				7.4	7.6		0		
PARM No. 00400 A Mon. Site No. EFA-01	Permit Measurement				6.0 (Min.)	8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				0.9			0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Measurement				0.5 (Min.)		mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					0.31		0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Measurement					1.0 (Max.)			Monthly	Grab
Flow, Total Plant	Sample Measurement	0.067	0.059					0		
PARM Code 50050 P Mon. Site No. FLW-01	Permit Measurement	Report (Mo. Avg)	0.070 (3Mo. Avg.)	MGD					5 Days/Week	Meter
Percent Capacity, (3MRADF/Permitted Capacity) x100	Sample Measurement					83.8		0		
PARM Code 00180 Mon Site No. FLW-01	Permit Measurement					Report (Mo. Avg.)	percent		Monthly	Calculated

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A  
 REPORT: Monthly  
 GROUP: Domestic

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Influent  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 7/01/23 TO 7/31/23

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801  
 COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement					0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			MNR Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement					0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement			MNR Report (Max.)	mg/L		Annually	Grab

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS /OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Chris Nichols</i>	TELEPHONE NO. 863-965-2599	DATE (MM/DD/YY) 08/22/23
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PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A

REPORT: Monthly  
 GROUP: Domestic

MONITORING GROUP NUMBER: RMP-Q  
 MONITORING GROUP DESC: Biosolids Quantity  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

Monitoring Period 7/01/23 TO 7/31/23

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	0				0		
PARM Code B0008 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement	0				0		
PARM Code B0007 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated

I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS / OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Chris Nichols</i>	TELEPHONE NO. 863-965-2599	DATE (MM/DD/YY) 08/22/23
--	--	-------------------------------	-----------------------------

XXXX\*8.34(lb/gal)\*0.015(given average solids)/2000(lb/ton)= XXX DRY TONS  
 PA File No.: FLA013009-009-DW3P/NRL  
 DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

### DAILY SAMPLE RESULTS - PART B

Permit No.: FLA013009-009-DW3P/NRL  
 Monitoring Period 7/01/23 TO 7/31/23

Facility: Village of Lakeland

Code	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine Total Residual (For Disinfection) mg/L	Coliform Fecal #/100ml	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	NOTES
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	
1							0.079	
2							0.057	
3							0.057	
4		0.9				7.5	0.057	
5		1.1				7.5	0.058	
6		1.2				7.5	0.052	
7		1.8				7.6	0.047	
8		1.5				7.5	0.035	
9							0.068	
10		1.0				7.5	0.068	
11		1.3				7.4	0.035	
12		1.4				7.5	0.110	
13		1.3				7.5	0.067	
14		1.4				7.5	0.092	
15							0.084	
16							0.084	
17		1.0				7.5	0.084	
18		1.3				7.4	0.097	
19		1.8				7.5	0.090	
20		1.9				7.6	0.080	
21		1.4				7.5	0.067	
22							0.069	
23							0.069	
24		1.0				7.4	0.069	
25	<2.0	3.3	<1	0.31	2.2	7.6	0.045	
26		2.8				7.5	0.065	
27		4.4				7.6	0.048	
28		4.0				7.5	0.059	
29							0.063	
30							0.063	
31		1.6				7.5	0.063	
<b>Total</b>	<2.0		<1	0.31	2.2		2.084	
<b>Mo. Avg.</b>	<2.0		<1	0.31	2.2		0.067	

**PLANT STAFFING:**

Day Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Evening Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Night Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Lead Operator      Class:   C   Certificate No:   23671   Name:   CHRIS NICHOLS  

'A File No.: FLA013009-009-DW3P/NRL

MR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration



**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER:  
 LIMIT: Final  
 CLASS SIZE: N/A

FLA013009-009-DW3P/NRL  
 REPORT: Monthly  
 GROUP: Domestic

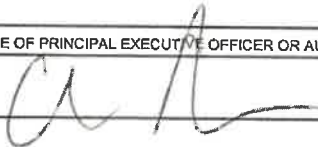
MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Restricted Spray field (R-001)  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 8/01/23 TO 8/31/23

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, To R-001	Sample Measurement	0.054				0		
PARM No. 50050 Y Mon. Site No. FLW-01	Permit Measurement	0.070 (An. Avg.)	MGD				5 days/week	Calculation
Flow	Sample Measurement	0.047				0		
PARM Code 50050 J Mon Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	MGD				5 days/week	Meter
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.71		0		
PARM No. 80082 Y Mon. Site No. EFA-01	Permit Measurement			20.0 (An. Avg.)	mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.6	2.6	0		
PARM No. 80082 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.)	mg/L	Monthly	Grab
Solids, Total Suspended	Sample Measurement			4.43		0		
PARM No. 00530 Y Mon. Site No. EFA-01	Permit Measurement			20.0 (An. Avg.)		mg/L	Monthly	Calculation
Solids, Total Suspended	Sample Measurement			2.4	2.4	0		
PARM No. 00530 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.)	mg/L	Monthly	Grab

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS /OPERATOR		863-965-2699	09/22/23

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Village of Lakeland WWTF

MONITORING GROUP NUMBER: R-001  
Monitoring Period 8/01/23 TO 8/31/23

PERMIT NO.: FLA013009-009-DW3P/NRL

Parameter		Quality or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				1.00			0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Measurement				200 (An. Avg.)		#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement					<1		0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Measurement					100 (Max.)	#/100mL		Monthly	Grab
PH	Sample Measurement				7.4	7.6		0		
PARM No. 00400 A Mon. Site No. EFA-01	Permit Measurement				6.0 (Min.)	8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				1.0			0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Measurement				0.5 (Min.)		mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					0.50		0		
PARM Code 00620 A Site No. EFA-01	Permit Measurement					12.0 (Max.)			Monthly	Grab
Flow, Total Plant	Sample Measurement	0.047	0.062					0		
PARM Code 50050 P Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	0.070 (3Mo. Avg.)	MGD					5 Days/Week	Meter
Percent Capacity, (3MRADE/Permitted Capacity) x100	Sample Measurement					88.1		0		
PARM Code 00180 Mon Site No. FLW-01	Permit Measurement					Report (Mo. Avg.)	percent		Monthly	Calculated

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

**When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926**

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Influent  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 8/01/23 TO 8/31/23

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement			MNR Report (Max.)	mg/L	0	Annually	Grab
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement							
Solids, Total Suspended (Influent)	Sample Measurement			MNR Report (Max.)	mg/L	0	Annually	Grab
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement							

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NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS /OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE NO. 863-965-2599	DATE (MM/DD/YY) 09/22/23
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PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

**When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926**

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic

MONITORING GROUP NUMBER: RMP-Q  
 MONITORING GROUP DESC: Biosolids Quantity  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801


Monitoring Period 8/01/23 TO 8/31/23

COUNTY: Polk

OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	0				0		
PARM Code B0008 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement	1				0		
PARM Code B0007 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS /OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE NO. 863-965-2599	DATE (MM/DD/YY) 09/22/23
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$16,000 * 8.34 (\text{lb/gal}) * 0.015 (\text{given average solids}) = 2000 (\text{lb/ton}) = 1.0 \text{ DRY TONS}$

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DAILY SAMPLE RESULTS - PART B**

Permit No.: FLA013009-009-DW3P/NRL

Facility: Village of Lakeland

Monitoring Period 8/01/23 TO 8/31/23

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine Total Residual (For Disinfection) mg/L	Coliform Fecal #/100ml	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	NOTES
Code	80082	50060	74055	00620	00530	00400	50050	
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	
1		1.2				7.4	0.050	
2		1.0				7.4	0.044	
3		1.4				7.5	0.084	
4		1.8				7.5	0.058	
5							0.055	
6							0.055	
7		1.0				7.5	0.055	
8		1.6				7.5	0.048	
9		1.8				7.6	0.046	
10		1.6				7.5	0.037	
11		1.7				7.5	0.045	
12							0.044	
13							0.044	
14		1.0				7.4	0.044	16,000 GAL HAULED A-1
15		1.7				7.5	0.042	
16		1.8				7.5	0.036	
17		1.3				7.6	0.040	
18		1.6				7.5	0.053	
19							0.045	
20							0.045	
21		1.1				7.5	0.045	
22		1.3				7.5	0.034	
23		1.9				7.6	0.048	
24	2.6	2.1	<1	0.50	2.4	7.5	0.032	
25		2.3				7.5	0.047	
26							0.042	
27							0.042	
28		1.6				7.5	0.042	
29		1.0				7.5	0.031	
30		1.6				7.5	0.057	
31		1.8				7.5	0.066	
Total	2.6		<1	0.50	2.4		1.455	
Mo. Avg.	2.6		<1	0.50	2.4		0.047	

**PLANT STAFFING:**

Day Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Evening Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Night Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Lead Operator      Class:   C   Certificate No:   23671   Name:   CHRIS NICHOLS  

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER:  
 LIMIT: Final  
 CLASS SIZE: N/A

FLA013009-009-DW3P/NRL  
 REPORT: Monthly  
 GROUP: Domestic


MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Restricted Spray field (R-001)  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 9/01/23 TO 9/30/23

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, To R-001	Sample Measurement	0.052				0		
PARM No. 50050 Y Mon. Site No. FLW-01	Permit Measurement	0.070 (An. Avg.)	MGD				5 days/week	Calculation
Flow	Sample Measurement	0.066				0		
PARM No. 50050 I Mon. Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	MGD				5 days/week	Meter
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.59		0		
PARM No. 80082 Y Mon. Site No. EFA-01	Permit Measurement			20.0 (An. Avg.)	mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			<2.0		0		
PARM No. 80082 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	mg/L		Monthly	Grab
Solids, Total Suspended	Sample Measurement			4.28		0		
PARM No. 00530 Y Mon. Site No. EFA-01	Permit Measurement			30.0 (An. Avg.)	mg/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement			<1.0		0		
PARM No. 00530 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	mg/L		Monthly	Grab

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS /OPERATOR		863-965-2599	10/22/23

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Village of Lakeland WWTF

MONITORING GROUP NUMBER: R-001  
Monitoring Period 9/01/23 TO 9/30/23

PERMIT NO.: FLA013009-009-DW3P/NRL

Parameter		Quality or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					1.00		0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Measurement					200 (An. Avg.)	#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement					<1		0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Measurement					800 (Max.)	#/100mL		Monthly	Grab
PH	Sample Measurement				7.5	7.6		0		
PARM No. 00400 A Mon. Site No. EFA-01	Permit Measurement				6.0 (Min.)	8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				0.6			0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Measurement				0.5 (Min.)		mg/l		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					0.20		0		
PARM Code 00620 A Site No. EFA-01	Permit Measurement					12.0 (Max.)			Monthly	Grab
Flow, Total Plant	Sample Measurement	0.066	0.060					0		
PARM Code 50050 P Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	0.070 (3Mo. Avg.)	MGD					5 Days/Week	Meter
Percent Capacity, (3MRADE/Permitted Capacity) x100	Sample Measurement					85.7		0		
PARM Code 00180 Mon Site No. FLW-01	Permit Measurement					Report (Mo. Avg.)	percent		Monthly	Calculated

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A  
 REPORT: Monthly  
 GROUP: Domestic

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Influent  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 9/01/23 TO 9/30/23

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement					0		
PARM Code 80082 G Mon. Site No. INF- 01	Permit Requirement			MNR Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement					0		
PARM Code 00530 G Mon. Site No. INF- 01	Permit Requirement			MNR Report (Max.)	mg/L		Annually	Grab

I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS /OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE NO. 863-965-2599	DATE (MM/DD/YY) 10/22/23
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PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994



**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A

REPORT: Monthly  
 GROUP: Domestic


MONITORING GROUP NUMBER: RMP-Q  
 MONITORING GROUP DESC: Biosolids Quantity  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801  
 COUNTY: Polk  
 OFFICE: Southwest District

Monitoring Period 9/01/23 TO 9/30/23

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	0				0		
PARM Code B0008 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement	1				0		
PARM Code B0007 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS /OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE NO. 863-965-2599	DATE (MM/DD/YY) 10/22/23
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$16,000 * 8.34 (\text{lb/gal}) * 0.015 (\text{given average solids}) / 2000 (\text{lb/ton}) = 1.0 \text{ DRY TONS}$

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

### DAILY SAMPLE RESULTS - PART B

Permit No.: FLA013009-009-DW3P/NRL

Facility: Village of Lakeland

Monitoring Period 9/01/23 TO 9/30/23

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine Total Residual (For Disinfection) mg/L	Coliform Fecal #/100ml	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	NOTES
Code	80082	50060	74055	00620	00530	00400	50050	
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	
1		1.5				7.5	0.075	
2							0.076	
3							0.076	
4		1.1				7.5	0.076	
5		1.5				7.6	0.056	
6		1.3				7.5	0.054	
7		1.4				7.5	0.047	
8		1.0				7.5	0.061	16,000 GAL HAULED A-1
9							0.036	
10							0.036	
11		0.6				7.5	0.036	
12		1.3				7.5	0.093	
13		1.7				7.6	0.077	
14		1.8				7.5	0.077	
15		1.6				7.5	0.060	
16							0.064	
17							0.064	
18		0.8				7.5	0.064	
19		1.6				7.6	0.048	
20		1.1				7.5	0.050	
21		1.1				7.5	0.105	
22		1.8				7.6	0.113	
23							0.080	
24							0.080	
25		1.1				7.5	0.080	
26	<2.0	3.0	<1	0.20	<1.0	7.6	0.053	
27		2.5				7.5	0.077	
28		2.7				7.5	0.068	
29		2.2				7.6	0.047	
30							0.061	
<b>Total</b>	<2.0		<1	0.20	<1.0		1.992	
<b>Mo. Avg.</b>	<2.0		<1	0.20	<1.0		0.066	

**PLANT STAFFING:**

Day Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Evening Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Night Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Lead Operator      Class:   C   Certificate No:   23671   Name:   CHRIS NICHOLS  

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER:  
 LIMIT: Final  
 CLASS SIZE: N/A

FLA013009-009-DW3P/NRL  
 REPORT: Monthly  
 GROUP: Domestic

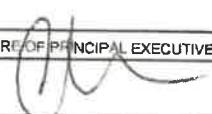
MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Restricted Spray field (R-001)  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 10/01/23 TO 10/31/23

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, To R-001	Sample Measurement	0.051				0		
PARM No. 50050 Y Mon. Site No. FLW-01	Permit Measurement	0.070 (An Avg.)	MGD				5 days/week	Calculation
Flow	Sample Measurement	0.049				0		
PARM Code 50050 I Mon Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	MGD				5 days/week	Meter
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.45		0		
PARM No. 80082 Y Mon. Site No. EFA-01	Permit Measurement			30.0 (An. Avg.)	mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.4	4.4	0		
PARM No. 80082 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.) mg/L		Monthly	Grab
Solids, Total Suspended	Sample Measurement			4.52		0		
PARM No. 00530 Y Mon. Site No. EFA-01	Permit Measurement			20.0 (An. Avg.)			Monthly	Calculation
Solids, Total Suspended	Sample Measurement			4.6	4.6	0		
PARM No. 00530 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.) mg/L		Monthly	Grab

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS /OPERATOR		863-965-2599	11/22/23

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Village of Lakeland WWTF

MONITORING GROUP NUMBER: R-001  
Monitoring Period 10/01/23 TO 10/31/23

PERMIT NO.: FLA013009-009-DW3P/NRL

Parameter		Quality or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				1.00			0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Measurement				200 (An. Avg.)		#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement				<1			0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Measurement				800 (Max.)		#/100mL		Monthly	Grab
PH	Sample Measurement				7.5	7.6		0		
PARM No 00400 A Mon. Site No. EFA-01	Permit Measurement				6.0 (Min.)	8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				0.6			0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Measurement				0.5 (Min.)		mg/l.		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					<0.092		0		
PARM Code 00620 A Site No. EFA-01	Permit Measurement					12.0 (Max.)			Monthly	Grab
Flow, Total Plant	Sample Measurement	0.049	0.054					0		
PARM Code 50050 P Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	0.070 (3Mo. Avg.)	MGD					5 Days/Week	Meter
Percent Capacity, (3MRADF/Permitted Capacity) x100	Sample Measurement					77.1		0		
PARM Code 00180 Mon Site No. FLW-01	Permit Measurement					Report (Mo. Avg.)	percent		Monthly	Calculated

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Influent  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 10/01/23 TO 10/31/23

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801  
 COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement			MNR		0		
PARM Code 80082 G Mon Site No. INF- 01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement			MNR		0		
PARM Code 00530 G Mon Site No. INF- 01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab

I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS /OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE NO. 863-965-2599	DATE (MM/DD/YY) 11/22/23
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PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A

REPORT: Monthly  
 GROUP: Domestic

MONITORING GROUP NUMBER: RMP-Q  
 MONITORING GROUP DESC: Biosolids Quantity  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

Monitoring Period 10/01/23 TO 10/31/23

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	0				0		
PARM Code B0008 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement	0				0		
PARM Code B0007 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS /OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE NO. 863-965-2599	DATE (MM/DD/YY) 11/22/23
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XXX\*8.34(lb/gal)\*0.015(given average solids)/2000(lb/ton)= XXX DRY TONS

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DAILY SAMPLE RESULTS - PART B**

Permit No.: FLA013009-009-DW3P/NRL  
 Monitoring Period 10/01/23 TO 10/31/23

Facility: Village of Lakeland

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine Total Residual (For Disinfection) mg/L	Coliform Fecal #/100ml	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	NOTES
Code	80082	50060	74055	00620	00530	00400	50050	
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	
1							0.073	
2		1.0				7.5	0.073	
3		1.3				7.5	0.054	
4		1.6				7.5	0.054	
5		1.1				7.5	0.051	
6		1.3				7.6	0.049	
7							0.051	
8							0.051	
9		0.9				7.5	0.051	
10		0.6				7.6	0.032	
11		1.0				7.6	0.053	
12		1.1				7.5	0.057	
13		1.5				7.6	0.053	
14							0.052	
15							0.052	
16		1.0				7.5	0.052	
17		1.4				7.5	0.045	
18		1.9				7.6	0.044	
19		1.7				7.5	0.047	
20		1.3				7.5	0.047	
21							0.045	
22							0.045	
23		1.1				7.5	0.045	
24	4.4	2.8	<1	<0.092	4.6	7.6	0.031	
25		2.3				7.5	0.051	
26		1.3				7.5	0.041	
27		1.6				7.5	0.038	
28							0.044	
29							0.044	
30		1.2				7.5	0.044	
31		1.6				7.5	0.041	
<b>Total</b>	<b>4.4</b>		<b>&lt;1</b>	<b>&lt;0.092</b>	<b>4.6</b>		<b>1.512</b>	
<b>Mo. Avg.</b>	<b>4.4</b>		<b>&lt;1</b>	<b>&lt;0.092</b>	<b>4.6</b>		<b>0.049</b>	

**PLANT STAFFING:**

Day Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Evening Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Night Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Lead Operator      Class: C Certificate No: 23671 Name: CHRIS NICHOLS

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER:  
 LIMIT: Final  
 CLASS SIZE: N/A

FLA013009-009-DW3P/NRL  
 REPORT: Monthly  
 GROUP: Domestic


MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Restricted Spray field (R-001)  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period: 11/01/23 TO 11/30/23

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, To R-001	Sample Measurement	0.049				0		
PARM No. 50050 Y Mon. Site No. FLW-01	Permit Measurement	0.070 (An. Avg.)	MGD				5 days/week	Calculation
Flow	Sample Measurement	0.043				0		
PARM No. 30050 I Mon. Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	MGD				5 days/week	Meter
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.14		0		
PARM No. 80082 Y Mon. Site No. EFA-01	Permit Measurement			20.0 (An. Avg.)	mg/l		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.1		0		
PARM No. 80082 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.)	mg/l	Monthly	Grab
Solids, Total Suspended	Sample Measurement			4.13		0		
PARM No. 00550 Y Mon. Site No. EFA-01	Permit Measurement			30.0 (An. Avg.)		mg/l	Monthly	Calculation
Solids, Total Suspended	Sample Measurement			1.6		0		
PARM No. 00550 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.)	mg/l	Monthly	Grab

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS /OPERATOR		863-965-2599	12/22/23

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):



**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Village of Lakeland WWTF

MONITORING GROUP NUMBER: R-001  
Monitoring Period 11/01/23 TO 11/30/23

PERMIT NO.: FLA013009-009-DW3P/NRL

Parameter		Quality or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				1.00			0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Measurement				200 (An. Avg.)		#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement				<1			0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Measurement				800 (Max.)		#/100mL		Monthly	Grab
PH	Sample Measurement				7.2	7.6		0		
PARM No. 00400 A Mon. Site No. EFA-01	Permit Measurement				6.0 (Min.)	8.5 (Max.)	S.U.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				1.1			0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Measurement				0.5 (Min.)		mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					<0.092		0		
PARM Code 00620 A Site No. EFA-01	Permit Measurement					120 (Max.)			Monthly	Grab
Flow, Total Plant	Sample Measurement	0.043	0.053					0		
PARM Code 50050 P Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	0.070 (3Mo. Avg.)	MGD					5 Days/Week	Meter
Percent Capacity, (3MRADF/Permitted Capacity) x100	Sample Measurement					75.2		0		
PARM Code 00180 Mon Site No, FLW-01	Permit Measurement					Report (Mo. Avg.)	percent		Monthly	Calculated

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

**When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926**

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Influent

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 11/01/23 TO 11/30/23

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement			MNR		0		
PARM Code 80082 G Mon. Site No. INF- 01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement			MNR		0		
PARM Code 00530 G Mon. Site No. INF- 01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS /OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Chris Nichols</i>	TELEPHONE NO. 863-965-2599	DATE (MM/DD/YY) 12/22/23
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PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201 LIMIT: Final REPORT: Monthly  
 Auburndale, FL 33823 CLASS SIZE: N/A GROUP: Domestic

MONITORING GROUP NUMBER RMP-Q  
 MONITORING GROUP DESC Biosolids Quantity

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 11/01/23 TO 11/30/23

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	0				0		
PARM Code B0008 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement	2.0				0		
PARM Code B0007 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS /OPERATOR	<i>Chris Nichols</i>	863-965-2599	12/22/23

32000\*8.34(lb/gal)\*0.015(given average solids)=2000(lb/ton)= 2.0 DRY TONS  
 PA File No.: FLA013009-009-DW3P/NRL  
 DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DAILY SAMPLE RESULTS - PART B**

