

SCANNED

Rhema Business Services, Inc.

1344 Vickers Drive
Tallahassee, FL 32303-3041

(850) 562-9886
(850) 562-9887 FAX

ORIGINAL

January 8, 1999

Division of Records and Reporting
Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850

RECEIVED-FPSC
99 JAN - 8 AM 9:47
RECORDS AND REPORTING

Re: Docket No. 981341-WS, Application of CHC VII, LTD. for Grandfather Water and Wastewater Certificates in Polk County, Florida

Gentlemen:

Enclosed are the original and five (5) copies of the CHC VII, Ltd. response to John D. Williams' letter of November 13, 1998, the original revised map, and the original and two (2) copies of the modified tariff sheets. Each item in that letter is addressed in the order it appeared.

1. **Utility Name.** The correct name of the utility is CHC VII, Ltd.
2. **Rate Authority.** The Board of Commissioners of Polk County considered this utility exempt from its regulation, due to it being subject to the requirements of Chapter 723, Florida Statutes. Polk County, accordingly, did not authorize the current rates.

CHC VII put the current rates into effect on September 30, 1986. A copy of the portion of each current prospectus pertaining to the water and wastewater rate, and a copy of the lease for each park are enclosed. The rate reflected in each prospectus is that after implementation of the regulatory assessment fee pass-through rate adjustment. Management purged all earlier versions to assure that any prospectus issued is the current version.

3. **Legal Description and Territory Map.** The legal description is correct. A new map is enclosed. *To WAW*

ACK _____
 AFA _____
 AFP _____
 CAF _____
 CMU _____
 CTR _____
 EAG _____
 LEG 1 _____
 LIN _____
 OPC _____
 RCH _____
 SEC 1 _____
 WAS Brad _____
 OTH _____

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Monte Reddick
FPSC-BUREAU OF RECORDS

DOCUMENT NUMBER-DATE
00310 JAN-8 99
FPSC-RECORDS/REPORTING

4. Permit Information.

- a. The date of the utility's water construction permit is August 19, 1986. The utility's current wastewater permit was originally issued on February 19, 1992, and modified on April 30, 1993.
- b. Copies of the water construction permit, the current wastewater permit, Wastewater Permit Application Form 1, and Wastewater Application Form 2A are enclosed.
- c. Copies of the monthly operating reports are enclosed.
- d. The utility is in the Highland Ridge Water Use Caution Area.
- e. There are no unresolved warning letters or current consent orders.

5. System Verification. The water systems, and wastewater systems, of the two mobile home parks are connected. The Swiss Golf community is the double-wide section, and the Hidden Golf community is the single-wide section. Both communities were constructed in 1986.

6. Tariff Name. The correct name of the utility is CHC VII, Ltd.

7. Tariff Address and Phone Number. CHC VII, Ltd. is managed by the Managing General Partner, which is responsible for the day-to-day management of the utility. The General Partner has a pool of employees available, which is in common with General Partners of the other utilities, all of which are located at the same address. This office is approximately twenty miles from the mobile home parks. The business and emergency telephone numbers are local calls for the utility's customers.

8. Tariff Rates. CHC VII is making application for grandfather certificates. The application for grandfather certificates is not the appropriate forum in which to modify its rate structure. The Commission can not fairly modify the rate structure without concurrently authorizing an increase in rates to offset the additional costs.

CHC VII respectfully declines to provide the information requested in items a through c. CHC VII does not have the staffing to provide the detailed information that has been requested.

Changing the rate structure to separate usage and base facility charges would impose a financial hardship on the utility. The change would require CHC VII to reprogram its billing program. The change would also require CHC VII to change the prospectus for each of the two mobile home parks in its service area pursuant to Chapter 723, Florida Statutes. Amendment of each prospectus entails engaging attorneys to prepare and file each prospectus with the Bureau of Mobile Homes. In addition to the legal costs, CHC VII would have to pay a filing fee equal to ten dollars (\$10.00) per lot. Preparation, filing and processing each prospectus would require approximately three months. CHC VII would then have to give its customers ninety (90) days notice.

The group which manages CHC VII would have to prepare a prospectus for each of ten (10) different mobile home parks. The expense of changing the prospectus for each of the ten mobile home parks would provide no benefit to the customers.

The Commission can not fairly impose a change of rate structure without concurrently authorizing an increase in rates to offset the additional costs. The application for grandfather certificates is, accordingly, not the proper forum in which to change the rate structure.

9. **Combined Rates.** The utility's rates are for water and wastewater service combined.
10. **Cost of Service.** CHC VII is making application for grandfather certificates. The application for grandfather certificates is not the appropriate forum in which to modify its rate structure. The Commission can not fairly require CHC VII to separate its water and wastewater charge without concurrently allowing it to recover the cost of separating the charge.

Separating the water and wastewater charge would require CHC VII to reprogram its customer billing program. It would also require CHC VII to change the prospectus for each of the two mobile home parks in its service area pursuant to Chapter 723, Florida Statutes. Amendment of each prospectus entails engaging attorneys to prepare and file each prospectus with the Bureau of Mobile Homes. In addition to the legal costs, CHC VII would have to pay a filing fee equal to ten dollars (\$10.00) per lot. Preparation, filing and processing each prospectus would require approximately three months. CHC VII would then have to give its customers ninety (90) days notice.

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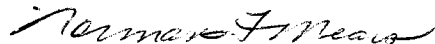
The group which manages CHC VII would have to prepare a prospectus for each of ten (10) different mobile home parks. The expense of changing the prospectus for each of the ten mobile home parks would provide no benefit to the customers.

The Commission can not fairly require CHC VII to separate its water and wastewater charge without concurrently allowing it to recover the costs of separating the charge. This application for grandfather certificates is, accordingly, not the proper forum in which to separate the water and wastewater charge.

11. Miscellaneous Tariff Corrections. Please see the enclosed, modified tariff sheets. In Water Tariff Rule 7.0, we have added the phrase, "without the prior written consent of the Utility", rather than deleting the paragraph.

Please direct any additional questions to me at 562-9886.

Sincerely,



Norman F. Mears
Senior Utility Consultant

Hand deliver
Enclosures
cc: Ray Moats

PROSPECTUS

SWISS GOLF & TENNIS CLUB MOBILE HOME PARK

1. THIS PROSPECTUS (OFFERING CIRCULAR) CONTAINS IMPORTANT MATTERS TO BE CONSIDERED IN LEASING A MOBILE HOME LOT.
2. THE STATEMENTS CONTAINED HEREIN ARE ONLY SUMMARY IN NATURE. A PROSPECTIVE LESSEE SHOULD REFER TO ALL REFERENCES, ALL EXHIBITS HERETO, THE CONTRACT DOCUMENTS, AND SALES MATERIALS.
3. ORAL REPRESENTATIONS SHOULD NOT BE RELIED UPON AS CORRECTLY STATING THE REPRESENTATIONS OF THE PARK OWNER OR OPERATOR. REFER TO THIS PROSPECTUS (OFFERING CIRCULAR) AND ITS EXHIBITS FOR CORRECT REPRESENTATIONS.
4. UPON DELIVERY OF THIS PROSPECTUS TO A PROSPECTIVE LESSEE, THE RENTAL AGREEMENT IS VOIDABLE BY THE LESSEE FOR A PERIOD OF FIFTEEN (15) DAYS.

made, base rent will be increased as set out in VIII(C) above. The mobile home owner shall be notified of the increase in base rent at least ninety (90) days prior to the increase.

F. OTHER FEES CHARGED TO HOME OWNER

Other fees, charges, or assessments that the resident is responsible for are:

(1) Lot and lawn maintenance is the responsibility of the individual mobile home owner. Waterfront lots shall be maintained to the waterfront by the mobile home owner. In the event that lawn maintenance is not performed by the individual mobile home owner, the Park Owner may maintain such lot and the mobile home owner shall be responsible for the cost to the mobile home park of maintaining the lot and lawn. That cost is currently \$ 20.00 per cut .

(2) Water and sewer are the responsibility of the individual mobile home owner. Water and sewage will be paid by the mobile home owner based on a minimum fee of \$ 15.71 per month for usage up to 8000 gallons per month. For every 1000 gallons or portion thereof in excess of 8000 gallons up to 10,000 gallons, the rate shall be an additional \$ 1.31 per 1000 gallons. For every 1000 gallons or portion thereof in excess of 10,000 gallons, the rate shall be an additional \$ 2.09 per 1000 gallons. Those mobile home owners living on lots 1001 through 1086 will be charged by the City of Winter Haven in accordance with its current rates.

(3) Tree trimming and/or removal is the responsibility of the individual mobile home owner if that tree is located on the leased lot. Trees will not be trimmed or removed without the manager's written permission. If the mobile home owner refuses to trim and/or remove the tree, then the park Owner may do so and bill the mobile home owner the amount of services in the following month's rent. The charge for tree trimming and/or removal is \$ billed amount.

(4) Late fees of \$ 1.50 per day will accrue after the fifth day of the month on rent or any other charge to the mobile home owner that is not paid by the fifth day of each month. That \$ 1.50 per day will be retroactive to the first day of the month and will continue every day thereafter until such time as the rent or other charge is paid. A \$ 15.00 service fee, plus late charges, will be made for bad checks.

(5) The mobile home owner shall pay an extra resident fee of \$ 10.00 per person per month for guest visiting beyond fifteen consecutive days or more than thirty days per year.

(6) The mobile home owner will be charged a debris removal fee in accordance with Section VIII(K) if the mobile home owner refuses, or for any other reason is unable, to comply with that Section. The charge for that service is \$ billed amount.

**SWISS GOLF & TENNIS CLUB MOBILE HOME PARK
LEASE AGREEMENT**

THIS LEASE made and entered into this ____ day of _____, 19____, by and between CHC VII, Ltd., known as Swiss Golf & Tennis Club Mobile Home park, hereinafter called the "Community" and _____, hereinafter called the Owner-tenant.

WITNESSETH, that in consideration of the covenants herein contained, on the part of the said Owner-tenant to be kept and performed, the said Community does hereby release to the said Owner-tenant the following described property: Street: _____, Lot No.: _____.

TO HAVE AND TO HOLD the same from the ____ day of _____, 19____, until the 31st day of December, the said Owner-tenant paying the initial monthly base rental of \$_____ from the beginning of this Lease until the 31st day of December, 19____. Annual monthly base rental increases for the calendar years 19____ and subsequent years will be based on no less than \$5.00 or the increase in the Consumer Price Index (defined as the United States Department of Labor Consumer Price Index, U.S. City Average, All Urban Consumers, 1982-84 equals 100) ("CPI"), whichever is greater. Lease renewals and increases will become effective the first day of January of each year thereafter and will be a part of the Lease Agreement for that year.

Base rent will also be increased in calendar years subsequent to the initial year by any increase in real estate or other taxes and assessments by a state or local government. Such increases in taxes and assessments will be based on a prorata computation among all lots in the mobile home park and will be charged to all residents to whom this Prospectus is applicable. The mobile home owner shall be notified of the increase in base rent at least ninety (90) days prior to the increase.

Rental payments are due on or before the 1st day of each month for that month, at the place designated by the Community.

The Owner-tenant covenants and agrees to the following:

1. To make no unlawful, improper, or offensive use of the property.
2. To comply with the Rules & Regulations of the Park. A copy of said Rules & Regulations has been furnished to the Owner-tenant.
3. That the Lease is governed by Chapter 723, Florida Statutes (Florida Mobile Home Act) as currently in effect at the time of execution of this document, the provisions of which are incorporated herein by reference.
4. Actions by the Owner-tenant which constitute grounds for eviction under Section 723.061, Florida Statutes, shall be a violation of this Lease. Failure of the Community to evict a tenant for violation of any one of the grounds set forth in Section 723.061, Florida Statutes, or for any grounds provided for in this Lease, shall not waive the right for the Community to consider any subsequent violation of the same grounds, or the violation of any other grounds, a breach of this Lease by Owner-tenant so long as permitted by Chapter 723, Florida Statutes.
5. As provided in the Rules & Regulations, rules and regulations may be modified, eliminated, or additional rules and regulations adopted by the Community upon giving the Owner-tenant notice thereof as required by law and said Rules & Regulations in accordance with Chapter 723, Florida Statutes.

6. This Lease and the privileges contained herein are not assignable, and said Lease is only valid as long as those executing this Lease reside upon the premises set forth in this Lease, and are in full conformance of all provisions of this Lease and the park Rules & Regulations, except that a new home owner may assume, in writing, the balance of the annual Lease through December 31, of the year of purchase in accordance with Chapter 723, Florida Statutes.

7. Owner-tenant expressly understands and agrees that, upon execution of this Lease, all prior leases, rental agreement, negotiations, and other agreements between the parties regarding the lot leased are hereby terminated, void, and of no legal force and effect.

8. Storm Drainage is included in the lot rental amount and charged in accordance with Sections VII and VII(J) of the Prospectus.

9. Other financial obligations of the Owner-tenant, not including user fees, are as follows:

| | | <u>Fees or Charges</u> |
|---|--|--|
| Yard Maintenance (not charged unless owner fails to maintain yard) | | \$ <u>20.00</u> per cut |
| Water and Sewer | up to <u>8000</u> gallons | \$ <u>15.71</u> |
| | excess per <u>1000</u> gal. over <u>8000</u> up to <u>10,000</u> | \$ <u>1.31</u> |
| | excess per <u>1000</u> gal. over <u>10,000</u> | \$ <u>2.09</u> |
| lots 1001 through 1086 | | charged by the City of Winter Haven in accordance with its current rates |
| Tree Trimming/Removal, Debris Removal (not charged unless Owner-tenant fails to provide services himself) | | \$ <u>billed amount</u> |
| Late Check Charge after 5th day | | \$ <u>1.50</u> per day |
| Bad Check Charge | | \$ <u>15.00</u> |
| Extra Resident Fee | | \$ <u>10.00</u> per person |
| Debris Removal | charged in accordance with Section VIII(K) of the Prospectus | |
| Governmental Assessments, Fees, Surcharges, Charges | charged in accordance with Section VIII(J) of the Prospectus | |

The fees will be charged and increased as set out in Sections VIII(F) through (K) of the Prospectus. No services are included in the lot rental amount other than those services stated above.

10. The Community reserves the right to pass on and pass through charges in accordance with the Prospectus and Chapter 723, Florida Statutes.

11. Owner-tenant(s) acknowledge that they have read the foregoing, the Rules & Regulations, and the Prospectus, and that Owner-tenant was offered the foregoing Lease prior to occupancy.

We have read and understand this Agreement and agree to the terms set out herein.

WITNESS our hands and seals of the date set out above.

Owner-tenant

Community Representative

Owner-tenant

PROSPECTUS

HIDDEN GOLF CLUB MOBILE HOME PARK

1. THIS PROSPECTUS (OFFERING CIRCULAR) CONTAINS IMPORTANT MATTERS TO BE CONSIDERED IN LEASING A MOBILE HOME LOT.
2. THE STATEMENTS CONTAINED HEREIN ARE ONLY SUMMARY IN NATURE. A PROSPECTIVE LESSEE SHOULD REFER TO ALL REFERENCES, ALL EXHIBITS HERETO, THE CONTRACT DOCUMENTS, AND SALES MATERIALS.
3. ORAL REPRESENTATIONS SHOULD NOT BE RELIED UPON AS CORRECTLY STATING THE REPRESENTATIONS OF THE PARK OWNER OR OPERATOR. REFER TO THIS PROSPECTUS (OFFERING CIRCULAR) AND ITS EXHIBITS FOR CORRECT REPRESENTATIONS.
4. UPON DELIVERY OF THIS PROSPECTUS TO A PROSPECTIVE LESSEE, THE RENTAL AGREEMENT IS VOIDABLE BY THE LESSEE FOR A PERIOD OF FIFTEEN (15) DAYS.

event that lawn maintenance is not performed by the individual mobile home owner, the Park Owner may maintain such lot and the mobile home owner shall be responsible for the cost to the mobile home park of maintaining the lot and lawn. That cost is currently \$ 20.00 per cut.

(2) Water and sewer are the responsibility of the individual mobile home owner. Water and sewage will be paid by the mobile home owner based on a minimum fee of \$ 15.71 per month for usage up to 8000 gallons per month. For every 1000 gallons or portion thereof in excess of 8000 gallons up to 10,000 gallons, the rate shall be an additional \$ 1.31 per 1000 gallons. For every 1000 gallons or portion thereof in excess of 10,000 gallons, the rate shall be an additional \$ 2.09 per 1000 gallons.

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(4) Late fees of \$ 1.50 per day will accrue after the fifth day of the month on rent or any other charge to the mobile home owner that is not paid by the fifth day of each month. That \$ 1.50 per day will be retroactive to the first day of the month and will continue every day thereafter until such time as the rent or other charge is paid. A \$ 15.00 service fee, plus late charges, will be made for bad checks.

(5) The mobile home owner shall pay an extra resident fee of \$ 10.00 per person per month for guest visiting beyond fifteen consecutive days or more than thirty days per year.

(6) The mobile home owner will be charged a debris removal fee in accordance with Section VIII(K) if the mobile home owner refuses, or for any other reason is unable, to comply with that Section. The charge for that service is \$ billed amount.

(7) The mobile home owner shall also be responsible for governmental assessments, fees, surcharges, and charges in accordance with Section VIII(J). Such taxes and/or assessments shall be allocated equally among all lots and shall be billed annually to the mobile home owner.

G. FACTORS USED TO INCREASE LOT RENTAL AMOUNT EXCLUDING BASE RENT

Fees, charges, and other costs to the mobile home owner will be charged or increased, as the case may be, as a result of increased costs to the Park Owner attributable to increases in utility rates and usage, tap-in fee requirement(s) into a utility

**HIDDEN GOLF CLUB MOBILE HOME PARK
LEASE AGREEMENT**

THIS LEASE made and entered into this ____ day of _____, 19____, by and between CHC VII, Ltd., known as Hidden Golf Club Mobile Home park, hereinafter called the "Community" and _____, hereinafter called the Owner-tenant.

WITNESSETH, that in consideration of the covenants herein contained, on the part of the said Owner-tenant to be kept and performed, the said Community does hereby release to the said Owner-tenant the following described property: Street: _____, Lot No.: _____.

TO HAVE AND TO HOLD the same from the ____ day of _____, 19____, until the 31st day of December, the said Owner-tenant paying the initial monthly base rental of \$_____ from the beginning of this Lease until the 31st day of December, 19____. Annual monthly base rental increases for the calendar years 19____ and subsequent years will be based on no less than \$5.00 or the increase in the Consumer Price Index (defined as the United States Department of Labor Consumer Price Index, U.S. City Average, All Urban Consumers, 1982-84 equals 100) ("CPI"), whichever is greater. Lease renewals and increases will become effective the first day of January of each year thereafter and will be a part of the Lease Agreement for that year.

Base rent will also be increased in calendar years subsequent to the initial year by any increase in real estate or other taxes and assessments by a state or local government. Such increases in taxes and assessments will be based on a prorata computation among all lots in the mobile home park and will be charged to all residents to whom this Prospectus is applicable. The mobile home owner shall be notified of the increase in base rent at least ninety (90) days prior to the increase.

Rental payments are due on or before the 1st day of each month for that month, at the place designated by the Community.

The Owner-tenant covenants and agrees to the following:

1. To make no unlawful, improper, or offensive use of the property.
2. To comply with the Rules & Regulations of the Park. A copy of said Rules & Regulations has been furnished to the Owner-tenant.
3. That the Lease is governed by Chapter 723, Florida Statutes (Florida Mobile Home Act) as currently in effect at the time of execution of this document, the provisions of which are incorporated herein by reference.
4. Actions by the Owner-tenant which constitute grounds for eviction under Section 723.061, Florida Statutes, shall be a violation of this Lease. Failure of the Community to evict a tenant for violation of any one of the grounds set forth in Section 723.061, Florida Statutes, or for any grounds provided for in this Lease, shall not waive the right for the Community to consider any subsequent violation of the same grounds, or the violation of any other grounds, a breach of this Lease by Owner-tenant so long as permitted by Chapter 723, Florida Statutes.
5. As provided in the Rules & Regulations, rules and regulations may be modified, eliminated, or additional rules and regulations adopted by the Community upon giving the Owner-tenant notice thereof as required by law and said Rules & Regulations in accordance with Chapter 723, Florida Statutes.

6. This Lease and the privileges contained herein are not assignable, and said Lease is only valid as long as those executing this Lease reside upon the premises set forth in this Lease, and are in full conformance of all provisions of this Lease and the park Rules & Regulations, except that a new home owner may assume, in writing, the balance of the annual Lease through December 31, of the year of purchase in accordance with Chapter 723, Florida Statutes.

7. Owner-tenant expressly understands and agrees that, upon execution of this Lease, all prior leases, rental agreement, negotiations, and other agreements between the parties regarding the lot leased are hereby terminated, void, and of no legal force and effect.

8. Storm drainage is included in the lot rental amount and charged in accordance with Sections VII and VIII(J) of the Prospectus.

9. Other financial obligations of the Owner-tenant, not including user fees, are as follows:

| | <u>Fees or Charges</u> |
|--|---|
| Yard Maintenance (not charged unless owner fails to maintain yard) | \$ <u>20.00</u> per cut |
| Water and Sewer | up to <u>8000</u> gallons \$ <u>15.71</u> |
| | excess per <u>1000</u> gal. over <u>8000</u> up to <u>10,000</u> \$ <u>1.31</u> |
| | excess per <u>1000</u> gal. over <u>10,000</u> \$ <u>2.09</u> |
| Tree Trimming/Removal, Debris Removal (not charged unless Owner-tenant fails to provide services himself) | \$ <u>billed amount</u> |
| Late Check Charge after 5th day | \$ <u>1.50</u> per day |
| Bad Check Charge | \$ <u>15.00</u> |
| Extra Resident Fee | \$ <u>10.00</u> per person |
| Debris Removal | charged in accordance with Section VIII(K) of the Prospectus |
| Governmental Assessments, Fees, Surcharges, and Charges | charged in accordance with Section VIII(J) of the Prospectus |

The fees will be charged and increased as set out in Sections VIII(F) through (K) of the Prospectus. No services are included in the lot rental amount other than those services stated above.

10. The Community reserves the right to pass on and pass through charges in accordance with the Prospectus and Chapter 723, Florida Statutes.

11. Owner-tenant(s) acknowledge that they have read the foregoing, the Rules & Regulations, and the Prospectus, and that Owner-tenant was offered the foregoing Lease prior to occupancy.

We have read and understand this Agreement and agree to the terms set out herein.

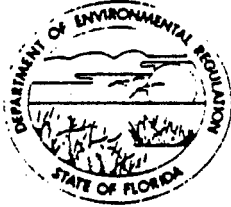
WITNESS our hands and seals of the date set out above.

Owner-tenant

Community Representative

Owner-tenant

DEPARTMENT OF ENVIRONMENTAL REGULATION



SOUTHWEST DISTRICT

7601 HIGHWAY 301 NORTH
TAMPA, FLORIDA 33610-9544

BOB GRAHAM
GOVERNOR

VICTORIA J. TSCHINKEL
SECRETARY

RICHARD D. GARRITY, PH.D.
DISTRICT MANAGER

APPLICATION TO CONSTRUCT A PUBLIC DRINKING WATER SYSTEM

INSTRUCTIONS: All of the application forms, including engineering plans and specifications, must be completed and submitted. For construction of facilities consisting solely of pumping and disinfection, Parts A, B, C, D, and E 1 and 2, (d) through (f), as well as engineering plans and specifications, must be completed and submitted. When using this form for distribution systems alone, only Part B and applicable sections of Part A need to be completed. Submission of any false statement or representation in this application is a violation of the law. Attach additional sheets as necessary.

System Name: SWISS GOLF CLUB County: POLK
System Address: Street OLD LUCERNE PARK ROAD City: WINTER HAVEN
Applicant's Name and Title: EDWARD E. DOUGHERTY, GENERAL PARTNER
Applicant's Address: P.O. BOX 5252, LAKE LAND FLORIDA 33803
Utility Supplying Water: Name: SWISS GOLF CLUB
Utility Address: OLD LUCERNE PARK ROAD, WINTER HAVEN, FLORIDA
Owner/Operator After Construction, if different: _____
Owner/Operator Address: _____
Type of Proposed Facility: EXTENSION OF THE DISTRIBUTION SYSTEM To Serve: TRALER PARK
(Subdivision, trailer park, school, etc.)
Latitude 28° 05' 41" N Longitude 81° 41' 08" W

A. Applicant:

I, the owner/authorized representative* of SWISS GOLF CLUB am fully aware that the statements made in this application for a permit to construct a DISTRIBUTION SYSTEM are true, correct and complete to the best of my knowledge and belief. Further, the undersigned agrees to maintain and operate the facility in such a manner as to comply with the provisions of Chapter 403, Florida Statutes, and all the rules of the department. The undersigned also understands that a permit, if granted by the department, will be non-transferable and will promptly notify the department upon sale or legal transfer of the permitted facility. The undersigned also accepts responsibility for retaining the project engineer as indicated on this application to observe that construction of the project is in accordance with engineering plans and specifications.

APPROVED BY
POLK COUNTY DEPARTMENT OF ENVIRONMENTAL REGULATION
PROVISIONAL
Date 8-13-86
*Attach letter of authorization serial No. 5386-324-A
David R. Graham
ENVIRONMENTAL ENGINEERING ADMINISTRATOR
Note: THIS APPROVAL IS NOT INTENDED TO COVER STRUCTURAL DESIGN.
DER Form 17-1.208(1)
Effective November 30, 1982

Signed: Edward E. Dougherty
Owner/Authorized Representative
EDWARD E. DOUGHERTY GENERAL PARTNER
Name and Title (Please type)
Date: 7/1/86 Telephone No. 647-1581

B. Owner/Authorized Representative of Utility Supplying Water (if applicable)

The undersigned, owner/authorized representative* of _____ hereby certifies that the above reference utility has adequate reserve capacity to supply water to this project and will provide the necessary treatment as required by Chapter 403, Florida Statutes, and all rules of the department. Further, the undersigned verifies that his treatment plant was constructed under a valid permit, Number _____ dated _____ issued by the department, and the connection of the proposed project will not be in violation of any condition of said permit.

*Attach letter of authorization

Signed: _____

Name and Title (Please Type)

Date: _____ Phone No.: _____

C. Owner/Operator* After Construction (if different from applicant)

I, the undersigned, do certify that I will become the owner/operator of the proposed facility after construction. Further, I certify that I am fully aware that the statements made in this application are true, correct and complete to the best of my knowledge. Also, I agree to operate and maintain the facilities in such a manner as to comply with the provisions of Chapter 403, Florida Statutes, and all rules of the department. I understand the permit is non-transferable and will promptly notify the department upon sale or legal transfer of the permitted establishment.

*Attach letter of authorization

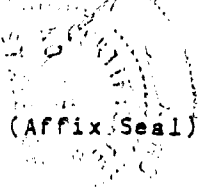
Signed: _____

Name and Title (Please Type)

Date: _____ Phone No. _____

D. Professional Engineer Registered in Florida

This is to certify that the engineering features of this public drinking water system have been designed/examined by me and found to be in conformity with modern engineering principles, applicable to the treatment and distribution of drinking water characterized in this application. There is reasonable assurance in my professional judgment that the facility, when constructed as planned and properly maintained and operated, will comply with all applicable statutes of the State of Florida and the rules of the department.