Permit No.: FLA013009-009-DW3P/NRL  
 Monitoring Period 11/01/23 TO 11/30/23

Facility: Village of Lakeland

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine Total Residual (For Disinfection) mg/L	Coliform Fecal #/100ml	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	NOTES
Code	80082	50060	74055	00620	00530	00400	50050	
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	
1		1.8				7.5	0.043	
2		1.6				7.5	0.040	
3		1.4				7.6	0.042	16000 GAL HAULED A1
4							0.042	
5							0.042	
6		1.7				7.6	0.042	
7		1.4				7.5	0.032	
8		1.6				7.5	0.049	
9		1.3				7.5	0.039	
10		3.1				7.5	0.042	
11							0.049	
12							0.049	
13		1.6				7.5	0.049	
14		1.3				7.6	0.035	
15		1.7				7.6	0.047	
16	4.1	2.8	<1	<0.092	1.6	7.6	0.038	
17		2.3				7.6	0.055	
18							0.048	
19							0.048	
20		1.1				7.6	0.048	
21		1.6				7.6	0.039	
22		1.2				7.5	0.044	
23		1.3				7.5	0.030	
24		1.3				7.6	0.047	
25							0.046	
26							0.046	
27		1.4				7.5	0.046	16000 GAL HAULED A1
28		1.5				7.2	0.030	
29		1.5				7.6	0.043	
30		1.2				7.5	0.035	
Total	4.1		<1	<0.092	1.6		1.285	
Mo. Avg.	4.1		<1	<0.092	1.6		0.043	

**PLANT STAFFING:**

Day Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Evening Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Night Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Lead Operator      Class: C Certificate No: 23671 Name: CHRIS NICHOLS

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A

REPORT: Monthly  
 GROUP: Domestic

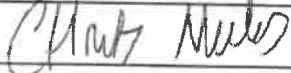
MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Restricted Spray field (R-001)  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 12/01/23 TO 12/31/23

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, To R-001	Sample Measurement	0.049				0		
PARM No. 50050 Y Mon. Site No. FLW-01	Permit Measurement	(An Avg.)	MGD				5 days/week	Calculation
Flow	Sample Measurement	0.045				0		
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	MGD				5 days/week	Meter
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.38		0		
PARM No. 80082 Y Mon. Site No. EFA-01	Permit Measurement			(An Avg.)	mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			9.4		0		
PARM No. 80082 A Mon. Site No. EFA-01	Permit Measurement			(Mo. Avg.) (Max.)	mg/L		Monthly	Grab
Solids, Total Suspended	Sample Measurement			4.05		0		
PARM No. 00530 Y Mon. Site No. EFA-01	Permit Measurement			(An Avg.)	mg/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement			2.0		0		
PARM No. 00530 A Mon. Site No. EFA-01	Permit Measurement			(Mo. Avg.) (Max.)	mg/L		Monthly	Grab

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS /OPERATOR		863-965-2599	1/22/24

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Village of Lakeland WWTF

MONITORING GROUP NUMBER: R-001  
Monitoring Period 12/01/23 TO 12/31/23

PERMIT NO.: FLA013009-009-DW3P/NRL

Parameter		Quality or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				1.08			0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Measurement				200 (An. Avg.)		#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement					2		0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Measurement					800 (Max.)	#/100mL		Monthly	Grab
PH	Sample Measurement				7.5	7.6		0		
PARM No. 00400 A Mon. Site No. EFA-01	Permit Measurement				6.0 (Min.)	8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				1.1			0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Measurement				0.5 (Min.)		mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					<0.092		0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Measurement					12.0 (Max.)			Monthly	Grab
Flow, Total Plant	Sample Measurement	0.045	0.046					0		
PARM Code 50050 P Mon. Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	0.070 (3Mo. Avg.)	MGD					5 Days/Week	Meter
Percent Capacity, (3MRADF/Permitted Capacity) x100	Sample Measurement					65.2		0		
PARM Code 00180 Mon Site No, FLW-01	Permit Measurement					Report (Mo. Avg.)	percent		Monthly	Calculated

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

**When Completed mail this report to:** Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A  
 REPORT: Monthly  
 GROUP: Domestic

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Influent  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 12/01/23 TO 12/31/23

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement					0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			MNR Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement					0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement			MNR Report (Max.)	mg/L		Annually	Grab

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NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS / OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Chris Nichols</i>	TELEPHONE NO. 863-965-2599	DATE (MM/DD/YY) 1/22/24
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PA File No.: FLA013009-009-DW3P/NRL  
 DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A  
 REPORT: Monthly  
 GROUP: Domestic

MONITORING GROUP NUMBER: RMP-Q  
 MONITORING GROUP DESC: Biosolids Quantity  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

Monitoring Period 12/01/23 TO 12/31/23

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	0						
PARM Code B0008 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons			0	Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement	2.0						
PARM Code B0007 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons			0	Monthly	Calculated

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NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS / OPERATOR	<i>Chris Nichols</i>	863-985-2599	1/22/24

$32000 * 8.34 (\text{lb/gal}) * 0.015 (\text{given average solids}) / 2000 (\text{lb/ton}) = 2.0 \text{ DRY TONS}$

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration



**DAILY SAMPLE RESULTS - PART B**

Permit No.: FLA013009-009-DW3P/NRL  
 Monitoring Period 12/01/23 TO 12/31/23

Facility: Village of Lakeland

Code	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine Total Residual (For Disinfection) mg/L	Coliform Fecal #/100ml	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	NOTES
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	
1		1.6				7.5	0.041	
2							0.040	
3							0.040	16000 GAL HAULED A1
4		1.2				7.5	0.040	
5		1.6				7.5	0.038	
6		1.9				7.6	0.040	
7		1.5				7.5	0.035	
8		1.1				7.5	0.037	
9							0.044	
10							0.044	
11		1.2				7.5	0.044	
12		1.5				7.6	0.037	
13		1.2				7.5	0.044	
14		1.6				7.5	0.042	
15		3.5				7.5	0.033	
16							0.059	
17							0.059	
18		1.9				7.6	0.059	
19		1.3				7.5	0.051	
20		1.9				7.5	0.052	
21	9.4	1.9	2.0	<0.092	2.0	7.5	0.038	
22		1.6				7.5	0.056	
23							0.049	
24							0.049	
25		1.1				7.5	0.049	
26		1.3				7.5	0.039	
27		1.7				7.5	0.045	16000 GAL HAULED A1
28		1.9				7.6	0.035	
29		1.7				7.5	0.054	
30							0.043	
Total	9.4		2.0	<0.092	2.0		1.383	
Mo. Avg.	9.4		2.0	<0.092	2.0		0.045	

**PLANT STAFFING:**

Day Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Evening Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Night Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Lead Operator      Class: C Certificate No: 23671 Name: CHRIS NICHOLS

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A

REPORT: Monthly  
 GROUP: Domestic


MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Restricted Spray field (R-001)  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 1/01/24 TO 1/31/24

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, To R-001	Sample Measurement	0.049				0		
PARM No. 50050 Y Mon. Site No. FLW-01	Permit Measurement	0.070 (An. Avg.)	MGD				5 days/week	Calculation
Flow	Sample Measurement	0.045				0		
PARM Code 50050 I Mon. Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	MGD				5 days/week	Meter
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.48		0		
PARM No. 80082 Y Mon. Site No. EFA-01	Permit Measurement			20.0 (An. Avg.)	mg/l		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			5.6	5.6	0		
PARM No. 80082 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.) mg/L		Monthly	Grab
Solids, Total Suspended	Sample Measurement			2.90		0		
PARM No. 00530 Y Mon. Site No. EFA-01	Permit Measurement			30.0 (An. Avg.)	mg/l		Monthly	Calculation
Solids, Total Suspended	Sample Measurement			6.2	6.2	0		
PARM No. 00530 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.) mg/L		Monthly	Grab

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS /OPERATOR		863-985-2599	2/22/24

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Village of Lakeland WWTF

MONITORING GROUP NUMBER: R-001

PERMIT NO.: FLA013009-009-DW3P/NRL

Monitoring Period 1/01/24 TO 1/31/24

Parameter		Quality or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				1.08			0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Measurement				200 (An. Avg.)		#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement				<1			0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Measurement				800 (Max.)		#/100mL		Monthly	Grab
PH	Sample Measurement			7.5	7.6			0		
PARM No. 00400 A Mon. Site No. EFA-01	Permit Measurement			6.0 (Min.)	8.5 (Max.)		s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			1.1				0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Measurement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					<0.092		0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Measurement					12.0 (Max.)			Monthly	Grab
Flow, Total Plant	Sample Measurement	0.045	0.044					0		
PARM Code 50050 P Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	0.070 (3Mo. Avg.)	MGD					5 Days/Week	Meter
Percent Capacity, (3MRADF/Permitted Capacity) x100	Sample Measurement					63.3		0		
PARM Code 00180 Mon Site No. FLW-01	Permit Measurement					Report (Mo. Avg.)	percent		Monthly	Calculated

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

**When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926**

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A  
 REPORT: Monthly  
 GROUP: Domestic

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Influent  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 1/01/24 TO 1/31/24

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801  
 COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement				MNR	0		
PARM Code 80082 G Mon. Site No. INF- 01	Permit Requirement				Report (Max.)	mg/L	Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement				MNR	0		
PARM Code 00530 G Mon. Site No. INF- 01	Permit Requirement				Report (Max.)	mg/L	Annually	Grab

I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS / OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Chris Nichols</i>	TELEPHONE NO. 863-965-2599	DATE (MM/DD/YY) 2/22/24
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PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME:	West Lakeland Wastewater, LLC	PERMIT NUMBER:	FLA013009-009-DW3P/NRL
MAILING ADDRESS:	1902 Barton Park Road, Suite 201 Auburndale, FL 33823	LIMIT: Final	REPORT: Monthly
		CLASS SIZE: N/A	GROUP: Domestic

MONITORING GROUP NUMBER	RMP-Q
MONITORING GROUP DESC	Biosolids Quantity
RE-SUBMITTED DMR:	
NO DISCHARGE FROM SITE	

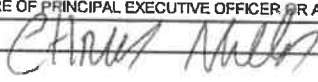
FACILITY LOCATION: Village of Lakeland WWTF  
3580 Lazy Lake Drive South  
Eaton Park, FL 33801

Monitoring Period 1/01/24 TO 1/31/24

COUNTY: Polk  
OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	0				0		
PARM Code B0008 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement	0				0		
PARM Code B0007 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated

I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS /OPERATOR		863-965-2599	2/22/24

XXXX\*8.34(lb/gal)\*0.015(given average solids)/2000(lb/ton)= XXX DRY TONS

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DAILY SAMPLE RESULTS - PART B**

Permit No.: FLA013009-009-DW3P/NRL  
 Monitoring Period 1/01/24 TO 1/31/24

Facility: Village of Lakeland

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine Total Residual (For Disinfection) mg/L	Coliform Fecal #/100ml	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	NOTES
Code	80082	50060	74055	00620	00530	00400	50050	
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	
1		1.6				7.5	0.041	
2							0.040	
3							0.040	16000 GAL HAULED A1
4		1.2				7.5	0.040	
5		1.6				7.5	0.038	
6		1.9				7.6	0.040	
7		1.5				7.5	0.035	
8		1.1				7.5	0.037	
9							0.044	
10							0.044	
11		1.2				7.5	0.044	
12		1.5				7.6	0.037	
13		1.2				7.5	0.044	
14		1.6				7.5	0.042	
15		3.5				7.5	0.033	
16							0.059	
17							0.059	
18		1.9				7.6	0.059	
19		1.3				7.5	0.051	
20		1.9				7.5	0.052	
21		1.9				7.5	0.038	
22		1.6				7.5	0.056	
23							0.049	
24							0.049	
25	5.6	1.1	<1	<0.092	6.2	7.5	0.049	
26		1.3				7.5	0.039	
27		1.7				7.5	0.045	
28		1.9				7.6	0.035	
29		1.7				7.5	0.054	
30							0.043	
31							0.043	
Total	5.6		<1	<0.092	6.2		1.383	
Mo. Avg.	5.6		<1	<0.092	6.2		0.045	

**PLANT STAFFING:**

Day Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Evening Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Night Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Lead Operator      Class:   C   Certificate No:   23671   Name:   CHRIS NICHOLS  

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A

REPORT: Monthly  
 GROUP: Domestic

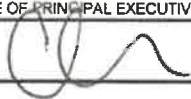
MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Restricted Spray field (R-001)  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 2/01/24 TO 2/29/24

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, To R-001	Sample Measurement	0.049				0		
PARM No. 50050 Y Mon. Site No. FLW-01	Permit Measurement	(An. Avg.)	MGD				5 days/week	Calculation
Flow	Sample Measurement	0.042				0		
PARM Code 50050 I Mon. Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	MGD				5 days/week	Meter
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.25		0		
PARM No. 80081 Y Mon. Site No. EFA-01	Permit Measurement			20.0 (An. Avg.)	mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			5.8	5.8	0		
PARM No. 80082 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.)	mg/L	Monthly	Grab
Solids, Total Suspended	Sample Measurement			3.00		0		
PARM No. 00530 Y Mon. Site No. EFA-01	Permit Measurement			20.0 (An. Avg.)	mg/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement			2.2	2.2	0		
PARM No. 00530 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.)	mg/L	Monthly	Grab

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS /OPERATOR		863-965-2599	3/22/24

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Village of Lakeland WWTF

MONITORING GROUP NUMBER: R-001  
Monitoring Period 2/01/24 TO 2/29/24

PERMIT NO.: FLA013009-009-DW3P/NRL

Parameter		Quality or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					1.08		0		
PARM Code 74055 Y Mon Site No. EFA-01	Permit Measurement					200 (An Avg.)	#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement					1		0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Measurement					800 (Max)	#/100mL		Monthly	Grab
PH	Sample Measurement				7.2	7.5		0		
PARM No. 00400 A Mon Site No. EFA-01	Permit Measurement				6.0 (Min)	8.5 (Max)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				0.8			0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Measurement				0.5 (Min.)		mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					0.092		0		
PARM Code 00620 A Site No. EFA-01	Permit Measurement					12.0 (Max.)			Monthly	Grab
Flow, Total Plant	Sample Measurement	0.042	0.044					0		
PARM Code. 50030 P Site No. FLW-01	Permit Measurement	Report (Mo Avg)	0.070 (3Mo Avg.)	MGD					5 Days/Week	Meter
Percent Capacity, (3MRADF/Permitted Capacity) x100	Sample Measurement					62.9		0		
PARM Code 00180 Mon Site No. FLW-01	Permit Measurement					Report (Mo Avg)	percent		Monthly	Calculated

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994



**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A  
 REPORT: Monthly  
 GROUP: Domestic

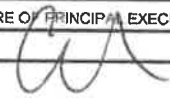
MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Influent  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 2/01/24 TO 2/29/24

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement			339		0		
PARM Code 80082 G Mon. Site No. INF- 01	Permit Requirement			Report (Max.)	mg/l.		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement			210		0		
PARM Code 00530 G Mon. Site No. INF- 01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab

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NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS /OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE NO. 863-965-2599	DATE (MM/DD/YY) 3/22/24
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PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

**When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926**

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A

REPORT: Monthly  
 GROUP: Domestic

MONITORING GROUP NUMBER: RMP-Q  
 MONITORING GROUP DESC: Biosolids Quantity  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

Monitoring Period 2/01/24 TO 2/29/24

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	0				0		
PARM Code B0008 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement	0				0		
PARM Code B0007 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated

I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS /OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE NO. 863-965-2599	DATE (MM/DD/YY) 3/22/24
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XXXX\*8.34(lb./gal)\*0.015(given average solids)/2000 (lb./ton) = XXX DRY TONS

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994



## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER:  
 LIMIT: Final  
 CLASS SIZE: N/A

FLA013009-009-DW3P/NRL  
 REPORT: Monthly  
 GROUP: Domestic

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Restricted Spray field (R-001)

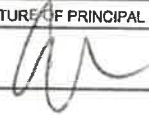
FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 3/01/24 TO 3/31/24

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, To R-001	Sample Measurement	0.050				0		
PARM No. 50050 Y Mon. Site No. FLW-01	Permit Measurement	0.070 (An Avg.)	MGD				5 days/week	Calculation
Flow	Sample Measurement	0.043				0		
PARM Code 50050 J Mon. Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	MGD				5 days/week	Alert
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.18		0		
PARM No. 80082 Y Mon. Site No. EFA-01	Permit Measurement			20.0 (An Avg.)	mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			6.5		0		
PARM No. 80082 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.) mg/L		Monthly	Grab
Solids, Total Suspended	Sample Measurement			2.80		0		
PARM No. 00530 Y Mon. Site No. EFA-01	Permit Measurement			20.0 (An Avg.)	mg/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement			2.4		0		
PARM No. 00530 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.) mg/L		Monthly	Grab

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NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS /OPERATOR		863-965-2599	4/22/24

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Village of Lakeland WWTF

MONITORING GROUP NUMBER: R-001  
Monitoring Period 3/01/24 TO 3/31/24

PERMIT NO.: FLA013009-009-DW3P/NRL

Parameter		Quality or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				1.08			0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Measurement				200 (An. Avg.)		#/100ml		Monthly	Calculation
Coliform, Fecal	Sample Measurement				<1			0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Measurement				800 (Max.)		#/100ml		Monthly	Grab
PH	Sample Measurement			7.3	7.5			0		
PARM No. 00400 A Mon. Site No. EFA-01	Permit Measurement			6.0 (Min.)	8.5 (Max.)		s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			1.0				0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Measurement			0.5 (Min.)			mg/l		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					0.16		0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Measurement					12.0 (Max.)			Monthly	Grab
Flow, Total Plant	Sample Measurement	0.043	0.043					0		
PARM Code 50050 P Mon. Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	0.070 (3Mo. Avg.)	MGD					5 Days/Week	Meter
Percent Capacity, (3MRADF/Permitted Capacity) x100	Sample Measurement					61.9		0		
PARM Code 00180 Mon Site No. FLW-01	Permit Measurement					Report (Mo. Avg.)	percent		Monthly	Calculated

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A  
 REPORT: Monthly  
 GROUP: Domestic


MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Influent  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 3/01/24 TO 3/31/24

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement					0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			MNR Report (Max.)	mg/l		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement					0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement			MNR Report (Max.)	mg/l		Annually	Grab

I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS / OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE NO. 863-965-2599	DATE (MM/DD/YY) 4/22/24
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PA File No.: FLA013009-009-DW3P/NRL  
 DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

**When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926**

PERMITTEE NAME: West Lakland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A  
 REPORT: Monthly  
 GROUP: Domestic

MONITORING GROUP NUMBER: RMP-Q  
 MONITORING GROUP DESC: Biosolids Quantity  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE

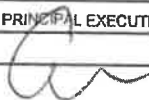
FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

Monitoring Period 3/01/24 TO 3/31/24

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	0				0		
PARM Code B0008 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement	0				0		
PARM Code B0007 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS /OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE NO. 863-965-2599	DATE (MM/DD/YY) 4/22/24
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XXXX\*8.34(lb/gal)\*0.015(given average solids)/2000(lb/ton)= XXX DRY TONS

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DAILY SAMPLE RESULTS - PART B**

Permit No.: FLA013009-009-DW3P/NRL  
 Monitoring Period 3/01/24 TO 3/31/24

Facility: Village of Lakeland

Code	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine Total Residual (For Disinfection) mg/L	Coliform Fecal #/100ml	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	NOTES
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	
1		1.3				7.5	0.045	
2							0.043	
3							0.043	
4		1.1				7.4	0.043	
5		1.0				7.3	0.045	
6		1.4				7.3	0.050	
7		1.1				7.4	0.056	
8		1.2				7.3	0.056	
9							0.052	
10							0.052	
11		1.1				7.4	0.052	
12		1.6				7.4	0.041	
13		1.4				7.5	0.045	
14		1.1				7.5	0.041	
15		1.5				7.4	0.038	
16							0.045	
17							0.045	
18		1.6				7.4	0.045	
19		1.3				7.5	0.032	
20		1.5				7.5	0.032	
21		1.5				7.4	0.038	
22		1.4				7.5	0.041	
23							0.043	
24							0.043	
25		1.1				7.5	0.043	
26		1.3				7.4	0.032	
27		2.3				7.4	0.042	
28	6.5	2.5	<1	0.16	2.4	7.5	0.037	
29		2.1				7.4	0.046	
30							0.038	
31							0.038	
Total	6.5		<1	0.16	2.4		1.343	
Mo. Avg.	6.5		<1	0.16	2.4		0.043	

**PLANT STAFFING:**

Day Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Evening Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Night Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Lead Operator      Class:   C   Certificate No:   23671   Name:   CHRIS NICHOLS  

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994



**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER:  
 LIMIT: Final  
 CLASS SIZE: N/A

FLA013009-009-DW3P/NRL  
 REPORT: Monthly  
 GROUP: Domestic


MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Restricted Spray field (R-001)  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period: 4/01/24 TO 4/30/24

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, To R-001	Sample Measurement	0.050				0		
PARM No. 50050 Y Mon. Site No. FLW-01	Permit Measurement	0.070 (An. Avg.)	MGD				5 days/week	Calculation
Flow	Sample Measurement	0.041				0		
PARM Code: 80050 Mon. Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	MGD				5 days/week	Meter
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.37		0		
PARM No. 80082 Y Mon. Site No. EFA-01	Permit Measurement			30.0 (An. Avg.)	mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			6.0	6.0	0		
PARM No. 80082 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.)		Monthly	Grab
Solids, Total Suspended	Sample Measurement			2.93		0		
PARM No. 00530 Y Mon. Site No. EFA-01	Permit Measurement			20.0 (An. Avg.)	mg/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement			2.5	2.5	0		
PARM No. 00530 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.)		Monthly	Grab

I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS / OPERATOR		863-965-2599	5/22/24

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Village of Lakeland WWTF

MONITORING GROUP NUMBER: R-001  
Monitoring Period 4/01/24 TO 4/30/24

PERMIT NO.: FLA013009-009-DW3P/NRL

Parameter		Quality or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				1.08			0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Measurement				200 (Ar. Avg.)		#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement				<1			0		
PARM Code 74053 A Mon. Site No. EFA-01	Permit Measurement				500 (Max.)		#/100mL		Monthly	Grab
PH	Sample Measurement			7.3	7.6			0		
PARM No. 00400 A Mon. Site No. EFA-01	Permit Measurement			6.0 (Min.)	8.5 (Max.)		s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			1.0				0		
PARM Code 50460 A Mon. Site No. EFA-01	Permit Measurement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					<0.092		0		
PARM Code 00620 A Site No. EFA-01	Permit Measurement					12.0 (Max.)			Monthly	Grab
Flow, Total Plant	Sample Measurement	0.041	0.042					0		
PARM Code 50050 P Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	0.070 (3Mo. Avg.)	MGD					5 Days/Week	Meter
Percent Capacity, (3MRADF/Permitted Capacity) x100	Sample Measurement					60.0		0		
PARM Code 00180 Mon Site No. FLW-01	Permit Measurement				Report (Mo. Avg.)	percent			Monthly	Calculated

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Influent


FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 4/01/24 TO 4/30/24

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement			MNR		0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement			MNR		0		
PARM Code 0053 D Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab

I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS /OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE NO. 863-965-2599	DATE (MM/DD/YY) 5/22/24
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PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A  
 REPORT: Monthly  
 GROUP: Domestic

MONITORING GROUP NUMBER: RMP-Q  
 MONITORING GROUP DESC: Biosolids Quantity  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

Monitoring Period 4/01/24 TO 4/30/24

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	0				0		
PARM Code B0008 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement	0.75				0		
PARM Code B0007 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS /OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Chris Nichols</i>	TELEPHONE NO. 863-965-2599	DATE (MM/DD/YY) 5/22/24
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12,000\*8.34(lb/gal)\*0.015 (given average solids)/2000(lb/ton)= 0.75 DRY TONS  
 PA File No.: FLA013009-009-DW3P/NRL  
 DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DAILY SAMPLE RESULTS - PART B**

Permit No.: FLA013009-009-DW3P/NRL  
 Monitoring Period 4/01/24 TO 4/30/24

Facility: Village of Lakeland

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine Total Residual (For Disinfection) mg/L	Coliform Fecal #/100ml	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	NOTES
Code	80082	50060	74055	00620	00530	00400	50050	
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	
1		1.3				7.5	0.056	
2		1.6				7.4	0.037	
3		1.9				7.5	0.040	
4		1.6				7.5	0.044	
5		1.3				7.5	0.046	
6							0.044	
7							0.044	
8		1.3				7.5	0.044	
9		1.4				7.5	0.045	
10		1.7				7.4	0.048	
11		1.1				7.5	0.034	
12		1.3				7.5	0.052	
13							0.047	
14							0.047	
15		1.3				7.4	0.047	
16		1.3				7.5	0.038	
17		1.1				7.4	0.041	
18	6.0	2.1	<1	<0.092	2.5	7.5	0.031	
19		2.3				7.5	0.040	
20							0.040	
21							0.040	
22		1.1				7.5	0.040	
23		1.5				7.6	0.041	
24		1.6				7.5	0.040	
25		1.4				7.5	0.036	
26		1.1				7.4	0.032	
27							0.039	
28							0.039	
29		1.0				7.4	0.039	
30		1.8				7.3	0.032	
Total	6.0		<1	<0.092	2.5		1.242	
Mo. Avg.	6.0		<1	<0.092	2.5		0.041	

**PLANT STAFFING:**

Day Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Evening Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Night Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Lead Operator      Class: C Certificate No: 23671 Name: CHRIS NICHOLS

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A

REPORT: Monthly  
 GROUP: Domestic

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Restricted Spray field (R-001)  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period: 5/01/24 TO 5/31/24

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, To R-001	Sample Measurement	0.050				0		
PARM No. 50050 Y Mon. Site No. FLW-01	Permit Measurement	0.070 (An. Avg.)	MGD				5 days/week	Calculation
Flow	Sample Measurement	0.038				0		
PARM Code 50050 I Mon. Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	MGD				5 days/week	Meter
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.47		0		
PARM No. 80082 Y Mon. Site No. EFA-01	Permit Measurement			30.0 (An. Avg.)	mg/L		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.2	3.2	0		
PARM No. 80082 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.) mg/L		Monthly	Grab
Solids, Total Suspended	Sample Measurement			2.69		0		
PARM No. 00530 Y Mon. Site No. EFA-01	Permit Measurement			30.0 (An. Avg.)	mg/L		Monthly	Calculation
Solids, Total Suspended	Sample Measurement			2.2	2.2	0		
PARM No. 00530 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.) mg/L		Monthly	Grab

I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS /OPERATOR	<i>Chris Nichols</i>	863-965-2599	6/25/24

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Village of Lakeland WWTF

MONITORING GROUP NUMBER: R-001  
Monitoring Period 5/01/24 TO 5/31/24

PERMIT NO.: FLA013009-009-DW3P/NRL

Parameter		Quality or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					1.08		0		
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Measurement					200 (An. Avg.)	#/100mL		Monthly	Calculation
Coliform, Fecal	Sample Measurement					<1		0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Measurement					500 (Max.)	#/100mL		Monthly	Grab
PH	Sample Measurement				7.3	7.8		0		
PARM No. 00400 A Mon. Site No. EFA-01	Permit Measurement				6.0 (Min.)	8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				0.8			0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Measurement				0.5 (Min.)		mg/l.		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement					<0.092		0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Measurement					12.0 (Max.)			Monthly	Grab
Flow, Total Plant	Sample Measurement	0.038	0.041					0		
PARM Code 50050 P Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	0.070 (3Mo. Avg.)	MGD					5 Days/Week	Meter
Percent Capacity, (3MRADF/Permitted Capacity) x 100	Sample Measurement					58.1		0		
PARM Code 00180 Mon Site No. FLW-01	Permit Measurement					Report (Mo. Avg.)	percent		Monthly	Calculated

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Influent  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 5/01/24 TO 5/31/24

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement			MNR Report (Max.)		0		
PARM Code 80082 G Mon. Site No. INF- 01	Permit Requirement				mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement			MNR Report (Max.)		0		
PARM Code 00530 G Mon. Site No. INF- 01	Permit Requirement				mg/L		Annually	Grab

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS /OPERATOR	<i>Chris Nichols</i>	863-965-2599	6/25/24

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994



**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME:	West Lakeland Wastewater, LLC	PERMIT NUMBER:	FLA013009-009-DW3P/NRL
MAILING ADDRESS:	1902 Barton Park Road, Suite 201 Auburndale, FL 33823	LIMIT:	Final
		CLASS SIZE:	N/A
		REPORT:	Monthly
		GROUP:	Domestic

FACILITY LOCATION:	Village of Lakeland WWTF 3580 Lazy Lake Drive South Eaton Park, FL 33801	MONITORING GROUP NUMBER:	RMP-Q
		MONITORING GROUP DESC:	Biosolids Quantity
		RE-SUBMITTED DMR:	NO DISCHARGE FROM SITE
COUNTY:	Polk	Monitoring Period	5/01/24 TO 5/31/24
OFFICE:	Southwest District		

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	0				0		
PARM Code B0008 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement	1.0				0		
PARM Code B0007 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS /OPERATOR	<i>Chris Nichols</i>	863-965-2599	6/25/24

16,000\*8.34(lb gal)\*0.015(given average solids)=2000(lb/ton)= 1.0 DRY TONS  
 PA File No.: FLA013009-009-DW3P/NRL  
 DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DAILY SAMPLE RESULTS - PART B**

Permit No.: FLA013009-009-DW3P/NRL

Facility: Village of Lakeland

Monitoring Period 5/01/24 TO 5/31/24

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine Total Residual (For Disinfection) mg/L	Coliform Fecal #/100ml	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.	Flow MGD	NOTES
Code	80082	50060	74055	00620	00530	00400	50050	
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	
1		2.3				7.4	0.035	
2		0.8				7.3	0.039	
3		1.8				7.3	0.030	
4							0.040	
5							0.040	
6		1.2				7.4	0.040	
7		1.4				7.4	0.035	
8		0.9				7.3	0.037	
9		2.9				7.4	0.009	
10		2.4				7.5	0.060	
11							0.037	
12							0.037	
13		0.9				7.4	0.037	
14		1.3				7.5	0.031	
15		1.5				7.5	0.038	
16	3.2	3.1	<1	<0.092	2.2	7.5	0.037	
17		2.0				7.5	0.047	
18							0.040	
19							0.040	
20		1.1				7.5	0.040	
21		1.6				7.5	0.037	
22		1.3				7.5	0.037	16,000 GALS, A-1
23		1.7				7.5	0.038	
24		1.8				7.4	0.033	
25							0.041	
26							0.041	
27		1.2				7.5	0.041	
28		1.6				7.4	0.038	
29		2.0				7.4	0.039	
30		1.7				7.5	0.036	
31		0.8				7.8	0.049	
Total	3.2		<1	<0.092	2.2		1.180	
Mo. Avg.	3.2		<1	<0.092	2.2		0.038	

**PLANT STAFFING:**

Day Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Evening Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Night Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Lead Operator      Class: C Certificate No: 23671 Name: CHRIS NICHOLS

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A

REPORT: Monthly  
 GROUP: Domestic

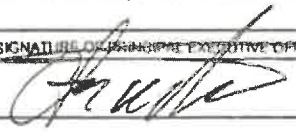
MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Restricted Spray field (R-001)  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period: 6/01/24 TO 6/30/24

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow, To R-001	Sample Measurement	0.048				0		
PARAM No. 50030 9 Mon. Site No. FLW-01	Permit Measurement	0.070 (An. Avg.)	MGD				5 days/week	Calculation
Flow	Sample Measurement	0.050				0		
PARAM No. 50030 1 Mon. Site No. FLW-01	Permit Measurement	Report (Mo. Avg.)	MGD				5 days/week	Meter
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.77		0		
PARAM No. 50032 7 Mon. Site No. EFA-01	Permit Measurement			20.0 (An. Avg.)	mg/l		Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement			5.6	5.6	0		
PARAM No. 50032 A Mon. Site No. EFA-01	Permit Measurement			30.0 (Mo. Avg.)	60.0 (Max.)	mg/L	Monthly	Grab
Solids, Total Suspended	Sample Measurement			2.61		0		
PARAM No. 50030 9 Mon. Site No. EFA-01	Permit Measurement			20.0 (An. Avg.)		mg/L	Monthly	Calculation
Solids, Total Suspended	Sample Measurement			2.0	2.0	0		
PARAM No. 50030 A Mon. Site No. EFA-01	Permit Measurement			20.0 (Mo. Avg.)	40.0 (Max.)	mg/L	Monthly	Grab

I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS /OPERATOR		863-865-2599	7/23/24

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: Village of Lakeland WWTF

MONITORING GROUP NUMBER: R-001  
Monitoring Period 6/01/24 TO 6/30/24

PERMIT NO.: FLA013009-009-DW3P/NRL

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement			1.08		0		
PARM Code 74055 Mon. Site No. EFA-01	Y Permit Measurement			200 (An. Avg.)	#/100ml.		Monthly	Calculation
Coliform, Fecal	Sample Measurement			<1		0		
PARM Code 74055 Mon. Site No. EFA-01	A Permit Measurement			800 (Max.)	#/100ml.		Monthly	Grab
PH	Sample Measurement			7.4		0		
PARM No. 00400 Mon. Site No. EFA-01	A Permit Measurement			6.0 (Min.)			5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			0.8		0		
PARM Code 50060 A Mon. Site No. EFA-01	A Permit Measurement			0.5 (Min.)	mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement			<0.092		0		
PARM Code 00620 A Site No. EFA-01	Mon. Permit Measurement			12.0 (Max.)			Monthly	Grab
Flow, Total Plant	Sample Measurement	0.050	0.043			0		
PARM Code 50030 P Site No. FLW-01	Mon. Permit Measurement	Report (Mo. Avg.)	0.070 (3Mo. Avg.)	MOD			5 Days/Week	Motor
Percent Capacity, (3MRADF/Permitted Capacity) x100	Sample Measurement					0		
PARM Code 00180 Mon Site No. FLW-01	I Permit Measurement				61.4 Report (Mo. Avg.)	percent	Month	Calculated

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A


REPORT: Monthly  
 GROUP: Domestic

MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Influent  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE  
 Monitoring Period 6/01/24 TO 6/30/24

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801  
 COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement			MNR		0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement			MNR		0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L		Annually	Grab

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <b>CHRIS NICHOLS /OPERATOR</b>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE NO. 863-865-2599	DATE (MM/DD/YY) 7/23/24
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PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 29, 1994

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

When Completed mail this report to: Department of Environmental Protection, 13051 Temple Terrace, FL 33637-0926

PERMITTEE NAME: West Lakeland Wastewater, LLC  
 MAILING ADDRESS: 1902 Barton Park Road, Suite 201  
 Auburndale, FL 33823

PERMIT NUMBER: FLA013009-009-DW3P/NRL  
 LIMIT: Final  
 CLASS SIZE: N/A

REPORT: Monthly  
 GROUP: Domestic

MONITORING GROUP NUMBER: RMP-Q  
 MONITORING GROUP DESC: Biosolids Quantity  
 RE-SUBMITTED DMR:  
 NO DISCHARGE FROM SITE

FACILITY LOCATION: Village of Lakeland WWTF  
 3580 Lazy Lake Drive South  
 Eaton Park, FL 33801

Monitoring Period 6/01/24 TO 6/30/24

COUNTY: Polk  
 OFFICE: Southwest District

Parameter		Quality or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	0				0		
PARM Code B0008 + Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement	1.0				0		
PARM Code B0007 Mon. Site No. RMP - 001	Permit Requirement	Report (Mo. Total)	dry tons				Monthly	Calculated

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 gather and evaluate 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 fines and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (MM/DD/YY)
CHRIS NICHOLS /OPERATOR		863-965-2599	7/23/24

16,000\*8.34(lb/gal)\*0.015(given average solids)/2000(lb/ton)= 1.0 DRY TONS  
 PA File No.: FLA013009-009-DW3P/NRL  
 DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 28, 1994

### DAILY SAMPLE RESULTS - PART B

Permit No.: FLA013009-009-DW3P/NRL  
 Monitoring Period 6/01/24 TO 6/30/24

Facility: Village of Lakeland

Code	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine Total Residual (For Disinfection) mg/L	Coliform Fecal #/100ml	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH	s.u.	Flow MGD	NOTES
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	FLW-01	
1								0.040	
2								0.040	
3		0.8					7.7	0.040	
4		1.2					7.5	0.058	
5		1.4					7.5	0.009	
6		1.1					7.4	0.032	
7		2.3					7.4	0.037	
8								0.040	
9								0.040	
10		1.3					7.5	0.040	
11		1.6					7.5	0.035	
12		2.3					7.6	0.048	
13	5.6	1.6	<1	<0.092	2.0		7.5	0.045	
14		1.4					7.5	0.060	
15								0.059	
16								0.059	
17		1.1					7.4	0.059	
18		1.6					7.6	0.038	
19		1.7					7.6	0.053	
20		1.4					7.5	0.053	
21		1.5					7.5	0.037	
22								0.068	
23								0.068	
24		1.1					7.5	0.068	
25		1.5					7.5	0.071	
26		1.5					7.6	0.071	
27		1.1					7.5	0.060	
28		1.3					7.5	0.060	
29								0.062	
30								0.062	
Total	5.6		<1	<0.092	2.0			1.514	
Mo. Avg.	5.6		<1	<0.092	2.0			0.050	

**PLANT STAFFING:**

Day Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Evening Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Night Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Lead Operator      Class: C Certificate No: 23671 Name: CHRIS NICHOLS

PA File No.: FLA013009-009-DW3P/NRL

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DEP Form 62-620.910(10), Effective Nov. 28, 1994



# FLORIDA DEPARTMENT OF Environmental Protection

Southwest District  
13051 N Telecom Pkwy, Suite 101  
Temple Terrace, Florida 33637-9260

**Ron DeSantis**  
Governor

**Jeanette Nuñez**  
Lt. Governor

**Shawn Hamilton**  
Secretary

November 18, 2024

In the Matter of an  
Application for Permit by:

West Lakeland Wastewater LLC  
Michael A Smallridge, As Receiver  
5911 Trouble Creek Road  
New Port Richey, Florida 34652  
(352) 340 - 6032  
[compliance@fusillc.com](mailto:compliance@fusillc.com)

File Number FLA013009-010-DW3P/NR  
Polk County  
West Lakeland Wastewater Treatment Plant

## NOTICE OF PERMIT ISSUANCE

Enclosed is Permit Number FLA013009 to operate the Village of Lakeland, issued under Chapter 403, Florida Statutes.

Monitoring requirements under this permit are effective on the first day of the second month following the effective date of the permit. Until such time, the permittee shall continue to monitor and report in accordance with previously effective permit requirements, if any.

## NOTICE OF RIGHTS

This action is final and effective on the date filed with the Clerk of the Department unless a petition for an administrative hearing is timely filed under Sections 120.569 and 120.57, F.S., before the deadline for filing a petition. On the filing of a timely and sufficient petition, this action will not be final and effective until further order of the Department. Because the administrative hearing process is designed to formulate final agency action, the hearing process may result in a modification of the agency action or even denial of the application.

### Petition for Administrative Hearing

A person whose substantial interests are affected by the Department's action may petition for an administrative proceeding (hearing) under Sections 120.569 and 120.57, F.S. Pursuant to Rules 28-106.201 and 28-106.301, F.A.C., a petition for an administrative hearing must contain the following information:

- (a) The name and address of each agency affected and each agency's file or identification number, if known;



- (b) The name, address, any e-mail address, any facsimile number, and telephone number of the petitioner, if the petitioner is not represented by an attorney or a qualified representative; the name, address, and telephone number of the petitioner's representative, if any, which shall be the address for service purposes during the course of the proceeding; and an explanation of how the petitioner's substantial interests will be affected by the agency determination;
- (c) A statement of when and how the petitioner received notice of the agency decision;
- (d) A statement of all disputed issues of material fact. If there are none, the petition must so indicate;
- (e) A concise statement of the ultimate facts alleged, including the specific facts that the petitioner contends warrant reversal or modification of the agency's proposed action;
- (f) A statement of the specific rules or statutes that the petitioner contends require reversal or modification of the agency's proposed action, including an explanation of how the alleged facts relate to the specific rules or statutes; and
- (g) A statement of the relief sought by the petitioner, stating precisely the action that the petitioner wishes the agency to take with respect to the agency's proposed action.

The petition must be filed (received by the Clerk) in the Office of General Counsel of the Department at 3900 Commonwealth Boulevard, Mail Station 35, Tallahassee, Florida 32399-3000, or via electronic correspondence at [Agency\\_Clerk@FloridaDEP.gov](mailto:Agency_Clerk@FloridaDEP.gov). Also, a copy of the petition shall be mailed to the applicant at the address indicated above at the time of filing.

#### Time Period for Filing a Petition

In accordance with Rule 62-110.106(3), F.A.C., petitions for an administrative hearing by the applicant and persons entitled to written notice under Section 120.60(3), F.S., must be filed within 14 days of receipt of this written notice. Petitions filed by any persons other than the applicant, and other than those entitled to written notice under Section 120.60(3), F.S., must be filed within 14 days of publication of the notice or within 14 days of receipt of the written notice, whichever occurs first. You cannot justifiably rely on the finality of this decision unless notice of this decision and the right of substantially affected persons to challenge this decision has been duly published or otherwise provided to all persons substantially affected by the decision. While you are not required to publish notice of this action, you may elect to do so pursuant Rule 62-110.106(10)(a), F.A.C.

The failure to file a petition within the appropriate time period shall constitute a waiver of that person's right to request an administrative determination (hearing) under Sections 120.569 and 120.57, F.S., or to intervene in this proceeding and participate as a party to it. Any subsequent intervention (in a proceeding initiated by another party) will be only at the discretion of the presiding officer upon the filing of a motion in compliance with Rule 28-106.205, F.A.C. If you do not publish notice of this action, this waiver may not apply to persons who have not received a clear point-of-entry.

#### Extension of Time

Under Rule 62-110.106(4), F.A.C., a person whose substantial interests are affected by the Department's action may also request an extension of time to file a petition for an administrative hearing. The Department may, for good cause shown, grant the request for an extension of time.

Requests for extension of time must be filed with the Office of General Counsel of the Department at 3900 Commonwealth Boulevard, Mail Station 35, Tallahassee, Florida 32399-3000, or via electronic correspondence at [Agency\\_Clerk@FloridaDEP.gov](mailto:Agency_Clerk@FloridaDEP.gov), before the deadline for filing a petition for an administrative hearing. A timely request for extension of time shall toll the running of the time period for filing a petition until the request is acted upon.

Mediation

Mediation is not available in this proceeding.

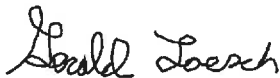
Judicial Review

Once this decision becomes final, any party to this action has the right to seek judicial review pursuant to Section 120.68, F.S., by filing a Notice of Appeal pursuant to Florida Rules of Appellate Procedure 9.110 and 9.190 with the Clerk of the Department in the Office of General Counsel (Station #35, 3900 Commonwealth Boulevard, Tallahassee, Florida 32399-3000) and by filing a copy of the Notice of Appeal accompanied by the applicable filing fees with the appropriate district court of appeal. The notice must be filed within 30 days from the date this action is filed with the Clerk of the Department.

**EXECUTION AND CLERKING**

Executed in Hillsborough County, Florida.

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION



---

Gerald "JJ" Loesch  
Environmental Administrator  
Permitting & Waste Cleanup Program  
Southwest District

**Attachment(s):**

1. Permit No. FLA013009
2. Discharge Monitoring Report (DMR)
3. Statement of Basis

**CERTIFICATE OF SERVICE**

The undersigned duly designated deputy clerk hereby certifies that this document and all attachments were sent on the filing date below to the following listed persons:

---

**FILING AND ACKNOWLEDGMENT**

FILED, on this date, pursuant to Section 120.52, F. S., with the designated Department Clerk, receipt of which is hereby acknowledged.



November 18, 2024

**Clerk**

**Date**

**CC:**

Mark Cadenhead, P.E., Cadenhead Environmental Engineering Services,  
[mark\\_cadenhead@bellsouth.net](mailto:mark_cadenhead@bellsouth.net)

Gerald "JJ" Loesch, DEP SWD, [gerald.loesch@floridadep.gov](mailto:gerald.loesch@floridadep.gov)

Erica Peck, DEP SWD, [erica.peck@floridadep.gov](mailto:erica.peck@floridadep.gov)

Dave Petti, DEP SWD, [dave.petti@floridadep.gov](mailto:dave.petti@floridadep.gov)

Emily Larson, DEP SWD, [emily.larson@floridadep.gov](mailto:emily.larson@floridadep.gov)

Noah Cummings, DEP SWD, [noah.cummings@floridadep.gov](mailto:noah.cummings@floridadep.gov)



# FLORIDA DEPARTMENT OF Environmental Protection

Southwest District  
13051 N Telecom Pkwy, Suite 101  
Temple Terrace, Florida 33637-9260

**Ron DeSantis**  
Governor

**Jeanette Nuñez**  
Lt. Governor

**Shawn Hamilton**  
Secretary

## STATE OF FLORIDA DOMESTIC WASTEWATER FACILITY PERMIT

**PERMITTEE:**

West Lakeland Wastewater LLC

**RESPONSIBLE OFFICIAL:**

Michael A Smallridge, As Receiver  
5911 Trouble Creek Road  
New Port Richey, Florida 34652  
(352) 340-6032  
[compliance@fusllc.com](mailto:compliance@fusllc.com)

**PERMIT NUMBER:**

FLA013009

**FILE NUMBER:**

FLA013009-010-DW3P/NR

**ISSUANCE DATE:**

November 18, 2024

**EFFECTIVE DATE:**

January 11, 2025

**EXPIRATION DATE:**

January 10, 2030

**FACILITY:**

West Lakeland Wastewater Treatment Plant  
3580 Lazy Lake Drive South  
Lakeland, FL 33801  
Polk County  
Latitude: 28°2' 15.25" N Longitude: 81°53' 9.66" W

This permit is issued under the provisions of Chapter 403, Florida Statutes (F.S.), and applicable rules of the Florida Administrative Code (F.A.C.). This permit does not constitute authorization to discharge wastewater other than as expressly stated in this permit. The above-named permittee is hereby authorized to operate the facilities in accordance with the documents attached hereto and specifically described as follows:

**WASTEWATER TREATMENT:**

Operation of an existing 0.070 MGD Three-Month Rolling Average Daily Flow (3MRADF), Type III contact stabilization domestic wastewater treatment plant. The treatment plant consists of two contact stabilization tanks of 10,000 gallons total volume, five re-aeration basins of 25,000 gallons total volume, two clarifiers of 13,000 gallons total volume and 163 square feet of surface area, one chlorine contact chamber of 4,500 gallons, three digesters of 15,000 gallons total volume. This plant is operated to provide secondary treatment with basic disinfection.