Signed: Ivan D. King

IVAN D. KING, PE

Name (Please Type)

KING ENGINEERING SERVICE

Company Name (Please Type)

427 E. CENTRAL AVE, WINTER HAVEN, FLA 33880

Mailing Address (Please Type)

Florida Registration No. 9719

Date: 6/26/81 Phone No. 291 7681

470

PART A - GENERAL

1. Estimated total cost of project \$ 111,750 Describe all water treatment DUAL GAS CHLORINATION SYSTEM / AUTOMATIC SWITCH OVER / 100#/DAY CHLORINATOR
2. Existing plant capacity (MGD) 0.72 Plant capacity increase (MGD) NONE
3. Previous DER permit number(s), if any SERIAL NO. 5385-324
4. Present population of area served 936 PHASE ONE Per capita consumption 100GPD
5. Design population (additional served by this project) 894 PHASE TWO
6. Total ERC's* served 267 Total ERC's approved 267
Additional ERC's 255 [ERC (Equivalent Residential Connection) = 3.5 persons]
7. Give any industrial users of abnormal demands NONE
8. Current system water demand, in MGD (from plant operation report)
Average day 0.045 Maximum day 0.06 Maximum hour (GPM) 41.66
Additional water demand, MGD: Avg. day 0.275 Max. day 0.3668 Max. Hr. (GPM) 254
9. Is plant designed for 24-hour operation or what portion? YES
10. Give characteristics of raw water (attach chemical analysis) _____
11. Give source proposed water (deep well, shallow well, spring, surface) _____
12. Sewage disposal SWISS GOLF CLUB
(Name and Address of sewerage utility)
13. Finished water storage: Elevated _____ Ground _____
Existing Capacity _____ Capacity Increase _____
14. Existing service pump capacity (MGD) _____ Additional service pump cap. (MGD) _____
15. Static head in relation to pumping plant _____
16. Well permit from water management district? Yes Permit No. _____
No Explain _____

PART B - DISTRIBUTION SYSTEM

1. Interconnection with other system NONE
2. Minimum size pipe 2" Maximum size pipe 6" Minimum system pressure 25PSI
Maximum system pressure 60PSI
3. Is fire control provided in design? YES
4. Describe dead-end conditions and necessity for flushing including number of such conditions and flushing schedule NONE

5. Describe cross-connection control program NONE
6. Describe corrosion control program as necessary NONE
7. Water demand for additional connections (MGD) NONE
8. Number of each type of additional connections (residential, commercial, agricultural, industrial) to be served 447 MOBILE HOME SITES

PART C - WELL SUPPLY

Existing Wells

| | | | | | | | | |
|---------------------|--|--|--|--|--|--|--|--|
| Well Identification | | | | | | | | |
| Size of Casing | | | | | | | | |
| Depth of Casing | | | | | | | | |
| Depth of Well | | | | | | | | |
| Pump (type) | | | | | | | | |
| Pump Capacity (GPM) | | | | | | | | |

Proposed Wells

| | | | | | | | | |
|---------------------|--|--|--|--|--|--|--|--|
| Well Identification | | | | | | | | |
| Size of Casing | | | | | | | | |
| Depth of Casing | | | | | | | | |
| Depth of Well | | | | | | | | |
| Pump (type) | | | | | | | | |
| Pump Capacity (GPM) | | | | | | | | |

Type of well construction _____

Casing material _____ Aquifer _____

Give all geological data, including log of test wells or wells in vicinity.

Describe possible sources of contamination (particularly those within 100' of well).

PART D - SURFACE SUPPLIES

1. Name of stream, lake, or pond _____
2. Show by attached map watershed, towns or communities above intake, industrial plants, and in immediate vicinity, farm house, picnic ground, abattoirs and other sources of pollution, with distance from intake. Locate intake on map.

POLK COUNTY HEALTH DEPARTMENT PROVISOS

1. Construction of this project must be commenced within one year from the date of this application; otherwise plans and specifications must be resubmitted for approval by this Department. The engineer of record in this application is responsible for supervision of the construction of this project and upon completion shall inspect for complete conformity to the plans and specifications as approved. A report of such inspection in writing and signed by the engineer shall be rendered to the interested County Health Department and to the Department of Environmental Regulation.

2. This approval is given with the understanding that upon the installation of such works, its operations shall be placed under the care of a competent person, whose qualifications are approved by the Department and the operation shall be carried out according to best accepted practice and in accordance with the requirements of the rules and regulations of the Department. This includes not only the provision of continuing essential funds for operation and maintenance of chemical supplies for plant operation; but also the funds for maintenance equipment and supplying the needs of a suitable water plant laboratory which is required for proper operation of this water treatment facility.

3. Water supply facilities including mains shall be installed, cleaned, disinfected, and bacteriologically cleared for service, in accordance with the latest applicable AWWA Standards and Department rules and regulations.

4. Where water and sewer mains cross with less than 18" vertical clearance, the sewer will be 20' of either cast iron pipe or concrete encased vitrified clay pipe centered at the point of crossing. When a water main parallels a sewer main, a separation of at least 10' should be maintained where practical.

5. An auxiliary gas chlorination unit with automatic switch over and second booster pump must be provided to satisfy the dual chlorination requirement in Chapter 17-22 of the Florida Administrative Code.

6. Satisfactory bacteriological main clearance samples must be submitted for two (2) consecutive days from lots No. 37, 60, 80, 320, 340, 380, 400, 625, 745 and 775.

NAME Swiss Golf & Tennis ClubDATE 10/28/85LOCATION Lucrene Park Road

D # 2

PUMP _____

WELL DEPTH 480' SIZE 12" CASEING 153' 12"
240' 8" SteelWATER LEVEL 15' TESTED _____0-7 sand7-9 white clay9-16 yellow clay & orange clay16-72 fine white sand72-84 dark brown sand & muck84-90 brownish gray sand90-98 muck98-173 large white sand & silt173-175 light tan clay

175-179 dark gray clay & shell

179-240 broken ocala

240-241 hard tan limestone

241-300 ocala

300-351 john sand

351-382 tan limestone

382-418 ocala

418-453 john sand

453-464 ocala

464-480 hard tan limestone

set 12" casing to 153'

Set 8" to 240' cement to top

DUNHAM WELL DRILLING, INC.**1341 42nd ST. N.W.****WINTER HAVEN, FL 33881**

PUMPS • IRRIGATION

Ace Phone (813) 967-0656
55 Recker Hwy.
Auburndale, Florida 33823

MAILING ADDRESS
P.O. Box 518
Auburndale, Florida 33823

May 20, 1985

ID #1

Mr. Bob Archer
Swiss Village Golf & Tennis Club
P. O. Box 5252
Lakeland, FL 33803

Dear Mr. Archer:

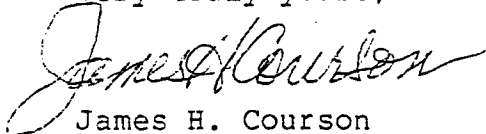
Following is the information you requested on the 12" well drilled for Russell Snively in Section 35, Township 275, Range 26 E by Saddler-Taylor Company.

Date: 6/18/68
Casing: 118' of 12" B.T.&C. steel
177' of 10" B.T.&C. steel liner, top at 108'
bottom at 285'
Depth: 546'
Water Level: 13'

12" 1 1/2" CAPTION WELL

There is no other information available on this well unless Russell Snively may have a copy of the driller's log showing the depths and types of formations.

Very truly yours,



James H. Courson
Bob Taylor Well Drilling, Inc.

JHC/lw



Department of Environmental Protection

Lawton Chiles
Governor

Southwest District
3804 Coconut Palm Drive
Tampa, Florida 33619

Virginia B. Wetherell
Secretary

March 13, 1996

Mr. Raymond Moats
Vice President
CHC VII, Ltd.
P.O. Box 5252
Lakeland, FL. 33807-5252

Polk County-DW
Swiss Golf Club WWTP
GMS ID No. 4053P10039

Revision and Modification of Conditions Permit No. D053-200395

Dear Mr. Moats:

In accordance with Chapters 62-4, 62-620 and 62-640, Florida Administrative Code, the Department is hereby modifying the permit conditions for the above-referenced wastewater permit, originally issued on February 19, 1992. The conditions are changed as follows:

| <u>Condition</u> | <u>From</u> | <u>To</u> |
|-----------------------|----------------|-------------|
| Expiration Date | 04/30/93 | 02/19/97 |
| Specific Condition 9 | Delete Current | *See Below |
| Specific Condition 9a | Delete Current | **See Below |

*9. The domestic wastewater residuals for this facility are classified as stabilization Class B.

**9a. The domestic wastewater residuals shall be land applied only at the following sites, as referenced below:

| Site Name | Acreage | Latitude | Longitude | Section | Township | Range | County |
|------------|---------|-----------|-----------|---------|----------|-------|--------|
| Waverly | 30.0 | 27°59'03" | 81°35'30" | 1 | 29S | 27E | Polk |
| Lawson Gr. | 1.0 | 28°20'00" | 80°75'00" | 29 | 24S | 30E | Orange |

This permit modification, D053-200395B, authorizing the above changes must be attached to your original permit and becomes a part of that Permit.

Sincerely,

Michael S. Hickey
Michael S. Hickey, P.E.
Water Facilities Administrator
FDEP Southwest District

MSH/mhh
cc: Steve Thompson, FDEP
Michele Hennessy, FDEP



Department of Environmental Protection

Lawton Chiles
Governor

Southwest District
3804 Coconut Palm Drive
Tampa, Florida 33619
January 5, 1996

Virginia B. Wetherell
Secretary

Mr. Raymond Moats
Vice President
CHC VII, Ltd.
P.O. Box 5252
Lakeland, FL 33807

Polk County
Swiss Golf Club WWTP
GMS ID No.: 4053P10039

Revision and Modification of Conditions Permit No: DO53-200395

Dear Mr. Moats:

We are in receipt of your request, application #53-264618, for a modification of the above-referenced domestic wastewater treatment plant, and a modification of the permit conditions of the above operation permit, originally issued on 02/19/92. The conditions are hereby changed as follows:

| <u>Condition</u> | <u>From</u> | <u>To</u> |
|----------------------|-------------|-------------|
| Facility Description | As entered | See * below |

* Operation of an existing 0.176 mgd annual average daily flow Type II extended aeration domestic wastewater treatment plant with chlorinated and filtered effluent routed into a polishing pond then to dual drainfields of 73,181 square feet. Construction and operation of an additional drainfield area of 350' x 125' to provide additional effluent reuse and disposal. The additional area will be located on the west end of the golf course between Fairway Circle South and Greenview Drive as specified in the Florida Testing & Environmental, Inc., Report dated January 1995.

By this plant modification and permit revision, you are authorized to perform the work and modify the plant in accordance with drawings, plans, documents or specifications submitted to and retained on file at the FDEP Southwest District Office. These are hereby incorporated by reference and made a part hereof. A **Notification of Completion of Construction**, DEP Form 62-620.910(12) is required prior to placing the modifications into operation.

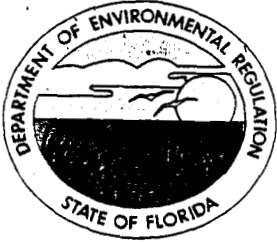
This permit modification, DO53-200395A, authorizing the above changes must be attached to your original permit and, together with any other preceding modification(s), becomes a part of that Permit.

Sincerely,

Michael S. Hickey, P.E.
Water Facilities Administrator
FDEP Southwest District

MSH/sgt

c: Sonny Gulati, P.E.



Florida Department of Environmental Regulation

Southwest District

4520 Oak Fair Boulevard

Tampa, Florida 33610-7347

Lawton Chiles, Governor

813-620-6100

Carol M. Browner, Secretary

PERMITTEE:
CHC VII, Ltd.
P.O. Box 5252
Lakeland, FL 33807

PERMIT/CERTIFICATION
GMS ID No: 4053P10039
Permit No: D053-200395
Date of Issue: 02/19/92
Expiration Date: April 30, 1993
County: Polk
Lat/Long: 28° 05' 44"
81° 41' 09"
Sec/Town/Range: 35/27S/26E
Project: Swiss Golf Club WWTP
Processor: S.G. Thompson

Attn: Raymond Moats
Vice President:

This permit is issued under the provisions of Chapter 403, Florida Statutes, and Florida Administrative Code Rule(s) 17-3, 17-4 and 17-600 Series. The above named permittee is hereby authorized to perform the work or operate the facility shown on the application and approved drawing(s), plans, and other documents, attached hereto or on file with the department and made a part hereof and specifically described as follows:

Operation of a 0.176 MGD Type II extended aeration sewage treatment plant with chlorinated and filtered effluent to a polishing pond then to dual drainfields of 73,181 square feet total area each side.

Location: Old Lucerne Park Road, North of Winter Haven, Florida

Replaces Permit No.: D053-175364 Expired: 09/30/91

PERMITTEE: CHC VII, Ltd.
 PERMIT NO: D053-200395

SPECIFIC CONDITIONS:

1. Drawings, plans, documents or specifications submitted by the permittee, not attached hereto, but retained on file at the Southwest District Office, are made a part hereof.
2. The zone of discharge boundary shall extend horizontally 100 feet from the site boundary or to the installation's property boundary, whichever is less, and vertically to the base of the shallow water table aquifer. (Rule 17-28.700, F.A.C.)
3. The water quality standards for Class G-II groundwater shall not be exceeded at the boundary of the zone of discharge. (Rule 17-3.402, Rule 17-3.404, F.A.C.)
4. In accordance with Chapter 17-602, F.A.C., the required certified operator on site time is: a Class C or better operator for 1/2 hour, 5 days a week and a weekend visit.
5. The discharge from the chlorine contact chamber shall be sampled in accordance with Chapter 17-601, F.A.C. and shall meet the following limitations:

| Parameter | Unit | Min-imum | Maximum | Type Sample | Frequency |
|---------------------------|--------|----------|--------------------|-----------------|-----------------|
| Permitted Capacity (flow) | mgd | .000 | 0.176 average | | Daily, 5/wk |
| pH | std un | 6.00 | 8.50 | grab | Daily, 5/wk |
| CBOD5 | mg/L | 0 | 20 annual avg. | 8 hr. composite | every two weeks |
| | | | 30 monthly avg. | | |
| | | | 45 weekly avg. | | |
| | | | 60 any one sample | | |
| Total Suspended Solids | mg/l | 0 | 5.0 any one sample | 8 hr. composite | every two weeks |
| Nitrate (as N) | mg/L | 0 | 12 | 8 hr. composite | every two weeks |
| Cl2 | mg/L | 0.5 | - | grab | Daily, 5/wk |
| Fecal coliform | #/100 | 0 | 200 Annual Average | grab | every 2 wk. |
| | | | 200 Monthly Avg. | | |

The results shall be reported monthly on DER Form 17-601.900(1).

6. The sludge shall be sampled after final treatment in accordance with Rule 17-640.700(1)(b) F.A.C. but prior to land application for the parameters listed below every 6 months. A copy of the analyses shall be submitted with the monthly operation report for the following parameters:

PERMITTEE: CHC VII, Ltd.
PERMIT NO: DO53-200395

SPECIFIC CONDITIONS: (cont'd)

6. (con't):
- Total Nitrogen - % dry weight
 - Total Phosphorus - % dry weight
 - Total Potassium - % dry weight
 - Cadmium - mg/kg dry weight
 - Copper - mg/kg dry weight
 - Lead - mg/kg dry weight
 - Nickel - mg/kg dry weight
 - Zinc - mg/kg dry weight
 - pH - standard units
 - Total Solids - %

7. Direct discharge from the polishing pond or the drainfields to area surface waters is not allowed. Surface discharge shall be considered a violation of this permit and the permittee shall immediately report any such discharge to the SW District Office of the Department of Environmental Regulation.

8. If historical or archaeological artifacts, such as Indian canoes, are discovered at any time within the project site, the permittee shall notify the DER Southwest District office and the Bureau of Historic Preservation, Division of Archives, History and Records Management, R.A. Gray Building, Tallahassee, Florida 32301, telephone number (904) 487-2073.

9. The domestic wastewater residuals for this facility are classified as stabilization Class C.

a. The domestic wastewater residuals shall be land applied only at Lawson Groves (as identified in the Agricultural Use plan or Dedicated Site plan submitted with the application).

b. Annual update reports, summaries, and revised agricultural site plans are due not later than one year from the issuance of the permit. The reports shall be submitted annually thereafter, and not later than this anniversary date to the Department and the Local Program (if applicable).

c. The permittee shall comply with all provisions of Chapter 17-640, F.A.C. and shall report any non-compliance or changes from the approved use plan to the Department and Local Program (if applicable).

PERMITTEE: CHC VII, Ltd.
PERMIT NO: DO53-200395

10. The permittee shall provide an approved flow measurement device on the sewage treatment plant to monitor the influent (ahead of any return flows) and/or effluent flow, as appropriate. For plants with design flow equal to or greater than 0.100 MGD, flow measurement shall be with a flow meter equipped with a recorder and an integrator or totalizer. The flow measurement device shall be calibrated at least annually, with evidence of calibration kept at the site of flow measurement, and submitted to the Department upon request.

11. The permittee shall provide a weatherproof location for an on/site log book to monitor the daily activities of the certified operator. This log book shall record sign in/out times of the certified operator, list any maintenance performed and contain the signature and certification number of the operator.

12. The permittee shall maintain all audible and visual alarm systems on the lift station(s) in operating condition at all times.

13. A reduced pressure zone backflow preventer shall be installed on any potable water supply to the treatment facility. No potable water outlet intended for human contact shall be located down-line of the backflow preventer.

14. The disinfection system shall be operated to maintain a minimum chlorine residual of 0.5 mg/l at the outfall from the chlorine contact chamber. A metering device for dosing chlorine to the effluent shall be utilized and the chlorine supply tank shall be inspected regularly to ensure proper operation.

15. Prior to sixty days before the expiration of this permit, the permittee shall apply for a renewal of the permit on forms and in a manner prescribed by the Department of Environmental Regulation.

16. Daily checks of the plant shall be performed by the permittee, or supplier, or his representative or agent five (5) days per week for all Class C and D plants pursuant to Rule 17-602.375(1), F.A.C.

17. If after twelve months of operation the facility is maintained in compliance to these permit conditions the permittee may request an extension of the permit for 48 additional months.

18. The permittee shall be aware of and operate under the attached "General Permit Conditions #1 thru #15". General Permit Conditions are binding upon the permittee and enforceable pursuant to Chapter 403 of the Florida Statutes.

PERMITTEE: CHC VII, Ltd.
PERMIT NO: DO53-200395

GROUND WATER MONITORING PLAN (OPERATION)

1. In accordance with Rule 17-28.700, Florida Administrative Code (F.A.C.), the permittee has installed and placed into operation a ground water Monitoring System. The Ground Water Monitoring System is designed and constructed in accordance with the plans on file in the Southwest District office.

2. The ground water monitoring wells are located as follows:

| <u>Well Number</u> | <u>Aquifer</u> | <u>Location</u> |
|--------------------|----------------|-----------------|
| MW-1 | Surficial | Golf Course |
| MW-2 | Surficial | Golf Course |
| MW-3 | Surficial | Golf Course |

The wells are to be clearly labelled and easily visible at all times.

3. If any monitoring well becomes damaged or inoperable, the permittee shall notify the Department immediately and a detailed written report shall follow within 7 days. The written report shall detail what problem has occurred and remedial measures that have been taken to prevent the recurrence. All monitoring well design and replacement shall be approved by the Department prior to installation of the replacement well.

4. Sixty days prior to the submittal of the renewal application of this permit, the permittee shall sample all ground water monitor wells for the Florida Primary and Secondary Drinking Water parameters included in Rule 17-550, F.A.C., Public Drinking Water Systems, fecal coliform and EPA Method 608. The analyses shall be submitted to the Department with the renewal application.

5. Sixty days prior to the submittal of the renewal application of this permit, the permittee shall provide a 24 hour composite effluent sample prior to discharge to the plant percolation ponds. The composite sample shall be analyzed for the Florida Primary and Secondary Drinking Water Standards in accordance with Rule 17-550, F.A.C., the EPA Priority Pollutants and fecal coliform. The effluent analysis shall be submitted to the Department with the renewal application.

PERMITTEE: CHC VII, Ltd.
PERMIT NO: DO53-200395

6. All ground water monitor wells shall be sampled and analyzed quarterly for the following parameters. However, additional sample(s), well(s), and parameter(s) may be required based upon subsequent analyses.

PRIMARY STANDARDS

| | |
|-----------------------|------|
| Nitrate (as Nitrogen) | mg/l |
| Sodium | mg/l |
| Turbidity | NTU |

SECONDARY STANDARDS

| | |
|------------------------------|------------|
| Sulfate | mg/L |
| Chloride | mg/l |
| Total Dissolved Solids (TDS) | mg/l |
| pH | std. units |

OTHERS

| | |
|----------------------------|------------|
| Temperature | °C |
| Total Organic Carbon (TOC) | mg/l |
| Specific Conductance | umhos/cm |
| Fecal Coliform | cts/100 ml |
| Water Levels (M.S.L.) | feet |

7. Following the initial analysis of the ground water monitor wells, the wells shall be sampled and analyzed according to the following schedule:

| <u>Sample Period</u> | <u>Report Due Date</u> |
|--------------------------------|------------------------|
| 1st Quarter (January-March) | April 15 |
| 2nd Quarter (April-June) | July 15 |
| 3rd Quarter (July-September) | October 15 |
| 4th Quarter (October-December) | January 15 |

The permittee shall submit to the Department the results of the water quality analyses no later than the 15 day of the month immediately following the end of the sampling period. The results shall be sent to the Department of Environmental Regulation, Southwest District Office, 4520 Oak Fair Boulevard, Tampa, Florida 33610-7347.

PERMITTEE: CHC VII, Ltd.
PERMIT NO: DO53-200395

8. If, at any time, background ground water standards are exceeded at the edge of the zone of discharge, the permittee has 15 days in which to resample the monitor well(s) to verify the original analysis. The monitoring test results must be submitted to the Department within fifteen days of receipt of the analysis from the laboratory. Should the permittee choose not to resample, the Department will consider the water quality analysis as representative of current ground water conditions at the facility.

9. The field testing, sample collection and preservation and laboratory testing, including quality control procedures, shall be in accordance with methods approved by the Department in accordance with Rule 17-4.246 and 17-3.401, F.A.C. Approved methods as published by the Department or as published in Standard Methods, A.S.T.M. or EPA methods shall be used. Approved methods for chemical analyses are summarized in the Federal Register, December 1, 1976 (41FR52780) except that turbidity shall be measured by the Nephelometric Method.

10. Ground water sampling shall be reported on the attached Parameter Monitoring Report Forms [DER Form 17-1.216(2)]. In order to facilitate entry of this data into the State computer system, these forms or an exact replica must be used and must not be altered as to content. The original copies should be retained so that the necessary information is available to properly complete future reports. The report forms received from the laboratory must be submitted along with the DER Parameter Monitoring Report Forms described above.

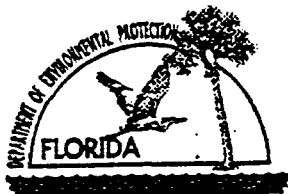
11. The permittee shall ensure that the water quality standards for Class G-II ground waters will not be exceeded at the boundary of the zone of discharge according to Rule 17-3.402 and 17-3.404, F.A.C.

12. The permittee shall ensure that the minimum criteria for ground water specified in Rule 17-3.402, F.A.C. shall not be violated within the zone of discharge.

STATE OF FLORIDA DEPARTMENT OF
ENVIRONMENTAL REGULATION



Richard D. Garrity, Ph.D.
Director of District Management



WASTEWATER PERMIT APPLICATION FORM 1 GENERAL INFORMATION

IV FA

I IDENTIFICATION NUMBER:

Facility ID 4053P10039

II CHARACTERISTICS:

INSTRUCTIONS: Complete the questions below to determine whether you need to submit any permit application forms to the Department of Environmental Protection. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the blank in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements. See Section B of the instructions. See also, Section C of the instructions for definitions of the terms used here.

| SPECIFIC QUESTIONS | YES | NO | FORM ATTACHED |
|--|-----|----|---------------|
| A. Is this facility a domestic wastewater facility which results in a discharge to surface or ground waters? | X | | X |
| B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters? | | X | |
| C. Does or will this facility (other than those describe in A. or B.) discharge process wastewater, or non-process wastewater regulated by effluent guidelines or new source performance standards, to surface waters? | | X | |
| D. Does or will this facility (other than those described in A. or B.) discharge process wastewater to ground waters? | | X | |
| E. Does or will this facility discharge non-process wastewater, not regulated by effluent guidelines or new source performance standards, to surface waters? | | X | |
| F. Does or will this facility discharge non-process wastewater to ground waters? | | X | |
| G. Does or will this facility discharge stormwater to surface waters? | | X | |
| H. Is this facility a non-discharging/closed loop recycle system? | | X | |

III NAME OF FACILITY: (40 characters and spaces)

| |
|------------------------------|
| CHC VII LTD; SWISS GOLF CLUB |
|------------------------------|

IV FACILITY CONTACT: (A. 30 characters and spaces)

| | |
|--|----------------------------|
| A. Name and Title (Last, first, & title) | B. Phone (area code & no.) |
| Moats, Raymond, President | 941-647-1581 |

V FACILITY MAILING ADDRESS: (A. 30 characters and spaces; B. 25 characters and spaces)

| | | |
|---------------------------------------|-----------|-----------------|
| A. Street or P.O. Box: P. O. Box 5252 | | |
| B. City or Town: Lakeland | State: FL | Zip Code: 33807 |

VI FACILITY LOCATION: (A. 30 characters and spaces; B. 24 characters and spaces; C. 3 spaces (if known); D. 25 characters and spaces; E. 2 spaces; F. 9 spaces)

| | | |
|--|----------------------------|--------------------|
| A. Street, Route or Other Specific Identifier: Old Lucerne Park Road | | |
| B. County Name: Polk | C. County Code (if known): | |
| D. City or Town: Winter Haven | E. State: FL | F. Zip Code: 33881 |

VII SIC CODES: (4-digit, in order of priority)

| | | | |
|------------|-----------|------------|-----------|
| 1. Code #: | (Specify) | 2. Code #: | (Specify) |
| 3. Code #: | (Specify) | 4. Code #: | (Specify) |

VIII OPERATOR INFORMATION: (A. 40 characters and spaces; B. 1 character; C. 1 character (if other, specify); D. 12 characters; E. 30 characters and spaces; F. 25 characters and spaces; G. 2 characters; H. 9 characters)

| | | | |
|---|-------------|---|-------------------------------|
| A. Name: Raymond Moats | | B. Is the name in VIII A. the owner? Yes: No: | |
| C. Status of Operator: F = Federal; S = State; P = Private; O = Other; M = Public (other than F or S) | (code) P | (specify) Private | D. Phone No.: 941-647-1581 |
| E. Street or P. O. Box: P. O. Box 5252 | | | |
| F. City or Town: Lakeland | | G. State: FL H. Zip Code: 33807 | |

IX INDIAN LAND: Is the facility located on Indian lands? Yes: No:

X EXISTING ENVIRONMENTAL PERMITS:

| A. NPDES Permit No. | B. UIC Permit No. | C. Other (specify) | D. Other (specify) |
|---------------------|-------------------|--------------------|--------------------|
| N/A | N/A | DEP DO53-200395 | |

XI MAP: Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII NATURE OF BUSINESS (provide a brief description)

Private Retirement Manufactured Home Community

XIII CERTIFICATION (see instructions)

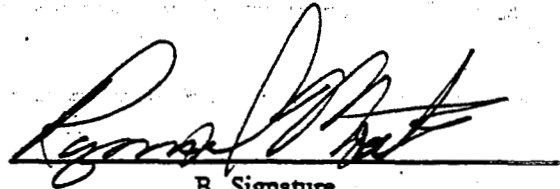
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Raymond Moats

A. Name (type or print)

President

Official Title (type or print)



B. Signature

2/17/97

C. Date Signed



WASTEWATER APPLICATION FORM 2A

FOR A DOMESTIC WASTEWATER FACILITY PERMIT

Instructions for selected items are included in the "INSTRUCTIONS FOR FORM 2A". Refer to these instructions before filling out each item.