**REUSE OR DISPOSAL:**

**Land Application R-001:** An existing 0.070 MGD annual average daily flow permitted capacity Part II slow-rate restricted public access land application system (R-001). R-001 consists of a sprayfield of 44.2 acres total area. In addition, there are two polishing/holding ponds of 28,800 square feet of bottom surface area. R-001 is located approximately at latitude 28° 01' 46" N, longitude 81° 52' 58" W.

**IN ACCORDANCE WITH:** The limitations, monitoring requirements, and other conditions set forth in this cover sheet and Part I through Part IX on pages 1 through 166 of this permit.

PERMITTEE: West Lakeland Wastewater LLC

PERMIT NUMBER: FLA013009-010-DW3P/NR

FACILITY: Village of Lakeland

**I. RECLAIMED WATER AND EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS**

**A. Reuse and Land Application Systems**

1. During the period beginning on the effective date and lasting through the expiration date of this permit, the permittee is authorized to direct reclaimed water to Reuse System R-001. Such reclaimed water shall be limited and monitored by the permittee as specified below and reported in accordance with Permit Condition I.B.7:

Parameter	Units	Max. /Min	Reclaimed Water Limitations		Monitoring Requirements			Notes
			Limit	Statistical Basis	Frequency of Analysis	Sample Type	Monitoring Site Number	
Flow	MGD	Max Max	0.070 Report	Annual Average Monthly Average	5 Days/Week	Meter	FLW-01	See I.A.3
BOD, Carbonaceous 5 day, 20C	mg/L	Max Max	20.0 30.0	Annual Average Monthly Average	Monthly	Calculated	EFA-01	
BOD, Carbonaceous 5 day, 20C	mg/L	Max	60.0	Single Sample	Monthly	Grab	EFA-01	
Solids, Total Suspended	mg/L	Max Max	20.0 30.0	Annual Average Monthly Average	Monthly	Calculated	EFA-01	
Solids, Total Suspended	mg/L	Max	60.0	Single Sample	Monthly	Grab	EFA-01	
Coliform, Fecal	#/100mL	Max	200	Annual Average	Monthly	Calculated	EFA-01	
Coliform, Fecal	#/100mL	Max	800	Single Sample	Monthly	Grab	EFA-01	
pH	s.u.	Min Max	6.0 8.5	Single Sample Single Sample	5 Days/Week	Grab	EFA-01	
Chlorine, Total Residual (For Disinfection)	mg/L	Min	0.5	Single Sample	5 Days/Week	Grab	EFA-01	See I.A.4
Nitrogen, Nitrate, Total (as N)	mg/L	Max	12	Single Sample	Monthly	Grab	EFA-01	

2. Reclaimed water samples shall be taken at the monitoring site locations listed in Permit Condition I.A.1. and as described below:

Monitoring Site Number	Description of Monitoring Site
FLW-01	Flow to R-001 and plant by meter after the CCC and prior to reuse
EFA-01	AFTER DISINFECTION AND PRIOR TO LAND APPLICATION

3. A meter shall be utilized to measure flow and calibrated at least once every 12 months. [62-600.200(25)]
4. Total residual chlorine must be maintained for a minimum contact time of 15 minutes based on peak hourly flow. [62-610.410, 600.440(4)(b) and (5)(b)]
5. To report the "90th percentile,"
  - a. Place the bacteria results in ascending order (from lowest to highest value) and assign each sample a number, 1 for the lowest value.
  - b. Multiply the total number of samples by 0.9 to determine the 90th percentile level.
  - c. Report the value of the sample that corresponds to the 90th percentile level (e.g., 10 samples x 0.9 = 9, report the value of the 9th sample). If the 90th percentile level is not a whole number, rounding or interpolation should be used to determine the 90th percentile. When rounding, round down to the nearest whole number if the decimal is 0.4 or lower, and round up to the nearest whole number if the decimal is 0.5 or higher (e.g., 12 samples x 0.9 = 10.8, report the value of the 11th sample if rounding).

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[62-600.440(5)(a)3]

**B. Other Limitations and Monitoring and Reporting Requirements**

1. During the period beginning on the effective date and lasting through the expiration date of this permit, the treatment facility shall be limited and monitored by the permittee as specified below and reported in accordance with condition I.B.7.:

Parameter	Units	Max. /Min	Limitations		Monitoring Requirements			Notes
			Limit	Statistical Basis	Frequency of Analysis	Sample Type	Monitoring Site Number	
Flow	MGD	Max Max	0.07 Report	3-Month Rolling Average Monthly Average	5 Days/Week	Meter	FLW-01	See I.A.1
Percent Capacity, (TMADF/Permitted Capacity) x 100	percent	Max	Report	Monthly Average	Monthly	Calculated	FLW-01	
BOD, Carbonaceous 5 day, 20C (Influent)	mg/L	Max	Report	Single Sample	Annually	Grab	INF-01	See I.A.1
Solids, Total Suspended (Influent)	mg/L	Max	Report	Single Sample	Annually	Grab	INF-01	See I.A.1

2. Samples shall be taken at the monitoring site locations listed in Permit Condition I.D.1. and as described below:

Monitoring Site Number	Description of Monitoring Site
FLW-01	Flow to R-001 and plant by meter after the CCC and prior to reuse
INF-01	AT HEADWORKS, PRIOR TO TREATMENT, AND AHEAD OF RAS LINE

3. Influent samples shall be collected so that they do not contain digester supernatant or return activated sludge, or any other plant process recycled waters. [62-600.660(4)(a)]
4. A meter shall be utilized to measure flow and calibrated at least once every 12 months. [62-600.200(25)]
5. The sample collection, analytical test methods, and method detection limits (MDLs) applicable to this permit shall be conducted using a sufficiently sensitive method to ensure compliance with applicable water quality standards and effluent limitations and shall be in accordance with Rule 62-4.246, Chapters 62-160 and 62-600, F.A.C., and 40 CFR 136, as appropriate. The list of Department established analytical methods, and corresponding MDLs (method detection limits) and PQLs (practical quantitation limits), which is titled "FAC 62-4 MDL/PQL Table (November 10, 2020)" is available at <https://floridadep.gov/dear/quality-assurance/content/quality-assurance-resources>. The MDLs and PQLs as described in this list shall constitute the minimum acceptable MDL/PQL values and the Department shall not accept results for which the laboratory's MDLs or PQLs are greater than those described above unless alternate MDLs and/or PQLs have been specifically approved by the Department for this permit. Any method included in the list may be used for reporting as long as it meets the following requirements:
  - a. The laboratory's reported MDL and PQL values for the particular method must be equal or less than the corresponding method values specified in the Department's approved MDL and PQL list;
  - b. The laboratory reported MDL for the specific parameter is less than or equal to the permit limit or the applicable water quality criteria, if any, stated in Chapter 62-302, F.A.C. Parameters that are listed as "report only" in the permit shall use methods that provide an MDL, which is equal to or less than the applicable water quality criteria stated in 62-302, F.A.C.; and
  - c. If the MDLs for all methods available in the approved list are above the stated permit limit or applicable water quality criteria for that parameter, then the method with the lowest stated MDL shall be used.

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When the analytical results are below method detection or practical quantitation limits, the permittee shall report the actual laboratory MDL and/or PQL values for the analyses that were performed following the instructions on the applicable discharge monitoring report.

Where necessary, the permittee may request approval of alternate methods or for alternative MDLs or PQLs for any approved analytical method. Approval of alternate laboratory MDLs or PQLs are not necessary if the laboratory reported MDLs and PQLs are less than or equal to the permit limit or the applicable water quality criteria, if any, stated in Chapter 62-302, F.A.C. Approval of an analytical method not included in the above-referenced list is not necessary if the analytical method is approved in accordance with 40 CFR 136 or deemed acceptable by the Department. [62-4.246, 62-160]

- 6. The permittee shall provide safe access points for obtaining representative samples which are required by this permit. [62-600.650(2)]
- 7. Monitoring requirements under this permit are effective on the first day of the second month following the effective date of the permit. Until such time, the permittee shall continue to monitor and report in accordance with previously effective permit requirements, if any. During the period of operation authorized by this permit, the permittee shall complete and submit to the Department Discharge Monitoring Reports (DMRs) in accordance with the frequencies specified by the REPORT type (i.e. monthly, quarterly, semiannual, annual, etc.) indicated on the DMR forms attached to this permit. Unless specified otherwise in this permit, monitoring results for each monitoring period shall be submitted in accordance with the associated DMR due dates below. DMRs shall be submitted for each required monitoring period including periods of no discharge.

REPORT Type on DMR	Monitoring Period	Submit by
Monthly	first day of month - last day of month	28 <sup>th</sup> day of following month
Once Every Two Months	January 1 - February 28/29 March 1 - April 30 May 1 - June 30 July 1 - August 31 September 1 - October 31 November 1 - December 31	March 28 May 28 July 28 September 28 November 28 January 28
Quarterly	January 1 - March 31 April 1 - June 30 July 1 - September 30 October 1 - December 31	April 28 July 28 October 28 January 28
Semiannual	January 1 - June 30 July 1 - December 31	July 28 January 28
Annual	January 1 - December 31	January 28

The permittee may submit either paper or electronic DMR forms. If submitting electronic DMR forms, the permittee shall use the electronic DMR system approved by the Department (EzDMR) and shall electronically submit the completed DMR forms using the DEP Business Portal at <https://www.fldepportal.com/go/>. Reports shall be submitted to the Department by the twenty-eighth (28th) of the month following the month of operation. Data submitted in electronic format is equivalent to data submitted on signed and certified paper DMR forms.

If submitting paper DMR forms, the permittee shall make copies of the attached DMR forms, without altering the original format or content unless approved by the Department, and shall mail the completed DMR forms to the Department's Southwest District Office at the address specified in Permit Condition I.D.14. by the twenty-eighth (28th) of the month following the month of operation.

[62-620.610(18)][62-600.680(1)]

- 8. The permittee of a publicly-owned facility shall submit an annual report regarding transactions or allocations of costs and expenditures on pollution mitigation among the utility's permitted wastewater systems, including the prevention of sanitary sewer overflows, collection and transmission system pipe leakages, and inflow and infiltration. This report may be combined with the annual report for the facility's collection system action plan

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required by Rule 62-600.705, F.A.C. The report shall be electronically submitted to the Department's Southwest District Office no later than June 30 of each calendar year. *[62-600.700(4)]*

9. The permittee shall submit an annual report summarizing the implementation of the facility's collection system action plan required by paragraph 62-600.704(2)(b), F.A.C. The report shall be electronically submitted to the Department's Southwest District Office no later than June 30 of each calendar year. *[62-600.705(2)]*
10. The permittee shall submit the following with any application for permit renewal or substantial permit revision:
  - a. a copy of the facility's up-to-date power outage contingency plan required by subsection 62-600.705(1), F.A.C., for mitigating impacts to the facility's collection systems and pump stations; and,
  - b. an electronic summary of the facility's up-to-date collection system action plan required by paragraph 62-600.705(2)(a), F.A.C.

*[62-600.705(1) and (2)]*

11. Unless specified otherwise in this permit, all reports and other information required by this permit, including 24-hour notifications, shall be submitted to or reported to, as appropriate, the Department's Southwest District Office at the address specified below:

Florida Department of Environmental Protection  
Southwest District  
13051 N Telecom Pkwy, Suite 101  
Temple Terrace, Florida 33637-9260

Phone Number - (813) 470-5700  
FAX Number - (813) 470-5993  
[Swd\\_dw@dep.state.fl.us](mailto:Swd_dw@dep.state.fl.us)

(All e-mails (electronic communication) shall be followed by original copies.)

*[62-620.305]*

12. All reports and other information shall be signed in accordance with the requirements of Rule 62-620.305, F.A.C. *[62-620.305]*

## II. BIOSOLIDS MANAGEMENT REQUIREMENTS

### A. Basic Requirements

1. Biosolids generated by this facility may be transferred to a Biosolids Treatment Facility or disposed of in a Class I solid waste landfill. Transferring biosolids to an alternative biosolids treatment facility does not require a permit modification. However, use of an alternative biosolids treatment facility requires submittal of a copy of the agreement pursuant to Rule 62-640.880(1)(c), F.A.C., along with a written notification to the Department at least 30 days before transport of the biosolids. *[62-620.320(6), 62-640.880(1)]*
2. The permittee shall monitor and keep records of the quantities of biosolids generated, received from source facilities, treated, distributed and marketed, land applied, used as a biofuel or for bioenergy, transferred to another facility, or landfilled. These records shall be kept for a minimum of five years. *[62-640.650(4)(a)]*
3. Biosolids quantities shall be monitored by the permittee as specified below. Results shall be reported on the permittee's Discharge Monitoring Report for Monitoring Group RMP-Q in accordance with Condition I.B.7.



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Parameter	Units	Max. /Min	Biosolids Limitation		Monitoring Requirements			Notes
			Limit	Statistical Basis	Frequency of Analysis	Sample Type	Monitoring Site Number	
Biosolids Quantity (Landfilled)	dry tons	Max	Report	Monthly Total	Monthly	Calculated	RMP-001	
Biosolids Quantity (Transferred)	dry tons	Max	Report	Monthly Total	Monthly	Calculated	RMP-001	

[62-640.650(5)(a)1]

4. Biosolids quantities shall be calculated as listed in Permit Condition II.3 and as described below:

Monitoring Site Number	Description of Monitoring Site Calculations
RMP-001	Residuals removed from digester

5. The treatment, management, transportation, use, land application, or disposal of biosolids shall not cause a violation of the odor prohibition in subsection 62-296.320(2), F.A.C. [62-640.400(6)]
6. Storage of biosolids or other solids at this facility shall be in accordance with the Facility Biosolids Storage Plan. [62-640.300(4)]
7. Biosolids shall not be spilled from or tracked off the treatment facility site by the hauling vehicle. [62-640.400(9)]

**B. Disposal**

1. Disposal of biosolids, septage, and "other solids" in a solid waste disposal facility, or disposal by placement on land for purposes other than soil conditioning or fertilization, such as at a monofill, surface impoundment, waste pile, or dedicated site, shall be in accordance with Chapter 62-701, F.A.C. [62-640.100(6)(b) & (c)]

**C. Transfer**

1. The permittee shall not be held responsible for treatment and management violations that occur after its biosolids have been accepted by a permitted biosolids treatment facility with which the source facility has an agreement in accordance with subsection 62-640.880(1)(c), F.A.C., for further treatment, management, or disposal. [62-640.880(1)(b)]
2. The permittee shall keep hauling records to track the transport of biosolids between the facilities. The hauling records shall contain the following information:

Source Facility	Biosolids Treatment Facility or Treatment Facility
1. Date and time shipped	1. Date and time received
2. Amount of biosolids shipped	2. Amount of biosolids received
3. Degree of treatment (if applicable)	3. Name and ID number of source facility
4. Name and ID Number of treatment facility	4. Signature of hauler
5. Signature of responsible party at source facility	5. Signature of responsible party at treatment facility
6. Signature of hauler and name of hauling firm	

A copy of the source facility hauling records for each shipment shall be provided upon delivery of the biosolids to the biosolids treatment facility or treatment facility. The treatment facility permittee shall report to the Department within 24 hours of discovery any discrepancy in the quantity of biosolids leaving the source facility and arriving at the biosolids treatment facility or treatment facility.

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*[62-640.880(4)]*

**D. Receipt**

1. If the permittee intends to accept biosolids from other facilities, a permit revision is required pursuant to paragraph 62-640.880(2)(d), F.A.C. *[62-640.880(2)(d)]*

**III. GROUND WATER REQUIREMENTS**

1. Section III is not applicable to this facility.

**IV. ADDITIONAL REUSE AND LAND APPLICATION REQUIREMENTS**

**A. Part II Slow-Rate/Restricted Access System(s)**

1. Advisory signs shall be posted around the site boundaries to designate the nature of the project area. *[62-610.418(1)]*
2. Routine aquatic weed control and regular maintenance of storage pond embankments and access areas are required. *[62-610.414(8)]*
3. The maximum annual average loading rate to the R-001 site consisting of a slow-rate restricted public access land application sprayfield system shall be limited to 0.41 inches per week. The hydraulic loading rate shall not produce surface runoff or ponding of the applied reclaimed water. *[62-610.423(3) and (4)]*
4. The crops or vegetation shall be periodically harvested and removed from the project area. *[62-610.310(3)(d) and 62-610.419(1)(b)]*
5. Dairy cattle whose milk is intended for human consumption shall not be allowed on the project area for a period of 15 days after the last application of reclaimed water. No restrictions are imposed on the grazing of other cattle. *[62-610.425]*
6. Irrigation of edible food crops is prohibited, unless all requirements of Part III of Chapter 62-610, F.A.C., are met. *[62-610.475]*
7. Overflows from emergency discharge facilities on storage ponds shall be reported as abnormal events in accordance with Permit Condition IX.20. *[62-610.800(9)]*
8. A 500-foot setback distance shall be provided from the edge of the wetted area to potable water supply wells (applicable to wells that are existing or have been approved by the Department or the Department of Health; Class I surface waters; or Class II surface waters. This distance shall be reduced to 200 feet if facility Class I reliability is provided in accordance with subsection 62-610.462(1), F.A.C. This distance shall be reduced to 100 feet if facility Class I reliability is provided in accordance with subsection 62-610.462(1), F.A.C., and if high-level disinfection is provided.) *[62-610.421(3), 62-610.462(1)]*
9. No cross-connections to potable water systems shall be allowed. The permittee shall submit documentation of Department acceptance for a cross-connection control and inspection program pursuant to Rule 62-555.360, F.A.C., for all public water supply systems located within the area to be served by reclaimed water. *[62-610.419(3)]*

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## V. OPERATION AND MAINTENANCE REQUIREMENTS

### A. Staffing Requirements

1. During the period of operation authorized by this permit, the wastewater facilities shall be operated under the supervision of one or more operators certified in accordance with Chapter 62-602, F.A.C. In accordance with Chapter 62-699, F.A.C., this facility is a Category II, Class C facility and, at a minimum, operators with appropriate certification must be on the site as follows:

A Class C or higher operator 1/2 hour/day for 5 days/week and one visit each weekend. The lead/chief operator must be a Class C operator, or higher.

2. An operator meeting the lead/chief operator class for the plant shall be available during all periods of plant operation. "Available" means able to be contacted as needed to initiate the appropriate action in a timely manner. *[62-699.311(1)]*

### B. Capacity Analysis Report and Operation and Maintenance Performance Report Requirements

1. The application to renew this permit shall include an updated capacity analysis report prepared in accordance with Rule 62-600.405, F.A.C. *[62-600.405(5)]*
2. The application to renew this permit shall include a detailed operation and maintenance performance report prepared in accordance with Rule 62-600.735, F.A.C. *[62-600.735(1)]*

### C. Recordkeeping Requirements

1. The permittee shall maintain the following records and make them available for inspection at the following address: on the site of the permitted facility.
  - a. Records of all compliance monitoring information, including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation, including, if applicable, a copy of the laboratory certification showing the certification number of the laboratory, for at least three years from the date the sample or measurement was taken;
  - b. Copies of all reports required by this permit for at least three years from the date the report was prepared;
  - c. Records of all data, including reports and documents, used to complete the application for this permit for at least three years from the date the application was filed;
  - d. Monitoring information, including a copy of the laboratory certification showing the laboratory certification number, related to the residuals use and disposal activities for the time period set forth in Chapter 62-640, F.A.C., for at least three years from the date of sampling or measurement;
  - e. A copy of the current wastewater facility permit;
  - f. Copies of the current operation and maintenance manuals for the wastewater facility and the collection/transmission systems owned or operated by the wastewater facility permittee as required by Chapters 62-600 and 62-604, F.A.C.;
  - g. A copy of any required record drawings for the wastewater facility and the collection/transmission systems owned or operated by the wastewater facility permittee;
  - h. Copies of the licenses of the current certified operators;
  - i. Copies of the logs and schedules showing plant operations and equipment maintenance for three years from the date of the logs or schedules. The logs shall, at a minimum, include identification of the plant; the signature and license number of the operator(s) and the signature of the person(s) making any entries; date and time in and out; specific operation and maintenance activities, including any preventive maintenance or repairs made or requested; results of tests performed and samples taken, unless documented on a laboratory

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sheet; and notation of any notification or reporting completed in accordance with Rule 62-602.650(3), F.A.C. The logs shall be maintained on-site in a location accessible to 24-hour inspection, protected from weather damage, and current to the last operation and maintenance performed; and

- j. Records of biosolids quantities, treatment, monitoring, and hauling for at least five years.

[62-620.350, 62-604.500, 62-602.650, 62-640.650(4)]

**VI. SCHEDULES**

- 1. The following improvement actions shall be completed according to the following schedule:

Improvement Action	Completion Date
1. Electronically submit a power outage contingency plan for the facility's collection system in accordance with Rule 62-600.705(1), F.A.C.	Within 12 months of the effective date of this permit.
2. Electronically submit a summary of the facility's collection system action plan in accordance with Rule 62-600.705(2)(a), F.A.C.	Within 12 months of the effective date of this permit

[62-620.320(6)]

- 2. The permittee is not authorized to discharge to waters of the state after the expiration date of this permit, unless:

- a. The permittee has applied for renewal of this permit at least 180 days before the expiration date of this permit using the appropriate forms listed in Rule 62-620.910, F.A.C., and in the manner established in the Department of Environmental Protection Guide to Permitting Wastewater Facilities or Activities Under Chapter 62-620, F.A.C., including submittal of the appropriate processing fee set forth in Rule 62-4.050, F.A.C.; or
- b. The permittee has made complete the application for renewal of this permit before the permit expiration date.