SECTION 1. APPLICANT AND FACILITY DESCRIPTION

1. Application Type

- New
- Substantial Modification
- Permit Renewal

2. Facility Type

- Wastewater Treatment
- Reuse or Disposal
- Limited Wet Weather Discharge
- Residuals/Septage Management

3. Treatment Facility Information

- a. Name SWISS GOLF CLUB
- b. Facility Identification Number 4053P10039
- c. Location
 - Number and Street Old Lucerne Park Road
 - City/State/Zip Code Winter Haven, FL 33881
 - Telephone (941) 647-1581
 - Latitude 28 ° 05 ' 44 " N
 - Longitude 81 ° 41 ' 09 " W
 - Dates Coordinates Determined / /
 - Method Used to Obtain Coordinates Geodetic Quad Map
- d. Ownership Type
 - Municipal
 - County
 - State
 - Private
- e. Contact

Name
Telephone

Raymond Moats
(941) 647-1581

f. Facility Mailing Address

Number and Street
City/State/Zip Code

P. O. Box 5252
Lakeland, Fl 33807

g. Year Facility Began Operation

1985

h. Year of Facility's Last Substantial Modification

1996

4. Applicant or Authorized Representative

Legal Name
Number and Street
City/State/Zip Code
Telephone

CHC VII, Ltd.
P. O. Box 5252
Lakeland, Fl 33807
(941) 647-1581

5. Applicant's Authorized Agent

Name and Title
Number and Street
City/State/Zip Code
Telephone

Raymond Moats, President
P. O. Box 5252
Lakeland, Fl 33807
(941) 647-1581

6. Project Name and Description

SWISS GOLF CLUB
WASTEWATER TREATMENT
FACILITY: WASTEWATER
TREATMENT AND TREATED
EFFLUENT REUSE

7. Collection System Length

6 miles

8. Industrial Wastewater Contributions

a. Average Daily Flow

N/A mgd

b. Does this facility have an approved pretreatment program?

 Yes No

Coordinator Name
Number and Street
City/State/Zip Code
Telephone

N/A

()

9. Municipalities or Areas Served

| Name of Municipality or Area | Population Served |
|---------------------------------------|-------------------|
| Swiss Golf Club Mobile Home Community | 1700 |
| | |
| | 1700 |
| Total Population Served | |

10. Reclaimed Water Reuse and Effluent Disposal

| Method of Reuse or Disposal | Number of Reuse or Disposal Points | Total Design Capacity (mgd) | Basis of Design Flow |
|--|------------------------------------|-----------------------------|---------------------------|
| Surface Waters - Excluding Ocean Outfalls and Wetlands (Rule 62-600.510, F.A.C.) | | | |
| Ocean Outfalls (Rule 62-600.520, F.A.C.) | | | |
| Wetlands (Rule 62-600.620, F.A.C.) | | | |
| Reuse of Reclaimed Water and Land Application (Rule 62-600.530, F.A.C.) | 2 | 0.176 | Annual Average Daily Flow |
| Ground Water Disposal by Underground Injection (Rule 62-600.540, F.A.C.) | | | |
| Other (Describe.) | | | |
| Total Item 7 | 2 | 0.176 | |

11. Number of Seasonal or Periodic Discharges

N/A

12. Flows to Another Wastewater Facility

a. Does part of the facility's flow go into a collection/transmission system or reclaimed water distribution system under another responsible organization?

Yes No

b. If yes, which one? N/A

Collection/Transmission System
 Reclaimed Water Distribution System

c. Responsible Organization Receiving the Flow

Name
Number and Street
City/State/Zip Code

N/A

d. Name of Facility Which Receives the Flow

N/A

e. Facility Identification Number of Facility Which
Receives the Flow

N/A

f. Average Daily Flow Discharged to the
Receiving Facility

N/A mgd

13. Residuals Use or Disposal

a. Amount of Residuals Generated by the Facility

1.25 dry tons/year

b. Does this facility receive residuals from another
facility for further treatment and disposal?

Yes No

c. Method of Residuals Use or Disposal

| Method | Number of Sites or Number of Receiving Facilities | Dry Tons Used or Disposed Per Year |
|--|---|------------------------------------|
| Land Application (Chapter 62-640, F.A.C.) | 1 | 1.25 |
| Distribution and Marketing (Chapter 62-640, F.A.C.) | | |
| Landfill Disposal (Chapter 62-701, F.A.C.) | | |
| Incineration (Chapter 62-200 Series, F.A.C.) | | |
| Transport to Another Treatment Facility | | |
| Other (Describe.) | | |
| Total | | 1.25 |

- d. If residuals are transported to another facility for landfill disposal, incineration, or treatment, provide the facility name, Facility identification number and address.

Name _____ N/A
 Facility Identification Number _____
 Number and Street _____ N/A
 City/State/Zip Code _____
 County _____
 Telephone (____) _____
 Treatment Codes for Receiving Facility _____

14. Permits and Applications

- a. Expiration Date of Current NPDES Permit _____ N/A / _____ / _____
 b. Expiration Date of Current DEP Permit _____ 2 / 19 / 97
 c. Existing, Pending, or Denied Permits and Permit Applications

| Issuing Agency | Permit Type | Permit Number | Date Filed | Date Issued | Date Denied | Date of Expiration |
|----------------|-------------|----------------|------------|-------------|-------------|--------------------|
| FDEP | Operation | D053 200395 | 7 /30/ 91 | 2 /19/ 92 | / / | 2 /19/ 97 |
| | | | / / | / / | / / | / / |
| | | | / / | / / | / / | / / |
| | | | / / | / / | / / | / / |

- d. Orders and Notices N/A

| Type or Order or Notice | Issuing Agency | Date of Order or Notice |
|-------------------------|----------------|-------------------------|
| Notice or Violation | | |
| Consent Order | | |
| Administrative Order | | |
| Other (Describe.) | | |

SECTION 2. TREATMENT FACILITY DESCRIPTION

1. Description

Surge tank prior to extended aeration, clarification, chlorine contact, sand filters, subsurface irrigation system with rapid infiltration basin for back-up. Sludge is aerobically digested, lime stabilized and hauled wet to an agricultural use site.

2. Treatment Codes

| | | | | |
|-----------|-----------|------------|-----------|-----------|
| <u>JS</u> | <u>OA</u> | <u>ASE</u> | <u>N</u> | <u>P</u> |
| <u>FS</u> | <u>ID</u> | <u>DD</u> | <u>DL</u> | <u> </u> |
| — | — | — | — | — |
| — | — | — | — | — |
| — | — | — | — | — |

3. Design Capacity of the Treatment Facility

| | |
|--------------------------------------|-------------|
| Current Design Capacity | 0.176 mgd |
| Proposed Incremental Design Capacity | + 0 mgd |
| Proposed Total Design Capacity | = 0.176 mgd |

4. Basis of Design Flow

- Annual Average Daily Flow
- Maximum Monthly Average Daily Flow
- Three-Month Average Daily Flow
- Other

If other, specify.

5. Design Treatment Levels

| Parameter | Effluent Concentration | Units | Basis | Percent Removal |
|-------------------|------------------------|----------------|---------------------------|-----------------|
| pH | 6.0 - 8.5 | Standard Units | | |
| CBOD ₅ | 20 | mg/L | Annual Average | 90% |
| TSS | 10 | mg/L | Single Sample | 95% |
| CBOD ₅ | 30 | mg/L | Monthly Average | |
| | 45 | mg/L | Weekly Average | |
| | 60 | mg/L | Single Sample | |
| Fecal Coliform | 200 | # / 100 mL | Monthly or Annual Average | |
| Nitrate (as N) | 12 | mg/L | Single Sample | |
| — | | | | |

6. Disinfection Level Provided

- Low-level
- Basic
- Intermediate
- High-level
- High-level Alternative

If the facility disinfects by chlorination and the discharge is to surface waters, is dechlorination provided?

Yes No N/A

7. Residuals Treatment

a. Class of Residuals

- Class AA (Rule 62-640.850, F.A.C.)
- Class A (Rule 62-640.600, F.A.C.)
- Class B (Rule 62-640.600, F.A.C.)
- Other

If other, describe.

b. Parameter Concentrations

- Total Nitrogen
- Total Phosphorus
- Total Potassium
- Cadmium
- Copper
- Lead
- Nickel
- Zinc
- pH
- Total Solids
- Other Parameters (Describe.)

| | |
|--|------------------|
| <u>15.4</u> | % dry weight |
| <u>3.3</u> | % dry weight |
| <u>0.6</u> | % dry weight |
| <u>69</u> | mg/kg dry weight |
| <u>930</u> | mg/kg dry weight |
| <u>120</u> | mg/kg dry weight |
| <u>4.15</u> | mg/kg dry weight |
| <u>130</u> | mg/kg dry weight |
| <u>6.5</u> | standard units |
| <u>0.1</u> | % |
| <u>Arsenic - 14 Selenium - 16</u> | |
| <u>Mercury - 35 Molybdenum - 68</u> | |
| <u>Chromium - 275</u> | |

Date of Sample

3 / 19 / 96

8. Reliability Class

- Class I
- Class II
- Class III
- Other Equivalent Reliability

SECTION 3. A. DISCHARGES TO SURFACE WATERS (including wetlands)

1. Discharge Serial Number and Name

Discharge Serial Number
Discharge Name
Previous Discharge Serial Number

_____ N/A _____

2. Discharge Location

County
City or Town (if applicable)
Street or Description

_____ N/A _____

Latitude
Longitude
Dates Coordinates Determined
Method Used to Obtain Coordinates

_____ ° _____ ' _____ "N
_____ ° _____ ' _____ "W
_____/_____/_____

3. Discharge Operating Dates

Discharge Start Date
Discharge End Date

_____ N/A / ____ / ____
_____ / ____ / ____

Reason for Discontinuing the Discharge

4. Design Capacity of the Outfall

Current Design Capacity
Proposed Incremental Design Capacity
Proposed Total Design Capacity

_____ N/A mgd
+ _____ mgd
= _____ mgd

5. Basis of Design Flow

- ___ Annual Average Daily Flow
- ___ Maximum Monthly Average Daily Flow
- ___ Three-Month Average Daily Flow
- ___ Other

If other, specify.

6. Basis for Effluent Limitations

- TBEL
- Level I QBEL
- Level II QBEL
- Other

If other, specify.

Date Effluent Limitations Established

_____/_____/_____

7. Discharge Point Description

- Ocean
- Stream
- Estuary
- Lake
- Wetland
- Other

If other, specify.

8. Receiving Waterbody Name

9. Type of Receiving Waterbody

- Fresh
- Brackish or Marine

10. Classification of Receiving Waterbody

- Class I
- Class II
- Class III
- Class IV
- Class V

Is the receiving waterbody contiguous to, or identified as, an Outstanding Florida Water (OFW) or an Outstanding National Resource Water?

Yes No

If yes, name and locate on a USGS map.

11. Outfall Information

Description of Outfall and Diffuser

Construction Materials

Length From Shore

Diameter

Discharge Depth Below Water Surface

Receiving Water Bottom Depth Below Water Surface

_____ feet
 _____ inches
 _____ feet
 _____ feet

12. Surface Water Improvement and Management (SWIM)

a. Will the discharge affect any SWIM plan waterbodies?

___ Yes ___ No

b. If yes, name the waterbody.

c. Has the SWIM plan been approved by a water management district and the Department?

___ Yes ___ No

d. If yes, attach documentation that the proposed discharge is consistent with the SWIM plan.

13. Additional Information Required for Seasonal or Periodic Discharges

Frequency
Duration
Volume
Occurrence

_____ Times Per Year
_____ Days
_____ Thousand Gallons Per Incident

| | | | | | |
|--|-----|--|-----|--|-----|
| | Jan | | May | | Sep |
| | Feb | | Jun | | Oct |
| | Mar | | Jul | | Nov |
| | Apr | | Aug | | Dec |

14. Additional Information Required for Limited Wet Weather Discharges Permitted in Accordance with Rule 62-610.860, F.A.C.

a. Downstream Waterbody

Name of nearest downstream lake, estuary, reservoir, OFW, or Class I water. Show location on a USGS map.

Downstream Waterbody Description

___ Ocean
___ Stream
___ Estuary
___ Lake
___ Wetland
___ Other

If other, specify.

Classification of Downstream Waterbody

- _____ Class I
- _____ Class II
- _____ Class III
- _____ Class IV
- _____ Class V

Distance Downstream

_____ miles

Average Flow Velocity During Anticipated Periods of Discharge

_____ feet per second

Travel Time During Anticipated Periods of Discharge

_____ hours

b. Rainfall Information

Rainfall Gauging Station Location

Period of Record Analyzed:

Beginning Year

Ending Year

Number of Years

Average Annual Rainfall

_____ inches per year

c. Simulation of Operation of the Reuse, Storage, and Limited Wet Weather Discharge for an Average Rainfall Year

Year Simulated

Annual Rainfall During Average Year

_____ inches

Number of Days Limited Wet Weather Discharge is Used During Average Rainfall Year (N)

_____ days

Percent of the Days of the Year that the Limited Wet Weather Discharge will Occur During Average Rainfall Year (P)

_____ %

Note:

$P = [(N) / (365)] \times 100\%$

P cannot exceed 25% or be less than 1%.

d. Reclaimed Water Quality (maximum monthly average)

CBOD₅

_____ mg/L

TKN (as Nitrogen)

_____ mg/L

e. Minimum Acceptable Stream Dilution Factor (SDF) _____

Note:

$SDF = P(0.085 \times CBOD_5 + 0.272 \times TKN - 0.484)$
 The values for $CBOD_5$ and TKN should be in terms of maximum monthly average limitations as provided in 14.d. above. The value of P should be as calculated in 14.c. above.

f. Adjusted Stream Dilution Factor _____

Note:

If the travel time shown in 14.a., above, is less than 24 hours, provide the adjusted minimum acceptable stream dilution factor.
 $Adjusted\ SDF = SDF \times (24\ \text{hours}) / (\text{travel time in hours})$

15. Additional Information Required for Wetland Discharges

a. Is the wetland a jurisdictional wetland (i.e. within the landward extent of waters as defined in Rule 62-301.400, F.A.C., or isolated and not owned entirely by one person, or owned entirely by the State)?

___ Yes ___ No

b. Will the wetland be used as a treatment wetland or receiving wetland?

___ Treatment
 ___ Receiving

If the wetland is to be used as a treatment wetland, attach documentation showing ownership or the applicant's legal interest in the treatment wetland.

c. If the wetland is to be used for treatment, identify the type.

___ Man-made
 ___ Hydrologically Altered
 ___ Unaltered

d. Is the wetland herbaceous or woody?

___ Herbaceous
 ___ Woody

e. Identify the classification of surface waters within the wetland.

___ Class I
 ___ Class II
 ___ Class III
 ___ Class IV
 ___ Class V

f. Are the waters within the wetland part of an OFW?

___ Yes ___ No

16. Operational Data N/A

a. Description of Influent and Effluent

| Parameter | Influent | | Effluent | | | | |
|---|----------------|----------------|------------------------|-------------------------|-----------------------|--------------------|-------------|
| | Annual Average | Annual Average | Lowest Monthly Average | Highest Monthly Average | Frequency of Analysis | Number of Analyses | Sample Type |
| Flow mgd | | | | | | | |
| pH Units | | | | | | | |
| Fecal Coliform Bacteria Number/100 mL | | | | | | | |
| CBOD 5-day mg/L | | | | | | | |
| Chlorine Total Residual mg/L | | | | | | | |
| Total Suspended Solids mg/L | | | | | | | |
| Ammonia (as N) mg/L | | | | | | | |
| Kjeldahl Nitrogen mg/L | | | | | | | |
| Nitrate (as N) mg/L | | | | | | | |
| Total Phosphorus (as P) mg/L | | | | | | | |
| Dissolved Oxygen mg/L | | | | | | | |
| - | | | | | | | |

a. Description of Influent and Effluent (continued) N/A

| Parameter | Influent | | Effluent | | | | |
|-----------|----------------|----------------|------------------------|-------------------------|-----------------------|--------------------|-------------|
| | Annual Average | Annual Average | Lowest Monthly Average | Highest Monthly Average | Frequency of Analysis | Number of Analyses | Sample Type |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

b. Additional Wastewater Characteristics

| Parameter | Present | Parameter | Present | Parameter | Present |
|-----------|---------|------------|---------|--------------------------------|---------|
| Bromide | | Cobalt | | Thallium | |
| Chloride | | Chromium | | Titanium | |
| Cyanide | | Copper | | Tin | |
| Fluoride | | Iron | | Zinc | |
| Sulfide | | Lead | | Algicides* | |
| Aluminum | | Manganese | | Chlorinated Organic Compounds* | |
| Antimony | | Mercury | | Oil and Grease | |
| Arsenic | | Molybdenum | | Pesticides* | |
| Beryllium | | Nickel | | Phenols | |
| Barium | | Selenium | | Surfactants | |
| Boron | | Silver | | Radioactivity* | |
| Cadmium | | | | | |

* Provide specific compound or element as "Additional Information", if known.

SECTION 3. B. REUSE AND LAND APPLICATION SYSTEMS

1. Reuse or Land Application System Serial Number and Name

Reuse or Land Application System Serial Number R001
 Reuse or Land Application System Name Swiss Golf Club - Subsurface Irrigation
 Previous Reuse or Land Application System Serial Number N/A

2. Reuse or Land Application System Location

County Polk
 City or Town (if applicable) Winter Haven
 Street or Description Old Lucerne Park Road

Latitude 28° 05' 44" N
 Longitude 81° 04' 09" W
 Dates Coordinates Determined / / 85
 Method Used to Obtain Coordinates USGS Quadrangle Map

3. Reuse or Land Application System Operating Dates

System Operation Start Date 3 / 1 / 90
 System Operation End Date N/A / /

Reason for Discontinuing System Operation N/A

4. Design Capacity of the Reuse or Land Application System

Current Design Capacity 0.176 mgd
 Proposed Incremental Design Capacity 0 mgd
 Proposed Total Design Capacity = 0.176 mgd

5. Basis of Design Flow

Annual Average Daily Flow
 Maximum Monthly Average Daily Flow
 Three-Month Average Daily Flow
 Other

If other, specify.

6. Underdrains and Perimeter Ditches

a. Is the reuse or land application system underdrained? Yes No

b. Are perimeter ditches used?

Yes No

If yes, will they be excavated to a depth which will intersect the seasonal high ground water table or the ground water mound during any portion of the year?

Yes No

7. Type of Reuse or Land Application System

- Slow-rate land application system/restricted public access (Chapter 62-610, F.A.C., Part II)
- Slow-rate land application system/public access areas, residential irrigation, and edible crop irrigation (Chapter 62-610, F.A.C., Part III)
- Rapid-rate land application system (Chapter 62-610, F.A.C., Part IV)
- Absorption field system (Chapter 62-610, F.A.C., Part V)
- Overland flow system (Chapter 62-610, F.A.C., Part VI)
- Other land application system with additional levels of preapplication treatment (Rule 62-610.660, F.A.C.)
- Other land application system with lower levels of preapplication treatment (Rule 62-610.670, F.A.C.)

8. Application Areas and Rates

| Site/Use Type/Major User | Area (acres) | Rate (inches/week) | Capacity (mgd) |
|---|--------------|--------------------|----------------|
| Golf Course Subsurface Irrigation/Swiss Golf Club | 4.4 | 6.5 | 0.176 |
| | | | |
| | | | |
| | | | |
| Total | 4.4 | 6.5 | 0.176 |

9. Additional Information Required for Reuse Systems Permitted Under Part III of Chapter 62-610, F.A.C.

a. Areas Irrigated N/A

- Residential lawns
- Golf courses
- Cemeteries
- Parks, playgrounds
- Landscape areas
- Highway medians, rights-of-way
- Edible crops
- Others

If other, specify.

b. Other Uses of Reclaimed Water N/A

- Toilet flushing
- Fire protection
- Construction dust control
- Aesthetic purposes (decorative ponds, fountains, etc.)
- Others

If other, specify.

c. How many hours per day, seven days per week, is or will an operator be on-site at the wastewater treatment facility?

 N/A hours per day

If the treatment facility is or will be staffed by an operator less than 24 hrs/day, describe the additional levels of reliability included within the treatment or reuse systems. (See Rule 62-610.462, F.A.C.)

d. For permit renewals, list the dates on which the operating protocols (as described in Rule 62-610.463, F.A.C.) were submitted to the Department and the date of the Department's approvals during the last five years. N/A

| Date Submitted | Date Approved |
|----------------|---------------|
| / / | / / |
| / / | / / |
| / / | / / |
| / / | / / |

e. For each site where edible crops are or will be irrigated with reclaimed water, describe the crops grown; the type of application system used; provisions for crop washing and for processing, if any; and provisions for control of public access, if any. (See Rule 62-610.475, F.A.C.)

 N/A

SECTION 3. C. GROUND WATER DISPOSAL BY UNDERGROUND INJECTION

1. Underground Injection Well Facility Serial Number and Name N/A

| | |
|--|--|
| Underground Injection Well Facility Serial Number | |
| Underground Injection Well Facility Name | |
| Previous Underground Injection Well Facility Serial Number | |

2. Underground Injection Well Facility Location N/A

| | |
|------------------------------|--|
| County | |
| City or Town (if applicable) | |
| Street or Description | |

| | | | | |
|-----------------------------------|---|---|--|----|
| Latitude | ° | ' | | °N |
| Longitude | ° | ' | | °W |
| Dates Coordinates Determined | / | / | | |
| Method Used to Obtain Coordinates | | | | |

3. Underground Injection Well Facility DEP Identification Number or Permit Application Number N/A

4. Discharge Operating Dates

| | |
|----------------------|---------|
| Discharge Start Date | N/A / / |
| Discharge End Date | / / |

| | |
|--|--|
| Reason for Discontinuing the Discharge | |
| | |

5. Design Capacity of the Underground Injection Well Facility

| | | |
|--------------------------------------|-----|-----|
| Current Design Capacity | N/A | mgd |
| Proposed Incremental Design Capacity | + | mgd |
| Proposed Total Design Capacity | = | mgd |

6. Basis of Design Flow N/A

- Annual Average Daily Flow
- Maximum Monthly Average Daily Flow
- Three-Month Average Daily Flow
- Other

If other, specify.

| | |
|--|--|
| | |
| | |

SECTION 4. SCHEDULED IMPROVEMENTS AND SCHEDULES OF IMPLEMENTATION

1. Improvements Required

a. Discharge Serial Numbers, Reclaimed Water Reuse or Land Application System Serial Numbers, and Underground Injection Well Facility Serial Numbers Affected

N/A

b. Authority Imposing Requirement

- Local
- State
- Federal
- Developed by Applicant
- Other

If other, specify.

c. Improvement Description:

3-character General Action Description

3-character Specific Action Descriptions

2. Implementation Schedule and Actual Completion Dates

| Implementation Steps | Schedule | Actual Completion |
|--|----------|-------------------|
| a. Preliminary Plans Complete | / / | / / |
| b. Final Plans and Specifications Complete | / / | / / |
| c. Financing Complete | / / | / / |
| d. Site Acquired | / / | / / |
| e. Begin Construction | / / | / / |
| f. End Construction | / / | / / |
| g. Begin Reuse or Disposal | / / | / / |
| h. Operational Level Attained | / / | / / |

SECTION 5. INDUSTRIAL WASTEWATER CONTRIBUTIONS

1. Significant Industrial User

N/A

Name
 Number and Street
 City/State/Zip Code
 County

2. Primary Standard Industrial Classification Code

3. Principal Product or Raw Material

| | Description | Quantity per Day | Units (See Table 3) |
|--------------|-------------|------------------|------------------------|
| Product | | | |
| Raw Material | | | |

4. Flow

Volume _____ Gallons Per Day

Frequency _____ Intermittent _____ Continuous

5. Pretreatment Provided

____ Yes ____ No

6. Characteristics of Wastewater

| Parameter Name | Value | Units |
|----------------|-------|-------|
| | | |
| | | |
| | | |
| | | |
| | | |

SECTION 6. ADDITIONAL INFORMATION REQUIRED FOR PERMIT RENEWALS

1. Have there been any modifications to the treatment facilities or reuse or disposal system, since the issuance of the current permit? If yes, describe on a separate sheet and attach.

Yes No

2. For limited wet weather discharges, have any modifications been made to the operation, frequency of discharge, or stream hydrology since the original limited wet weather discharge permit or the most recent permit. If yes, describe on a separate sheet and attach.

Yes No NA

3. Have there been any violations during the last six months? If yes, describe on a separate sheet and attach.

Yes No

4. Have there been any treatment facility interferences due to the discharge of industrial wastewater to the treatment facility during the last six months? If yes, describe on a separate sheet and attach.

Yes No

5. Is there any enforcement action pending against these treatment, reuse, or disposal facilities? If yes, describe on a separate sheet and attach.

Yes No

6. Have all previous permit conditions, including pretreatment requirements, monitoring requirements, and operator attendance been complied with? If no, describe on a separate sheet and attach.

Yes No

7. For permit renewals involving a limited wet weather discharge permitted under Rule 62-610.860, F.A.C., list the number of days during each of the last five years that the limited wet weather discharge was used. Also, list the total annual rainfall for each year.

| Year | Number of Days Used | P (%) | Annual Rainfall (inches) |
|---------------|---------------------|-------|--------------------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| Total/Average | | | |

8. For permit renewals involving a limited wet weather discharge permitted under Rule 62-610.860, F.A.C., provide the number of days during each of the last five years that the actual dilution ratio, as defined in Rule 62-610.860, F.A.C., was less than the minimum SDF and the number of months in which the monthly average CBOD₅ or TKN in the limited wet weather discharge exceeded the permit limitations.

| Year | Number of Days the Dilution Ratio Was Less Than SDF | Number of Monthsthe Limits Were Exceeded | |
|------|---|--|-----|
| | | CBOD ₅ | TKN |
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |

SECTION 6

Item 1 - The system was modified in 1996. An additional 1.5 acre, slow rate underground drainfield was installed on the #15 fairway of the Swiss Golf, golf course.

SECTION 7. ADDITIONAL INFORMATION REQUIRED FOR RESIDUALS/SEPTAGE MANAGEMENT FACILITIES

1. Location of Residuals Treatment Processes

(Describe in relation to the wastewater treatment processes.)