[62-620.335(1)-(4)]

**VII. INDUSTRIAL PRETREATMENT PROGRAM REQUIREMENTS**

- 1. This facility is not required to have a pretreatment program at this time. [62-625.500]

**VIII. OTHER SPECIFIC CONDITIONS**

- 1. In the event that the wastewater facilities or equipment, including collection/transmission systems, no longer function as intended, are no longer safe in terms of public health and safety (including inactive or abandoned facilities), or odor, noise, aerosol drift, or lighting adversely affects neighboring developed areas at the levels prohibited by paragraphs 62-600.400(2)(a) and 62-604.400(2)(c), F.A.C., corrective action (which may include additional maintenance or modifications of the permitted facilities) shall be taken by the permittee. Other corrective action may be required to ensure compliance with rules of the Department. Additionally, the treatment, management, use or land application of residuals shall not cause a violation of the odor prohibition in subsection 62-296.320(2), F.A.C. [62-600.410(5), 62-604.500(3) and 62-640.400(6)]
- 2. All collection/transmission systems shall be operated and maintained to provide uninterrupted service. All pump stations shall be operated and maintained to provide the emergency pumping capability requirements in paragraph 62-604.400(2)(a), F.A.C., the lightning and transient voltage surge protections in paragraph 62-604.400(2)(b), F.A.C., and the design and signage requirements in paragraph 62-604.400(2)(d), F.A.C. Also, all equipment, pipes, manholes, pump stations, and other appurtenances necessary for the collection/transmission of domestic wastewater, including equipment provided pursuant to subsection 62-604.400(2), F.A.C., shall be maintained to function as intended. [62-604.500(2) and (3)]
- 3. The permittee shall evaluate and update the emergency response plan portion of the collection system operation and maintenance manual annually. The emergency response plan shall assess collection system security including

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cybersecurity; water quality monitoring for sanitary sewer overflows affecting surface waters; and hurricane and severe storm preparedness and response. [62-604.500(4)]

4. Collection/transmission systems shall be maintained to minimize excessive infiltration and inflow into the collection/transmission system, as well as excessive leakage from the collection/transmission system. The permittee shall take corrective actions when infiltration, inflow, or leakage is excessive. Infiltration and inflow are considered excessive if one or both cause or contribute to sanitary sewer overflows. Leakage, or exfiltration, is considered excessive if it causes or contributes to a violation of surface water quality standards or ground water quality standards. [62-604.500(5)]
5. All collection/transmission systems shall be operated and maintained to prevent sanitary sewer overflows. The permittee shall evaluate the cause of all sanitary sewer overflows and evaluate potential corrective measures to avoid future sanitary sewer overflows. Corrective actions shall be taken by the permittee if excessive inflow and infiltration causes or contributes to a sanitary sewer overflow. The owner/operator of a satellite collection system shall take corrective actions for a sanitary sewer overflow in the receiving collection system caused by excessive inflow and infiltration in the satellite collection system. [62-604.500(6)]
6. The deliberate introduction of stormwater in any amount into collection/transmission systems designed solely for the introduction (and conveyance) of domestic/industrial wastewater; or the deliberate introduction of stormwater into collection/transmission systems designed for the introduction or conveyance of combinations of storm and domestic/industrial wastewater in amounts which may reduce the efficiency of pollutant removal by the treatment plant is prohibited, except as provided by Rule 62-610.472, F.A.C. [62-604.130(4)]
7. Cross-connection, as defined in Rule 62-550.200, F.A.C., between the wastewater facility, including the collection/transmission system, and a potable water system is prohibited. [62-550.360][62-604.130(3)]
8. The collection/transmission operation and maintenance manual shall be maintained and revised periodically in accordance with subsection 62-604.500(4), F.A.C., to reflect any alterations performed or to reflect experience resulting from operation. However, a new operation and maintenance manual is not required to be developed for each project if there is already an existing manual that is applicable to the facilities being constructed. [62-604.500(4)]
9. Collection/transmission system overflows shall be reported to the Department in accordance with Permit Condition IX. 20. [62-604.550] [62-620.610(20)]
10. The operating authority of a collection/transmission system and the permittee of a treatment plant are prohibited from accepting connections of wastewater discharges which have not received necessary pretreatment or which contain materials or pollutants (other than normal domestic wastewater constituents):
  - a. Which may cause fire or explosion hazards; or
  - b. Which may cause excessive corrosion or other deterioration of wastewater facilities due to chemical action or pH levels; or
  - c. Which are solid or viscous and obstruct flow or otherwise interfere with wastewater facility operations or treatment; or
  - d. Which result in the wastewater temperature at the introduction of the treatment plant exceeding 40°C or otherwise inhibiting treatment; or
  - e. Which result in the presence of toxic gases, vapors, or fumes that may cause worker health and safety problems.[62-604.130(5)]
11. The treatment facility, storage ponds for Part II systems, rapid infiltration basins, and/or infiltration trenches shall be enclosed with a fence or otherwise provided with features to discourage the entry of animals and unauthorized persons. [62-610.418(1) and 62-600.400(2)(b)]

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12. Screenings and grit removed from the wastewater facilities shall be collected in suitable containers and hauled to a Department approved Class I landfill or to a landfill approved by the Department for receipt/disposal of screenings and grit. *[62-701.300(1)(a)]*
13. Where required by Chapter 471 or Chapter 492, F.S., applicable portions of reports that must be submitted under this permit shall be signed and sealed by a professional engineer or a professional geologist, as appropriate. *[62-620.310(4)]*
14. The permittee shall provide verbal notice to the Department's Southwest District Office as soon as practical after discovery of a sinkhole or other karst feature within an area for the management or application of wastewater, wastewater residuals (sludges), or reclaimed water. The permittee shall immediately implement measures appropriate to control the entry of contaminants, and shall detail these measures to the Department's Southwest District Office in a written report within 7 days of the sinkhole discovery. *[62-620.320(6)]*
15. The permittee shall provide notice to the Department of the following:
  - a. Any new introduction of pollutants into the facility from an industrial discharger which would be subject to Chapter 403, F.S., and the requirements of Chapter 62-620, F.A.C., if it were directly discharging those pollutants; and
  - b. Any substantial change in the volume or character of pollutants being introduced into that facility by a source which was identified in the permit application and known to be discharging at the time the permit was issued.Notice shall include information on the quality and quantity of effluent introduced into the facility and any anticipated impact of the change on the quantity or quality of effluent or reclaimed water to be discharged from the facility. If pretreatment becomes necessary, this permit may be modified to require the permittee to develop and implement a local pretreatment program in accordance with the requirements of Chapter 62-625, F.A.C.

*[62-620.625(2)]*

#### IX. GENERAL CONDITIONS

1. The terms, conditions, requirements, limitations, and restrictions set forth in this permit are binding and enforceable pursuant to Chapter 403, Florida Statutes. Any permit noncompliance constitutes a violation of Chapter 403, Florida Statutes, and is grounds for enforcement action, permit termination, permit revocation and reissuance, or permit revision. *[62-620.610(1)]*
2. This permit is valid only for the specific processes and operations applied for and indicated in the approved drawings or exhibits. Any unauthorized deviations from the approved drawings, exhibits, specifications, or conditions of this permit constitutes grounds for revocation and enforcement action by the Department. *[62-620.610(2)]*
3. As provided in subsection 403.087(7), F.S., the issuance of this permit does not convey any vested rights or any exclusive privileges. Neither does it authorize any injury to public or private property or any invasion of personal rights, nor authorize any infringement of federal, state, or local laws or regulations. This permit is not a waiver of or approval of any other Department permit or authorization that may be required for other aspects of the total project which are not addressed in this permit. *[62-620.610(3)]*
4. This permit conveys no title to land or water, does not constitute state recognition or acknowledgment of title, and does not constitute authority for the use of submerged lands unless herein provided and the necessary title or leasehold interests have been obtained from the State. Only the Trustees of the Internal Improvement Trust Fund may express State opinion as to title. *[62-620.610(4)]*
5. This permit does not relieve the permittee from liability and penalties for harm or injury to human health or welfare, animal or plant life, or property caused by the construction or operation of this permitted source; nor does it allow the permittee to cause pollution in contravention of Florida Statutes and Department rules, unless

PERMITTEE: West Lakeland Wastewater LLC

PERMIT NUMBER:

FLA013009-010-  
DW3P/NR

FACILITY: Village of Lakeland

specifically authorized by an order from the Department. The permittee shall take all reasonable steps to minimize or prevent any discharge, reuse of reclaimed water, or residuals use or disposal in violation of this permit which has a reasonable likelihood of adversely affecting human health or the environment. It shall not be a defense for a permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of this permit. *[62-620.610(5)]*

6. If the permittee wishes to continue an activity regulated by this permit after its expiration date, the permittee shall apply for and obtain a new permit. *[62-620.610(6)]*
7. The permittee shall at all times properly operate and maintain the facility and systems of treatment and control, and related appurtenances, that are installed and used by the permittee to achieve compliance with the conditions of this permit. This provision includes the operation of backup or auxiliary facilities or similar systems when necessary to maintain or achieve compliance with the conditions of the permit. *[62-620.610(7)]*
8. This permit may be modified, revoked and reissued, or terminated for cause. The filing of a request by the permittee for a permit revision, revocation and reissuance, or termination, or a notification of planned changes or anticipated noncompliance does not stay any permit condition. *[62-620.610(8)]*
9. The permittee, by accepting this permit, specifically agrees to allow authorized Department personnel, including an authorized representative of the Department and authorized EPA personnel, when applicable, upon presentation of credentials or other documents as may be required by law, and at reasonable times, depending upon the nature of the concern being investigated, to:
  - a. Enter upon the permittee's premises where a regulated facility, system, or activity is located or conducted, or where records shall be kept under the conditions of this permit;
  - b. Have access to and copy any records that shall be kept under the conditions of this permit;
  - c. Inspect the facilities, equipment, practices, or operations regulated or required under this permit; and
  - d. Sample or monitor any substances or parameters at any location necessary to assure compliance with this permit or Department rules.

*[62-620.610(9)]*

10. In accepting this permit, the permittee understands and agrees that all records, notes, monitoring data, and other information relating to the construction or operation of this permitted source which are submitted to the Department may be used by the Department as evidence in any enforcement case involving the permitted source arising under the Florida Statutes or Department rules, except as such use is proscribed by Section 403.111, F.S., or Rule 62-302.302, F.A.C. Such evidence shall only be used to the extent that it is consistent with the Florida Rules of Civil Procedure and applicable evidentiary rules. *[62-620.610(10)]*
11. When requested by the Department, the permittee shall within a reasonable time provide any information required by law which is needed to determine whether there is cause for revising, revoking and reissuing, or terminating this permit, or to determine compliance with the permit. The permittee shall also provide to the Department upon request copies of records required by this permit to be kept. If the permittee becomes aware of relevant facts that were not submitted or were incorrect in the permit application or in any report to the Department, such facts or information shall be promptly submitted or corrections promptly reported to the Department. *[62-620.610(11)]*
12. Unless specifically stated otherwise in Department rules, the permittee, in accepting this permit, agrees to comply with changes in Department rules and Florida Statutes after a reasonable time for compliance; provided, however, the permittee does not waive any other rights granted by Florida Statutes or Department rules. A reasonable time for compliance with a new or amended surface water quality standard, other than those standards addressed in Rule 62-302.500, F.A.C., shall include a reasonable time to obtain or be denied a mixing zone for the new or amended standard. *[62-620.610(12)]*
13. The permittee, in accepting this permit, agrees to pay the applicable regulatory program and surveillance fee in accordance with Rule 62-4.052, F.A.C. *[62-620.610(13)]*

PERMITTEE: West Lakeland Wastewater LLC

PERMIT NUMBER: FLA013009-010-  
DW3P/NR

FACILITY: Village of Lakeland

14. This permit is transferable only upon Department approval in accordance with Rule 62-620.340, F.A.C. The permittee shall be liable for any noncompliance of the permitted activity until the transfer is approved by the Department. *[62-620.610(14)]*
15. The permittee shall give the Department written notice at least 60 days before inactivation or abandonment of a wastewater facility or activity and shall specify what steps will be taken to safeguard public health and safety during and following inactivation or abandonment. *[62-620.610(15)]*
16. The permittee shall apply for a revision to the Department permit in accordance with Rules 62-620.300, F.A.C., and the Department of Environmental Protection Guide to Permitting Wastewater Facilities or Activities Under Chapter 62-620, F.A.C., at least 90 days before construction of any planned substantial modifications to the permitted facility is to commence or with Rule 62-620.325(2), F.A.C., for minor modifications to the permitted facility. A revised permit shall be obtained before construction begins except as provided in Rule 62-620.300, F.A.C. *[62-620.610(16)]*
17. The permittee shall give advance notice to the Department of any planned changes in the permitted facility or activity which may result in noncompliance with permit requirements. The permittee shall be responsible for any and all damages which may result from the changes and may be subject to enforcement action by the Department for penalties or revocation of this permit. The notice shall include the following information:
  - a. A description of the anticipated noncompliance;
  - b. The period of the anticipated noncompliance, including dates and times; and
  - c. Steps being taken to prevent future occurrence of the noncompliance.

*[62-620.610(17)]*

18. Sampling and monitoring data shall be collected and analyzed in accordance with Rule 62-4.246 and Chapters 62-160, 62-600, and 62-610, F.A.C., and 40 CFR 136, as appropriate.
  - a. Monitoring results shall be reported at the intervals specified elsewhere in this permit and shall be reported on a Discharge Monitoring Report (DMR), DEP Form 62-620.910(10), or as specified elsewhere in the permit.
  - b. If the permittee monitors any contaminant more frequently than required by the permit, using Department approved test procedures, the results of this monitoring shall be included in the calculation and reporting of the data submitted in the DMR.
  - c. Calculations for all limitations which require averaging of measurements shall use an arithmetic mean unless otherwise specified in this permit.
  - d. Except as specifically provided in Rule 62-160.300, F.A.C., any laboratory test required by this permit shall be performed by a laboratory that has been certified by the Department of Health Environmental Laboratory Certification Program (DOH ELCP). Such certification shall be for the matrix, test method and analyte(s) being measured to comply with this permit. For domestic wastewater facilities, testing for parameters listed in Rule 62-160.300(4), F.A.C., shall be conducted under the direction of a certified operator.
  - e. Field activities including on-site tests and sample collection shall follow the applicable standard operating procedures described in DEP-SOP-001/01 adopted by reference in Chapter 62-160, F.A.C.
  - f. Alternate field procedures and laboratory methods may be used where they have been approved in accordance with Rules 62-160.220, and 62-160.330, F.A.C.

*[62-620.610(18)]*

19. Reports of compliance or noncompliance with, or any progress reports on, interim and final requirements contained in any compliance schedule detailed elsewhere in this permit shall be submitted no later than 14 days following each schedule date. *[62-620.610(19)]*



PERMITTEE: West Lakeland Wastewater LLC

PERMIT NUMBER: FLA013009-010-  
DW3P/NR

FACILITY: Village of Lakeland

20. The permittee shall report to the Department any noncompliance which may endanger health or the environment. Any information shall be provided orally within 24 hours from the time the permittee becomes aware of the circumstances. A written submission shall also be provided within five days of the time the permittee becomes aware of the circumstances. The written submission shall contain a description of the noncompliance and its cause; the period of noncompliance including exact dates and times, and if the noncompliance has not been corrected, the anticipated time it is expected to continue; clean up actions taken and status; and steps taken or planned to reduce, eliminate, and prevent recurrence of the noncompliance. For noncompliance events related to sanitary sewer overflows, bypass events, or unauthorized discharges, these reports must include the data described above (with the exception of time of discovery) as well as the type of event (e.g., sanitary sewer overflow, bypass, unauthorized discharge); type of sanitary sewer overflow structure (e.g., manhole); the discharge location address and latitude/longitude; type of water discharged; discharge volumes and volumes recovered; volume discharged to surface waters and receiving waterbody name; types of human health and environmental impacts of the sanitary sewer overflow, bypass event, or unauthorized discharge (e.g., beach closure); whether the noncompliance was caused by a third party; and whether the noncompliance was related to wet weather. The written submission may be provided electronically using the Department's Business Portal at <https://www.fldeportal.com/go/> (via "Submit" followed by "Report" or "Registration/Notification"). Notice required for public notice of pollution under paragraph (d) may be provided together with the written submission using the Business Portal. All noncompliance events related to sanitary sewer overflows or bypass events submitted after September 14, 2021, shall be submitted electronically.
- a. The following shall be included as information which must be reported within 24 hours under this condition:
    - (1) Any unanticipated bypass which causes any reclaimed water or the effluent to exceed any permit limitation or results in an unpermitted discharge,
    - (2) Any upset which causes any reclaimed water or the effluent to exceed any limitation in the permit,
    - (3) Violation of a maximum daily discharge limitation for any of the pollutants specifically listed in the permit for such notice; and,
    - (4) Any unauthorized discharge to surface or ground waters, except for discharges to ground water of reclaimed water meeting Part III or Part V treatment standards under Chapter 62-610, F.A.C.
  - b. Oral reports as required by this subsection shall be provided as follows:
    - (1) For unauthorized releases or spills of treated or untreated wastewater reported pursuant to subparagraph (a)4., that are in excess of 1,000 gallons per incident, or where information indicates that public health or the environment will be endangered, oral reports shall be provided to the Department by calling the STATE WATCH OFFICE TOLL FREE NUMBER (800)320-0519, as soon as practicable, but no later than 24 hours from the time the permittee becomes aware of the discharge. The permittee, to the extent known, shall provide the following information to the State Watch Office:
      - (a) Name, address, and telephone number of person reporting,
      - (b) Name, address, and telephone number of permittee or responsible person for the discharge,
      - (c) Date and time of the discharge and status of discharge (ongoing or ceased),
      - (d) Characteristics of the wastewater spilled or released (untreated or treated, industrial or domestic wastewater),
      - (e) Estimated amount of the discharge,
      - (f) Location or address of the discharge,
      - (g) Source and cause of the discharge,
      - (h) Whether the discharge was contained on-site, and cleanup actions taken to date,
      - (i) Description of area affected by the discharge, including name of water body affected, if any; and,
      - (j) Other persons or agencies contacted.
    - (2) Oral reports, not otherwise required to be provided pursuant to subparagraph (b)1., above, shall be provided to the Department within 24 hours from the time the permittee becomes aware of the circumstances.
  - c. If the oral report has been received within 24 hours, the noncompliance has been corrected, and the noncompliance did not endanger health or the environment, the Department shall waive the written report.

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- d. In accordance with Section 403.077, F.S., unauthorized releases or spills reportable to the State Watch Office pursuant to subparagraph (b)1. above shall also be reported to the Department within 24 hours from the time the permittee becomes aware of the discharge. The permittee shall provide to the Department information reported to the State Watch Office. Notice of unauthorized releases or spills may be provided to the Department through the Department's Public Notice of Pollution web page at <https://floridadep.gov/pollutionnotice> or by reporting electronically using the Department's Business Portal at <https://www.fldepportal.com/go/> (via "Submit" followed by "Report" or "Registration/Notification").
- (1) If, after providing notice pursuant to paragraph (d) above, the permittee determines that a reportable unauthorized release or spill did not occur or that an amendment to the notice is warranted, the permittee may submit a letter to the Department documenting such determination at [pollution.notice@floridadep.gov](mailto:pollution.notice@floridadep.gov).
- (2) If, after providing notice pursuant to paragraph (d) above, the permittee discovers that a reportable unauthorized release or spill has migrated outside the property boundaries of the installation, the permittee must provide an additional notice to the Department that the release has migrated outside the property boundaries within 24 hours after its discovery of the migration outside of the property boundaries.
- e. Unless discharged to surface waters, a spill, release, discharge, upset or bypass involving reclaimed water meeting Part III or Part V treatment standards under Chapter 62-610, F.A.C., shall not be considered to endanger health or the environment and shall be reported under subsection (21) of this permit.

*[62-620.610(20)] [62-620.100(3)]*

21. The permittee shall report all instances of noncompliance not reported under Permit Conditions IX.17., IX.18., or IX.19. of this permit at the time monitoring reports are submitted. This report shall contain the same information required by Permit Condition IX.20. of this permit. *[62-620.610(21)]*

22. Bypass Provisions.

- a. "Bypass" means the intentional diversion of waste streams from any portion of a treatment works.
- b. Bypass is prohibited, and the Department may take enforcement action against a permittee for bypass, unless the permittee affirmatively demonstrates that:
- (1) Bypass was unavoidable to prevent loss of life, personal injury, or severe property damage; and
- (2) There were no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment downtime. This condition is not satisfied if adequate back-up equipment should have been installed in the exercise of reasonable engineering judgment to prevent a bypass which occurred during normal periods of equipment downtime or preventive maintenance; and
- (3) The permittee submitted notices as required under Permit Condition IX.22.c. of this permit.
- c. If the permittee knows in advance of the need for a bypass, it shall submit prior notice to the Department, if possible at least 10 days before the date of the bypass. The permittee shall submit notice of an unanticipated bypass within 24 hours of learning about the bypass as required in Permit Condition IX.20. of this permit. A notice shall include a description of the bypass and its cause; the period of the bypass, including exact dates and times; if the bypass has not been corrected, the anticipated time it is expected to continue; and the steps taken or planned to reduce, eliminate, and prevent recurrence of the bypass.
- d. The Department shall approve an anticipated bypass, after considering its adverse effect, if the permittee demonstrates that it will meet the three conditions listed in Permit Condition IX.22.b.(1) through (3) of this permit.
- e. A permittee may allow any bypass to occur which does not cause reclaimed water or effluent limitations to be exceeded if it is for essential maintenance to assure efficient operation. These bypasses are not subject to the provisions of Permit Condition IX.22.b. through d. of this permit.

*[62-620.610(22)]*

PERMITTEE: West Lakeland Wastewater LLC

PERMIT NUMBER: FLA013009-010-  
DW3P/NR

FACILITY: Village of Lakeland

23. Upset Provisions.

- a. "Upset" means an exceptional incident in which there is unintentional and temporary noncompliance with technology-based effluent limitations because of factors beyond the reasonable control of the permittee.
  - (1) An upset does not include noncompliance caused by operational error, improperly designed treatment facilities, inadequate treatment facilities, lack of preventive maintenance, careless or improper operation.
  - (2) An upset constitutes an affirmative defense to an action brought for noncompliance with technology based permit effluent limitations if the requirements of upset provisions of Rule 62-620.610, F.A.C., are met.
- b. A permittee who wishes to establish the affirmative defense of upset shall demonstrate, through properly signed contemporaneous operating logs, or other relevant evidence that:
  - (1) An upset occurred and that the permittee can identify the cause(s) of the upset;
  - (2) The permitted facility was at the time being properly operated;
  - (3) The permittee submitted notice of the upset as required in Permit Condition IX.20. of this permit; and
  - (4) The permittee complied with any remedial measures required under Permit Condition IX.5. of this permit.
- c. In any enforcement proceeding, the burden of proof for establishing the occurrence of an upset rests with the permittee.
- d. Before an enforcement proceeding is instituted, no representation made during the Department review of a claim that noncompliance was caused by an upset is final agency action subject to judicial review.

*[62-620.610(23)]*

Executed in Hillsborough County, Florida.