N / A

2. Type and Amount of Waste Treated at this Facility

| Type | Amount (dry tons/day) | Amount (gallons/day) |
|---------------------------|--------------------------|-------------------------|
| Residuals | or | |
| Septage | | |
| Food Establishment Sludge | | |
| Portable Toilet Waste | | |
| Holding Tank Waste | | |
| Boat or Marina Waste | | |
| Other (Describe.) | | or |
| Total | or | |

Is the total amount estimated or actual?

Estimated
 Actual

3. Information on Treatment Facilities Transporting Residuals

a. DEP Permit Number

b. Facility Name
 Number and Street
 City/State/Zip Code
 County
 Telephone

c. Facility Type

Type I
 Type II
 Type III

d. Amount of Residuals Received From This Facility

_____ dry tons/day or _____ gpd

Is this amount estimate or actual?

___ Estimated
___ Actual

e. Describe the treatment provided by this facility before transport.

f. Parameter Concentrations

Total Nitrogen

_____ % dry weight

Total Phosphorus

_____ % dry weight

Total Potassium

_____ % dry weight

Cadmium

_____ mg/kg dry weight

Copper

_____ mg/kg dry weight

Lead

_____ mg/kg dry weight

Nickel

_____ mg/kg dry weight

Zinc

_____ mg/kg dry weight

pH

_____ standard units

Total Solids

_____ %

Other Parameters (Describe.)

Date of Sample

_____/_____/_____

4. Describe the manifest system used for tracking residuals during transport from the facilities.

SECTION 8. DOCUMENTATION SUBMITTED

| 1. General Application Requirements | Attached | |
|--|----------|----|
| | Yes | No |
| a. Process Flow Diagram | X | |
| b. Site Plan | X | |
| c. Location Map | X | |
| d. Agricultural Use Plan or Dedicated Site Plan | X | |
| e. Capacity Analysis Report | X | |
| f. Results of Whole Effluent Biological Toxicity Testing | X | |
| g. Reuse Feasibility Study | N/A | |
| h. Binding Agreements and Documentation of Controls on Individual Users of Reclaimed Water | X | |

| 2. Additional Application Requirements for New Facilities and Modifications to Existing Facilities | Yes | No |
|---|-----|----|
| a. Preliminary Design Report | | |
| b. Documentation of Compliance with Antidegradation Requirements | | |
| c. Public Service Commission Certification Number and Copy of Certificate or Order Number and Copy of Order | | |
| d. Letter from the Management and Storage of Surface Waters Permitting Agency | | |
| e. Request for Approval of Monitoring Plans for Discharge of Domestic Wastewater to Wetlands | | |
| f. Concurrent Application for Ground Water Disposal by Underground Injection | | |
| g. Application for Monitoring Plan Approval | | |

| 3. Additional Application Requirements for Permit Renewals | Yes | No |
|---|-----|----|
| a. Operation and Maintenance Performance Report | X | |
| b. Reclaimed Water or Effluent Analysis Report | X | |
| c. Technical Evaluation of Need to Revise Local Pretreatment Limits | N/A | |
| d. Results of Mechanical Integrity Testing | X | |

SECTION 9. CERTIFICATIONS

1. Certifications for Construction of New Facilities or Modifications to Existing Facilities

a. Applicant or Authorized Representative

I certify that the statements made in this application for a permit and all attachments are true, correct, and complete to the best of my knowledge and belief. I agree to retain the design engineer, or another professional engineer registered in Florida, to conduct on-site observation of construction, to prepare a notification of completion of construction, and to review record drawings for adequacy as referenced in Rule 62-620.630, F.A.C. Further, I agree to provide an appropriate operation and maintenance manual for the facilities pursuant to Rule 62-620.630, F.A.C., and to retain a professional engineer registered in Florida to examine (or to prepare or revise, if necessary) the manual. For projects regulated by Chapter 62-610, F.A.C., I agree to provide the additional operation requirements of that Chapter.

(Signature of Applicant or Authorized Representative) _____ (Date) _____
Name (please type) _____ Company Name _____
Title _____ Company Address _____
Phone _____ City/State/Zip Code _____

b. Professional Engineer Registered in Florida

I certify that the engineering features of this domestic wastewater project have been (designed) (examined) by me and found to conform to engineering principles applicable to such projects. In my professional judgement, this facility, when properly constructed, operated, and maintained, will comply with all applicable statutes of the State of Florida and rules of the Department.

Name (please type) _____
Florida Registration Number _____
Company Name _____
Company Address _____
City/State/Zip Code _____
Phone Number () _____

(Seal, Signature, Date, and Registration Number)

c. Professional Engineer Registered in Florida

I certify that this firm or individual has been retained by the applicant to prepare a notification of completion of construction, to prepare operation and maintenance manuals, and to review record drawings for adequacy as referenced in Rules 62-620.630, 62-600.717, and 62-600.720, F.A.C.

Name (please type) _____
Florida Registration Number _____
Company Name _____
Company Address _____
City/State/Zip Code _____
Phone Number () _____

(Seal, Signature, Date, and Registration Number)

2. Certifications for Permit Renewals

a. Applicant or Authorized Representative

I certify that the statements made in this application for a permit and all attachments are true, correct and complete to the best of my knowledge and belief. I agree to operate and maintain these wastewater facilities in such a manner as to comply with the provisions of Chapter 403, F.S., Chapter 62-600, F.A.C., and all other applicable rules of the Department. Further, an appropriate operation and maintenance manual which has been examined by a professional engineer as certified below is available and located at Corporate Office and can be submitted upon request as part of the permit procedure. A copy of the record drawings or other plans (as applicable) showing modifications to existing facilities, as referenced in Rule 62-600.717, F.A.C., is available at the same location. I also understand that a permit if granted by the Department, is transferable only upon Department approval in accordance with Rule 62-620.340, F.A.C., and I will notify the Department in accordance with this rule upon sale or legal transfer of the permitted facilities. In the event of abandonment or inactivation of the facilities, I will notify the Department and ensure that public health and safety are protected as required by Rule 62-620.610, F.A.C.

Raymond Moats 2/17/97
(Signature of Applicant or Authorized Representative¹) (Date)

Name (please type) Raymond Moats Company Name CHC VII, Ltd.
Title President Company Address P. O. Box 5252
Phone 941-647-1581 City/State/Zip Code Lakeland, FL 33807

b. Professional Engineer

I certify that the engineering features of these domestic wastewater facilities have been examined by me and found to conform to engineering principles applicable to such projects. I certify that the operation and maintenance manual for these wastewater facilities has been prepared or examined by me or by individual(s) under my direct supervision and that there is reasonable assurance, in my professional judgement, that the facilities, when properly operated and maintained in accordance with this manual, will comply with all applicable statutes of the State of Florida and rules of the Department.

Name (please type) Ivan D. King
Florida Registration Number 9719
Company Name King Engineering Service
Company Address 3015 Silverado Terrace
City/State/Zip Code Winter Haven, FL 33884
Phone Number (941) 325-6146
I D King 2/17/97 #9719
(Seal, Signature, Date, and Registration Number)

¹If signed by the authorized representative, attach a letter of authorization.



Department of Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF OCTOBER 1997

Water System Information

System Name: Swiss Golf & Tennis PWS Identification No.: 6535064
System Owner Name: CRF, Inc Telephone No.: (941) 647-1581
Address: P.O. Box 5252
City: Lakeland State: FL Zip Code: 33807-5252
System Type: [X] community; [] non-transient non-community; [] non-community; [] consecutive
No. of Service Connections at End of Month: 865 Total Population Served at End of Month: 1172

Water Treatment Plant Information

Treatment Plant Name: Swiss Golf & Tennis Telephone No.: (941) 647-1581
Address: Old Lucerne Park Road
City: Winterhousen State: FL Zip Code:
Permitted Maximum Day Capacity of Plant: gpd
Plant Category and Class per Rule 62-699.310(4), F.A.C.:
Lead/Chief Plant Operator:

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Row 1: Robert A. Byrd, 007483, C, 14

Other Certified Plant Operators (attach additional sheets if necessary):

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Multiple empty rows for additional operators.

STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF October 1997

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

Signature and Date: Robert A. Byrd, 11/5/97

Name and Certificate Number (please type or print): Robert A. Byrd C7483

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
 System PWS Identification Number: 6535064
 Treatment Plant Name: Swiss Golf & Tennis

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF October 1997

Type of Residual Disinfectant Maintained in Distribution System Served by Plant: free chlorine;
 combined chlorine (chloramine); chlorine dioxide
 Summary of Daily Water Treatment Data for Month:

| Day of the Month | Hours Plant in Operation | Quantity of Finished Water Produced by Plant (gallons) X 1000 | Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L) | Residual Disinfectant in Distribution System | | | Reported Emergency or Abnormal Operating Conditions |
|------------------|--------------------------|---|---|---|--|---|---|
| | | | | Lowest Residual Disinfectant Concentration at Remote Point (mg/L) | Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points | Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) | |
| 1 | | 434 | 3.0 | 1.5 | | | |
| 2 | | | | | | | |
| 3 | | 259 | 3.0 | 1.5 | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |
| 6 | | 626 | 3.0 | 1.5 | | | |
| 7 | | | | | | | |
| 8 | | 452 | 3.0 | 1.5 | | | |
| 9 | | | | | | | |
| 10 | | 323 | 3.0 | 1.5 | | | |
| 11 | | | | | | | |
| 12 | | | | | | | |
| 13 | | 581 | 3.0 | 1.5 | | | |
| 14 | | | | | | | |
| 15 | | 508 | 3.0 | 1.5 | | | |
| 16 | | | | | | | |
| 17 | | 509 | 3.0 | 1.5 | | | |
| 18 | | | | | | | |
| 19 | | | | | | | |
| 20 | | 590 | 3.0 | 1.5 | | | |
| 21 | | | | | | | |
| 22 | | 503 | 3.0 | 1.5 | 5 | 1.5 | |
| 23 | | | | | | | |
| 24 | | 345 | 3.0 | 1.5 | | | |
| 25 | | | | | | | |
| 26 | | | | | | | |
| 27 | | 725 | 3.0 | 1.5 | | | |
| 28 | | | | | | | |
| 29 | | 417 | 3.0 | 1.5 | | | |
| 30 | | | | | | | |
| 31 | | 317 | 3.0 | 1.5 | | | |
| Total | | 6589 | | | 5 | | |
| Avg. | | 213 | | | | | |
| Max. | | 255 | | | | | |



Department of Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF NOVEMBER 1997

Water System Information

System Name: Swiss Golf & Tennis PWS Identification No.: 6535064
System Owner: CRF, Inc Telephone No.: (941) 647-1581
Address: P.O. Box 5252
City: Lakeland State: FL Zip Code: 33807-5252
System Type: [X] community; [] non-transient non-community; [] non-community; [] consecutive
No. of Service Connections at End of Month: 950 Total Population Served at End of Month: 1870

Water Treatment Plant Information

Treatment Plant Name: Swiss Golf & Tennis Telephone No.: (941) 647-1581
Address: Old Locerne Park Road
City: Winterhaven State: FL Zip Code: 33811
Permitted Maximum Day Capacity of Plant: 657,000 gpd
Plant Category and Class per Rule 62-699.310(4), F.A.C.:
Lead/Chief Plant Operator:

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Row 1: Robert A. Byrd, 007483, C, 12

Other Certified Plant Operators (attach additional sheets if necessary):

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Multiple empty rows.

STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF NOVEMBER 1997

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

Signature and Date: Robert A. Byrd, 12/2/97

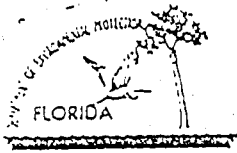
Name and Certificate Number (please type or print): Robert A. Byrd, DW007483 C

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
 System PWS Identification Number: 6535064
 Treatment Plant Name: SWISS GOLF & TENNIS

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF NOVEMBER 1997

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: free chlorine; combined chlorine (chloramine); chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

| Day of the Month | Hours Plant in Operation | Quantity of Finished Water Produced by Plant (gallons) | Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L) | Residual Disinfectant in Distribution System | | | Reported Emergency or Abnormal Operating Conditions |
|------------------|--------------------------|--|---|---|--|---|---|
| | | | | Lowest Residual Disinfectant Concentration at Remote Point (mg/L) | Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points | Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) | |
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | 520,000 | 3.0 | 1.5 | | | |
| 4 | | | | | | | |
| 5 | | 424,000 | 3.0 | 1.5 | | | |
| 6 | | | | | | | |
| 7 | | 305,000 | 3.0 | 1.5 | | | |
| 8 | | | | | | | |
| 9 | | | | | | | |
| 10 | | 660,000 | 3.0 | 1.5 | | | |
| 11 | | | | | | | |
| 12 | | 509,000 | 3.0 | 1.5 | | | |
| 13 | | | | | | | |
| 14 | | 307,000 | 3.0 | 1.5 | | | |
| 15 | | | | | | | |
| 16 | | | | | | | |
| 17 | | 563,000 | 3.0 | 1.5 | | | |
| 18 | | | | | | | |
| 19 | | 482,000 | 3.0 | 1.5 | | | |
| 20 | | | | | | | |
| 21 | | 286,000 | 3.0 | 1.5 | | | |
| 22 | | | | | | | |
| 23 | | | | | | | |
| 24 | | 696,000 | 3.0 | 1.5 | 3 | 1.5 | |
| 25 | | | | | | | |
| 26 | | 482,000 | 3.0 | 1.5 | | | |
| 27 | | | | | | | |
| 28 | | 362,000 | 3.0 | 1.5 | | | |
| 29 | | | | | | | |
| 30 | | | | | | | |
| 31 | | | | | | | |
| Total | | 5,596,000 | | | 3 | | |
| Avg. | | 186,533 | | | | | |
| Max. | | 254,500 | | | | | |



Department of
Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and
for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF
DECEMBER 1997

Water System Information

- System Name: Swiss Golf & Tennis PWS Identification No.: 6535064
- System Owner
Name: CRF, Inc. Telephone No.: (941) 647-1581
Address: P.O. Box 5252
City: Lakeland State: FL Zip Code: 33807-5252
- System Type: community; non-transient non-community; non-community; consecutive
- No. of Service Connections at End of Month: 950 Total Population Served at End of Month: 1870

Water Treatment Plant Information

- Treatment Plant
Name: Swiss Golf & Tennis Telephone No.: (941) 647-1581
Address: Old Lucerne Park Road
City: Winterhaven State: FL Zip Code: 33811
- Permitted Maximum Day Capacity of Plant: 657,000 gpd
- Plant Category and Class per Rule 62-699.310(4), F.A.C.: 5C
- Lead/Chief Plant Operator:

| Name | Certificate Number | Class (A, B, C, or D) | Day(s)/Shift(s) Worked |
|-----------------------|--------------------|-----------------------|------------------------|
| <u>Robert A. Byrd</u> | <u>007483</u> | <u>C</u> | <u>14</u> |

- Other Certified Plant Operators (attach additional sheets if necessary):

| Name | Certificate Number | Class (A, B, C, or D) | Day(s)/Shift(s) Worked |
|------|--------------------|-----------------------|------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF
DECEMBER 1997

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

Robert Byrd, 012/7/98
Signature and Date

Robert Byrd, DW007483C
Name and Certificate Number (please type or print)

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water

Systems that Treat Their Water

System PWS Identification Number:

6535064

Treatment Plant Name:

Swiss Golf & Tennis

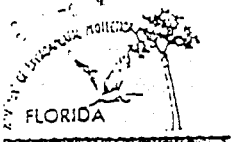
II. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF DECEMBER 1997

Type of Residual Disinfectant Maintained in Distribution System Served by Plant: free chlorine;

combined chlorine (chloramine); chlorine dioxide

Summary of Daily Water Treatment Data for Month:

| Day of the Month | Hours Plant in Operation | Quantity of Finished Water Produced by Plant (gallons) | Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L) | Residual Disinfectant in Distribution System | | | Reported Emergency or Abnormal Operating Conditions |
|------------------|--------------------------|--|---|---|--|---|---|
| | | | | Lowest Residual Disinfectant Concentration at Remote Point (mg/L) | Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points | Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) | |
| 1 | | 681,000 | 3.0 | 1.8 | | | |
| 2 | | | | | | | |
| 3 | | 446,000 | 3.0 | 1.5 | | | |
| 4 | | | | | | | |
| 5 | | 286,000 | 3.0 | 1.5 | | | |
| 6 | | | | | | | |
| 7 | | | | | | | |
| 8 | | 558,000 | 3.0 | 1.8 | | | |
| 9 | | | | | | | |
| 10 | | 327,000 | 3.0 | 1.5 | | | |
| 11 | | | | | | | |
| 12 | | 326,000 | 3.0 | 1.5 | | | |
| 13 | | | | | | | |
| 14 | | | | | | | |
| 15 | | 425,000 | 3.0 | 1.5 | | | |
| 16 | | | | | | | |
| 17 | | 375,000 | 3.0 | 1.8 | 3 | 1.8 | |
| 18 | | | | | | | |
| 19 | | 207,000 | 3.0 | 1.5 | | | |
| 20 | | | | | | | |
| 21 | | | | | | | |
| 22 | | 470,000 | 3.0 | 1.5 | | | |
| 23 | | | | | | | |
| 24 | | 414,000 | 3.0 | 1.5 | | | |
| 25 | | | | | | | |
| 26 | | 211,000 | 2.5 | 1.2 | | | |
| 27 | | | | | | | |
| 28 | | | | | | | |
| 29 | | 454,000 | 3.0 | 1.5 | | | |
| 30 | | | | | | | |
| 31 | | 315,000 | 3.0 | 1.5 | | | |
| Total | | 5,495,000 | | | 3 | | |
| Avg. | | 177,258 | | | | | |
| Max. | | 227,000 | | | | | |



Department of Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF JANUARY 1998

Water System Information

System Name: Swiss Golf & TENNIS PWS Identification No.: 6535064
System Owner Name: CRF, INC Telephone No.: (941) 647-1581
Address: P.O. Box 5252 City: LAKEWOOD State: FL Zip Code: 33807-5252
System Type: [X] community; [] non-transient non-community; [] non-community; [] consecutive
No. of Service Connections at End of Month: 950 Total Population Served at End of Month: 1870

Water Treatment Plant Information

Treatment Plant Name: Swiss Golf & TENNIS Telephone No.: (941) 647-1581
Address: Old Lucerne Park Road City: Winterhaven State: FL Zip Code: 33811
Permitted Maximum Day Capacity of Plant: 657,000 gpd
Plant Category and Class per Rule 62-699.310(4), F.A.C.: SC
Lead/Chief Plant Operator:

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Row 1: Robert A. Byrd, 007483, C, 13

Other Certified Plant Operators (attach additional sheets if necessary):

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Multiple empty rows.

STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF JANUARY 1998

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

Signature and Date: Robert A. Byrd 2/13/98

Name and Certificate Number (please type or print): Robert A. Byrd, DW007483C

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water

Systems that Treat Their Water

System PWS Identification Number:

6535064

Treatment Plant Name:

SUNSHINE GOLF & TENNIS

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF JANUARY 1998

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: free chlorine; combined chlorine (chloramine); chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

| Day of the Month | Hours Plant in Operation | Quantity of Finished Water Produced by Plant (gallons) | Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L) | Residual Disinfectant in Distribution System | | | Reported Emergency or Abnormal Operating Conditions |
|------------------|--------------------------|--|---|---|--|---|---|
| | | | | Lowest Residual Disinfectant Concentration at Remote Point (mg/L) | Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points | Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) | |
| 1 | | | | | | | |
| 2 | | 274,000 | 3.0 | 1.5 | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| 5 | | 522,000 | 3.0 | 1.5 | | | |
| 6 | | | | | | | |
| 7 | | 460,000 | 3.0 | 1.5 | | | |
| 8 | | | | | | | |
| 9 | | 202,000 | 3.0 | 1.5 | | | |
| 10 | | | | | | | |
| 11 | | | | | | | |
| 12 | | 522,000 | 3.0 | 1.5 | | | |
| 13 | | | | | | | |
| 14 | | 487,000 | 3.0 | 1.5 | | | |
| 15 | | | | | | | |
| 16 | | 258,000 | 3.0 | 1.5 | | | |
| 17 | | | | | | | |
| 18 | | | | | | | |
| 19 | | 498,000 | 3.0 | 1.5 | | | |
| 20 | | | | | | | |
| 21 | | 420,000 | 3.0 | 1.5 | | | |
| 22 | | | | | | | |
| 23 | | 242,000 | 3.0 | 1.5 | | | |
| 24 | | | | | | | |
| 25 | | | | | | | |
| 26 | | 451,000 | 3.0 | 1.5 | 3 | 1.5 | |
| 27 | | | | | | | |
| 28 | | 377,000 | 3.0 | 1.5 | | | |
| 29 | | | | | | | |
| 30 | | 312,000 | 3.0 | 1.5 | | | |
| 31 | | | | | | | |
| Total | | 4,975,000 | | | 3 | | |
| Avg. | | 160,484 | | | | | |
| Max. | | 230,000 | | | | | |



Department of Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF FEBRUARY 1998

Water System Information

System Name: SWISS GOLF & TENNIS PWS Identification No.: 6535064
System Owner Name: CRF, Inc Telephone No.: (941) 647-1581
Address: P.O. BOX 5252 City: LAKEWORTH State: FL Zip Code: 33801-5252
System Type: [X] community; [] non-transient non-community; [] non-community; [] consecutive
No. of Service Connections at End of Month: 950 Total Population Served at End of Month: 1870

Water Treatment Plant Information

Treatment Plant Name: SWISS GOLF & TENNIS Telephone No.: (941) 647-1581
Address: OLD LUCERNE PARK ROAD City: WINTERHAVEN State: FL Zip Code: 33811
Permitted Maximum Day Capacity of Plant: 657,000 gpd
Plant Category and Class per Rule 62-699.310(4), F.A.C.: 5C
Lead/Chief Plant Operator:

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Row 1: Robert A. Byrd, 007483, C, 12

Other Certified Plant Operators (attach additional sheets if necessary):

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Multiple empty rows for additional operators.

STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF FEBRUARY 1998

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

Signature and Date: Robert A. Byrd, 3/10/98

Name and Certificate Number (please type or print): Robert A. Byrd, DW007483C

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water

Systems that Treat Their Water
System PWS Identification Number:

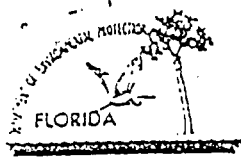
6535064
SWISS GOLF & TENNIS

Treatment Plant Name:

III. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH YEAR OF FEBRUARY 1998

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: free chlorine; combined chlorine (chloramine); chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

| Day of the Month | Hours Plant in Operation | Quantity of Finished Water Produced by Plant (gallons) | Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L) | Residual Disinfectant in Distribution System | | | Reported Emergency or Abnormal Operating Conditions |
|------------------|--------------------------|--|---|---|--|---|---|
| | | | | Lowest Residual Disinfectant Concentration at Remote Point (mg/L) | Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points | Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) | |
| 1 | | | | | | | |
| 2 | | 520,000 | 3.0 | 1.5 | | | |
| 3 | | | | | | | |
| 4 | | 345,000 | 3.0 | 1.5 | | | |
| 5 | | | | | | | |
| 6 | | 314,000 | 3.0 | 1.5 | | | |
| 7 | | | | | | | |
| 8 | | | | | | | |
| 9 | | 442,000 | 3.0 | 1.5 | | | |
| 10 | | | | | | | |
| 11 | | 401,000 | 3.0 | 1.5 | | | |
| 12 | | | | | | | |
| 13 | | 364,000 | 3.0 | 1.5 | | | |
| 14 | | | | | | | |
| 15 | | | | | | | |
| 16 | | 567,000 | 3.0 | 1.5 | | | |
| 17 | | | | | | | |
| 18 | | 291,000 | 3.0 | 1.5 | | | |
| 19 | | | | | | | |
| 20 | | 346,000 | 3.0 | 1.5 | | | |
| 21 | | | | | | | |
| 22 | | | | | | | |
| 23 | | 419,000 | 3.0 | 1.5 | | | |
| 24 | | | | | | | |
| 25 | | 323,000 | 3.0 | 1.5 | 3 | 1.5 | |
| 26 | | | | | | | |
| 27 | | 258,000 | 3.0 | 1.5 | | | |
| 28 | | | | | | | |
| 29 | | | | | | | |
| 30 | | | | | | | |
| 31 | | | | | | | |
| Total | | 4,590,000 | | | 3 | | |
| Avg. | | 163,929 | | | | | |
| Max. | | 200,500 | | | | | |



Department of Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF MARCH 1998

Water System Information

System Name: Swiss Golf & Tennis PWS Identification No.: 6535064
System Owner Name: CRF Telephone No.: (941)647-1581
Address: P.O. Box 5252
City: LAICELAND State: FL Zip Code: 33807
System Type: [X] community; [] non-transient non-community; [] non-community; [] consecutive
No. of Service Connections at End of Month: 950 Total Population Served at End of Month: 1870

Water Treatment Plant Information

Treatment Plant Name: Swiss Golf & Tennis Telephone No.: (941)647-1581
Address: Old Lucerne Park Road
City: Winter Haven State: FL Zip Code: 33811
Permitted Maximum Day Capacity of Plant: 657,000 gpd
Plant Category and Class per Rule 62-699.310(4), F.A.C.: 5C
Lead/Chief Plant Operator:

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Row 1: Robert A. Byrd, 007483, C, 13

Other Certified Plant Operators (attach additional sheets if necessary):

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Multiple empty rows.

STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF MARCH 1998

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

Signature and Date: Robert A. Byrd, 4/1/98

Name and Certificate Number (please type or print): Robert A. Byrd, DW007483C

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water

Systems that Treat Their Water

System PWS Identification Number: 6535064

Treatment Plant Name: SWISS GOLF & TENNIS

III. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH YEAR OF MARCH 1998

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: free chlorine; combined chlorine (chloramine); chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

| Day of the Month | Hours Plant in Operation | Quantity of Finished Water Produced by Plant (gallons) | Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L) | Residual Disinfectant in Distribution System | | | Reported Emergency or Abnormal Operating Conditions |
|------------------|--------------------------|--|---|---|--|---|---|
| | | | | Lowest Residual Disinfectant Concentration at Remote Point (mg/L) | Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points | Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) | |
| 1 | | | | | | | |
| 2 | | 482,000 | 3.0 | 1.5 | | | |
| 3 | | | | | | | |
| 4 | | 387,000 | 3.0 | 1.5 | | | |
| 5 | | | | | | | |
| 6 | | 269,000 | 3.0 | 1.5 | | | |
| 7 | | | | | | | |
| 8 | | | | | | | |
| 9 | | 521,000 | 3.0 | 1.5 | | | |
| 10 | | | | | | | |
| 11 | | 378,000 | 3.0 | 1.5 | | | |
| 12 | | | | | | | |
| 13 | | 354,000 | 3.0 | 1.5 | | | |
| 14 | | | | | | | |
| 15 | | | | | | | |
| 16 | | 560,000 | 3.0 | 1.5 | | | |
| 17 | | | | | | | |
| 18 | | 440,000 | 3.0 | 1.5 | | | |
| 19 | | | | | | | |
| 20 | | 315,000 | 3.0 | 1.5 | | | |
| 21 | | | | | | | |
| 22 | | | | | | | |
| 23 | | 464,000 | 3.0 | 1.5 | | | |
| 24 | | | | | | | |
| 25 | | 388,000 | 3.0 | 1.5 | | | |
| 26 | | | | | | | |
| 27 | | 331,000 | 3.0 | 1.5 | | | |
| 28 | | | | | | | |
| 29 | | | | | | | |
| 30 | | 692,000 | 3.0 | 1.5 | 3 | 1.5 | |
| 31 | | | | | | | |
| Total | | 5,581,000 | | | 3 | | |
| Avg. | | 180,032 | | | | | |
| Max. | | 230,667 | | | | | |



Department of Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF APRIL 1998

Water System Information

System Name: Swiss Golf & Tennis PWS Identification No.: 6535064
System Owner Name: C.R.F. Telephone No.: (941)647-1581
Address: P.O. Box 5252
City: Lakeland State: FL Zip Code: 33807
System Type: [X] community; [] non-transient non-community; [] non-community; [] consecutive
No. of Service Connections at End of Month: 950 Total Population Served at End of Month: 1870

Water Treatment Plant Information

Treatment Plant Name: Swiss Golf & Tennis Telephone No.: (941) 647-1581
Address: Old Lucerne Park Road
City: Winter Haven State: FL Zip Code: 33811
Permitted Maximum Day Capacity of Plant: 657,000 gpd
Plant Category and Class per Rule 62-699.310(4), F.A.C.: 5C
Lead/Chief Plant Operator:

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Row 1: Robert A. Byrd, 007483, C, 13

Other Certified Plant Operators (attach additional sheets if necessary):

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Multiple empty rows.

STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF APRIL 1998

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or-visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

Signature and Date: Robert A. Byrd, 5/12/98

Name and Certificate Number (please type or print): Robert A. Byrd, DW007483C

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 6535064
 Treatment Plant Name: Swiss Golf, TEMI

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH YEAR OF APRIL 1998

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: free chlorine; combined chlorine (chloramine); chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

| Day of the Month | Hours Plant in Operation | Quantity of Finished Water Produced by Plant (gallons) | Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L) | Residual Disinfectant in Distribution System | | | Reported Emergency or Abnormal Operating Conditions |
|------------------|--------------------------|--|---|---|--|---|---|
| | | | | Lowest Residual Disinfectant Concentration at Remote Point (mg/L) | Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points | Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) | |
| 1 | | 586,000 | 3.0 | 1.5 | | | |
| 2 | | | | | | | |
| 3 | | 332,000 | 3.0 | 1.5 | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |
| 6 | | 717,000 | 3.0 | 1.5 | | | |
| 7 | | | | | | | |
| 8 | | 593,000 | 3.0 | 1.5 | | | |
| 9 | | | | | | | |
| 10 | | 348,000 | 3.0 | 1.5 | | | |
| 11 | | | | | | | |
| 12 | | | | | | | |
| 13 | | 732,000 | 3.0 | 1.5 | | | |
| 14 | | | | | | | |
| 15 | | 578,000 | 3.0 | 1.5 | | | |
| 16 | | | | | | | |
| 17 | | 491,000 | 3.0 | 1.5 | | | |
| 18 | | | | | | | |
| 19 | | | | | | | |
| 20 | | 786,000 | 3.0 | 1.5 | | | |
| 21 | | | | | | | |
| 22 | | 473,000 | 3.0 | 1.5 | | | |
| 23 | | | | | | | |
| 24 | | 361,000 | 3.0 | 1.5 | 3 @ A | 1.5 | |
| 25 | | | | | | | |
| 26 | | | | | | | |
| 27 | | 756,000 | 3.0 | 1.5 | | | |
| 28 | | | | | | | |
| 29 | | 533,000 | 3.0 | 1.5 | | | |
| 30 | | | | | | | |
| 31 | | | | | | | |
| Total | | 7,286,000 | | | 3 | | |
| Avg. | | 242,867 | | | | | |
| Max. | | 296,500 | | | | | |



Department of Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF MAY 1998

Water System Information

System Name: Swiss Golf & Tennis PWS Identification No.: 6535064
System Owner Name: C.R.F. Telephone No.: (941) 647-1581
Address: P.O. Box 5252
City: Lakeland State: FL Zip Code: 33807
System Type: community
No. of Service Connections at End of Month: 950 Total Population Served at End of Month: 1870

Water Treatment Plant Information

Treatment Plant Name: Swiss Golf & Tennis Telephone No.: (941) 647-1581
Address: Old Lucerne Park Road
City: Winter Haven State: FL Zip Code: 33811
Permitted Maximum Day Capacity of Plant: 657,000 gpd
Plant Category and Class per Rule 62-699.310(4), F.A.C.: 5C
Lead/Chief Plant Operator:

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Row 1: Robert A. Byrd, 007483, C, 13

Other Certified Plant Operators (attach additional sheets if necessary):

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Multiple empty rows.

STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF MAY 1998

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

Signature and Date: Robert A. Byrd, 6/9/98

Name and Certificate Number (please type or print): Robert A. Byrd, DW007483C

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF MAY 1998

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: free chlorine; combined chlorine (chloramine); chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

| Day of the Month | Hours Plant in Operation | Quantity of Finished Water Produced by Plant (gallons) | Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L) | Residual Disinfectant in Distribution System | | | Reported Emergency or Abnormal Operating Conditions |
|------------------|--------------------------|--|---|---|--|---|---|
| | | | | Lowest Residual Disinfectant Concentration at Remote Point (mg/L) | Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points | Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) | |
| 1 | | 342,000 | 3.0 | 1.5 | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4 | | 630,000 | 3.0 | 1.5 | | | |
| 5 | | | | | | | |
| 6 | | 405,000 | 3.0 | 1.5 | | | |
| 7 | | | | | | | |
| 8 | | 271,000 | 3.0 | 1.5 | | | |
| 9 | | | | | | | |
| 10 | | | | | | | |
| 11 | | 646,000 | 3.0 | 1.5 | | | |
| 12 | | | | | | | |
| 13 | | 581,000 | 3.0 | 1.5 | | | |
| 14 | | | | | | | |
| 15 | | 286,000 | 3.0 | 1.5 | | | |
| 16 | | | | | | | |
| 17 | | | | | | | |
| 18 | | 730,000 | 3.0 | 1.5 | | | |
| 19 | | | | | | | |
| 20 | | 612,000 | 3.0 | 1.5 | | | |
| 21 | | | | | | | |
| 22 | | 476,000 | 3.0 | 1.5 | | | |
| 23 | | | | | | | |
| 24 | | | | | | | |
| 25 | | 827,000 | 1.2 | 0.5 | | | |
| 26 | | | | | | | |
| 27 | | 621,000 | 0.5 | 0.2 | 3 @ A | 0.2 | * REPAIR BOOSTER PUMP |
| 28 | | | | | | | |
| 29 | | 257,000 | 3.0 | 1.5 | | | |
| 30 | | | | | | | |
| 31 | | | | | | | |
| Total | | 6,684,000 | | | 3 | | |
| Avg. | | 215,613 | | | | | |
| Max. | | 310,500 | | | | | |



Department of Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF JUNE 1998

Water System Information

System Name: Swiss Golf & Tennis PWS Identification No.: 6535064
System Owner Name: C.R.F. Telephone No.: (941) 647-1581
Address: P.O. Box 5252
City: Lakeland State: FL Zip Code: 33807
System Type: [X] community; [] non-transient non-community; [] non-community; [] consecutive
No. of Service Connections at End of Month: 950 Total Population Served at End of Month: 1870

Water Treatment Plant Information

Treatment Plant Name: Swiss Golf & Tennis Telephone No.: (941) 647-1581
Address: Old Lucerne Park Road
City: Winter Haven State: FL Zip Code: 33811
Permitted Maximum Day Capacity of Plant: 657,000 gpd
Plant Category and Class per Rule 62-699.310(4), F.A.C.: 5C
Lead/Chief Plant Operator:

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Row 1: Robert A. Byrd, 007483, C, 13

Other Certified Plant Operators (attach additional sheets if necessary):

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Multiple empty rows.

STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF JUNE 1998

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

Signature and Date: Robert A. Byrd 7/13/98

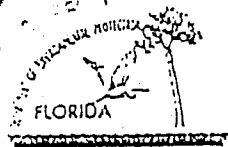
Name and Certificate Number (please type or print): Robert A. Byrd, DW007483C

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
 System PWS Identification Number: 6535064
 Treatment Plant Name: Swiss Gb/R Dennis

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF JUNE 1998

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: free chlorine; combined chlorine (chloramine); chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

| Day of the Month | Hours Plant in Operation | Quantity of Finished Water Produced by Plant (gallons) | Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L) | Residual Disinfectant in Distribution System | | | Reported Emergency or Abnormal Operating Conditions |
|------------------|--------------------------|--|---|---|--|---|---|
| | | | | Lowest Residual Disinfectant Concentration at Remote Point (mg/L) | Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points | Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) | |
| 1 | | 725,000 | 3.0 | 1.3 | | | |
| 2 | | | | | | | |
| 3 | | 561,000 | 3.0 | 1.5 | | | |
| 4 | | | | | | | |
| 5 | | 487,000 | 3.0 | 1.5 | | | |
| 6 | | | | | | | |
| 7 | | | | | | | |
| 8 | | 821,000 | 3.0 | 1.5 | | | |
| 9 | | | | | | | |
| 10 | | 559,000 | 3.0 | 1.8 | 3 | 1.8 | |
| 11 | | | | | | | |
| 12 | | 424,000 | 3.0 | 1.5 | | | |
| 13 | | | | | | | |
| 14 | | | | | | | |
| 15 | | 903,000 | 3.0 | 1.6 | | | |
| 16 | | | | | | | |
| 17 | | 637,000 | 3.0 | 1.4 | | | |
| 18 | | | | | | | |
| 19 | | 422,000 | 3.3 | 1.5 | | | |
| 20 | | | | | | | |
| 21 | | | | | | | |
| 22 | | 962,000 | 3.0 | 1.4 | | | |
| 23 | | | | | | | |
| 24 | | 644,000 | 2.6 | 1.0 | | | |
| 25 | | | | | | | |
| 26 | | 515,000 | 3.0 | 1.3 | | | |
| 27 | | | | | | | |
| 28 | | | | | | | |
| 29 | | 934,000 | 3.5 | 2.2 | | | |
| 30 | | | | | | | |
| 31 | | | | | | | |
| Total | | 8,544,000 | | | 3 | | |
| Avg. | | 284,800 | | | | | |
| Max. | | 322,000 | | | | | |



Department of Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF JULY 1998

Water System Information

- System Name: Swiss Golf PWS Identification No.: 6535064
System Owner: C.R.F. Telephone No.: (941) 647-1581
Name: C.R.F. Telephone No.: (941) 647-1581
Address: P.O. Box 5252
City: Lakeland State: FL Zip Code: 33807
System Type: X community; non-transient non-community; non-community; consecutive
No. of Service Connections at End of Month: 950 Total Population Served at End of Month: 1870

Water Treatment Plant Information

- Treatment Plant Name: Swiss Golf Telephone No.: (941) 647-1581
Address: Old Lucerne Park Road
City: Winter Haven State: FL Zip Code: 33811
Permitted Maximum Day Capacity of Plant: 657,000 gpd
Plant Category and Class per Rule 62-699.310(4), F.A.C.: 5C
Lead/Chief Plant Operator:

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Row 1: Robert A. Byrd, 087483, C, 14

Other Certified Plant Operators (attach additional sheets if necessary):

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Multiple empty rows for additional operators.

STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF JULY 1998

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

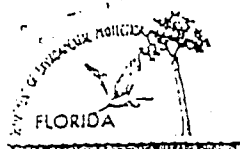
Signature and Date: Robert A. Byrd 8/12/98 Name and Certificate Number (please type or print): Robert A. Byrd, DN087483C

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
 System PWS Identification Number: 6535064
 Treatment Plant Name: Swiss Golf

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF JULY 1998

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: free chlorine; combined chlorine (chloramine); chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

| Day of the Month | Hours Plant in Operation | Quantity of Finished Water Produced by Plant (gallons) | Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L) | Residual Disinfectant in Distribution System | | | Reported Emergency or Abnormal Operating Conditions |
|------------------|--------------------------|--|---|---|--|---|---|
| | | | | Lowest Residual Disinfectant Concentration at Remote Point (mg/L) | Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points | Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) | |
| 1 | | 678,000 | 3.0 | 2.0 | | | |
| 2 | | | | | | | |
| 3 | | 454,000 | 3.0 | 1.8 | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |
| 6 | | 754,000 | 3.0 | 1.5 | | | |
| 7 | | | | | | | |
| 8 | | 540,000 | 3.0 | 1.5 | | | |
| 9 | | | | | | | |
| 10 | | 283,000 | 3.0 | 1.5 | | | |
| 11 | | | | | | | |
| 12 | | | | | | | |
| 13 | | 700,000 | 3.0 | 1.5 | | | |
| 14 | | | | | | | |
| 15 | | 392,000 | 3.0 | 1.5 | | | |
| 16 | | | | | | | |
| 17 | | 227,000 | 3.0 | 1.5 | | | |
| 18 | | | | | | | |
| 19 | | | | | | | |
| 20 | | 623,000 | 3.0 | 1.5 | | | |
| 21 | | | | | | | |
| 22 | | 307,000 | 1.0 | 6.2 | | | |
| 23 | | | | | | | |
| 24 | | 243,000 | 3.0 | 2.0 | | | |
| 25 | | | | | | | |
| 26 | | | | | | | |
| 27 | | 747,000 | 3.0 | 1.5 | | | |
| 28 | | | | | | | 3 @ A |
| 29 | | 394,000 | 3.0 | 1.8 | | | |
| 30 | | | | | | | |
| 31 | | 360,000 | 3.0 | 1.5 | | | |
| Total | | 6,832,000 | | | 3 | | |
| Avg. | | 220,387 | | | | | |
| Max. | | 339,000 | | | | | |



Department of Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF AUGUST 1998

Water System Information

System Name: SWISS GOLF PWS Identification No.: 6535064
System Owner Name: C.R.F. Telephone No.: (941) 647-1581
Address: P.O. Box 5252
City: LAKELAND State: FL Zip Code: 33807
System Type: [X] community; [] non-transient non-community; [] non-community; [] consecutive
No. of Service Connections at End of Month: 950 Total Population Served at End of Month: 1870

Water Treatment Plant Information

Treatment Plant Name: SWISS GOLF Telephone No.: (941) 647-1581
Address: OLD LUCERNE PARK ROAD
City: WINTERHAVEN State: FL Zip Code: 33811
Permitted Maximum Day Capacity of Plant: 657,000 gpd
Plant Category and Class per Rule 62-699.310(4), F.A.C.: 5C
Lead/Chief Plant Operator:

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Row 1: Robert A. Byrd, 007483, C, 13

Other Certified Plant Operators (attach additional sheets if necessary):

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Multiple empty rows for additional operators.

STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF AUGUST 1998

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
• if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

Signature and Date: Robert A. Byrd, 9/6/98

Name and Certificate Number (please type or print): Robert A. Byrd, DW007483C

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water

Systems that Treat Their Water

System PWS Identification Number: 6535064

Treatment Plant Name: SWISS GOLF

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH YEAR OF AUGUST 1998

Type of Residual Disinfectant Maintained in Distribution System Served by Plant: free chlorine;

combined chlorine (chloramine); chlorine dioxide

Summary of Daily Water Treatment Data for Month:

| Day of the Month | Hours Plant in Operation | Quantity of Finished Water Produced by Plant (gallons) | Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L) | Residual Disinfectant in Distribution System | | | Reported Emergency or Abnormal Operating Conditions |
|------------------|--------------------------|--|---|---|--|---|---|
| | | | | Lowest Residual Disinfectant Concentration at Remote Point (mg/L) | Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points | Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) | |
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | 989,000 | 2.7 | 1.4 | | | |
| 4 | | | | | | | |
| 5 | | 278,000 | 1.8 | 1.0 | | | |
| 6 | | | | | | | |
| 7 | | 312,000 | 2.4 | 1.0 | | | |
| 8 | | | | | | | |
| 9 | | | | | | | |
| 10 | | 606,000 | 3.0 | 1.5 | | | |
| 11 | | | | | | | |
| 12 | | 508,000 | 3.0 | 1.5 | | | |
| 13 | | | | | | | |
| 14 | | 295,000 | 2.8 | 1.4 | | | |
| 15 | | | | | | | |
| 16 | | | | | | | |
| 17 | | 618,000 | 2.5 | 1.2 | | | |
| 18 | | | | | | | |
| 19 | | 472,000 | 3.0 | 1.5 | | | |
| 20 | | | | | | | |
| 21 | | 339,000 | 3.0 | 1.5 | | | |
| 22 | | | | | | | |
| 23 | | | | | | | |
| 24 | | 678,000 | 3.0 | 1.5 | | | |
| 25 | | | | | | | |
| 26 | | 525,000 | 3.0 | 1.5 | 3 @ A | | |
| 27 | | | | | | | |
| 28 | | 319,000 | 2.8 | 1.2 | | | |
| 29 | | | | | | | |
| 30 | | | | | | | |
| 31 | | 690,000 | 2.5 | 1.2 | | | |
| Total | | 6,629,000 | | | 3 | | |
| Avg. | | 213,839 | | | | | |
| Max. | | 329,667 | | | | | |



Department of Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION FOR THE MONTH/YEAR OF SEPTEMBER 1998

Water System Information

System Name: SWISS GOLF PWS Identification No.: 6535064
System Owner Name: CRF Telephone No.: (941) 647-1581
Address: P.O. BOX 5252
City: LAKEWORTH State: FL Zip Code: 33807
System Type: [X] community; [] non-transient non-community; [] non-community; [] consecutive
No. of Service Connections at End of Month: 950 Total Population Served at End of Month: 1870

Water Treatment Plant Information

Treatment Plant Name: SWISS GOLF Telephone No.: (941) 647-1581
Address: OLD LICERNE PALM ROAD
City: WINTERHAVEN State: FL Zip Code: 33811
Permitted Maximum Day Capacity of Plant: 657,000 gpd
Plant Category and Class per Rule 62-699.310(4), F.A.C.: 5C
Lead/Chief Plant Operator:

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Row 1: Robert A. Byrd, 007483, C, 13

Other Certified Plant Operators (attach additional sheets if necessary):

Table with 4 columns: Name, Certificate Number, Class (A, B, C, or D), Day(s)/Shift(s) Worked. Multiple empty rows for additional operators.

STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF SEPTEMBER 1998

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

Signature and Date: Robert A. Byrd, 10/11/98

Name and Certificate Number (please type or print): Robert A. Byrd, DW007483C

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
 System PWS Identification Number: 6535064
 Treatment Plant Name: SWISS GOLF

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH YEAR OF SEPTEMBER 1998

- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: free chlorine; combined chlorine (chloramine); chlorine dioxide
- Summary of Daily Water Treatment Data for Month:

| Day of the Month | Hours Plant in Operation | Quantity of Finished Water Produced by Plant (gallons) | Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L) | Residual Disinfectant in Distribution System | | | Reported Emergency or Abnormal Operating Conditions |
|------------------|--------------------------|--|---|---|--|---|---|
| | | | | Lowest Residual Disinfectant Concentration at Remote Point (mg/L) | Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points | Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) | |
| 1 | | | | | 3 | 1.5 | |
| 2 | | 506,000 | 2.6 | 1.4 | | | |
| 3 | | | | | | | |
| 4 | | 365,000 | 3.0 | 1.5 | | | |
| 5 | | | | | | | |
| 6 | | | | | | | |
| 7 | | 684,000 | 3.0 | 1.5 | | | |
| 8 | | | | | | | |
| 9 | | 469,000 | 3.0 | 1.5 | | | |
| 10 | | | | | | | |
| 11 | | 278,000 | 3.0 | 1.5 | | | |
| 12 | | | | | | | |
| 13 | | | | | | | |
| 14 | | 706,000 | 3.0 | 1.0 | | | |
| 15 | | | | | | | |
| 16 | | 481,000 | 3.0 | 2.0 | | | |
| 17 | | | | | | | |
| 18 | | 278,000 | 3.0 | 1.8 | | | |
| 19 | | | | | | | |
| 20 | | | | | | | |
| 21 | | 516,000 | 3.0 | 1.5 | | | |
| 22 | | | | | | | |
| 23 | | 342,000 | 3.0 | 1.5 | | | |
| 24 | | | | | | | |
| 25 | | 231,000 | 3.0 | 1.5 | | | |
| 26 | | | | | | | |
| 27 | | | | | | | |
| 28 | | 443,000 | 3.0 | 1.5 | | | |
| 29 | | | | | | | |
| 30 | | 355,000 | 3.0 | 1.5 | | | |
| 31 | | | | | | | |
| Total | | 5,654,000 | | | 3 | | |
| Avg. | | 188,467 | | | | | |
| Max. | | 253,000 | | | | | |

Domestic Wastewater Treatment Plant Monthly Operating Report

Month October Year 1997

34)

| Day of the Month | Flow (mgd) | Chlorine Residual after Contact | Chlorine Residual after Dechlorination | CBOD ₅ Influent (mg/L) | TSS Influent (mg/L) | CBOD ₅ Effluent (mg/L) | TSS Effluent (mg/L) | pH Effluent | TKN Effluent (mg/L) | NH ₃ - N Effluent (mg/L) | Nitrate Effluent (mg/L) | Total P Effluent (mg/L) | Fecal Coliform (#/100ml) |
|------------------|------------|---------------------------------|--|-----------------------------------|---------------------|-----------------------------------|---------------------|-------------|---------------------|-------------------------------------|-------------------------|-------------------------|--------------------------|
| 1 | .045 | 1.5 | | | | | | 7.2 | | | | | |
| 2 | .045 | 2.0 | | 184 | 278 | 2.3 | 1.7 | 7.2 | | .02 | | | <1 |
| 3 | .055 | 2.5 | | | | | | 7.2 | | | | | |
| 4 | .054 | 3.0 | | | | | | 7.2 | | | | | |
| 5 | .053 | | | | | | | | | | | | |
| 6 | .053 | 2.5 | | | | | | 7.2 | | | | | |
| 7 | .059 | 2.0 | | | | | | 7.2 | | | | | |
| 8 | .058 | 2.5 | | | | | | 7.2 | | | | | |
| 9 | .064 | 2.0 | | | | | | 7.2 | | | | | |
| 10 | .057 | 1.5 | | | | | | 7.2 | | | | | |
| 11 | .062 | | | | | | | | | | | | |
| 12 | .062 | 2.0 | | | | | | 7.2 | | | | | |
| 13 | .035 | 2.5 | | | | | | 7.2 | | | | | |
| 14 | .061 | 2.0 | | | | | | 7.2 | | | | | |
| 15 | .067 | 1.5 | | | | | | 7.2 | | | | | |
| 16 | .060 | 1.5 | | 245 | 283 | 1.8 | 2.3 | 7.2 | | .13 | | | <1 |
| 17 | .064 | 1.0 | | | | | | 7.2 | | | | | |
| 18 | .074 | | | | | | | | | | | | |
| 19 | .073 | 1.5 | | | | | | 7.2 | | | | | |
| 20 | .087 | 1.5 | | | | | | 7.2 | | | | | |
| 21 | .082 | 1.5 | | | | | | 7.2 | | | | | |
| 22 | .069 | 1.5 | | | | | | 7.2 | | | | | |
| 23 | .060 | 1.5 | | | | | | 7.2 | | | | | |
| 24 | .075 | 2.0 | | | | | | 7.2 | | | | | |
| 25 | .072 | | | | | | | | | | | | |
| 26 | .072 | 2.5 | | | | | | 7.1 | | | | | |
| 27 | .050 | 1.5 | | | | | | 7.1 | | | | | |
| 28 | .091 | 1.0 | | | | | | 7.2 | | | | | |
| 29 | .078 | 1.5 | | | | | | 7.2 | | | | | |
| 30 | .082 | 2.0 | | 278 | 400 | <1 | .30 | 7.2 | | 7.5 | | | <1 |
| 31 | .070 | 1.5 | | | | | | 7.1 | | | | | |

Lead Operator: This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief, the information is true, complete and accurate.

Signed: Robert A. Byrd
 Name (Please Type) Robert A. Byrd
C.P.F.

Date: 11/7/97
 (991) 697-1581

CER Form 17-301.500(1)
 Domestic Wastewater Treatment Plant
 Monthly Operating Report
 Effective Date July 1, 1991
 CER Application No. (filled in by CER)

Domestic Wastewater Treatment Plant Monthly Operating Report

Month NOVEMBER Year 1997

| Day of the Month | Flow (mgd) | Chlorine Residual after Contact | Chlorine Residual after Dechlorination | CBOD ₅ Influent (mg/L) | TSS Influent (mg/L) | CBOD ₅ Effluent (mg/L) | TSS Effluent (mg/L) | pH Effluent | TKN Effluent (mg/L) | NH ₃ - N Effluent (mg/L) | Nitrate Effluent (mg/L) | Total P Effluent (mg/L) | Fecal Coliform (#/100ml) |
|------------------|------------|---------------------------------|--|-----------------------------------|---------------------|-----------------------------------|---------------------|-------------|---------------------|-------------------------------------|-------------------------|-------------------------|--------------------------|
| 1 | .114 | 2.0 | | | | | | 7.3 | | | | | |
| 2 | .094 | 1.5 | | | | | | 7.2 | | | | | |
| 3 | .051 | 2.5 | | | | | | 7.2 | | | | | |
| 4 | .089 | 2.0 | | | | | | 7.2 | | | | | |
| 5 | .066 | 3.0 | | | | | | 7.2 | | | | | |
| 6 | .073 | 1.5 | | | | | | 7.2 | | | | | |
| 7 | .078 | 1.5 | | | | | | 7.2 | | | | | |
| 8 | .082 | | | | | | | | | | | | |
| 9 | .082 | 2.0 | | | | | | 7.2 | | | | | |
| 10 | .054 | 3.0 | | | | | | 7.2 | | | | | |
| 11 | .079 | 1.5 | | | | | | 7.2 | | | | | |
| 12 | .073 | 2.0 | | | | | | 7.2 | | | | | |
| 13 | .093 | 3.0 | | 2.65 | 2.67 | 2.86 | 3.67 | 7.2 | | 1.97 | | <1 | |
| 14 | .067 | 2.0 | | | | | | 7.2 | | | | | |
| 15 | .104 | | | | | | | | | | | | |
| 16 | .104 | 1.5 | | | | | | 7.2 | | | | | |
| 17 | .052 | 2.5 | | | | | | 7.2 | | | | | |
| 18 | .079 | 2.0 | | | | | | 7.2 | | | | | |
| 19 | .080 | 2.0 | | | | | | 7.2 | | | | | |
| 20 | .082 | 1.5 | | | | | | 7.2 | | | | | |
| 21 | .070 | 2.5 | | | | | | 7.1 | | | | | |
| 22 | .091 | | | | | | | | | | | | |
| 23 | .091 | 2.5 | | | | | | 7.1 | | | | | |
| 24 | .058 | 2.5 | | | | | | 7.1 | | | | | |
| 25 | .080 | 2.0 | | | | | | 7.1 | | | | | |
| 26 | .080 | 2.5 | | 3.70 | 4.48 | <1 | 1.4 | 7.0 | | 11.29 | | <1 | |
| 27 | .086 | | | | | | | | | | | | |
| 28 | .086 | 1.5 | | | | | | 7.1 | | | | | |
| 29 | .121 | | | | | | | | | | | | |
| 30 | .121 | 2.0 | | | | | | 7.1 | | | | | |
| 31 | | | | | | | | | | | | | |

I, the undersigned, Lead Operator, This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief, the information is true, complete and accurate.