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION



\_\_\_\_\_  
Gerald "JJ" Loesch  
Environmental Administrator  
Permitting & Waste Cleanup Program  
Southwest District

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

**When completed submit this report to:** Department of Environmental Protection, Southwest District Office, Compliance Assurance Program, Attn: Domestic Wastewater, 13051 N Telecom Pkwy, Suite 101, Temple Terrace, FL 33637-0926, [swd\\_dhw@floridadep.gov](mailto:swd_dhw@floridadep.gov)

**PERMITTEE NAME:** West Lakeland Wastewater LLC  
**MAILING ADDRESS:** 5911 Trouble Creek Road  
 New Port Richey, Florida 34652

**PERMIT NUMBER:** FLA013009-010-DW3P/NR

**LIMIT:** Final  
**CLASS SIZE:** N/A  
**MONITORING GROUP NUMBER:** R-001  
**MONITORING GROUP DESCRIPTION:** LAND APPLICATION SYSTEM CONSISTING OF A SPRAYFIELD OF 44.2 ACRES TOTAL AREA, with Influent

**REPORT FREQUENCY:** Monthly  
**PROGRAM:** Domestic

**FACILITY:** West Lakeland Wastewater Treatment Plant  
**LOCATION:** 3580 Lazy Lake Drive South

Lakeland, FL 33801-

**RE-SUBMITTED DMR:**   
**NO DISCHARGE FROM SITE:**   
**MONITORING PERIOD** From: \_\_\_\_\_ To: \_\_\_\_\_

**COUNTY:** Polk  
**OFFICE:** Southwest District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement							
PARM Code 50050 Y Mon. Site No. FLW-01	Permit Requirement	0.070 (An.Avg.)	MGD				5 Days/Week	Meter
Flow	Sample Measurement							
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Requirement	Report (Mo.Avg.)	MGD			0	5 Days/Week	Meter
BOD, Carbonaceous 5 day, 20C	Sample Measurement							
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)	mg/L		Monthly	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement							
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo.Avg.)	mg/L		Monthly	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement							
PARM Code 80082 P Mon. Site No. EFA-01	Permit Requirement			60.0 (Max.)	mg/L		Monthly	Grab
Solids, Total Suspended	Sample Measurement							
PARM Code 00530 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An.Avg.)	mg/L		Monthly	Calculated

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 gather and evaluate 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.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

FACILITY: West Lakeland Wastewater Treatment Plant

MONITORING GROUP R-001  
 NUMBER:  
 MONITORING PERIOD From: \_\_\_\_\_ To: \_\_\_\_\_

PERMIT NUMBER: FLA013009-010-DW3P/NR

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement									
PARM Code 00530 A Mon. Site No. EFA-01	Permit Requirement					30.0 (Mo.Avg.)	mg/L		Monthly	Calculated
Solids, Total Suspended	Sample Measurement									
PARM Code 00530 P Mon. Site No. EFA-01	Permit Requirement					60.0 (Max.)	mg/L		Monthly	Grab
Coliform, Fecal	Sample Measurement									
PARM Code 74055 Y Mon. Site No. EFA-01	Permit Requirement					200 (An.Avg.)	#/100mL		Monthly	Calculated
Coliform, Fecal	Sample Measurement									
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement					800 (Max.)	#/100mL		Monthly	Grab
pH	Sample Measurement									
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement				6.0 (Min.)	8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement									
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement				0.5 (Min.)		mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement									
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement					12 (Max.)	mg/L		Monthly	Grab
Flow	Sample Measurement									
PARM Code 50050 P Mon. Site No. FLW-01	Permit Requirement	0.07 (3Mo.Avg.)	Report (Mo.Avg.)	MGD					5 Days/Week	Meter
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement									
PARM Code 00180 1 Mon. Site No. FLW-01	Permit Requirement					Report (Mo.Avg.)	percent	0	Monthly	Calculated

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

**When completed submit this report to:** Department of Environmental Protection, Southwest District Office, Compliance Assurance Program, Attn: Domestic Wastewater, 13051 N Telecom Pkwy, Suite 101, Temple Terrace, FL 33637-0926, [swd\\_dw@floridadep.gov](mailto:swd_dw@floridadep.gov)

**PERMITTEE NAME:** West Lakeland Wastewater LLC  
**MAILING ADDRESS:** 5911 Trouble Creek Road  
 New Port Richey, Florida 34652

**PERMIT NUMBER:** FLA013009-010-DW3P/NR

**LIMIT:** Final  
**CLASS SIZE:** N/A  
**MONITORING GROUP NUMBER:** R-001  
**MONITORING GROUP DESCRIPTION:** LAND APPLICATION SYSTEM CONSISTING OF A SPRAYFIELD OF 44.2 ACRES TOTAL AREA, with Influent

**REPORT FREQUENCY:** Annually  
**PROGRAM:** Domestic

**FACILITY:** West Lakeland Wastewater Treatment Plant  
**LOCATION:** 3580 Lazy Lake Drive South

Lakeland, FL 33801

**RE-SUBMITTED DMR:**   
**NO DISCHARGE FROM SITE:**   
**MONITORING PERIOD** From: \_\_\_\_\_ To: \_\_\_\_\_

**COUNTY:** Polk  
**OFFICE:** Southwest District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement							
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L	0	Annually	Grab
Solids, Total Suspended (Influent)	Sample Measurement							
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement			Report (Max.)	mg/L	0	Annually	Grab

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 gather and evaluate 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.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**ISSUANCE/REISSUANCE DATE:**  
**DMR EFFECTIVE DATE:** 1st day of the 2nd month following effective date of permit - Permit expiration

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

**When completed submit this report to:** Department of Environmental Protection, Southwest District Office, Compliance Assurance Program, Attn: Domestic Wastewater, 13051 N Telecom Pkwy, Suite 101, Temple Terrace, FL 33637-0926, [swd\\_dw@floridadep.gov](mailto:swd_dw@floridadep.gov)

PERMITTEE NAME: West Lakeland Wastewater LLC  
 MAILING ADDRESS: 5911 Trouble Creek Road  
 New Port Richey, Florida 34652

PERMIT NUMBER: FLA013009-010-DW3P/NR

FACILITY: West Lakeland Wastewater Treatment Plant  
 LOCATION: 3580 Lazy Lake Drive South  
 Lakeland, FL 33801

LIMIT: Final  
 CLASS SIZE: N/A  
 MONITORING GROUP NUMBER: RMP-Q  
 MONITORING GROUP DESCRIPTION: Biosolids Quantity

REPORT FREQUENCY: Monthly  
 PROGRAM: Domestic

COUNTY: Polk  
 OFFICE: Southwest District

RE-SUBMITTED DMR:   
 NO DISCHARGE FROM SITE:   
 MONITORING PERIOD From: \_\_\_\_\_ To: \_\_\_\_\_

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement							
PARM Code B0008 + Mon. Site No. RMP-001	Permit Requirement	Report (Mo.Total)	dry tons			0	Monthly	Calculated
Biosolids Quantity (Transferred)	Sample Measurement							
PARM Code B0007 + Mon. Site No. RMP-001	Permit Requirement	Report (Mo.Total)	dry tons			0	Monthly	Calculated

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 gather and evaluate 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.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

ISSUANCE/REISSUANCE DATE:  
 DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

## DAILY SAMPLE RESULTS - PART B

Permit Number: FLA013009-010-DW3P/NR Facility: West Lakeland Wastewater Treatment Plant  
 Monitoring Period From: \_\_\_\_\_ To: \_\_\_\_\_

	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine, Total Residual (For Disinfection) mg/L	Coliform, Fecal #/100mL	Flow MGD	Flow MGD	Nitrogen, Nitrate, Total (as N) mg/L	Solids, Total Suspended mg/L	pH s.u.		
Code	80082	50060	74055	50050	50050	00620	00530	00400		
Mon. Site	EFA-01	EFA-01	EFA-01	FLW-01	FLW-01	EFA-01	EFA-01	EFA-01		
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**PLANT STAFFING:**

Day Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Evening Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Night Shift Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_  
 Lead Operator      Class: \_\_\_\_\_ Certificate No: \_\_\_\_\_ Name: \_\_\_\_\_

ISSUANCE/REISSUANCE DATE:



## GROUNDWATER MONITORING REPORT - PART D

Facility Name: West Lakeland Wastewater Treatment Plant  
 Permit Number: FLA013009-010-DW3P/NR  
 County: Polk  
 Office: Southwest District

Monitoring Well ID: \_\_\_\_\_  
 Well Type: \_\_\_\_\_  
 Description: \_\_\_\_\_  
 Re-submitted DMR:

Report Frequency: \_\_\_\_\_  
 Program: Domestic

Monitoring Period From: \_\_\_\_\_ To: \_\_\_\_\_ Date Sample Obtained: \_\_\_\_\_  
 Time Sample Obtained: \_\_\_\_\_

Was the well purged before sampling? \_\_\_Yes \_\_\_ No

Parameter	PARM Code	Sample Measurement	Permit Requirement	Units	Sample Type	Frequency of Analysis	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
-----------	-----------	--------------------	--------------------	-------	-------------	-----------------------	------------------	-----------------	-------------------------	--------------------------

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 gather and evaluate 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.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)

COMMENTS AND EXPLANATION (Reference all attachments here):

## INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT

Read these instructions before completing the DMR. Hard copies and/or electronic copies of the required parts of the DMR were provided with the permit. All required information shall be completed in full and typed or printed in ink. A signed, original DMR shall be mailed to the address printed on the DMR by the 28<sup>th</sup> of the month following the monitoring period. Facilities who submit their DMR(s) electronically through eDMR do not need to submit a hardcopy DMR. The DMR shall not be submitted before the end of the monitoring period.

The DMR consists of three parts--A, B, and D--all of which may or may not be applicable to every facility. Facilities may have one or more Part A's for reporting effluent or reclaimed water data. All domestic wastewater facilities will have a Part B for reporting daily sample results. Part D is used for reporting ground water monitoring well data.

When results are not available, the following codes should be used on parts A and D of the DMR and an explanation provided where appropriate. Note: Codes used on Part B for raw data are different.

CODE	DESCRIPTION/INSTRUCTIONS
ANC	Analysis not conducted.
DRY	Dry Well
FLD	Flood disaster.
IFS	Insufficient flow for sampling.
LS	Lost sample.
MNR	Monitoring not required this period.

CODE	DESCRIPTION/INSTRUCTIONS
NOD	No discharge from/to site.
OPS	Operations were shutdown so no sample could be taken.
OTH	Other. Please enter an explanation of why monitoring data were not available.
SEF	Sampling equipment failure.

When reporting analytical results that fall below a laboratory's reported method detection limits or practical quantification limits, the following instructions should be used, unless indicated otherwise in the permit or on the DMR:

1. Results greater than or equal to the PQL shall be reported as the measured quantity.
2. Results less than the PQL and greater than or equal to the MDL shall be reported as the laboratory's MDL value. These values shall be deemed equal to the MDL when necessary to calculate an average for that parameter and when determining compliance with permit limits.
3. Results less than the MDL shall be reported by entering a less than sign (" $<$ ") followed by the laboratory's MDL value, e.g.  $< 0.001$ . A value of one-half the MDL or one-half the effluent limit, whichever is lower, shall be used for that sample when necessary to calculate an average for that parameter. Values less than the MDL are considered to demonstrate compliance with an effluent limitation.

### PART A -DISCHARGE MONITORING REPORT (DMR)

Part A of the DMR is comprised of one or more sections, each having its own header information. Facility information is preprinted in the header as well as the monitoring group number, whether the limits and monitoring requirements are interim or final, and the required submittal frequency (e.g. monthly, annually, quarterly, etc.). Submit Part A based on the required reporting frequency in the header and the instructions shown in the permit. The following should be completed by the permittee or authorized representative:

**Resubmitted DMR:** Check this box if this DMR is being re-submitted because there was information missing from or information that needed correction on a previously submitted DMR. The information that is being revised should be clearly noted on the re-submitted DMR (e.g. highlight, circle, etc.)

**No Discharge From Site:** Check this box if no discharge occurs and, as a result, there are no data or codes to be entered for all of the parameters on the DMR for the entire monitoring group number; however, if the monitoring group includes other monitoring locations (e.g., influent sampling), the "NOD" code should be used to individually denote those parameters for which there was no discharge.

**Monitoring Period:** Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

**Sample Measurement:** Before filling in sample measurements in the table, check to see that the data collected correspond to the limit indicated on the DMR (i.e. interim or final) and that the data correspond to the monitoring group number in the header. Enter the data or calculated results for each parameter on this row in the non-shaded area above the limit. Be sure the result being entered corresponds to the appropriate statistical base code (e.g. annual average, monthly average, single sample maximum, etc.) and units. Data qualifier codes are not to be reported on Part A.

**No. Ex.:** Enter the number of sample measurements during the monitoring period that exceeded the permit limit for each parameter in the non-shaded area. If none, enter zero.

**Frequency of Analysis:** The shaded areas in this column contain the minimum number of times the measurement is required to be made according to the permit. Enter the actual number of times the measurement was made in the space above the shaded area.

**Sample Type:** The shaded areas in this column contain the type of sample (e.g. grab, composite, continuous) required by the permit. Enter the actual sample type that was taken in the space above the shaded area.

**Signature:** This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

**Comment and Explanation of Any Violations:** Use this area to explain any exceedances, any upset or by-pass events, or other items which require explanation. If more space is needed, reference all attachments in this area.

## PART B - DAILY SAMPLE RESULTS

**Monitoring Period:** Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

**Daily Monitoring Results:** Transfer all analytical data from your facility's laboratory or a contract laboratory's data sheets for all day(s) that samples were collected. Record the data in the units indicated. Table 1 in Chapter 62-160, F.A.C., contains a complete list of all the data qualifier codes that your laboratory may use when reporting analytical results. However, when transferring numerical results onto Part B of the DMR, only the following data qualifier codes should be used and an explanation provided where appropriate.

CODE	DESCRIPTION/INSTRUCTIONS
<	The compound was analyzed for but not detected.
A	Value reported is the mean (average) of two or more determinations.
J	Estimated value, value not accurate.
Q	Sample held beyond the actual holding time.
Y	Laboratory analysis was from an unpreserved or improperly preserved sample.

To calculate the monthly average, add each reported value to get a total. For flow, divide this total by the number of days in the month. For all other parameters, divide the total by the number of observations.

**Plant Staffing:** List the name, certificate number, and class of all state certified operators operating the facility during the monitoring period. Use additional sheets as necessary.

## PART D - GROUND WATER MONITORING REPORT

**Monitoring Period:** Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

**Date Sample Obtained:** Enter the date the sample was taken. Also, check whether or not the well was purged before sampling.

**Time Sample Obtained:** Enter the time the sample was taken.

**Sample Measurement:** Record the results of the analysis. If the result was below the minimum detection limit, indicate that. Data qualifier codes are not to be reported on Part D.

**Detection Limits:** Record the detection limits of the analytical methods used.

**Analysis Method:** Indicate the analytical method used. Record the method number from Chapter 62-160 or Chapter 62-601, F.A.C., or from other sources.

**Sampling Equipment Used:** Indicate the procedure used to collect the sample (e.g. airlift, bucket/bailer, centrifugal pump, etc.)

**Samples Filtered:** Indicate whether the sample obtained was filtered by laboratory (L), filtered in field (F), or unfiltered (N).

**Signature:** This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

**Comments and Explanation:** Use this space to make any comments on or explanations of results that are unexpected. If more space is needed, reference all attachments in this area.

## SPECIAL INSTRUCTIONS FOR LIMITED WET WEATHER DISCHARGES

**Flow (Limited Wet Weather Discharge):** Enter the measured average flow rate during the period of discharge or divide gallons discharged by duration of discharge (converted into days). Record in million gallons per day (MGD).

**Flow (Upstream):** Enter the average flow rate in the receiving stream upstream from the point of discharge for the period of discharge. The average flow rate can be calculated based on two measurements; one made at the start and one made at the end of the discharge period. Measurements are to be made at the upstream gauging station described in the permit.

**Actual Stream Dilution Ratio:** To calculate the Actual Stream Dilution Ratio, divide the average upstream flow rate by the average discharge flow rate. Enter the Actual Stream Dilution Ratio accurate to the nearest 0.1.

**No. of Days the SDF > Stream Dilution Ratio:** For each day of discharge, compare the minimum Stream Dilution Factor (SDF) from the permit to the calculated Stream Dilution Ratio. On Part B of the DMR, enter an asterisk (\*) if the SDF is greater than the Stream Dilution Ratio on any day of discharge. On Part A of the DMR, add up the days with an "\*" and record the total number of days the Stream Dilution Factor was greater than the Stream Dilution Ratio.

**CBOD<sub>5</sub>:** Enter the average CBOD<sub>5</sub> of the reclaimed water discharged during the period shown in duration of discharge.

**TKN:** Enter the average TKN of the reclaimed water discharged during the period shown in duration of discharge.

**Actual Rainfall:** Enter the actual rainfall for each day on Part B. Enter the actual cumulative rainfall to date for this calendar year and the actual total monthly rainfall on Part A. The cumulative rainfall to date for this calendar year is the total amount of rain, in inches, that has been recorded since January 1 of the current year through the month for which this DMR contains data.

**Rainfall During Average Rainfall Year:** On Part A, enter the total monthly rainfall during the average rainfall year and the cumulative rainfall for the average rainfall year. The cumulative rainfall for the average rainfall year is the amount of rain, in inches, which fell during the average rainfall year from January through the month for which this DMR contains data.

**No. of Days LWWD Activated During Calendar Year:** Enter the cumulative number of days that the limited wet weather discharge was activated since January 1 of the current year.

**Reason for Discharge:** Attach to the DMR a brief explanation of the factors contributing to the need to activate the limited wet weather discharge.

**STATEMENT OF BASIS  
FOR  
STATE OF FLORIDA DOMESTIC WASTEWATER FACILITY PERMIT**

PERMIT NUMBER: FLA013009-010-DW3P/NR

FACILITY NAME: West Lakeland Wastewater Treatment Plant

FACILITY LOCATION: 3580 Lazy Lake Drive South, Lakeland, FL 33801  
Polk County

NAME OF PERMITTEE: West Lakeland Wastewater LLC

PERMIT WRITER: Noah Cummings

1. SUMMARY OF APPLICATION

a. Chronology of Application

Application Number: FLA013009-010-DW3P

Application Submittal Date: July 09, 2024

b. Type of Facility

Domestic Wastewater Treatment Plant

Ownership Type: Private

SIC Code: 4952

c. Facility Capacity

Existing Permitted Capacity: 0.07 mgd Three Month Average Daily Flow

Proposed Increase in Permitted Capacity: 0 mgd Three Month Average Daily Flow

Proposed Total Permitted Capacity: 0.07 mgd Three Month Average Daily Flow

d. Description of Wastewater Treatment

Operation of an existing 0.070 MGD Three-Month Rolling Average Daily Flow (3MRADF), Type III contact stabilization domestic wastewater treatment plant. The treatment plant consists of two contact stabilization tanks of 10,000 gallons total volume, five re-aeration basins of 25,000 gallons total volume, two clarifiers of 13,000 gallons total volume and 163 square feet of surface area, one chlorine contact chamber of 4,500 gallons, three digesters of 15,000 gallons total volume. This plant is operated to provide secondary treatment with basic disinfection.

e. Description of Effluent Disposal and Land Application Sites (as reported by applicant)

Land Application R-001: An existing 0.070 MGD annual average daily flow permitted capacity Part II slow-rate restricted public access land application system (R-001). R-001 consists of a sprayfield of 44.2 acres total area. In

addition, there are two polishing/holding ponds of 28,800 square feet of bottom surface area. R-001 is located approximately at latitude 28° 01' 46" N, longitude 81° 52' 58" W.2.

2. SUMMARY OF SURFACE WATER DISCHARGE

This facility does not discharge to surface waters.

3. BASIS FOR PERMIT LIMITATIONS AND MONITORING REQUIREMENTS

This facility is authorized to direct reclaimed water to Reuse System R-001, a slow-rate/restricted public access system, based on the following:

Parameter	Units	Max/Min	Limit	Statistical Basis	Rationale
Flow	MGD	Max	0.070	Annual Average	62-600.700(2)(b) & 62-610.810(5) FAC
		Max	Report	Monthly Average	62-600.700(2)(b) & 62-610.810(5) FAC
BOD, Carbonaceous 5 day, 20C	mg/L	Max	20.0	Annual Average	62-600.420(3)(a)1. FAC
		Max	30.0	Monthly Average	62-610.410 & 62-600.420(3)(a)2. FAC
BOD, Carbonaceous 5 day, 20C	mg/L	Max	60.0	Single Sample	62-610.410 & 62-600.420(3)(a)4. FAC
Solids, Total Suspended	mg/L	Max	20.0	Annual Average	62-610.410(2)(a) FAC
		Max	30.0	Monthly Average	62-610.410 & 62-600.420(3)(b)2. FAC
Solids, Total Suspended	mg/L	Max	60.0	Single Sample	62-610.410 & 62-600.420(3)(b)4. FAC
Coliform, Fecal	#/100mL	Max	200	Annual Average	62-610.410 & 62-600.440(5)(a)1. FAC
Coliform, Fecal	#/100mL	Max	800	Single Sample	62-610.410 & 62-600.440(5)(a)4. FAC
pH	s.u.	Min	6.0	Single Sample	62-600.445 FAC
		Max	8.5	Single Sample	62-600.445 FAC
Chlorine, Total Residual (For Disinfection)	mg/L	Min	0.5	Single Sample	62-610.410 & 62-600.440(5)(c) FAC
Nitrogen, Nitrate, Total (as N)	mg/L	Max	12	Single Sample	

An existing 0.070 MGD annual average daily flow permitted capacity Part II slow-rate restricted public access land application system (R-001). R-001 consists of a sprayfield of 44.2 acres total area. In addition, there are two polishing/holding ponds of 28,800 square feet of bottom surface area. R-001 is located approximately at latitude 28 01 46 N, longitude 81 52 58 W.

Other Limitations and Monitoring Requirements:

Parameter	Units	Max/Min	Limit	Statistical Basis	Rationale
Flow	MGD	Max	0.07	3-Month Rolling Average	62-600.700(2)(b) FAC
		Max	Report	Monthly Average	62-600.700(2)(b) FAC
Percent Capacity, (TMADF/Permitted Capacity) x 100	percent	Max	Report	Monthly Average	62-600.405(4) FAC

Parameter	Units	Max/ Min	Limit	Statistical Basis	Rationale
BOD, Carbonaceous 5 day, 20C (Influent)	mg/L	Max	Report	Single Sample	62-600.660(1) FAC
Solids, Total Suspended (Influent)	mg/L	Max	Report	Single Sample	62-600.660(1) FAC

4. IMPAIRMENT STATUS OF RECEIVING WATERS

This section is not applicable to this facility.

5. DISCUSSION OF CHANGES TO PERMIT LIMITATIONS

The current wastewater permit for this facility FLA013009-010-DW3P expires on January 10, 2025. No changes have been made to this facility during the last permit cycle and no changes are proposed for the new permit cycle.

6. BIOSOLIDS MANAGEMENT REQUIREMENTS

Biosolids generated by this facility may be transferred to a Biosolids Treatment Facility or disposed of in a Class I solid waste landfill.

See the table below for the rationale for the biosolids quantities monitoring requirements.

Parameter	Units	Max/ Min	Limit	Statistical Basis	Rationale
Biosolids Quantity (Landfilled)	dry tons	Max	Report	Monthly Total	62-640.650(5)(a)1. FAC
Biosolids Quantity (Transferred)	dry tons	Max	Report	Monthly Total	62-640.650(5)(a)1. FAC

7. GROUND WATER MONITORING REQUIREMENTS

This section is not applicable to this facility.

8. PERMIT SCHEDULES

1. The following improvement actions shall be completed according to the following schedule:

Improvement Action	Completion Date
1. 1. Electronically submit a power outage contingency plan for the facility's collection system in accordance with Rule 62-600.705(1). F.A.C.	Within 12 months of the effective date of this permit.
2. 2. Electronically submit a summary of the facility's collection system action plan in accordance with Rule 62-600.705(2)(a). F.A.C.	Within 12 months of the effective date of this permit

9. INDUSTRIAL PRETREATMENT REQUIREMENTS

At this time, the facility is not required to develop an approved industrial pretreatment program. However, the Department reserves the right to require an approved program if future conditions warrant.

10. ADMINISTRATIVE ORDERS (AO) AND CONSENT ORDERS (CO)

This permit is not accompanied by an AO, and the permittee has not entered into a CO with the Department that affects this permit.