Signed: Robert A. Byrd
 Name (Please Type) Robert A. Byrd

Date: 12/13/97
(941) 647-1581

Domestic Wastewater Treatment Plant Monthly Operating Report

Month DECEMBER Year 1997

| Day of the Month | Flow (mgd) | Chlorine Residual after Contact | Chlorine Residual after Dechlorination | CBOD ₅ Influent (mg/L) | TSS Influent (mg/L) | CBOD ₅ Effluent (mg/L) | TSS Effluent (mg/L) | pH Effluent | TKN Effluent (mg/L) | NH ₃ - N Effluent (mg/L) | Nitrate Effluent (mg/L) | Total P Effluent (mg/L) | Fecal Coliform (#/100ml) |
|------------------|------------|---------------------------------|--|-----------------------------------|---------------------|-----------------------------------|---------------------|-------------|---------------------|-------------------------------------|-------------------------|-------------------------|--------------------------|
| 1 | .046 | 1.5 | | | | | | 7.1 | | | | | |
| 2 | .028 | 1.5 | | | | | | 7.1 | | | | | |
| 3 | .018 | 2.0 | | | | | | 7.1 | | | | | |
| 4 | .207 | 1.5 | | | | | | 7.1 | | | | | |
| 5 | .206 | 2.0 | | | | | | 7.0 | | | | | |
| 6 | .167 | 3.5 | | | | | | 7.1 | | | | | |
| 7 | .090 | 1.5 | | | | | | 7.1 | | | | | |
| 8 | .401 | 2.0 | | | | | | 7.1 | | | | | |
| 9 | .103 | 1.0 | | | | | | 7.2 | | | | | |
| 10 | .084 | 1.2 | | | | | | 7.4 | | | | | |
| 11 | .019 | 1.0 | | 220 | 358 | 2.2 | 4.3 | 7.4 | | <.01 | | | 2 |
| 12 | .055 | 0.8 | | | | | | 7.4 | | | | | |
| 13 | .144 | 1.0 | | | | | | 7.4 | | | | | |
| 14 | .243 | 0.6 | | | | | | 7.4 | | | | | |
| 15 | .063 | 1.0 | | | | | | 7.1 | | | | | |
| 16 | .091 | 0.8 | | | | | | 7.1 | | | | | |
| 17 | .144 | 0.8 | | | | | | 7.1 | | | | | |
| 18 | .100 | 1.4 | | | | | | 7.1 | | | | | |
| 19 | .118 | 1.5 | | | | | | 7.1 | | | | | |
| 20 | .074 | 2.1 | | | | | | 7.1 | | | | | |
| 21 | .126 | 1.5 | | | | | | 7.1 | | | | | |
| 22 | .080 | 2.0 | | | | | | 7.1 | | | | | |
| 23 | .108 | 1.5 | | | | | | 7.1 | | | | | |
| 24 | .109 | 2.0 | | | | | | 7.1 | | | | | |
| 25 | | | | | | | | | | | | | |
| 26 | .194 | 2.0 | | 309 | 98.7 | 4.2 | 1.6 | 7.1 | | <.01 | | | <1 |
| 27 | .160 | 1.0 | | | | | | 7.1 | | | | | |
| 28 | .225 | 1.0 | | | | | | 7.1 | | | | | |
| 29 | .129 | 1.0 | | | | | | 7.1 | | | | | |
| 30 | .148 | 1.5 | | | | | | 7.1 | | | | | |
| 31 | .108 | 1.0 | | | | | | 7.1 | | | | | |

Lead Operator: This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief, the information is true, complete, and accurate.

Signed: Robert A. Byrd
 Name (Please Type) Robert A. Byrd
C.R.F.

Date: 01/10/98
 Telephone No. (Please Type) (941) 647-1581

Domestic Wastewater Treatment Plant Monthly Operating Report

Month JANUARY Year 1998

| Day of the Month | Flow (mgd) | Chlorine Residual after Contact | Chlorine Residual after Dechlorination | CBOD ₅ Influent (mg/L) | TSS Influent (mg/L) | CBOD ₅ Effluent (mg/L) | TSS Effluent (mg/L) | pH Effluent | TKN Effluent (mg/L) | NH ₃ - N Effluent (mg/L) | Nitrate Effluent (mg/L) | Total P Effluent (mg/L) | Fecal Coliform (#/100ml) | | | | | |
|------------------|------------|---------------------------------|--|-----------------------------------|---------------------|-----------------------------------|---------------------|-------------|---------------------|-------------------------------------|-------------------------|-------------------------|--------------------------|--|--|--|--|--|
| 1 | .112 | | | | | | | | | | | | | | | | | |
| 2 | .112 | 0.8 | | | | | | 7.2 | | | | | | | | | | |
| 3 | .115 | 1.3 | | | | | | 7.2 | | | | | | | | | | |
| 4 | .165 | 1.5 | | | | | | 7.2 | | | | | | | | | | |
| 5 | .215 | 3.0 | | | | | | 7.2 | | | | | | | | | | |
| 6 | .141 | 1.0 | | | | | | 7.1 | | | | | | | | | | |
| 7 | .109 | 1.0 | | | | | | 7.1 | | | | | | | | | | |
| 8 | .162 | 1.5 | | 235 | 264 | 3.5 | 2.4 | 7.2 | | 0.3 | | | <1 | | | | | |
| 9 | .095 | 1.0 | | | | | | 7.2 | | | | | | | | | | |
| 10 | .155 | 2.0 | | | | | | 7.1 | | | | | | | | | | |
| 11 | .110 | 1.5 | | | | | | 7.2 | | | | | | | | | | |
| 12 | .088 | 2.5 | | | | | | 7.2 | | | | | | | | | | |
| 13 | .108 | 2.0 | | | | | | 7.2 | | | | | | | | | | |
| 14 | .135 | 2.5 | | | | | | 7.2 | | | | | | | | | | |
| 15 | .130 | 2.0 | | | | | | 7.2 | | | | | | | | | | |
| 16 | .142 | 1.5 | | | | | | 7.2 | | | | | | | | | | |
| 17 | .091 | 1.6 | | | | | | 7.2 | | | | | | | | | | |
| 18 | .123 | 1.5 | | | | | | 7.2 | | | | | | | | | | |
| 19 | .072 | 2.0 | | | | | | 7.2 | | | | | | | | | | |
| 20 | .104 | 1.5 | | | | | | 7.2 | | | | | | | | | | |
| 21 | .272 | 0.5 | | | | | | 7.2 | | | | | | | | | | |
| 22 | .115 | 0.8 | | 335 | 1577 | 3.6 | 2.1 | 7.2 | | 4.01 | | | <1 | | | | | |
| 23 | .102 | 1.0 | | | | | | 7.2 | | | | | | | | | | |
| 24 | .131 | 0.6 | | | | | | 7.1 | | | | | | | | | | |
| 25 | .137 | 1.0 | | | | | | 7.2 | | | | | | | | | | |
| 26 | .090 | 0.8 | | | | | | 7.2 | | | | | | | | | | |
| 27 | .133 | 1.0 | | | | | | 7.2 | | | | | | | | | | |
| 28 | .130 | 1.5 | | | | | | 7.2 | | | | | | | | | | |
| 29 | .148 | 1.0 | | | | | | 7.2 | | | | | | | | | | |
| 30 | .084 | 1.0 | | | | | | 7.2 | | | | | | | | | | |
| 31 | .123 | 1.0 | | | | | | 7.2 | | | | | | | | | | |

I, the undersigned Operator, hereby certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief, this information is true, complete, and accurate.

Signed: Robert A. Boyd
 Name (Please Type) Robert A. Boyd
 Operator Name C.R.F.

Date: 2/14/98
 Telephone No. (Please Type) (941) 647-1581

Domestic Wastewater Treatment Plant Monthly Operating Report

Month FEBRUARY Year 1998

| Day of the Month | Flow (mgd) | Chlorine Residual after Contact | Chlorine Residual after Dechlorination | CBOD ₅ Influent (mg/L) | TSS Influent (mg/L) | CBOD ₅ Effluent (mg/L) | TSS Effluent (mg/L) | pH Effluent | TKN Effluent (mg/L) | NH ₃ - N Effluent (mg/L) | Nitrate Effluent (mg/L) | Total P Effluent (mg/L) | Fecal Coliform (#/100ml) |
|------------------|------------|---------------------------------|--|-----------------------------------|---------------------|-----------------------------------|---------------------|-------------|---------------------|-------------------------------------|-------------------------|-------------------------|--------------------------|
| 1 | 153 | 0.8 | | | | | | 7.2 | | | | | |
| 2 | 167 | 1.0 | | | | | | 7.2 | | | | | |
| 3 | 138 | 1.0 | | | | | | 7.2 | | | | | |
| 4 | 130 | 1.5 | | | | | | 7.2 | | | | | |
| 5 | 153 | 1.0 | | 590 | 667 | 6.4 | 1.5 | 7.2 | | 0.3 | | | <1 |
| 6 | 112 | 1.5 | | | | | | 7.2 | | | | | |
| 7 | 100 | 2.0 | | | | | | 7.1 | | | | | |
| 8 | 133 | 1.0 | | | | | | 7.2 | | | | | |
| 9 | 085 | 1.5 | | | | | | 7.2 | | | | | |
| 10 | 139 | 1.0 | | | | | | 7.2 | | | | | |
| 11 | 118 | 0.8 | | | | | | 7.2 | | | | | |
| 12 | 150 | 1.0 | | | | | | 7.1 | | | | | |
| 13 | 104 | 0.8 | | | | | | 7.2 | | | | | |
| 14 | 139 | 0.8 | | | | | | 7.2 | | | | | |
| 15 | 086 | 1.0 | | | | | | 7.2 | | | | | |
| 16 | 179 | 0.5 | | | | | | 7.2 | | | | | |
| 17 | 182 | 1.0 | | | | | | 7.2 | | | | | |
| 18 | 174 | 0.8 | | | | | | 7.2 | | | | | |
| 19 | 156 | 0.8 | | 1000 | 1382 | 1.7 | <1 | 7.2 | | 0.22 | | | <1 |
| 20 | 153 | 0.8 | | | | | | 7.2 | | | | | |
| 21 | 157 | 1.0 | | | | | | 7.2 | | | | | |
| 22 | 221 | 0.8 | | | | | | 7.2 | | | | | |
| 23 | 043 | 1.0 | | | | | | 7.2 | | | | | |
| 24 | 182 | 1.2 | | | | | | 7.2 | | | | | |
| 25 | 100 | 1.5 | | | | | | 7.2 | | | | | |
| 26 | 127 | 1.0 | | | | | | 7.2 | | | | | |
| 27 | 091 | 1.2 | | | | | | 7.2 | | | | | |
| 28 | 102 | 1.0 | | | | | | 7.2 | | | | | |
| 29 | | | | | | | | | | | | | |
| 30 | | | | | | | | | | | | | |
| 31 | | | | | | | | | | | | | |

I, the undersigned Operator, This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief, this information is true, complete and accurate.

Signed: Robert A. Byrd
 Name (Please Type) Robert A. Byrd
 Agency Name C.R.F.

Date: 3/10/98
 Telephone No. (Please Type) (941) 647-1581

Domestic Wastewater Treatment Plant Monthly Operating Report

34) Month MARCH Year 1998

| Day of the Month | Flow (mgd) | Chlorine Residual after Contact | Chlorine Residual after Dechlorination | CBOD ₅ Influent (mg/L) | TSS Influent (mg/L) | CBOD ₅ Effluent (mg/L) | TSS Effluent (mg/L) | pH Effluent | TKN Effluent (mg/L) | NH ₃ - N Effluent (mg/L) | Nitrate Effluent (mg/L) | Total P Effluent (mg/L) | Fecal Coliform (#/100ml) | | | | | | |
|------------------|------------|---------------------------------|--|-----------------------------------|---------------------|-----------------------------------|---------------------|-------------|---------------------|-------------------------------------|-------------------------|-------------------------|--------------------------|--|--|--|--|--|--|
| 1 | .137 | 1.0 | | | | | | 7.2 | | | | | | | | | | | |
| 2 | .109 | 1.5 | | | | | | 7.1 | | | | | | | | | | | |
| 3 | .136 | 1.0 | | | | | | 7.2 | | | | | | | | | | | |
| 4 | .068 | 1.0 | | | | | | 7.1 | | | | | | | | | | | |
| 5 | .107 | 1.5 | | 1824 | 2235 | 3.3 | 2.6 | 7.1 | | <.1 | | <.1 | | | | | | | |
| 6 | .097 | 1.2 | | | | | | 7.1 | | | | | | | | | | | |
| 7 | .073 | 1.5 | | | | | | 7.1 | | | | | | | | | | | |
| 8 | .185 | 1.0 | | | | | | 7.1 | | | | | | | | | | | |
| 9 | .057 | 1.2 | | | | | | 7.1 | | | | | | | | | | | |
| 10 | .123 | 1.0 | | | | | | 7.2 | | | | | | | | | | | |
| 11 | .086 | 1.2 | | | | | | 7.2 | | | | | | | | | | | |
| 12 | .111 | 1.5 | | | | | | 7.2 | | | | | | | | | | | |
| 13 | .076 | 1.2 | | | | | | 7.2 | | | | | | | | | | | |
| 14 | .077 | 1.5 | | | | | | 7.2 | | | | | | | | | | | |
| 15 | .081 | 1.2 | | | | | | 7.2 | | | | | | | | | | | |
| 16 | .100 | 1.0 | | | | | | 7.2 | | | | | | | | | | | |
| 17 | .105 | 1.2 | | | | | | 7.2 | | | | | | | | | | | |
| 18 | .080 | 1.5 | | | | | | 7.2 | | | | | | | | | | | |
| 19 | .167 | 1.0 | | 1360 | 3060 | <.1 | .6 | 7.2 | | .1 | | <.1 | | | | | | | |
| 20 | .135 | 1.0 | | | | | | 7.2 | | | | | | | | | | | |
| 21 | .121 | 1.1 | | | | | | 7.2 | | | | | | | | | | | |
| 22 | .116 | 1.5 | | | | | | 7.1 | | | | | | | | | | | |
| 23 | .088 | 1.0 | | | | | | 7.2 | | | | | | | | | | | |
| 24 | .090 | 1.0 | | | | | | 7.2 | | | | | | | | | | | |
| 25 | .084 | 1.5 | | | | | | 7.2 | | | | | | | | | | | |
| 26 | .121 | 1.2 | | | | | | 7.2 | | | | | | | | | | | |
| 27 | .086 | 1.5 | | | | | | 7.2 | | | | | | | | | | | |
| 28 | .083 | 1.1 | | | | | | 7.2 | | | | | | | | | | | |
| 29 | .098 | 1.8 | | | | | | 7.1 | | | | | | | | | | | |
| 30 | .097 | 1.5 | | | | | | 7.1 | | | | | | | | | | | |
| 31 | .105 | 1.2 | | | | | | 7.1 | | | | | | | | | | | |

I, the undersigned Operator, certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief, this information is true, complete, and accurate.

Signed: Robert A. Byrd
 Name (Please Type) Robert A. Byrd
 Telephone No. C.R.F.

Date: 4/2/98
 Telephone No. (Please Type) (941) 647-1581

Domestic Wastewater Treatment Plant Monthly Operating Report

34)

Month APRIL Year 1998

| Day of the Month | Flow (mgd) | Chlorine Residual after Contact | Chlorine Residual after Dechlorination | CBOD ₅ Influent (mg/L) | TSS Influent (mg/L) | CBOD ₅ Effluent (mg/L) | TSS Effluent (mg/L) | pH Effluent | TKN Effluent (mg/L) | NH ₄ -N Effluent (mg/L) | Nitrate Effluent (mg/L) | Total P Effluent (mg/L) | Fecal Coliform (#/100ml) |
|------------------|------------|---------------------------------|--|-----------------------------------|---------------------|-----------------------------------|---------------------|-------------|---------------------|------------------------------------|-------------------------|-------------------------|--------------------------|
| 1 | .089 | 1.2 | | | | | | 7.1 | | | | | |
| 2 | .102 | 1.5 | | 4000 | 8460 | 2.0 | 1.9 | 7.1 | | 1.1 | | | <1 |
| 3 | .068 | 2.0 | | | | | | 7.1 | | | | | |
| 4 | .061 | 1.0 | | | | | | 7.1 | | | | | |
| 5 | .124 | 1.5 | | | | | | 7.0 | | | | | |
| 6 | .044 | 2.0 | | | | | | 7.0 | | | | | |
| 7 | .108 | 1.8 | | | | | | 7.0 | | | | | |
| 8 | .084 | 1.5 | | | | | | 7.1 | | | | | |
| 9 | .096 | 1.8 | | | | | | 7.1 | | | | | |
| 10 | .086 | 2.1 | | | | | | 7.1 | | | | | |
| 11 | .072 | 2.2 | | | | | | 7.1 | | | | | |
| 12 | .130 | 1.8 | | | | | | 7.1 | | | | | |
| 13 | .046 | 2.8 | | | | | | 7.1 | | | | | |
| 14 | .103 | 1.5 | | | | | | 7.1 | | | | | |
| 15 | .084 | 1.8 | | | | | | 7.1 | | | | | |
| 16 | .080 | 2.0 | | 3525 | 13460 | 1.4 | 2.6 | 7.0 | | <.01 | | | <1 |
| 17 | .087 | 1.5 | | | | | | 7.0 | | | | | |
| 18 | .068 | 1.5 | | | | | | 7.0 | | | | | |
| 19 | .082 | | | | | | | | | | | | |
| 20 | .081 | 1.0 | | | | | | 7.0 | | | | | |
| 21 | .090 | 1.8 | | | | | | 7.0 | | | | | |
| 22 | .067 | 1.5 | | | | | | 7.2 | | | | | |
| 23 | .076 | 1.8 | | | | | | 7.2 | | | | | |
| 24 | .078 | 1.5 | | | | | | 7.2 | | | | | |
| 25 | .082 | | | | | | | | | | | | |
| 26 | .088 | 1.8 | | | | | | 7.2 | | | | | |
| 27 | .077 | 1.5 | | | | | | 7.2 | | | | | |
| 28 | .082 | 1.5 | | | | | | 7.2 | | | | | |
| 29 | .069 | 1.0 | | | | | | 7.2 | | | | | |
| 30 | .064 | 2.0 | | 11500 | 33000 | 4.5 | <1 | 7.2 | | 0.39 | | | <1 |
| 31 | | | | | | | | | | | | | |

Lead Operator: This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief, the information is true, complete and accurate.

Signed: Robert A. Byrd
 Name (Please Type) Robert A. Byrd
 Telephone No. C.R.F.

Date: 5/14/98
 Telephone No. (Please Type) (941) 647-1581

Domestic Wastewater Treatment Plant Monthly Operating Report

34)

Month MAY Year 1998

| Day of the Month | Flow (mgd) | Chlorine Residual after Contact | Chlorine Residual after Dechlorination | CBOD ₅ Influent (mg/L) | TSS Influent (mg/L) | CBOD ₅ Effluent (mg/L) | TSS Effluent (mg/L) | pH Effluent | TKN Effluent (mg/L) | NH ₃ - N Effluent (mg/L) | Nitrate Effluent (mg/L) | Total P Effluent (mg/L) | Fecal Coliform (#/100ml) |
|------------------|------------|---------------------------------|--|-----------------------------------|---------------------|-----------------------------------|---------------------|-------------|---------------------|-------------------------------------|-------------------------|-------------------------|--------------------------|
| 1 | .079 | 2.0 | | | | | | 7.1 | | | | | |
| 2 | .058 | | | | | | | | | | | | |
| 3 | .057 | 1.8 | | | | | | 7.1 | | | | | |
| 4 | .055 | 2.6 | | | | | | 7.1 | | | | | |
| 5 | .078 | 3.0 | | | | | | 7.1 | | | | | |
| 6 | .059 | 3.0 | | | | | | 7.2 | | | | | |
| 7 | .078 | 2.4 | | | | | | 7.1 | | | | | |
| 8 | .031 | 2.0 | | | | | | 7.1 | | | | | |
| 9 | .058 | | | | | | | | | | | | |
| 10 | .057 | 2.8 | | | | | | 7.1 | | | | | |
| 11 | .049 | 2.0 | | | | | | 7.1 | | | | | |
| 12 | .056 | 2.2 | | | | | | 7.1 | | | | | |
| 13 | .061 | 2.5 | | | | | | 7.1 | | | | | |
| 14 | .057 | 3.2 | | 2200 | 5316 | <1 | 1.5 | 7.1 | | 1.43 | | <1 | |
| 15 | .057 | 2.4 | | | | | | 7.1 | | | | | |
| 16 | .073 | | | | | | | | | | | | |
| 17 | .072 | 3.5 | | | | | | 7.1 | | | | | |
| 18 | .016 | 4.0 | | | | | | 7.0 | | | | | |
| 19 | .062 | 4.0 | | | | | | 7.0 | | | | | |
| 20 | .053 | 4.0 | | | | | | 7.0 | | | | | |
| 21 | .071 | 3.0 | | | | | | 7.1 | | | | | |
| 22 | .044 | 2.0 | | | | | | 7.1 | | | | | |
| 23 | .056 | | | | | | | | | | | | |
| 24 | .055 | 3.4 | | | | | | 7.1 | | | | | |
| 25 | .047 | 3.0 | | | | | | 7.1 | | | | | |
| 26 | .046 | 2.0 | | | | | | 7.0 | | | | | |
| 27 | .075 | 2.5 | | | | | | 7.0 | | | | | |
| 28 | .033 | 2.0 | | 3722 | 1850 | <2 | 10.8 | 7.1 | | .78 | | <1 | |
| 29 | .044 | 3.0 | | | | | | 7.2 | | | | | |
| 30 | .092 | 2.5 | | | | | | 7.2 | | | | | |
| 31 | .049 | 2.0 | | | | | | 7.2 | | | | | |

I, the undersigned, Plant Operator, certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief, this information is true, complete and accurate.

Signed: Robert A. Byrd
 Name (Please Type) Robert A. Byrd
 Title C.R.F.

Date: 6/9/98
 Telephone No. (Please Type) (941) 647-1581

Domestic Wastewater Treatment Plant Monthly Operating Report

Month JUNE Year 1998

| Day of the Month | Flow (mgd) | Chlorine Residual after Contact | Chlorine Residual after Dechlorination | CBOD ₅ Influent (mg/L) | TSS Influent (mg/L) | CBOD ₅ Effluent (mg/L) | TSS Effluent (mg/L) | pH Effluent | TKN Effluent (mg/L) | NH ₃ - N Effluent (mg/L) | Nitrate Effluent (mg/L) | Total P Effluent (mg/L) | Fecal Coliform (if/100ml) | | | | | | |
|------------------|------------|---------------------------------|--|-----------------------------------|---------------------|-----------------------------------|---------------------|-------------|---------------------|-------------------------------------|-------------------------|-------------------------|---------------------------|--|--|--|--|--|--|
| 1 | .045 | 1.8 | | | | | | 7.2 | | | | | | | | | | | |
| 2 | .064 | 1.5 | | | | | | 7.2 | | | | | | | | | | | |
| 3 | .039 | 1.2 | | | | | | 7.2 | | | | | | | | | | | |
| 4 | .046 | 3.0 | | | | | | 7.2 | | | | | | | | | | | |
| 5 | .046 | 2.5 | | | | | | 7.2 | | | | | | | | | | | |
| 6 | .046 | 3.0 | | | | | | 7.2 | | | | | | | | | | | |
| 7 | .043 | 3.0 | | | | | | 7.2 | | | | | | | | | | | |
| 8 | .033 | 2.0 | | | | | | 7.2 | | | | | | | | | | | |
| 9 | .052 | 2.8 | | | | | | 7.2 | | | | | | | | | | | |
| 10 | .031 | 1.8 | | | | | | 7.2 | | | | | | | | | | | |
| 11 | .041 | 2.0 | | 1310 | 2412 | 3.0 | 2.0 | 7.2 | | 9.51 | | | <1 | | | | | | |
| 12 | .048 | 3.5 | | | | | | 7.2 | | | | | | | | | | | |
| 13 | .056 | 3.5 | | | | | | 7.2 | | | | | | | | | | | |
| 14 | .042 | | | | | | | | | | | | | | | | | | |
| 15 | .041 | 3.5 | | | | | | 7.1 | | | | | | | | | | | |
| 16 | .057 | 4.0 | | | | | | 7.1 | | | | | | | | | | | |
| 17 | .041 | 3.0 | | | | | | 7.1 | | | | | | | | | | | |
| 18 | .039 | 3.5 | | | | | | 7.1 | | | | | | | | | | | |
| 19 | .044 | 3.5 | | | | | | 7.1 | | | | | | | | | | | |
| 20 | .047 | 3.5 | | | | | | 7.1 | | | | | | | | | | | |
| 21 | .057 | | | | | | | | | | | | | | | | | | |
| 22 | .056 | 1.4 | | | | | | 7.1 | | | | | | | | | | | |
| 23 | .044 | 3.5 | | | | | | 7.1 | | | | | | | | | | | |
| 24 | .042 | 3.5 | | | | | | 7.1 | | | | | | | | | | | |
| 25 | .057 | 3.5 | | 11057 | 2190 | 1.3 | 1.2 | 7.1 | | 6.44 | | | <1 | | | | | | |
| 26 | .064 | 3.0 | | | | | | 7.1 | | | | | | | | | | | |
| 27 | .054 | | | | | | | | | | | | | | | | | | |
| 28 | .054 | 2.1 | | | | | | 7.1 | | | | | | | | | | | |
| 29 | .049 | 1.8 | | | | | | 7.2 | | | | | | | | | | | |
| 30 | .070 | 2.0 | | | | | | 7.2 | | | | | | | | | | | |
| 31 | | | | | | | | | | | | | | | | | | | |

Lead Operator: This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief, this information is true, complete and accurate.

Signed: Robert A. Byrd
 Name (Please Type): Robert A. Byrd
 Company Name: C.R.F.