11. REQUESTED VARIANCES OR ALTERNATIVES TO REQUIRED STANDARDS

No variances were requested for this facility.

12. THE ADMINISTRATIVE RECORD

The administrative record including application, draft permit, fact sheet, public notice (after release), comments received and additional information is available for public inspection during normal business hours at the location specified in item 14. Copies will be provided at a minimal charge per page.

13. PROPOSED SCHEDULE FOR PERMIT ISSUANCE

Notice of Permit Issuance

November 2024

14. DEP CONTACT

Additional information concerning the permit and proposed schedule for permit issuance may be obtained during normal business hours from:

Noah Cummings, Environmental Specialist  
Florida Department of Environmental Protection  
Southwest District Office  
13051 N Telecom Pkwy, Suite 101  
Temple Terrace, FL 33637-9260  
Telephone No.: (813) 470 – 5777  
[Noah.Cummings@FloridaDEP.gov](mailto:Noah.Cummings@FloridaDEP.gov)  
[Swd\\_dw@dep.state.fl.us](mailto:Swd_dw@dep.state.fl.us)



# FLORIDA DEPARTMENT OF Environmental Protection

Southwest District  
13051 North Telecom Parkway #101  
Temple Terrace, Florida 33637-0926

**Ron DeSantis**  
Governor

**Jeanette Nuñez**  
Lt. Governor

**Shawn Hamilton**  
Secretary

October 4, 2024

West Lakeland Wastewater, LLC  
Mike Smallridge, Receiver  
1902 Barton Park Road, Suite 201  
Auburndale Florida 33823  
[compliance@fusllc.com](mailto:compliance@fusllc.com)

Re: Department of Environmental Protection v. West Lakeland Wastewater, LLC  
Executed Settlement Agreement OGC File No.: 24-2505  
Facility ID: FLA013009, Village of Lakeland WWTF  
Polk County

Dear Mr. Smallridge:

Enclosed please find the executed Settlement Agreement OGC No. 24-2505, regarding the above referenced facility. The effective date of the Settlement Agreement is the filing date entered by the designated Department Clerk on the signature page.

For inquiries, you may contact David Petti at 813-470-5748, or by email at [David.Petti@FloridaDEP.gov](mailto:David.Petti@FloridaDEP.gov).

Sincerely,

A handwritten signature in black ink that reads "Kelley M. Boatwright".

Ms. Kelley M. Boatwright  
Southwest District Director  
Florida Department of Environmental Protection

KMB/dp

Enclosure: Executed Consent Order

Cc:

Lea Crandall, Agency Clerk, [Lea.Crandall@dep.state.fl.us](mailto:Lea.Crandall@dep.state.fl.us)  
Pamala Vazquez, DEP-SWD, [Pamala.Vazquez@FloridaDEP.gov](mailto:Pamala.Vazquez@FloridaDEP.gov)  
Emily Larson, DEP-SWD, [Emily.Larson@FloridaDEP.gov](mailto:Emily.Larson@FloridaDEP.gov)  
Erica Peck, DEP-SWD, [Erica.Peck@FloridaDEP.gov](mailto:Erica.Peck@FloridaDEP.gov)  
David Petti, DEP-SWD, [David.Petti@FloridaDEP.gov](mailto:David.Petti@FloridaDEP.gov)





# FLORIDA DEPARTMENT OF Environmental Protection

Southwest District Office  
13051 North Telecom Parkway #101  
Temple Terrace, Florida 33637-0926

**Ron DeSantis**  
Governor

**Jeanette Nuñez**  
Lt. Governor

**Shawn Hamilton**  
Secretary

September 17, 2024

West Lakeland Wastewater, LLC  
Mike Smallridge, Receiver  
1902 Barton Park Road, Suite 201  
Auburndale Florida 33823

SUBJECT: Department of Environmental Protection v. West Lakeland Wastewater, LLC  
OGC File No.: 24-2505  
Facility ID: FLA013009, Village of Lakeland WWTF  
Polk County

Mr. Smallridge:

The State of Florida Department of Environmental Protection ("Department") finds that West Lakeland Wastewater, LLC ("Respondent") reported an unauthorized discharge event of approximately 1,920 gallons of untreated wastewater being discharged to surface waters on February 21, 2024, in violation of Sections 403.121 (3)(b), Florida Statutes (F.S.), and Rule 62-604.130 (1) Florida Administrative Code (F.A.C.). Before sending this letter, the Department requested that the Respondent undertake certain actions to resolve the violation(s). These actions have since been completed. However, due to the nature of the violation(s), the Respondent remains subject to civil penalties. The Respondent is also responsible for costs incurred by the Department during the investigation of this matter.

### The Department's Offer

Based on the violations described above, the Department is seeking \$4,000.00 in civil penalties, \$6.00 in economic benefit and \$250.00 for costs and expenses the Department has incurred in investigating this matter, which amounts to a total of \$4,256.00. The civil penalty in this matter includes 1 violation of \$2,000.00 or more.

However, in lieu of making cash payment of \$4,006.00 in civil penalties as set forth in the paragraph above, Respondent may elect to offset this amount by implementing an in-kind penalty project, which must be approved by the Department. An in-kind

project must be either an environmental enhancement, environmental restoration or a capital/facility improvement project and may not be a corrective action requirement of the Agreement or otherwise required by law. The Department may also consider the donation of environmentally sensitive land as an in-kind project. The value of the in-kind penalty project shall be one and a half times the civil penalty off-set amount, which in this case is the equivalent of at least \$6,009.00. If Respondent chooses to implement an in-kind project, Respondent shall notify the Department of its election by electronic mail to David Petti at [David.Petti@FloridaDEP.gov](mailto:David.Petti@FloridaDEP.gov) within 15 days of the effective date of this Settlement Agreement.

**Notwithstanding the election to implement an in-kind project, payment of the remaining \$250.00 in costs must be paid within 30 days of the effective date of the Settlement Agreement.**

If Respondent elects to implement an in-kind project as provided in the paragraph above, then Respondent shall comply with all the requirements and time frames in Exhibit A entitled In-Kind Projects.

#### **Respondent's Acceptance**

If you wish to accept this offer and fully resolve the enforcement matter pending against the Respondent, please sign this letter and return it to the Department at Southwest District, 13051 Telecom Parkway North, Suite 101, Temple Terrace, Florida, 33637-0926 by **October 16, 2024**. The Department will then countersign it and file it with a designated clerk of the Department. Once the document is filed with the designated clerk, it will constitute a final order of the Department pursuant to Section 120.52(7), F.S. and will be effective unless a request for an administrative hearing is filed by a third party in accordance with Chapter 120, F.S. and the attached Notice of Rights.

By accepting this offer you, Mike Smallridge

- (1) certify that you are authorized and empowered to negotiate, enter into, and accept the terms of this offer in the name and on behalf of Respondent;
- (2) acknowledge and waive Respondent's right to an administrative hearing pursuant to Sections 120.569 and 120.57, F.S., on the terms of this offer, once final;
- (3) acknowledge and waive Respondent's right to an appeal pursuant to Section 120.68, F.S.

The Department acknowledges that the Respondent's acceptance of this offer does not constitute an admission of liability for the violation(s) referenced above.

#### **Respondent's Performance**

After signing and returning this document to the Department,

- (1) Respondent must implement the In-Kind Project in accordance with the requirements identified in the attached Exhibit A. Also, payment of \$250.00 for costs and expenses must be made by November 1, 2024.
- (2) If Respondent declines to implement an In-Kind Project, payment in full of \$4,256.00 is due by November 1, 2024.
- (3) Respondent shall make all payments required by this Agreement by cashier's check, money order or on-line payment. Cashier's check or money order shall be made payable to the "Department of Environmental Protection" and shall include both the OGC number assigned to this Agreement and the notation "Water Quality Assurance Trust Fund." Online payments by e-check can be made by going to the DEP Business Portal at:  
<http://www.fldepportal.com/go/pay/>  
It will take a number of days after this Agreement is final, effective and filed with the Clerk of the Department before ability to make online payment is available.

The Department may enforce the terms of this document, once final, and seek to collect monies owed pursuant to Sections 120.69 and 403.121, F.S.

Until clerked by the Department, this letter is only a settlement offer and not a final agency action. Consequently, neither the Respondent nor any other party may request an administrative hearing to contest this letter pursuant to Chapter 120, F.S. Once this letter is clerked and becomes a final order of the Department, as explained above, the attached Notice of Rights will apply to parties, other than the Respondent, whose interests will be substantially affected.

Electronic signatures or other versions of the parties' signatures, such as .pdf or facsimile, shall be valid and have the same force and effect as originals. No modifications of the terms of this Agreement will be effective until reduced to writing, executed by both Respondent and the Department, and filed with the clerk of the Department.

Please be aware that if the Respondent declines to respond to the Department's offer, the Department will assume that the Respondent is not interested in resolving the matter and will proceed accordingly.

If you have any questions, please contact David Petti at (813) 470-5748 or at [David.Petti@FloridaDEP.gov](mailto:David.Petti@FloridaDEP.gov).

Sincerely,

*Kelley M. Boatwright*

---

Ms. Kelley M. Boatwright  
District Director  
Southwest District

FOR THE RESPONDENT:

I, *Michael Smallridge* [Type or Print Name], HEREBY ACCEPT  
THE TERMS OF THE SETTLEMENT OFFER IDENTIFIED ABOVE.

By: *MS*  
[Signature]

Date: *10/1/24*

Title: *Sole Managing Member*  
[Type or Print]

---

**FOR DEPARTMENT USE ONLY**

DONE AND ORDERED this 4 day of October 2024, in Hillsborough County, Florida.

STATE OF FLORIDA DEPARTMENT  
OF ENVIRONMENTAL PROTECTION

*Kelley Boatwright*

---

Ms. Kelley M. Boatwright  
District Director  
Southwest District

Filed, on this date, pursuant to section 120.52, F.S., with the designated Department Clerk, receipt of which is hereby acknowledged.

*Jana Stein*

October 4, 2024

---

Clerk

---

DATE

Attachments:      Notice of Rights  
                                 Exhibit A - In Kind Project

Final clerked copy furnished to:

Lea Crandall, Agency Clerk ([lea.crandall@dep.state.fl.us](mailto:lea.crandall@dep.state.fl.us))

**FLORIDA UTILITY SERVICES 1, LLC  
5911 TROUBLE CREEK RD  
NEW PORT RICHEY, FL. 34652**

November 20, 2024

David Petti  
Florida Department of Environmental Protection  
13051 N. Telecom Parkway #101  
Temple Terrace, FL. 33637-0926

**Re: In Kind projects for West Lakeland Wastewater.**

Dear Mr. Petti:

In accordance with the Settlement Agreement dated October 4, 2024, West Lakeland Wastewater hereby submits 2 in-kind projects for DEP review with attached documentation.

**Project # 1.** Utility personnel constructed a retention area around lift station #2, complete with a berm which was sodded and with minimum landscaping. The benefits of this will be to retain any possible future over flows on site with prevention of any wastewater flowing into the borrow pit. This project has been completed. Please see attached documents with receipts and pictures attached. The total final costs for this project are \$ 3, 186.00.

**Project # 2.** The operator of this facility, Consta-Flow, installed a Mission Auto-Dialer at lift station # 2. The benefits of this auto- dialer is the real time notification by text and email of the lift station conditions along with a Weekly Management Report that allows utility personnel to address any potential future issues. This project is completed and was installed on 10/31/24. The total final costs for this project is \$7,979.00.

The total amount of in-kind project cost is \$ 11,165.00 which exceeds the \$6,009 represented in the settlement agreement.

The utility requests the department to accept the above as the completion of this agreement and that this matter be officially closed.

On behalf of the utility,

*Michael Smallridge*



Michael Smallridge

# Consta Flow Inc

5574 Commercial Boulevard  
 Winter Haven, FL 33880  
 (863) 965-2599  
 emily@constaflow.com

# Estimate

ESTIMATE# 1502  
 DATE 05/03/2024  
 PO#

### CUSTOMER

West Lakeland Wastewater  
 5911 Trouble Creek Road  
 New Port Richey FL 34652  
 (863) 904-5574

### SERVICE LOCATION

West Lakeland Wastewater  
 5911 Trouble Creek Road  
 New Port Richey FL 34652  
 (863) 904-5574

### DESCRIPTION

Install Mission auto dialer at boat ramp lift station.  
 50% OF PROJECT DUE PRIOR TO ORDERING MATERIAL.

## Estimate

Description	Qty	Rate	Total
Service Technician	14.00	145.00	2,030.00
Mission Auto Dialers	1.00	4,279.38	4,279.38
Float 50 ft, NC (RED)	1.00	164.85	164.85
Float 50 ft, NO (Green)	1.00	164.85	164.85
Unistrut Aluminum Long 1-5/8"	5.00	20.00	100.00
Conduit Flexible .50"	2.00	5.05	10.10
Coupling Flexible .50"	2.00	4.69	9.38
Wire Bolts, Nuts, Freight	1.00	250.00	250.00
SQD Surge Protective	1.00	250.57	250.57
Power Supply Module	1.00	72.80	72.80
Control Relay	2.00	62.80	125.60
FL Tax		7.00%	522.03

CUSTOMER MESSAGE

**Estimate Total:**

**\$7,979.56**

PRE-WORK SIGNATURE

Signed By:



## Mike Smallridge

---

**From:** Cindy <cindy@constaflow.com>  
**Sent:** Monday, November 18, 2024 11:16 AM  
**To:** Mike Smallridge  
**Cc:** Gaines  
**Subject:** Autodialer (RTU) Installation at Boat Ramp Lift Station

Mike,

The Autodialer (RTU=sn# 24MIS40780) was installed 10/31/2024 at the boat ramp lift station.

**Thank you,**

Cindy Alexander  
Consta Flow, Inc  
5574 Commercial Blvd,  
Winter Haven FL 33880  
863-965-2599

# Weekly Management Report

West Lakeland Wastewater, FL  
10 Nov 2024 - 16 Nov 2024



RTU Count		Messages Transmitted	
Model 110:	0	MyDro M150:	1
Model 800:	0	MyDro M850:	0
Manhole Monitor:	0	Model M84:	0
MyDro M50:	0		
Active:	1	Disabled:	0
		Total messages:	1176
		Analog:	672
		Digital:	0
		Other:	504

Alarm Count		Notification Results	
Analog:	0	Voice:	0
Digital:	0	Email:	0
Power Failure:	0	Text Message:	0
Communications:	0	Web:	0
Other:	0	Site Visit:	0
		Unacknowledged:	0

RTU Connectivity		Acknowledgment Time	
All RTUs Average:	100.0%	Average ACK time:	-

**Disabled Inputs**  
All inputs are enabled.

**Backup Battery Condition**  
The backup battery is OK.

**Untested Wet Well Inputs**  
There are no problems with any inputs that have a name that looks like "Wet Well"

Costs Associated with Retention & Berm Construction  
At lift station # 2 West Lakeland Wastewater including  
Receipts.

West Lakeland - Total Cost

Fill Dirt	\$267.25
4 pallets of Sod	\$568.00
Fertilizer & Seed	\$72.00
Plants for Berm	\$148.00
Supplies to install over flow pipe	\$147.00
Misc.	\$78.00
Mileage:	\$444.00
Jackie L- 376	
Juan- 123	
Chris-180	
Labor Hours:	
Jackie L.- 44.5 hrs	\$1,061
Juan- 14.5 hrs	\$316
Chris- 4.5 hrs	\$85.50
<b>Total</b>	<b>\$3,186.75</b>

Mulch & More Inc.  
 109 Waldemar Ct.  
 Winter Haven, FL 33884

*West LKI Project*

# Invoice

Date	Invoice #
6/7/2024	104026

**Bill To**

Florida Utility Services  
 232-7969 Jackie

**PAID**  
 06/07/2024

**Ship To**

3633 Lazy Lake Dr N  
 Lakeland  
 Find Jackie for drop

P.O. Number	Terms	Ship	Due Date	Web Site	Phone #
			6/7/2024	www.mulchandmore.com	863-318-8060

Quantity	Item Code	Description	Price Each	Amount
7	014	Yellow Fill Dirt	25.00	175.00T
	35	Non Local Delivery	80.00	80.00
		sales tax	7.00%	12.25

MULCH & MORE  
 5900 CYPRESS GARDENS RD  
 WINTER HAVEN, FL 33884  
 863-318-8060

06/07/2024 09:41:51  
 Merchant ID: \*\*\*\*\*1164  
 Device ID: 0030  
 Terminal ID: PP01.

**Credit Sale:**

Transaction #: 3  
 Card Type: Visa  
 Account: \*\*\*\*\*4569  
 Entry: Manual

Amount: USD \$267.25

Auth Code: 003  
 Auth Number: 005375  
 Response: 9  
 Response: AUTH/TKT  
 Y - Both Match (5-Digit Zip)  
 Response: N - CVV Matches  
 Code: K  
 ID: 504159498223300  
 SS AS: CREDIT

CUSTOMER COPY

THANK YOU!

**Total** \$267.25



# Lawn Services Lakeland, LLC.

OLD POLK CITY ROAD  
LAKELAND, FLORIDA 33809  
(863) 859-3525

D & J Lawn Services  
1275 Lakeland Blvd  
Lakeland, FL 33809  
Phone: (863) 859-3525  
Fax: (863) 859-3525

Cash Deposit \$10.00  
 Cash Receipt \$100.00  
 Delivery Fee \$50.00  
 Total \$160.00

Date \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

circle one: Yes No

11990

6-14-24

\$ 167.00

West Lk Villages

Paid by phone

COMISED	DRIVER	JOB. NO. OR LOT NO.	DESCRIPTION	PRICE	AMOUNT
			<b>BAHIA SOD SOLD AS IS NO GUARANTEE</b>		
			SALES TAX		
			DELIVERY CHARGE		
			Pallets Out at		
			Pallets in at		
			TOTAL		

circle one: Yes  No

THANK YOU

**INVOICE No. 11990**

This invoice must accompany all claims. TERMS OF SALE: Payment due upon receipt of invoice. By acceptance of products, customer and its agent agree that all products were in good health and condition upon receipt. D & J Lawn Services of Lakeland, LLC assumes no liability for products unless notified of defective condition within 24 hours of delivery or pickup. Empty sod pallets, in acceptable condition, must be returned within 3 months of purchase date for credit. Customers will not receive credit or refund for pallets in excess of purchases. Interest accrues on the unpaid balance at the rate of 1/2% per month. Customer agrees to pay costs of collection, including reasonable attorneys fees.

circle one: Water  Wastewater

Initials JR

Received by: \_\_\_\_\_ Date: \_\_\_\_\_  
CUSTOMER

# Lawn Services Lakeland, LLC.

1000 OLD POLK CITY ROAD  
LAKELAND, FLORIDA 33809  
(863) 859-3525

D & J Lawn Services  
1000 Old Polk City Road  
Lakeland, FL 33809  
(863) 859-3525

Bahia 400sqft (1) \$100.00  
Pallet Deposit (1) \$10.00  
Delivery Fee (1) \$50.00

Sub Total \$160.00

Total \$167.00

ORDER REF ID: 11944

APPROVED 11/29/24

FOR THE USE OF THE CUSTOMER ONLY  
DO NOT WRITE IN THESE SPACES  
DATE RECEIVED BY: \_\_\_\_\_  
DATE OF DELIVERY: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

DESCRIPTION	PRICE	AMOUNT
<b>BAHIA SOD SOLD AS IS NO GUARANTEE</b>		
SALES TAX		
DELIVERY CHARGE		
Pallets Out at		
Pallets in at		
TOTAL		

**INVOICE No. 11944**

This invoice must accompany all claims. TERMS OF SALE: Payment due upon receipt of invoice. By acceptance of products, customer and its agent agree that all products were in good health and condition upon receipt. D & J Lawn Services of Lakeland, LLC assumes no liability for products unless notified of defective condition within 24 hours of delivery or pickup. Empty sod pallets, in acceptable condition, must be returned within 3 months of purchase date for credit. Customers will not receive credit or refund for pallets in excess of purchases. Interest accrues on the unpaid balance at the rate of 1 1/2% per month. Customer agrees to pay costs of collection, including reasonable attorneys fees.

Received by: \_\_\_\_\_ Date: \_\_\_\_\_  
CUSTOMER

circle one:  Yes  No

11944

6-12-24

\$ 167.00

West Lak Villages

circle one: Yes  No

Sod

circle one: Water   Wastewater

Initials *[Signature]*



RECEIPT RECORD



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LOWE'S HOME CENTERS, LLC  
425 EAST VAN FLEET DRIVE  
DAWTON, FL 33830 (863) 519-4000

- SALE -

SALES#: S2531QQY 5101139 TRANS#: 132965099 06-18-24

335457 SUNN 20-LB SUPER IRON PLU 18.98

SUBTOTAL: 18.98  
TOTAL TAX: 1.33  
INVOICE 70906 TOTAL: 20.31  
DEBITVISA: 20.31  
CHANGE: 0.00

DEBITVISA: XXXXXXXXXXXX3773 AMOUNT: 20.31 AUTHCD: 282826

CHP REFID:253113906012 06/18/24 00:21:36

\*PIN VERIFIED

TRACE : 906012 RETRIEVAL: 253113906012

PURCHASE CASH BACK TOTAL DEBIT

20.31 0.00 20.31

TUR : 6080048000

TSI : 6800 AID : A0000000980840

STORE: 2531 TERMINAL: 13 06/18/24 00:21:43

# OF ITEMS PURCHASED: 1

EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



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\* ENTER FOR A CHANCE TO BE \*  
\* ONE OF FIVE \$500 WINNERS DRAWN MONTHLY! \*  
\* ENTRE EN EL SORTEO MENSUAL \*  
\* PARA SER UNO DE LOS CINCO GANADORES DE \$500! \*  
\* \*  
\* ENTER BY COMPLETING A SHORT SURVEY \*  
\* WITHIN ONE WEEK AT: [www.lowes.com/survey](http://www.lowes.com/survey) \*  
\* \*\*\*\*\*

Receipt Date 6-18-24

Amount \$ 20.51

Utility Name West Hill Villages

Description Fertilizer

Circle one: Water  Wastewater

Rate Case? \_\_\_\_\_ NARUC \_\_\_\_\_ QB \_\_\_\_\_

Initials JR

W. L. W. W



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LOWE'S HOME CENTERS, LLC  
425 EAST VAN FLEET DRIVE  
BARTON, FL 33830 (863) 519-4000

- SALE -

ESH: S2531QQY 5101139 TRANSH: 124609089 06-04-24

5745099 12 02 R-0 SR 5N1 GLS SHBU	20.34
7.98 DISCOUNT EACH	-1.20
3 @ 6.78	
1026719 12-02 FUS GLOSS WHITE	13.56
7.98 DISCOUNT EACH	-1.20
2 @ 6.78	
5224592 12-02 PROJECT SOURCE GLOS	5.08
5.98 DISCOUNT EACH	-0.90
SUBTOTAL:	38.98
TOTAL TAX:	2.73
INVOICE 97471 TOTAL:	41.71
DEBIT/VISA:	41.71
CHANGE:	0.00

TOTAL SAVINGS THIS TRIP: \$6.90

ISA: XXXXXXXXXXXX0774 AMOUNT: 41.71 AUTHCD: 747915  
 CHIP REFID: 253106471725 06/04/24 10:47:40  
 \*PIN VERIFIED  
 TRACE : 471725 RETRIEVAL: 253106471725  
 PURCHASE CASH BACK TOTAL DEBIT  
 41.71 0.00 41.71  
 TUR : 8080048000  
 TSI : 6800 AID : A0000000980840

ORE: 2531 TERMINAL: 06 06/04/24 10:47:46  
OF ITEMS PURCHASED: 6

RECEIPT RECORD

Receipt Date 6-24-24

Amount \$ 41.71

Utility Name W. L. W. W

Description paying for WL.