Date: 7/15/98
 Telephone No. (Please Type): (941) 647-1581

Domestic Wastewater Treatment Plant Monthly Operating Report

Month July Year 1998

| Day of the Month | Flow (mgd) | Chlorine Residual after Contact | Chlorine Residual after Dechlorination | CBOD ₅ Influent (mg/L) | TSS Influent (mg/L) | CBOD ₅ Effluent (mg/L) | TSS Effluent (mg/L) | pH Effluent | TKN Effluent (mg/L) | NH ₃ - N Effluent (mg/L) | Nitrate Effluent (mg/L) | Total P Effluent (mg/L) | Fecal Coliform (#/100ml) | | | | | | |
|------------------|------------|---------------------------------|--|-----------------------------------|---------------------|-----------------------------------|---------------------|-------------|---------------------|-------------------------------------|-------------------------|-------------------------|--------------------------|--|--|--|--|--|--|
| 1 | .060 | 1.0 | | | | | | 7.2 | | | | | | | | | | | |
| 2 | .073 | 1.2 | | | | | | 7.2 | | | | | | | | | | | |
| 3 | .080 | 1.0 | | | | | | 7.2 | | | | | | | | | | | |
| 4 | .033 | | | | | | | | | | | | | | | | | | |
| 5 | .033 | 1.2 | | | | | | 7.1 | | | | | | | | | | | |
| 6 | .061 | 1.5 | | | | | | 7.1 | | | | | | | | | | | |
| 7 | .047 | 2.5 | | | | | | 7.1 | | | | | | | | | | | |
| 8 | .056 | 2.8 | | | | | | 7.0 | | | | | | | | | | | |
| 9 | .052 | 3.0 | | 990 | 1920 | 4.3 | 1.2 | 7.0 | | 0.19 | | | <1 | | | | | | |
| 10 | .056 | 1.0 | | | | | | 7.0 | | | | | | | | | | | |
| 11 | .049 | | | | | | | | | | | | | | | | | | |
| 12 | .048 | 1.8 | | | | | | 7.0 | | | | | | | | | | | |
| 13 | .054 | 1.5 | | | | | | 7.0 | | | | | | | | | | | |
| 14 | .075 | 1.6 | | | | | | 7.0 | | | | | | | | | | | |
| 15 | .093 | 1.5 | | | | | | 7.0 | | | | | | | | | | | |
| 16 | .054 | 2.1 | | | | | | 7.0 | | | | | | | | | | | |
| 17 | .056 | 2.5 | | | | | | 7.1 | | | | | | | | | | | |
| 18 | .073 | 1.8 | | | | | | 7.1 | | | | | | | | | | | |
| 19 | .092 | | | | | | | | | | | | | | | | | | |
| 20 | .092 | 1.5 | | | | | | 7.2 | | | | | | | | | | | |
| 21 | .069 | 2.5 | | | | | | 7.1 | | | | | | | | | | | |
| 22 | .062 | 4.0 | | 1025 | 1733 | 2.3 | 2.5 | 7.1 | | 1.42 | | | 4 | | | | | | |
| 23 | .029 | 3.8 | | | | | | 7.1 | | | | | | | | | | | |
| 24 | .067 | 2.6 | | | | | | 7.1 | | | | | | | | | | | |
| 25 | .039 | | | | | | | | | | | | | | | | | | |
| 26 | .039 | 1.7 | | | | | | 7.1 | | | | | | | | | | | |
| 27 | .069 | 2.8 | | | | | | 7.1 | | | | | | | | | | | |
| 28 | .023 | 3.2 | | | | | | 7.1 | | | | | | | | | | | |
| 29 | .053 | 2.4 | | | | | | 7.1 | | | | | | | | | | | |
| 30 | .037 | 1.4 | | | | | | 7.1 | | | | | | | | | | | |
| 31 | .048 | 1.2 | | | | | | 7.1 | | | | | | | | | | | |

Lead Operator: This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief, this information is true, complete, and accurate.

Signed: Robert A. Byrd
 Name (Please Type) Robert A. Byrd
 Title (Please Type) C.R.F.

Date: 8/12/98
 Telephone No. (Please Type) (941) 647-1581

Domestic Wastewater Treatment Plant Monthly Operating Report

Month AUGUST Year 1998

| Day of the Month | Flow (mgd) | Chlorine Residual after Contact | Chlorine Residual after Dechlorination | CBOD ₅ Influent (mg/L) | TSS Influent (mg/L) | CBOD ₅ Effluent (mg/L) | TSS Effluent (mg/L) | pH Effluent | TKN Effluent (mg/L) | NH ₃ - N Effluent (mg/L) | Nitrate Effluent (mg/L) | Total P Effluent (mg/L) | Fecal Coliform (#/100ml) | | | | | |
|------------------|------------|---------------------------------|--|-----------------------------------|---------------------|-----------------------------------|---------------------|-------------|---------------------|-------------------------------------|-------------------------|-------------------------|--------------------------|--|--|--|--|--|
| 1 | 1,049 | | | | | | | | | | | | | | | | | |
| 2 | 1,048 | 1.8 | | | | | | 7.1 | | | | | | | | | | |
| 3 | 1,067 | 2.4 | | | | | | 7.1 | | | | | | | | | | |
| 4 | 1,050 | 3.1 | | | | | | 7.1 | | | | | | | | | | |
| 5 | 1,033 | 2.6 | | | | | | 7.0 | | | | | | | | | | |
| 6 | 1,070 | 4.0 | | 640 | 926 | 1.5 | 1.6 | 7.2 | | 0.21 | | | <1 | | | | | |
| 7 | 1,049 | 3.2 | | | | | | 7.2 | | | | | | | | | | |
| 8 | 1,052 | | | | | | | | | | | | | | | | | |
| 9 | 1,051 | 2.4 | | | | | | 7.2 | | | | | | | | | | |
| 10 | 1,052 | 2.0 | | | | | | 7.2 | | | | | | | | | | |
| 11 | 1,051 | 2.8 | | | | | | 7.2 | | | | | | | | | | |
| 12 | 1,059 | 1.9 | | | | | | 7.2 | | | | | | | | | | |
| 13 | 1,053 | 2.7 | | | | | | 7.2 | | | | | | | | | | |
| 14 | 1,029 | 3.1 | | | | | | 7.2 | | | | | | | | | | |
| 15 | 1,066 | | | | | | | | | | | | | | | | | |
| 16 | 1,065 | 3.0 | | | | | | 7.2 | | | | | | | | | | |
| 17 | 1,044 | 2.5 | | | | | | 7.2 | | | | | | | | | | |
| 18 | 1,038 | 3.8 | | | | | | 7.2 | | | | | | | | | | |
| 19 | 1,049 | 3.0 | | | | | | 7.2 | | | | | | | | | | |
| 20 | 1,047 | 3.4 | | 915 | 2140 | 1.6 | 1.2 | 7.2 | | 0.27 | | | <1 | | | | | |
| 21 | 1,040 | 2.4 | | | | | | 7.2 | | | | | | | | | | |
| 22 | 1,041 | | | | | | | | | | | | | | | | | |
| 23 | 1,041 | 2.1 | | | | | | 7.2 | | | | | | | | | | |
| 24 | 1,041 | 2.4 | | | | | | 7.2 | | | | | | | | | | |
| 25 | 1,039 | 2.0 | | | | | | 7.2 | | | | | | | | | | |
| 26 | 1,040 | 1.8 | | | | | | 7.2 | | | | | | | | | | |
| 27 | 1,029 | 3.2 | | | | | | 7.2 | | | | | | | | | | |
| 28 | 1,046 | 2.1 | | | | | | 7.2 | | | | | | | | | | |
| 29 | 1,046 | | | | | | | | | | | | | | | | | |
| 30 | 1,045 | 1.4 | | | | | | 7.2 | | | | | | | | | | |
| 31 | 1,045 | 2.9 | | | | | | 7.2 | | | | | | | | | | |

I, the undersigned, Lead Operator, This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief, this information is true, complete and accurate.

Signed: Robert A. Byrd
 Name (Please Type) Robert A. Byrd
 Company Name C.R.F.

Date: 9/6/98
 Telephone No. (Please Type) (941)647-1581

Domestic Wastewater Treatment Plant Monthly Operating Report

Month September Year 1998

| Day of this Month | Flow (mgd) | Chlorine Residual after Contact | Chlorine Residual after Dechlorination | CBOD ₅ Influent (mg/L) | TSS Influent (mg/L) | CBOD ₅ Effluent (mg/L) | TSS Effluent (mg/L) | pH Effluent | TKN Effluent (mg/L) | NH ₃ - N Effluent (mg/L) | Nitrate Effluent (mg/L) | Total P Effluent (mg/L) | Fecal Coliform (Jr/100ml) | | | | | | |
|-------------------|------------|---------------------------------|--|-----------------------------------|---------------------|-----------------------------------|---------------------|-------------|---------------------|-------------------------------------|-------------------------|-------------------------|---------------------------|--|--|--|--|--|--|
| 1 | .033 | 3.1 | | | | | | 7.2 | | | | | | | | | | | |
| 2 | .045 | 2.4 | | | | | | 7.2 | | | | | | | | | | | |
| 3 | .064 | 3.4 | | 815 | 1350 | 1.4 | <1 | 7.2 | | | 1.38 | | <1 | | | | | | |
| 4 | .028 | 2.9 | | | | | | 7.2 | | | | | | | | | | | |
| 5 | .060 | | | | | | | | | | | | | | | | | | |
| 6 | .059 | 2.1 | | | | | | 7.2 | | | | | | | | | | | |
| 7 | .017 | 1.4 | | | | | | 7.2 | | | | | | | | | | | |
| 8 | .044 | 1.8 | | | | | | 7.2 | | | | | | | | | | | |
| 9 | .048 | 2.4 | | | | | | 7.2 | | | | | | | | | | | |
| 10 | .056 | 1.5 | | | | | | 7.2 | | | | | | | | | | | |
| 11 | .030 | 1.4 | | | | | | 7.1 | | | | | | | | | | | |
| 12 | .049 | 2.9 | | | | | | 7.1 | | | | | | | | | | | |
| 13 | .043 | 3.1 | | | | | | 7.3 | | | | | | | | | | | |
| 14 | .044 | 2.4 | | | | | | 7.2 | | | | | | | | | | | |
| 15 | .075 | 1.8 | | | | | | 7.2 | | | | | | | | | | | |
| 16 | .037 | 1.4 | | | | | | 7.2 | | | | | | | | | | | |
| 17 | .052 | 2.9 | | 583 | 97.2 | 3.3 | 1.9 | 7.2 | | | 1.04 | | <1 | | | | | | |
| 18 | .051 | 3.1 | | | | | | 7.2 | | | | | | | | | | | |
| 19 | .081 | | | | | | | | | | | | | | | | | | |
| 20 | .081 | 3.0 | | | | | | 7.4 | | | | | | | | | | | |
| 21 | .091 | 2.4 | | | | | | 7.2 | | | | | | | | | | | |
| 22 | .072 | 1.8 | | | | | | 7.2 | | | | | | | | | | | |
| 23 | .054 | 2.2 | | | | | | 7.1 | | | | | | | | | | | |
| 24 | .069 | 2.4 | | | | | | 7.1 | | | | | | | | | | | |
| 25 | .090 | 1.8 | | | | | | 7.2 | | | | | | | | | | | |
| 26 | .087 | | | | | | | | | | | | | | | | | | |
| 27 | .086 | 1.0 | | | | | | 7.2 | | | | | | | | | | | |
| 28 | .054 | 2.8 | | | | | | 7.2 | | | | | | | | | | | |
| 29 | .064 | 2.4 | | | | | | 7.2 | | | | | | | | | | | |
| 30 | .058 | 1.8 | | | | | | 7.2 | | | | | | | | | | | |
| 31 | | | | | | | | | | | | | | | | | | | |

Lead Operator: This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief, this information is true, complete, and accurate.

Signed: Robert A. Byrd
 Name (Please Type) Robert A. Byrd
 Temporary Name C.R.F.

Date: 10/11/98
 Telephone No. (Please Type) (941) 647-1581

ORIGINAL

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Ray Moats
President of General Partner

WATER TARIFF

(Continued from Sheet No. 6.0)

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Ray Moats
 President of General Partner

WATER TARIFF

(Continued from Sheet No. 7.0)

- 4.0 APPLICATIONS BY AGENTS - Applications for water service requested by firms, partnerships, associations, corporations, and others shall be rendered only by duly authorized parties. When water service is rendered under agreement or agreements entered into between the Company and an agent of the principal, the use of such water service by the principal shall constitute full and complete ratification by the principal of the agreement or agreements entered into between the agent and the Company and under which such water service is rendered.
- 5.0 WITHHOLDING SERVICE - The Company may withhold or discontinue water service rendered under application made by any member or agent of a household, organization, or business unless all prior indebtedness to the Company of such household, organization, or business for water service has been settled in full in accordance with Rule 25-30.320, Florida Administrative Code.
- 6.0 EXTENSIONS - Extensions will be made to the Company's facilities in compliance with Commission Rules and Orders and the Company's tariff.
- 7.0 LIMITATION OF USE - Water service purchased from the Company shall be used by the customer only for the purposes specified in the application for water service and the customer shall not sell or otherwise dispose of such water service supplied by the Company.

Water service furnished to the customer shall be rendered directly to the customer through Company's individual meter and may not be remetered by the customer for the purpose of selling or otherwise disposing of water service to lessees, tenants, or others and under no circumstances shall the customer or customer's agent or any other individual, association or corporation install meters for the purpose of so remetering said water service without the prior written consent of the Utility.

In no case shall a customer, except with the written consent of the Company, extend his lines across a street, alley, lane, court, property line, avenue, or other way

(Continued to Sheet No. 9.0)

Ray Moats
President of General Partner

WATER TARIFF

(Continued from Sheet No. 8.0)

in order to furnish water service to the adjacent property through one meter even though such adjacent property may be owned by him. In case of such unauthorized extension, remetering, sale or disposition of service, the customer's water service will be subject to discontinuance until such unauthorized extension, remetering, sale or disposition of service is discontinued and full payment is made to the Company for water service rendered by the Company (calculated on proper classification and rate schedules) and until reimbursement in full is made to the Company for all extra expenses incurred for clerical work, testing, and inspections. (This shall not be construed as prohibiting a Customer from remetering.)

- 8.0 CONTINUITY OF SERVICE - The Company will at all times use reasonable diligence to provide continuous water service, and having used reasonable diligence, shall not be liable to the customer for failure or interruption of continuous water service. The Company shall not be liable for any act or omission caused directly or indirectly by strikes, labor troubles, accidents, litigations, breakdowns, shutdowns for emergency repairs, or adjustments, acts of sabotage, enemies of the United States, Wars, United States, State, Municipal or other governmental interference, acts of God or other causes beyond its control.

If at any time the Company shall interrupt or discontinue its service, all customers affected by said interruption or discontinuance shall be given not less than 24 hours written notice.

- 9.0 TYPE AND MAINTENANCE - The customer's pipes, apparatus and equipment shall be selected, installed, used and maintained in accordance with standard practice, and shall conform with the Rules and Regulations of the Company, and shall comply with all Laws and Governmental Regulations applicable to same. The Company shall not be responsible for the maintenance and operation of the customer's pipes and facilities. The customer expressly agrees not to utilize any appliance or device which is not properly constructed, controlled and protected or which may adversely affect the water service; and the Company reserves the right to discontinue or withhold water to such apparatus or device.

(Continued to Sheet No. 10.0)

Ray Moats
President of General Partner

WATER TARIFF

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Ray Moats
 President of General Partner

WATER TARIFF

FIRE PROTECTION SERVICE

WATER

AVAILABILITY -

APPLICABILITY -

LIMITATIONS - Subject to all of the Rules and Regulations of this Tariff and General Rules and Regulations of the Commission.

BILLING PERIOD- N/A

RATE - Public Fire Protection - per hydrant
N/A

Private Fire Protection -

N/A

BASE FACILITY CHARGE -

TERMS OF PAYMENT -

EFFECTIVE DATE -

TYPE OF FILING - Grandfather Certificate

Ray Moats
President of General Partner

WATER TARIFF

CUSTOMER DEPOSITS

ESTABLISHMENT OF CREDIT - Before rendering water service, the Company may require an applicant for service to satisfactorily establish credit, but such establishment of credit shall not relieve the customer from complying with the Company's Rules for prompt payment. Credit will be deemed so established, in accordance with Rule 25-30.311, Florida Administrative Code, if:

- (A) The applicant for service furnishes a satisfactory guarantor to secure payment of bills for the service requested,
- (B) The applicant pays a cash deposit,
- (C) The applicant for service furnishes an irrevocable letter of credit from a bank or surety bond.

AMOUNT OF DEPOSIT - The amount of initial deposit shall be the following according to meter size:

| | <u>Residential</u> | <u>General Service</u> |
|------------|--------------------|------------------------|
| 5/8 x 3/4" | N/A | N/A |
| 1" | N/A | N/A |
| 1 1/2" | N/A | N/A |
| Over 2" | N/A | N/A |

ADDITIONAL DEPOSIT - Under Rule 25-30.311(7), Florida Administrative Code, the Company may require a new deposit, where previously waived or returned, or an additional deposit in order to secure payment of current bills. The Company shall provide the customer with reasonable written notice of not less than thirty (30) days where such request or notice is separate and apart from any bill for service. The total amount of the required deposit shall not exceed an amount equal to the average actual charge for water service for two (2) monthly billing periods for the twelve-month period immediately prior to the date of notice. In the event the customer has had service less than 12 months, the Company shall base its new or additional deposit upon the average actual monthly billing available.

(Continued to Sheet No. 21.1)

Ray Moats
President of General Partner

WATER TARIFF

METER TEST DEPOSITS

METER BENCH TEST REQUEST - If any customer requests a bench test of his or her water meter, the Company will require a deposit to defray the cost of testing; such deposit shall not exceed the following schedule of fees and shall be in accordance with Rule 25-30.266, Florida Administrative Code:

| <u>METER SIZE</u> | <u>FEE</u> |
|-------------------|-------------|
| 5/8 x 3/4" | \$20.00 |
| 1" and 1 1/2" | \$25.00 |
| 2" and over | Actual Cost |

REFUND OF METER BENCH TEST DEPOSIT - If the meter is found to register in excess of prescribed accuracy limits pursuant to Rule 25-30.262, Florida Administrative Code, the deposit shall be refunded. If the meter is found to register accurately or below such prescribed accuracy limits, the deposit shall be retained by the Company as a service charge for conducting the meter test.

METER FIELD TEST REQUEST - Upon written request of any customer, the Company shall, without charge, make a field test of the accuracy of the water meter in use at the customer's premises provided that the meter has not been tested within one-half the maximum interval allowed under Rule 25-30.265, Florida Administrative Code.

EFFECTIVE DATE -

TYPE OF FILING - Grandfather Certificate

Ray Moats
President of General Partner

WATER TARIFF

SERVICE AVAILABILITY FEES AND CHARGES

| <u>DESCRIPTION</u> | <u>AMOUNT</u> | <u>SHEET NUMBER</u> |
|---|---------------|-------------------------|
| <u>Back-Flow Preventer Installation Fee</u> | | |
| 5/8 x 3/4" | \$ | |
| 1" | \$ | |
| 1 1/2" | \$ | |
| 2" | \$ | |
| Over 2" | Actual Cost | [1] |
| <u>Customer Connection (Tap-in) Charge</u> | | |
| 5/8 x 3/4" metered service | \$ | |
| 1" metered service | \$ | |
| 1 1/2" metered service | \$ | |
| 2" metered service | \$ | |
| Over 2" metered service | Actual Cost | [1] |
| <u>Guaranteed Revenue Charge</u> | | |
| With Prepayment of Service Availability Charges: | | |
| Residential-per ERC/month (___)GPD | \$ | |
| All others-per gallon/month | \$ | |
| Without Prepayment of Service Availability Charges: | | |
| Residential-per ERC/month (___)GPD | \$ | |
| All others-per gallon/month | \$ | |
| <u>Inspection Fee</u> | Actual Cost | [1] |
| <u>Main Extension Charge</u> | | |
| Residential-per ERC (___)GPD | \$ | |
| All others-per gallon | \$ | |
| or | | |
| Residential-per lot (___ foot frontage) | \$ | |
| All others-per front foot | \$ | |
| <u>Meter Installation Fee</u> | | |
| 5/8 x 3/4" | \$ | |
| 1" | \$ | |
| 1 1/2" | \$ | |
| 2" | \$ | |
| Over 2" | \$ | |
| <u>Plan Review Charge</u> | Actual Cost | [1] |
| <u>Plant Capacity Charge</u> | | |
| Residential-per ERC (___)GPD | \$ | |
| All others-per gallon | \$ | |
| <u>System Capacity Charge</u> | | |
| Residential-per ERC (___)GPD | \$ | |
| All others-per gallon | \$ | |

[1] Actual Cost is equal to the total cost incurred for services rendered by a customer.

EFFECTIVE DATE -

TYPE OF FILING - Grandfather Certificate

Ray Moats
President of General Partner

WATER TARIFF

APPLICATION FOR WATER SERVICE

SWISS GOLF & TENNIS CLUB MOBILE HOME PARK
LEASE AGREEMENT

THIS LEASE made and entered into this ____ day of _____, 19____, by and between CHC VII, Ltd., known as Swiss Golf & Tennis Club Mobile Home park, hereinafter called the "Community" and _____, hereinafter called the Owner-tenant.

WITNESSETH, that in consideration of the covenants herein contained, on the part of the said Owner-tenant to be kept and performed, the said Community does hereby release to the said Owner-tenant the following described property: Street: _____, Lot No.: _____.

TO HAVE AND TO HOLD the same from the ____ day of _____, 19____, until the 31st day of December, the said Owner-tenant paying the initial monthly base rental of \$_____ from the beginning of this Lease until the 31st day of December, 19____. Annual monthly base rental increases for the calendar years 19____ and subsequent years will be based on no less than \$5.00 or the increase in the Consumer Price Index (defined as the United States Department of Labor Consumer Price Index, U.S. City Average, All Urban Consumers, 1982-84 equals 100) ("CPI"), whichever is greater. Lease renewals and increases will become effective the first day of January of each year thereafter and will be a part of the Lease Agreement for that year.

Base rent will also be increased in calendar years subsequent to the initial year by any increase in real estate or other taxes and assessments by a state or local government. Such increases in taxes and assessments will be based on a prorata computation among all lots in the mobile home park and will be charged to all residents to whom this Prospectus is applicable. The mobile home owner shall be notified of the increase in base rent at least ninety (90) days prior to the increase.

Rental payments are due on or before the 1st day of each month for that month, at the place designated by the Community.

The Owner-tenant covenants and agrees to the following:

1. To make no unlawful, improper, or offensive use of the property.
2. To comply with the Rules & Regulations of the Park. A copy of said Rules & Regulations has been furnished to the Owner-tenant.

(Continued to Sheet No. 27.1)

Ray Moats
President of General Partner

WATER TARIFF

(Continued from Sheet No. 27.0)

3. That the Lease is governed by Chapter 723, Florida Statutes (Florida Mobile Home Act) as currently in effect at the time of execution of this document, the provisions of which are incorporated herein by reference.

4. Actions by the Owner-tenant which constitute grounds for eviction under Section 723.061, Florida Statutes, shall be a violation of this Lease. Failure of the Community to evict a tenant for violation of any one of the grounds set forth in Section 723.061, Florida Statutes, or for any grounds provided for in this Lease, shall not waive the right for the Community to consider any subsequent violation of the same grounds, or the violation of any other grounds, a breach of this Lease by Owner-tenant so long as permitted by Chapter 723, Florida Statutes.

5. As provided in the Rules & Regulations, rules and regulations may be modified, eliminated, or additional rules and regulations adopted by the Community upon giving the Owner-tenant notice thereof as required by law and said Rules & Regulations in accordance with Chapter 723, Florida Statutes.

6. This Lease and the privileges contained herein are not assignable, and said Lease is only valid as long as those executing this Lease reside upon the premises set forth in this Lease, and are in full conformance of all provisions of this Lease and the park Rules & Regulations, except that a new home owner may assume, in writing, the balance of the annual Lease through December 31, of the year of purchase in accordance with Chapter 723, Florida Statutes.

7. Owner-tenant expressly understands and agrees that, upon execution of this Lease, all prior leases, rental agreement, negotiations, and other agreements between the parties regarding the lot leased are hereby terminated, void, and of no legal force and effect.

8. Storm Drainage is included in the lot rental amount and charged in accordance with Sections VII and VII(J) of the Prospectus.

(Continued to Sheet No. 27.2)

Ray Moats
President of General Partner

WATER TARIFF

(Continued from Sheet No. 27.1)

9. Other financial obligations of the Owner-tenant, not including user fees, are as follows:

| | | <u>Fees or Charges</u> |
|---|--|--|
| Yard Maintenance (not charged unless owner fails to maintain yard) | | \$ <u>20.00</u> per cut |
| Water and Sewer | up to <u>8000</u> gallons | \$ <u>15.71</u> |
| | excess per <u>1000</u> gal. over <u>8000</u> up to <u>10,000</u> | \$ <u>1.31</u> |
| | excess per <u>1000</u> gal. over <u>10,000</u> | \$ <u>2.09</u> |
| lots 1001 through 1086 | | charged by the City of Winter Haven in accordance with its current rates |
| Tree Trimming/Removal, Debris Removal (not charged unless Owner-tenant fails to provide services himself) | | \$ <u>billed amount</u> |
| Late Check Charge after 5th day | | \$ <u>1.50</u> per day |
| Bad Check Charge | | \$ <u>15.00</u> |
| Extra Resident Fee | | \$ <u>10.00</u> per person |
| Debris Removal | charged in accordance with Section VIII(K) of the Prospectus | |
| Governmental Assessments, Fees, Surcharges, Charges | charged in accordance with Section VIII(J) of the Prospectus | |

The fees will be charged and increased as set out in Sections VIII(F) through (K) of the Prospectus. No services are included in the lot rental amount other than those services stated above.

10. The Community reserves the right to pass on and pass through charges in accordance with the Prospectus and Chapter 723, Florida Statutes.

11. Owner-tenant(s) acknowledge that they have read the foregoing, the Rules & Regulations, and the Prospectus, and that Owner-tenant was offered the foregoing Lease prior to occupancy.

(Continued to Sheet No. 27.3)

Ray Moats
President of General Partner

CHC VII, LTD.

ORIGINAL SHEET NO. 27.3

WATER TARIFF

(Continued from Sheet No. 27.2)

We have read and understand this Agreement and agree to the terms set out herein.

WITNESS our hands and seals of the date set out above.

Owner-tenant

Community Representative

Owner-tenant

(Continued to Sheet No. 27.4)

Ray Moats
President of General Partner

WATER TARIFF

(Continued from Sheet No. 27.3)

HIDDEN GOLF CLUB MOBILE HOME PARK
LEASE AGREEMENT

THIS LEASE made and entered into this ____ day of _____, 19__, by and between CHC VII, Ltd., known as Hidden Golf Club Mobile Home park, hereinafter called the "Community" and _____, hereinafter called the Owner-tenant.

WITNESSETH, that in consideration of the covenants herein contained, on the part of the said Owner-tenant to be kept and performed, the said Community does hereby release to the said Owner-tenant the following described property: Street: _____, Lot No.: _____.

TO HAVE AND TO HOLD the same from the ____ day of _____, 19__, until the 31st day of December, the said Owner-tenant paying the initial monthly base rental of \$ _____ from the beginning of this Lease until the 31st day of December, 19____. Annual monthly base rental increases for the calendar years 19__ and subsequent years will be based on no less than \$5.00 or the increase in the Consumer Price Index (defined as the United States Department of Labor Consumer Price Index, U.S. City Average, All Urban Consumers, 1982-84 equals 100) ("CPI"), whichever is greater. Lease renewals and increases will become effective the first day of January of each year thereafter and will be a part of the Lease Agreement for that year.

Base rent will also be increased in calendar years subsequent to the initial year by any increase in real estate or other taxes and assessments by a state or local government. Such increases in taxes and assessments will be based on a prorata computation among all lots in the mobile home park and will be charged to all residents to whom this Prospectus is applicable. The mobile home owner shall be notified of the increase in base rent at least ninety (90) days prior to the increase.