Circle one: Water Wastewater

Rate Case? \_\_\_\_\_ NARUC \_\_\_\_\_ QB \_\_\_\_\_

Initials J.P.

West Lkl. project

# mylowe's Rewards



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LOVE'S HOME CENTERS, LLC  
425 EAST VAN FLEET DRIVE  
BARFOW, FL 33830 (863) 519-4000

-- SALE --

SALES#: FSTLAND3 4813724 TRANS#: 665516569 06-14-24

5224595 12-02 PROJECT SOURCE GLOS	5.98
2758649 SMART SEED BERMUDA 1.75LB	13.98
5260547 PS 2-CT REUSABLE NITRILE	2.98
5224596 12-02 PROJECT SOURCE GLOS	5.98

SUBTOTAL:	28.92
TOTAL TAX:	2.02
INVOICE 91268 TOTAL:	30.94
DEBIT/ISA:	30.94
CHANGE:	0.00

BIT/ISA: XXXXXXXXXXXX3773 AMOUNT: 30.94 AUTHCD: 880431  
 CHIP REFID:253123268575 06/14/24 08:02:53  
 \*PIN VERIFIED  
 TRACE : 268575 RETRIEVAL: 253123268575  
 PURCHASE CASH BACK TOTAL DEBIT  
 30.94 0.00 30.94  
 TWR : 8000048000  
 FSI : 6800

STORE: 2531 TERMINAL: 23 06/14/24 08:03:10  
 # OF ITEMS PURCHASED: 4  
 EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



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\*\*\*\*\*  
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## RECEIPT RECORD

\* Purchase Order? circle one: Yes  No

Purchase Order No. (office) \_\_\_\_\_

Receipt Date 6-14-24

Amount \$ 30.94

Utility Name West Lkl Villages

\* Overtime? circle one: Yes  No

### Description

Spray paint  
Bermuda Scent  
Reusable Gloves

\* For LYU, EMU and HHU circle one: Water  Wastewater

Initials JL

Plants for WLUW

Spirit Lake Garden Center

5123 Spirit Lake Road June 18, 2024  
WINTER HAVEN, FL 12:51 PM  
33880 Cecilia  
(863) 251-7644  
www.spiritlakegardencenter.com

Receipt: JwKU  
Authorization: 431171

US DEBIT  
AID AO 00 00 00 98 08 40

Hosta 1 Gallon	\$8.99
Sweet Viburnum 3 Gallon x 2 (\$13.50 each)	\$27.00
Firebush Dwarf 3 Gallon x 2 (\$13.50 each)	\$27.00
Texas Sage Silver 3 Gallon x 2 (\$14.50 each)	\$29.00
Ligustrum Sunshine Southern Living 3 Gallon x 2 (\$23.50 each)	\$47.00

Subtotal	\$138.99
Florida State and Polk County Sales Tax (7%)	\$9.73

<b>Total</b>	<b>\$148.72</b>
Visa 1959 (Chip)	\$148.72
Michael A Smallridge	



RECEIPT RECORD

\* Is this part of a Purchase Order? circle one: Yes No

Purchase Order No. \_\_\_\_\_

Receipt Date 6/18/24

Amount \$ 148.72

Utility Name FWS / WLUW

\* Is this expense part of Overtime? circle one: Yes No

Description

plant for Burm.

\* For LYU, EMU and HHU

circle one: Water Wastewater

Initials \_\_\_\_\_

West Lake Land

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LOWE'S HOME CENTERS, LLC  
425 EAST VAN FLEET DRIVE  
BARTON, FL 33830 (863) 519-4000

- SALE -

SALES#: FSTLAN04 3475132 TRANSH: 994393194 06-12-24

23926 3-IN PVC DWV CAP	45.55
5 @ 9.11	
23544 8-OZ RAIN R SHINE PVC CEM	11.48
1478679 FISKARS MACHETE W SHEATH	34.90
209668 2-IN SINGLE UNION BALL VA	27.96
2 @ 13.98	
425006 VENOM 50-CT HVY DTY NITRI	17.98
SUBTOTAL: 137.95	
TOTAL TAX: 9.66	
INVOICE 86837 TOTAL: 147.61	
DEBITVISA: 147.61	
CHANGE: 0.00	

DEBITVISA: XXXXXXXXXXXX3773 AMOUNT: 147.61 AUTHCD: 24257  
3

CHIP REFID: 253123837467 06/12/24 09:37:47  
\*PIN VERIFIED

TRACE : 837467 RETRIEVAL: 253123837467  
PURCHASE CASH BACK TOTAL DEBIT  
147.61 0.00 147.61  
TVR : 8080048000  
TSI : 6800

STORE: 2531 TERMINAL: 23 06/12/24 09:30:05

# OF ITEMS PURCHASED: 10  
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



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## RECEIPT RECORD

\* Purchase Order? circle one: Yes  No

Purchase Order No. (office) \_\_\_\_\_

Receipt Date 6-12-24

Amount \$ 147.61

Utility Name West Lk Villages

\* Overtime? circle one: Yes  No

### Description

3in PVC cap  
Rain or Shine glue  
2" pvc ball Valve (2)  
Venom gloves, Machete

\* For LYU, EMU and HHU circle one: Water  Wastewater

Initials JL

Florida Utility Services 1. IIC

*West LK1*  
\*\*\* DUPLICATE COPY \*\*\*  
REYNOLDS FOOD MART  
1035 REYNOLDS RD-  
LAKELAND FL 33801  
(863) 937-5347

ORDER # 292883  
INVOICE# 292883  
Closed to Credit Card Purchase

DATE/TIME: 6/12/2024 11:03:40 AM  
CASHIER: MANAGER  
STATION: 01

Item Count: 4

2 FS POWERADE ORANGE*	\$3.98
1 FS POWERADE FRUIT PUNCH*	\$1.99
1 FS ICE BAG	\$3.49

Subtotal	\$9.46
Tax	\$0.42
<b>GRAND TOTAL</b>	<b>\$9.88</b>

Credit \$9.88

CREDIT CARD PURCHASE \$9.88  
Card Type: Visa  
\*\*\*\*\*3773 XX/XX  
Name: SERVICES, FLORIDA UTILITY  
Transaction Type: PURCHASE  
Ref Num: CKMF  
Auth Code: 430431  
Gateway Txn ID: 464164542218948  
Card Entry Method : Swiped  
AP430431

RECEIPT RECORD

\* Purchase Order? circle one: Yes No

Purchase Order No. (office) \_\_\_\_\_

Receipt Date 6-12-24

Amount \$ 9.88

Utility Name West LK1 Villages

\* Overtime? circle one: Yes No

Description

Power Aids  
Ice  
\_\_\_\_\_  
\_\_\_\_\_

\* For LYU, EMU and HHU circle one: Water Wastewater

Initials JR



#13797 395 E VAN FLEET DR  
BARTOW, FL 33830  
863-533-6669

570 9823 0002 06/05/2024 9:14 AM

BLUE SKY NOTES SEVILLE BLACK/NAVY  
84703715359 A 4.49  
RETURN VALUE 4.49  
  
SUBTOTAL 4.49  
SALES TAX A=7.0% 0.31  
  
TOTAL 4.80  
DEBIT CARD 4.80  
AUTH CODE 577569  
CHANGE .00

Sale  
AID A0000000980840  
US DEBIT  
Integrated chip card  
PIN Verified

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OR GO TO MYWALGREENS.COM. ENROLLING IS  
QUICK, EASY AND FREE! REDEEM WALGREENS  
CASH REWARDS OFF FUTURE PURCHASES.

PFEN# 1379-7029-8233-2406-0503



Walgreens 13797  
ACCT 3773  
SEQUENCE 3797020930  
PAYMENT FROM PRIMARY

HUNDREDS OF PHARMACY PLANS STILL COVER  
COVID-19 OTC TEST KITS, ASK THE PHARMACY  
IF YOUR PLAN COVERS TODAY!

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[WWW.WALGREENSLISTENS.COM](http://WWW.WALGREENSLISTENS.COM)  
or scan this code with your mobile device



### RECEIPT RECORD

\* Purchase Order? circle one: Yes  No

Purchase Order No. (office) \_\_\_\_\_

Receipt Date 6/5/24

Amount \$ 4.80

Utility Name West K1 Villages

\* Overtime? circle one: Yes  No

Description  
Note book  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* For LYU, EMU and HHU circle one: Water  Wastewater

Initials JK



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LOVE'S HOME CENTERS, LLC  
425 EAST VAN FLEET DRIVE  
BARTON, FL 33830 (863) 519-4000

- SALE -

SALES#: S2531CM3 2250751 TRANS#: 803260782 06-13-24

1031251 GATORADE 20-FL OZ 8-CT	8.98
293316 SAKRETE 60-LB CONCRETE MI	52.20
12 @ 4.35	

SUBTOTAL:	61.18
TOTAL TAX:	4.28
INVOICE 88922 TOTAL:	65.46
DEBITVISA:	65.46
CHANGE:	0.00

ITVISA: XXXXXXXXXXXX3773 AMOUNT: 65.46 AUTHCD: 541718

CHIP REF ID: 253102922544 06/13/24 08:05:27

\*PIN VERIFIED

TRACE : 922544 RETRIEVAL: 253102922544

PURCHASE CASH BACK TOTAL DEBIT

65.46 0.00 65.46

TUR : 8080048000

TSI : 6800

FORE: 2531 TERMINAL: 02 06/13/24 08:05:35

OF ITEMS PURCHASED: 13

INCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'S.  
FOR DETAILS ON OUR RETURN POLICY, VISIT  
LOWES.COM/RETURNS  
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\*\*\*\*\*

### RECEIPT RECORD

\* Purchase Order? circle one: Yes  No

Purchase Order No. (office) \_\_\_\_\_

Receipt Date 6-13-24

Amount \$ 65.46

Utility Name West Lak Villages

\* Overtime? circle one: Yes  No

Description \_\_\_\_\_

3 pack Gatorade

60lb Sakrete

\_\_\_\_\_

\_\_\_\_\_

\* For LYU, EMU and HHU circle one: Water  Wastewater

Initials JK



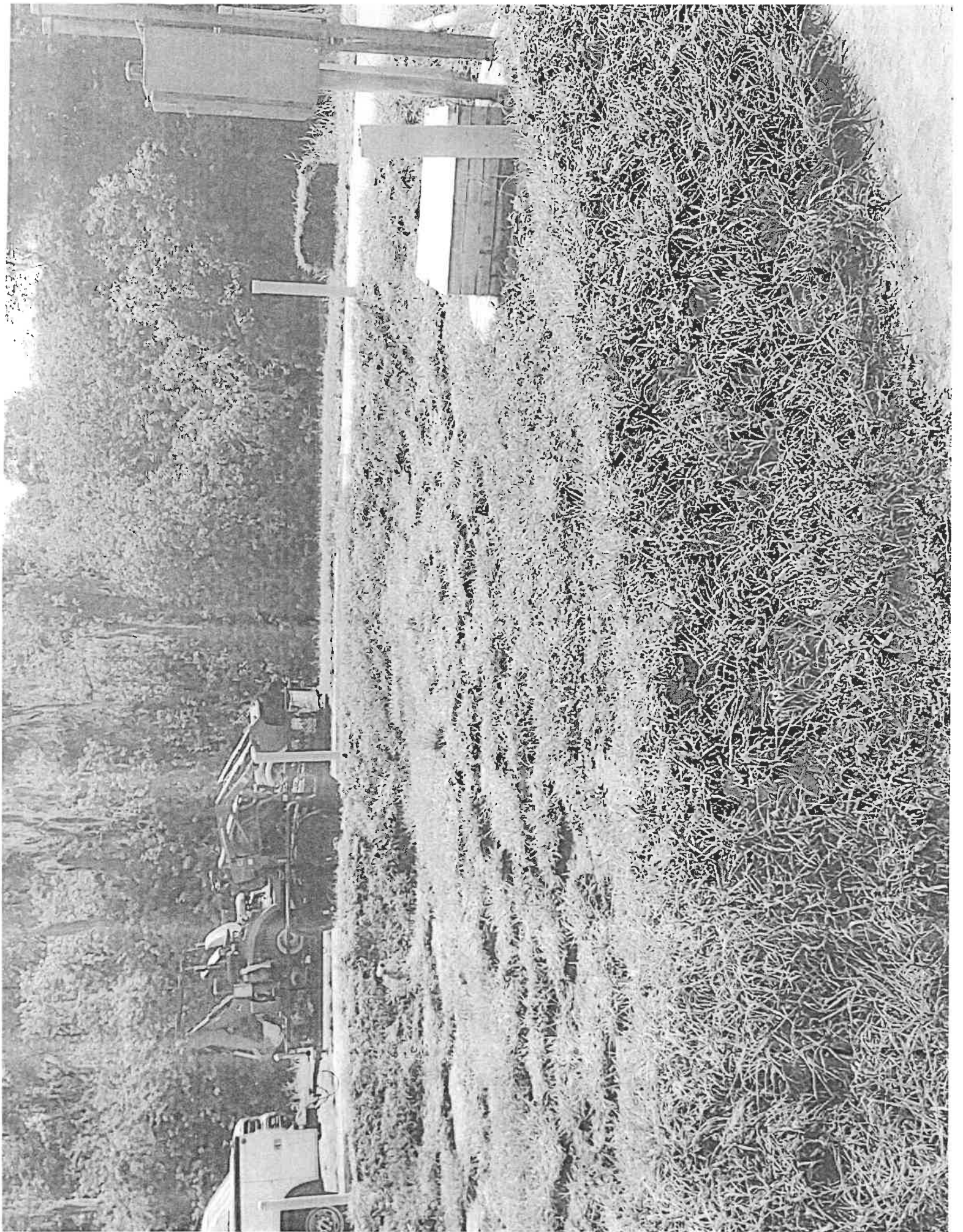


















## CUSTOMER COMPLAINT FORM

UTILITY: West Lakeland Wastewater, LLC

1. CUSTOMER NAME: Caller did not leave name or callback #

2. SERVICE ADDRESS: N/A

3. CUSTOMER PHONE NUMBER: N/A

4. DATE OF COMPLAINT: 4-25-2020 BY PHONE OR EMAIL. IF BY EMAIL ATTCH EMAIL

5. DESCRIBE REASON OF COMPLAINT: Caller called in After hours  
Saturday April 25, 2020 to report Sewer plant  
alarm going off on Barrington Ave off of Reynolds Rd.

6. HOW WAS COMPLAINT RESOLVED? DATE RESOLVED Notified technician  
of Alarm going off. after receiving call. Tech will  
check sewer plant. 4/25/2020.

## CUSTOMER COMPLAINT FORM

UTILITY: West Lakeland WASTEWATER, LLC

1. CUSTOMER NAME: Andrea Hawkins

2. SERVICE ADDRESS: 446 Oak Ridge East

3. CUSTOMER PHONE NUMBER: 407-280-6275

4. DATE OF COMPLAINT: 4/12/2021 BY PHONE OR EMAIL. IF BY EMAIL ATTCH EMAIL

5. DESCRIBE REASON OF COMPLAINT: Call came in After 4ours

8:03 AM customer Reported having NO WATER.

6. HOW WAS COMPLAINT RESOLVED? DATE RESOLVED 4/12/2021 I called

the customer back and told her we only service

the sewer. The customer needs to call Lakeland

Electric - her water company

## CUSTOMER COMPLAINT FORM

UTILITY: West Okland Wastewater, LLC

1. CUSTOMER NAME: JO POUTRE

2. SERVICE ADDRESS: 3618 LAZY LAKE DR.

3. CUSTOMER PHONE NUMBER: 803-248-9359

4. DATE OF COMPLAINT: 8/4/2021 BY PHONE OR EMAIL. IF BY EMAIL ATTCH EMAIL

5. DESCRIBE REASON OF COMPLAINT: Customer reported sewer backing up. Pump at sewer plant is off.

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6. HOW WAS COMPLAINT RESOLVED? DATE RESOLVED Notified technician  
Tech will check sewer system ASAP. 8/4/2021

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## CUSTOMER COMPLAINT FORM

UTILITY: West Lakeland wastewater

1. CUSTOMER NAME: Maria Barreto

2. SERVICE ADDRESS: 431 Leisure place.

3. CUSTOMER PHONE NUMBER: 860-574-0977

4. DATE OF COMPLAINT: 9-4-2021 BY PHONE OR EMAIL. IF BY EMAIL ATTCH EMAIL

5. DESCRIBE REASON OF COMPLAINT: NO water - customer  
PAID her bill yesterday.

6. HOW WAS COMPLAINT RESOLVED? DATE RESOLVED I spoke with  
the customer and told her to call Lakeland  
Electric. We only service sewer. 9-4-2021

## CUSTOMER COMPLAINT FORM

UTILITY: West Lakeland Wastewater, LLC

1. CUSTOMER NAME: Jo Poutre

2. SERVICE ADDRESS: 3618 LAY LAKE DR. SOUTH

3. CUSTOMER PHONE NUMBER: 803-248-9359

4. DATE OF COMPLAINT: 10-1-2021 BY PHONE OR EMAIL. IF BY EMAIL ATTCH EMAIL

5. DESCRIBE REASON OF COMPLAINT: Sewer system backing up.

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6. HOW WAS COMPLAINT RESOLVED? DATE RESOLVED Notified technician  
he will check system ASAP. 10/1/2021

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## CUSTOMER COMPLAINT FORM

UTILITY: West Highland WASTEWATER, LLC

1. CUSTOMER NAME: Danielle Pedrosa

2. SERVICE ADDRESS: 438 Perch place

3. CUSTOMER PHONE NUMBER: 863-808-9898

4. DATE OF COMPLAINT: 10/18/2019 BY PHONE OR EMAIL. IF BY EMAIL ATTCH EMAIL

5. DESCRIBE REASON OF COMPLAINT: Customer says we installed  
pipes in her yard for the wastewater and now  
water is backing up into her yard.  
pipes were installed 3 months ago.

6. HOW WAS COMPLAINT RESOLVED? DATE RESOLVED Have checked  
sewer line advised customer he needs to get  
a plumber. Issue not on utility's end.

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## CUSTOMER COMPLAINT FORM

UTILITY: West Lakeland Wastewater, LLC

1. CUSTOMER NAME: Greg Deibert

2. SERVICE ADDRESS: 522 Oak Ridge East

3. CUSTOMER PHONE NUMBER: 563-937-7867

4. DATE OF COMPLAINT: 12/13/2019 BY PHONE OR EMAIL. IF BY EMAIL ATTCH EMAIL

5. DESCRIBE REASON OF COMPLAINT: BAD odor in neighborhood

6. HOW WAS COMPLAINT RESOLVED? DATE RESOLVED Issue checked

Sewer system. there were no issues on utility's

end. says there is a company in area digging

man holes. This may be the cause. 12/15/2019

## CUSTOMER COMPLAINT FORM

UTILITY: West Lakeland Wastewater, LLC

1. CUSTOMER NAME: Charles Rains

2. SERVICE ADDRESS: 448 Leisure place

3. CUSTOMER PHONE NUMBER: 863-665-0922

4. DATE OF COMPLAINT: 11/22/2019 BY PHONE OR EMAIL. IF BY EMAIL ATTCH EMAIL

5. DESCRIBE REASON OF COMPLAINT: Customer mailed in complaint letter stating he would like a refund for a payment of \$21.42 processed on 11/3/2019. SAYS he should not have been charged because he does not live there he sold the home on October 1, 2019.

6. HOW WAS COMPLAINT RESOLVED? DATE RESOLVED I tried calling the customer. Phone number on file does not work. I emailed the customer explaining to him that the payment of \$21.42 covered his final bill. Service end date on bill was October 1, 2019. Emailed customer on 11/22/2019



## CUSTOMER COMPLAINT FORM

UTILITY: West Lakeland Wastewater, LLC

1. CUSTOMER NAME: Raymond Michael Schater

2. SERVICE ADDRESS: 446 Skyline DR. EAST

3. CUSTOMER PHONE NUMBER: 616-485-7903

4. DATE OF COMPLAINT: 10/23/2019 BY PHONE OR EMAIL. IF BY EMAIL ATTCH EMAIL

5. DESCRIBE REASON OF COMPLAINT: Charlie Thomas, personal representative.

for the estate of Raymond Schater requested \$7.00 late  
fee be waived. SAYS Sewer has not been utilized in almost

2-years. Late payment was unavoidable due to the amount of time  
it took to be appointed by the court as personal representative.

6. HOW WAS COMPLAINT RESOLVED? DATE RESOLVED Late fee was waived

on Mr. Schater's Account. 10/23/2019

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**PUMPING EQUIPMENT**

Lift Station Number.....	<u>2-1</u>	<u>2-2</u>	<u>3-1</u>	<u>3-2</u>	<u>EFF1s</u>	<u>EFF1s</u>
Make or Type and nameplate data on pump.....	<u>Subm</u>	<u>Subm</u>	<u>Subm</u>	<u>Subm</u>	<u>Subm</u>	<u>Subm</u>
Year installed.....	<u>Unk</u>	<u>Unk</u>	<u>Unk</u>	<u>Unk</u>	<u>Unk</u>	<u>Unk</u>
Rated capacity.....	<u>150</u>	<u>150</u>	<u>100</u>	<u>100</u>	<u>100</u>	<u>100</u>
Size.....						
Power:						
Electric.....	<u>X</u>	<u>X</u>	<u>X</u>	<u>X</u>	<u>X</u>	<u>X</u>
Mechanical.....						
Nameplate data of motor.....						

**SERVICE CONNECTIONS**

Size (inches).....	<u>3 1/2"</u>					
Type (PVC, VCP, etc.).....	<u>PVC</u>					
Average length.....	<u>50</u>					
Number of active service connections.....						
Beginning of year.....	<u>315</u>					
Added during year.....						
Retired during year.....						
End of year.....	<u>302</u>					
Give full particulars concerning inactive connections.....						

**COLLECTING AND FORCE MAINS**

	Collecting Mains				Force Mains			
Size (inches).....	<u>6"- 12"</u>				<u>4"- 6"</u>			
Type of main.....	<u>PVC</u>				<u>PVC</u>			
Length of main (nearest foot).....								
Beginning of year.....	<u>13376</u>				<u>1835</u>			
Added during year....								
Retired during year...								
End of year.....	<u>13376</u>				<u>1835</u>			

**MANHOLES**

Size (inches).....	<u>53</u>			
Type of Manhole.....				
Number of Manholes:				
Beginning of year.....	<u>12</u>			
Added during year.....				
Retired during year.....				
End of Year.....	<u>12</u>			