Rental payments are due on or before the 1st day of each month for that month, at the place designated by the Community.

The Owner-tenant covenants and agrees to the following:

1. To make no unlawful, improper, or offensive use of the property.
2. To comply with the Rules & Regulations of the Park. A copy of said Rules & Regulations has been furnished to the Owner-tenant.
3. That the Lease is governed by Chapter 723, Florida Statutes (Florida Mobile Home Act) as currently in effect at the time of execution of this document, the provisions of which are incorporated herein by reference.

(Continued to Sheet No. 27.5)

Ray Moats
 President of General Partner

WATER TARIFF

(Continued from Sheet No. 27.4)

4. Actions by the Owner-tenant which constitute grounds for eviction under Section 723.061, Florida Statutes, shall be a violation of this Lease. Failure of the Community to evict a tenant for violation of any one of the grounds set forth in Section 723.061, Florida Statutes, or for any grounds provided for in this Lease, shall not waive the right for the Community to consider any subsequent violation of the same grounds, or the violation of any other grounds, a breach of this Lease by Owner-tenant so long as permitted by Chapter 723, Florida Statutes.

5. As provided in the Rules & Regulations, rules and regulations may be modified, eliminated, or additional rules and regulations adopted by the Community upon giving the Owner-tenant notice thereof as required by law and said Rules & Regulations in accordance with Chapter 723, Florida Statutes.

6. This Lease and the privileges contained herein are not assignable, and said Lease is only valid as long as those executing this Lease reside upon the premises set forth in this Lease, and are in full conformance of all provisions of this Lease and the park Rules & Regulations, except that a new home owner may assume, in writing, the balance of the annual Lease through December 31, of the year of purchase in accordance with Chapter 723, Florida Statutes.

7. Owner-tenant expressly understands and agrees that, upon execution of this Lease, all prior leases, rental agreement, negotiations, and other agreements between the parties regarding the lot leased are hereby terminated, void, and of no legal force and effect.

8. Storm drainage is included in the lot rental amount and charged in accordance with Sections VII and VIII(J) of the Prospectus.

9. Other financial obligations of the Owner-tenant, not including user fees, are as follows:

| | <u>Fees or Charges</u> |
|--|---|
| Yard Maintenance (not charged unless owner fails to maintain yard) | \$ <u>20.00</u> per cut |
| Water and Sewer | up to <u>8000</u> gallons \$ <u>15.71</u> |
| | excess per <u>1000</u> gal. over <u>8000</u> up to <u>10,000</u> \$ <u>1.31</u> |
| | excess per <u>1000</u> gal. over <u>10,000</u> \$ <u>2.09</u> |
| Tree Trimming/Removal, Debris Removal (not charged unless Owner-tenant fails to provide services himself) | \$ <u>billed amount</u> |

(Continued to Sheet No. 27.6)

Ray Moats
President of General Partner

WATER TARIFF

(Continued from Sheet No. 27.5)

| | |
|---|--|
| Late Check Charge after 5th day | \$ <u>1.50</u> per day |
| Bad Check Charge | \$ <u>15.00</u> |
| Extra Resident Fee | \$ <u>10.00</u> per person |
| Debris Removal | charged in accordance with Section VIII(K) of the Prospectus |
| Governmental Assessments, Fees, Surcharges, and Charges | charged in accordance with Section VIII(J) of the Prospectus |

The fees will be charged and increased as set out in Sections VIII(F) through (K) of the Prospectus. No services are included in the lot rental amount other than those services stated above.

10. The Community reserves the right to pass on and pass through charges in accordance with the Prospectus and Chapter 723, Florida Statutes.

11. Owner-tenant(s) acknowledge that they have read the foregoing, the Rules & Regulations, and the Prospectus, and that Owner-tenant was offered the foregoing Lease prior to occupancy.

We have read and understand this Agreement and agree to the terms set out herein.

WITNESS our hands and seals of the date set out above.

Owner-tenant

Community Representative

Owner-tenant

Ray Moats
President of General Partner

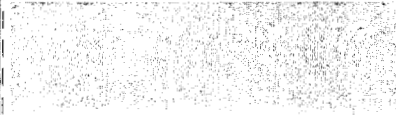
WATER TARIFF

COPY OF CUSTOMER'S BILL

HIDDEN GOLF CLUB
 P.O. BOX 5252 • LAKELAND, FL 33807
 BILLING INQUIRIES CALL 9-5 647-1581

FORWARDING & ADDRESS
 CORRECTION REQUESTED
 REQUEST UTILITY BILLING DEPT.

| TYPE OF SERVICE | METER READING | | USED | CHARGES |
|-----------------|---------------|----------|------|---------|
| | PRESENT | PREVIOUS | | |
| | | | | |



PLEASE BRING THIS ENTIRE BILL TO OFFICE
 OR MAIL THIS STUB WITH YOUR PAYMENT.

| METER READ | | CLASS | NET AMOUNT TO BE PAID | LATE FEE | GROSS AMOUNT TO BE PAID |
|------------|-----|-------|-----------------------|----------|-------------------------|
| MONTH | DAY | | | | |
| | | | | | |

| CUSTOMER | | PAY GROSS AMOUNT AFTER THIS DATE |
|-----------------------|---------|----------------------------------|
| ROUTE | ACCOUNT | |
| | | |
| NET AMOUNT TO BE PAID | | GROSS AMOUNT TO BE PAID |

SWISS GOLF AND TENNIS
 P.O. BOX 5252 • LAKELAND, FL 33807
 BILLING INQUIRIES CALL 9-5 647-1581

FORWARDING & ADDRESS
 CORRECTION REQUESTED
 REQUEST UTILITY BILLING DEPT.

| TYPE OF SERVICE | METER READING | | USED | CHARGES |
|-----------------|---------------|----------|------|---------|
| | PRESENT | PREVIOUS | | |
| | | | | |

PLEASE BRING THIS ENTIRE BILL TO OFFICE
 OR MAIL THIS STUB WITH YOUR PAYMENT.

| METER READ | | CLASS | NET AMOUNT TO BE PAID | LATE FEE | GROSS AMOUNT TO BE PAID |
|------------|-----|-------|-----------------------|----------|-------------------------|
| MONTH | DAY | | | | |
| | | | | | |

| CUSTOMER | | PAY GROSS AMOUNT AFTER THIS DATE |
|-----------------------|---------|----------------------------------|
| ROUTE | ACCOUNT | |
| | | |
| NET AMOUNT TO BE PAID | | GROSS AMOUNT TO BE PAID |

Ray Moats
 President of General Partner

WASTEWATER TARIFF

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Ray Moats
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WASTEWATER TARIFF

(Continued from Sheet No. 5.0)

- 10.0 "POINT OF COLLECTION" - For wastewater systems, "Point of Collection" shall mean the point at which the Company's piping, fittings, and valves connect with the customer's piping, fittings, and valves.
- 11.0 "RATE SCHEDULE" - The rate(s) or charge(s) for a particular classification of service plus the several provisions necessary for billing, including all special terms and conditions under which service shall be furnished at such rate or charge.
- 12.0 "SERVICE" - Service, as mentioned in this tariff and in agreement with customers, shall be construed to include, in addition to all wastewater service required by the customer the readiness and ability on the part of the Company to furnish wastewater service to the customer. Service shall conform to the standards set for in Section 367.111 of the Florida Statutes.
- 13.0 "SERVICES LINES" - The pipe between the Company's mains and the point of collection which includes all the pipe, fittings and valves necessary to make the connection to the customer's premises.
- 14.0 "TERRITORY" - The geographical area described by metes and bounds with township, range and section in a certificate, which may be within or without the boundaries of an incorporated municipality, and may include areas in more than one county.

Ray Moats
President of General Partner

WASTEWATER TARIFF

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Ray Moats
President of General Partner

WASTEWATER TARIFF

(Continued for Sheet No. 6.0)

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WASTEWATER TARIFF

RULES AND REGULATIONS

- 1.0 POLICY DISPUTE - Any dispute between the Company and the customer or prospective customer regarding the meaning or application of any provision this tariff shall upon written request by either party be resolved by the Florida Public Service Commission.
- 2.0 GENERAL INFORMATION - The Company's Rules and Regulations insofar as they are inconsistent with any Statute, Law, Rule or Commission Order shall be null and void. These Rules and Regulations are a part of the rate schedules and applications and contracts of the Company, and in the absence of specific written agreement to the contrary, apply without modification or change to each and every customer to whom the Company renders wastewater service.

In the event that a portion of these Rules and Regulations are declared unconstitutional or void for any reason by any court of competent jurisdiction, such decision shall in no way affect the validity of the remaining portions of the Rules and Regulations for wastewater service unless such court order or decision shall so direct.

The Company shall provide to all customers requiring such service within the territory described in its certificate upon such terms as are set forth in this tariff pursuant to Chapter 25-9 and 25-30, Florida Administrative Code, and Chapter 367, Florida Statutes.

- 3.0 SIGNED APPLICATION NECESSARY - Wastewater service is furnished only after a signed application or agreement and payment of the initial connection fee are accepted by the Company. The conditions of such application or agreement are binding upon the customer as well upon the Company. A copy of the application or agreement for wastewater service accepted by the Company will be furnished to the applicant on request.

The applicant shall furnish to the Company the correct name and street address or lot and block number at which wastewater service is to be rendered.

- 4.0 APPLICATIONS BY AGENTS - Applications for wastewater service requested by firms, partnerships, associations, corporations, and others shall be rendered only by duly

(Continued to Sheet No. 8.0)

Ray Moats
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WASTEWATER TARIFF

(Continued from Sheet No. 7.0)

authorized parties. When wastewater service is rendered under agreement or agreements entered into between the Company and an agent of the principal, the use of such wastewater service by the principal or agent shall constitute full and complete ratification by the principal of the agreement or agreements entered into between agent and the Company and under which such wastewater service is rendered.

- 5.0 WITHHOLDING SERVICE - The Company may withhold or discontinue wastewater service rendered under application made by any member or agent of a household, organization, or business unless all prior indebtedness to the Company of such household, organization, or business for wastewater service has been settled in full in accordance with Rule 25-30.320, Florida Administrative Code.
- 6.0 EXTENSIONS - Extensions will be made to the Company's facilities in compliance with Commission Rules and Orders and the Company's tariff.
- 7.0 LIMITATION OF USE - Wastewater service purchased from the Company shall be used by the consumer only for the purposes specified in the application for wastewater service. Wastewater service rendered to the customer for the consumer's own use and shall be collected directly into the Company's main wastewater lines.

In no case shall a customer, except with the written consent of the Company, extend his lines across a street, alley, lane, court, property line, avenue, or other way in order to furnish wastewater service to the adjacent property even though such adjacent property may be owned by him. In case of such unauthorized extension, remetering, sale, or disposition of service, the consumer's wastewater service will be is subject to discontinuance until such unauthorized extension, remetering, sale, or disposition of service discontinued and full payment is made to the Company for wastewater service rendered by the Company (calculated on proper classifications and rate schedules)

(Continued to Sheet No. 9.0)

Ray Moats
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WASTEWATER TARIFF

(Continued from Sheet No. 8.0)

and until reimbursement in full made to the Company for all extra expenses incurred for clerical work, testing, and inspections. (This shall not be construed as prohibiting a Customer from remetering.)

- 8.0 CONTINUITY OF SERVICE - The Company will at all times use reasonable diligence to provide continuous wastewater service, and having used reasonable diligence, shall not be liable to the customer for failure or interruption of continuous wastewater service. The Company shall not be liable for any act or omission caused directly or indirectly by strikes, labor troubles, accidents, litigations, breakdowns, shutdowns for emergency repairs, or adjustments, acts of sabotage, enemies of the United States, Wars, United States, State, Municipal or other governmental interference, acts of God or other causes beyond its control.

If at any time the Company shall interrupt or discontinue its service, all customers affected by said interruption or discontinuance shall be given not less than twenty-four (24) hours written notice.

- 9.0 TYPE AND MAINTENANCE - The customer's pipes, apparatus and equipment shall be selected, installed, used and maintained in accordance with standard practice and shall conform with the Rules and Regulations of the Company and shall comply with all Laws and Governmental Regulations applicable to same. The Company shall not be responsible for the maintenance and operation of the customer's pipes and facilities. The customer expressly agrees not to utilize any appliance or device which is not properly constructed, controlled and protected, or which may adversely affect the wastewater service; the Company reserves the right to discontinue or withhold wastewater service to such apparatus or device.
- 10.0 CHANGE OF CUSTOMER'S INSTALLATION - No changes or increases in customer's installation, which will materially affect the proper operation of the pipes, mains, or stations of the Company, shall be made without written consent of the Company. The customer shall be liable for any change resulting from a violation of this Rule.

(Continued to Sheet No. 10.0)

Ray Moats
President of General Partner

WASTEWATER TARIFF

(Continued from Sheet No. 9.0)

- 11.0 INSPECTION OF CUSTOMER'S INSTALLATION - All Customer's wastewater service installations or changes shall be inspected upon completion by a competent authority to ensure that customer's piping, equipment, and devices have been installed in accordance with accepted standard practice and local Laws and Governmental Regulations. Where Municipal or other Governmental inspection is required by local Rules and Ordinances, the Company cannot render wastewater service until such inspection has been made and a formal notice of approval from the inspecting authority has been received by the Company.

Notwithstanding the above, the Company reserves the right to inspect the customer's installation prior to rendering wastewater service, and from time to time thereafter, but assumes no responsibility whatsoever for any portion thereof.

- 12.0 PROTECTION OF COMPANY'S PROPERTY - The customer shall exercise reasonable diligence to protect the Company's property on the customer's premises and shall knowingly permit no one, but the Company's agents or persons authorized by law, to have access to the Company's pipes and apparatus.

In the event of any loss or damage to property of the Company caused by or arising out of carelessness, neglect, or misuse by the customer, the cost of making good such loss or repairing such damage shall be paid by the customer.

- 13.0 ACCESS TO PREMISES - The duly authorized agents of the Company shall have access at all reasonable hours to the premises of the customer for the purpose of installing, maintaining, inspecting, or removing the Company's property or for performance under or termination of the Company's agreement with the customer and under such performance shall not be liable for trespass.

- 14.0 RIGHT OF WAY OR EASEMENTS - The customer shall grant or cause to be granted to the Company, and without cost to the Company, all rights, easements, permits, and privileges which are necessary for the rendering of wastewater service.

(Continued to Sheet No. 11.0)

Ray Moats
President of General Partner

WASTEWATER TARIFF

(Continued from Sheet No. 10.0)

- 15.0 BILLING PERIODS - Customers pay the base charge monthly, in advance, in the lot rental amount but not in the base rent. The Utility bills customers quarterly, in arrears, for the excess consumption charges. Bills shall become due when rendered and be considered as received by the customer when delivered or mailed to the water service address or some other place mutually agreed upon. Non-receipt of bills by the customer shall not release or diminish the obligation of the customer with respect to payment thereof.
- 16.0 DELINQUENT BILLS - Bills are due when rendered. However, the Company shall not consider the customer delinquent in paying any bill until the twenty-first (21) day after the Company has mailed or presented the bill to the customer for payment. Wastewater service may then be discontinued only after the Company has mailed or presented within five (5) working days a written notice to the customer in accordance with Rule 25-30.320, Florida Administrative Code. Wastewater service shall be restored only after the Company has received payment for all past-due bills and reconnect charges from the customer.

There shall be no liability of any kind against the Company for the discontinuance of wastewater service to a customer for that customer's failure to pay the bills on time.

Partial payment of any bill for wastewater service rendered will not be accepted by the Company, except by the Company's agreement thereof or by direct order from the Commission.

- 17.0 PAYMENT OF WASTEWATER AND WATER SERVICE BILLS CONCURRENTLY - When both wastewater and water service are provided by the Company, payment of any wastewater service bill rendered by the Company to a customer shall not be accepted by the Company without the simultaneous or concurrent payment of any water service bill rendered by the Company. The Company may discontinue both wastewater service and water service to the customer's premises for non-payment of the wastewater service bill or water service bill or if payment is not made concurrently. The Company shall not re-establish or reconnect wastewater service and/or water service until such time as all wastewater and water service bills and all charges are paid.

(Continued to Sheet No. 12.0)

Ray Moats
President of General Partner

WASTEWATER TARIFF

(Continued from Sheet No. 11.0)

- 18.0 TAX CLAUSE - A municipal or county franchise tax levied upon a wastewater or water public utility shall not be incorporated into the rate for wastewater or water service but shall be shown as a separate item on the utility's bills to its customers in such Municipality or County.
- 19.0 CHANGE OF OCCUPANCY - When a change of occupancy takes place on any premises supplied by the Company with wastewater service, written notice thereof shall be given at the office of the Company not less than three (3) days prior to the date of change by the outgoing Customer. The outgoing customer shall be held responsible for all wastewater service rendered on such premises until such written notice is so received by the Company and the Company has had reasonable time to discontinue the wastewater service. However, if such written notice has not been received, the application of a succeeding occupant for wastewater service will automatically terminate the prior account. The customer's deposit may be transferred from one service location to another, if both locations are supplied wastewater service by the Company; the customer's deposit may not be transferred from one name to another.

Notwithstanding the above, the Company will accept telephone orders, for the convenience of its customers, to discontinue or transfer wastewater service from one service address to another and will use all reasonable diligence in the execution thereof. However, oral orders or advice shall not be deemed binding or be considered formal notification to the Company.

- 20.0 UNAUTHORIZED CONNECTIONS - WASTEWATER - Connections to the Company's wastewater system for any purpose whatsoever are to be made only by employees of the Company. Any unauthorized connections to the customer's wastewater service shall be subject to immediate discontinuance without notice. Wastewater service shall not be restored until such unauthorized connections have been removed and until settlement is made in full to the Company for all wastewater service estimated by the Company to have been used by reason of such unauthorized connection.

(Continued to Sheet No. 13.0)

Ray Moats
President of General Partner

WASTEWATER TARIFF

(Continued from Sheet No. 12.0)

- 21.0 ADJUSTMENT OF BILLS - When a customer has been overcharged or undercharged as a result of incorrect application of the rate schedule, incorrect reading of a water meter, or similar reasons, the amount may be credited or billed to the customer in accordance with Rule 25-30.340 and 25-30.350, Florida Administrative Code.
- 22.0 FILING OF CONTRACTS - Whenever a Developer Agreement or Contract, Guaranteed Revenue Contract, or Special Contract or Agreement is entered into by the Company for the sale of its product or services in a manner not specifically covered by its Rules and Regulations or approved Rate Schedules, a copy of such contracts or agreements shall be filed with the Commission prior to its execution in accordance with Rules 25-9.034 and Rule 25-30.550, Florida Administrative Code. If such contracts or agreements are approved by the Commission, a conformed copy shall be placed on file with the Commission prior to its effective date.
- 23.0 EVIDENCE OF CONSUMPTION - The initiation or continuation or resumption of water service to the customer's premises shall constitute the initiation or continuation or resumption of wastewater service to the customer's premises regardless of occupancy.
- 23.1 TEMPORARY DISCONTINUANCE OF SERVICE - At any time a customer may request a temporary discontinuance of service in order to insure that customer is not billed for any wastewater usage during the period of time in which that premises is not occupied or otherwise utilized. The customer will, however, be liable for payment of the base facility charge during the entire period of time the temporary disconnect remains in effect, in order for the Company to be able to recover its fixed cost of having wastewater service available to those premises upon request by the customer.

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CHC VII, LTD.

ORIGINAL SHEET NO. 14.0

WASTEWATER TARIFF

HELD FOR FUTURE USE

Ray Moats
President of General Partner

CHC VII, LTD.

ORIGINAL SHEET NO. 15.0

WASTEWATER TARIFF

HELD FOR FUTURE USE

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WASTEWATER TARIFF

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Ray Moats
President of General Partner

WASTEWATER TARIFF

GENERAL SERVICE

RATE SCHEDULE GS

- AVAILABILITY - Available throughout the area serviced by the Company.
- APPLICABILITY - For water service to all customers for which no other schedule applies.
- LIMITATIONS - Subject to all of the Rules and Regulations of this tariff and General Rules and Regulations of the Commission.

BILLING PERIOD- N/A

RATE - N/A

MINIMUM BILL - N/A

TERMS OF PAYMENT - Bills are due and payable when rendered and become delinquent if not paid within twenty (20) days. After five (5) working days' written notice is mailed to the customer separate and apart from any other bill, service may then be discontinued.

EFFECTIVE DATE -

TYPE OF FILING - Grandfather Certificate

Ray Moats
President of General Partner

WASTEWATER TARIFF

RESIDENTIAL SERVICERATE SCHEDULE RS

- AVAILABILITY - Available throughout the area served by the Company.
- APPLICABILITY - For water and wastewater service for all purposes in private residences and individually metered apartment units
- LIMITATIONS - Subject to all of the Rules and Regulations of this tariff and General Rules and Regulations of the Commission.
- BILLING PERIOD- Base Charge: Monthly in advance
Excess Consumption Charge: Quarterly in arrears
- RATE - Water and Wastewater for 5/8x3/4" Meters:
- | | |
|--|---------|
| Up to 8,000 gallons | \$15.00 |
| per 1,000 gal. over 8,000 up to 10,000 | \$ 1.25 |
| per 1,000 gal. over 10,000 | \$ 2.00 |
- MINIMUM BILL - \$15.00
- TERMS OF PAYMENT - Bills are due and payable when rendered and become delinquent if not paid within twenty (20) days. After five (5) working days' written notice is mailed to the customer separate and apart from any other bill, service may then be discontinued.
- EFFECTIVE DATE -
- TYPE OF FILING - Grandfather Certificate

Ray Moats
President of General Partner

WASTEWATER TARIFF

MULTI-RESIDENTIAL SERVICE

RATE SCHEDULE MS

- AVAILABILITY - Available throughout the Sumter County systems.
- APPLICABILITY - For wastewater service to all master-metered residential customers including, but not limited to, Condominiums, Apartments, and Mobile Home Parks.
- LIMITATIONS - Subject to all of the Rules and Regulations of this tariff and General Rules and Regulations of the Commission.
- BILLING PERIOD - Monthly
- RATE - Per Unit

Base Facilities Charge

All meter sizes N/A

Gallonge Charge per
1,000 gallons N/A

BASE FACILITY CHARGE - N/A

TERMS OF PAYMENT - Bills are due and payable when rendered and become delinquent if not paid within twenty (20) days. After five (5) working days' written notice is mailed to the customer separate and apart from any other bill, service may then be discontinued.

EFFECTIVE DATE -

TYPE OF FILING -

Ray Moats
President of General Partner

WASTEWATER TARIFF

CUSTOMER DEPOSITS

ESTABLISHMENT OF CREDIT - Before rendering wastewater service, the Company may require an applicant for service to satisfactorily establish credit, but such establishment of credit shall not relieve the customer from complying with the Company's Rules for prompt payment. Credit will be deemed so established, in accordance with Rule 25-30.311, Florida Administrative Code, if:

- (A) The applicant for service furnishes a satisfactory guarantor to secure payment of bills for the service requested,
- (B) The applicant pays a cash deposit,
- (C) The applicant for service furnishes an irrevocable letter of credit from a bank or surety bond.

AMOUNT OF DEPOSIT - The amount of initial deposit shall be the following according to meter size:

| | <u>Residential</u> | <u>General Service</u> |
|------------|--------------------|------------------------|
| 5/8 x 3/4" | N/A | N/A |
| 1" | N/A | N/A |
| 1 1/2" | N/A | N/A |
| Over 2" | N/A | N/A |

ADDITIONAL DEPOSIT - Under Rule 25-30.311(7), Florida Administrative Code, the Company may require a new deposit, where previously waived or returned, or an additional deposit in order to secure payment of current bills. The Company shall provide the customer with reasonable written notice of not less than thirty (30) days where such request or notice is separate and apart from any bill for service. The total amount of the required deposit shall not exceed an amount equal to the average actual charge for wastewater service for two (2) monthly billing periods for the twelve-month period immediately prior to the date of notice. In the event the customer has had service less than 12 months, the Company shall base its new or additional deposit upon the average actual monthly billing available.

(Continued to Sheet No. 20.1)

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WASTEWATER TARIFF

(Continued from Sheet No. 20.0)

INTEREST ON DEPOSIT - The Company shall pay interest on customer deposits pursuant to Rule 25-30.311(4)(a). The rate of interest is six percent (6%) per annum. The payment of interest shall be made once each year as a credit on regular bills or when service is discontinued as a credit on final bills. No customer depositor will receive interest on his or her deposit until a customer relationship and the deposit have been in existence for at least six (6) months. At such time, the customer depositor shall be entitled to receive interest from the day of the commencement of the customer relationship and placement of the deposit. The Company will pay or credit accrued interest to the customer's account during the month of N/A each year.

REFUND OF DEPOSIT - After a residential customer has established a satisfactory payment record and has had continuous service for a period of twenty-three (23) months, the Company shall refund the customer's deposit provided the customer has not, in the preceding twelve (12) months:

- (a) made more than one late payment of the bill (after the expiration of twenty (20) days from the date of mailing or delivery by the Company),
- (b) paid with a check refused by a bank,
- (c) been disconnected or non-payment, or
- (d) at any time tampered with the meter or used service in a fraudulent or unauthorized manner.

Notwithstanding the above, the Company may hold the deposit of a non-residential customer after a continuous service period of twenty-three (23) months and shall pay interest on the non-residential customer's deposit at the rate of seven percent (7%) per annum upon retainment of such deposit.

Nothing in this rule shall prohibit the Company from refunding a customer's deposit in less than twenty-three (23) months.

EFFECTIVE DATE -

TYPE OF FILING - Grandfather Certificate

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WASTEWATER TARIFF

MISCELLANEOUS SERVICE CHARGES

The company may charge the following miscellaneous service charges in accordance with the terms stated herein. If both water and wastewater services are provided, only a single charge is appropriate unless circumstances beyond the control of the Company require multiple actions.

INITIAL CONNECTION - This charge would be levied for service initiation at a location where service did not exist previously.

NORMAL RECONNECTION - This charge would be levied for transfer of service to a new customer account at a previously served location or reconnection of service subsequent to a customer requested disconnection.

VIOLATION RECONNECTION - This charge would be levied prior to reconnection of an existing customer after disconnection of service for cause according to Rule 25-30.320(2), Florida Administrative Code, including a delinquency in bill payment.

PREMISES VISIT CHARGE (IN LIEU OF DISCONNECTION) - This charge would be levied when a service representative visits a premises for the purpose of discontinuing service for nonpayment of a due and collectible bill and does not discontinue service because the customer pays the service representative or otherwise makes satisfactory arrangements to pay the bill.

Schedule of Miscellaneous Service Charges

| | |
|--|-----|
| Initial Connection | N/A |
| Normal Reconnection | N/A |
| Violation Reconnection | N/A |
| Premises Visit (in lieu of disconnection) | N/A |

[1] Actual cost is equal to the total cost incurred for services.

EFFECTIVE DATE -

TYPE OF FILING - Grandfather Certificate

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WASTEWATER TARIFF

SERVICE AVAILABILITY FEES AND CHARGES

| <u>DESCRIPTION</u> | <u>AMOUNT</u> | <u>SHEET NUMBER</u> |
|---|---------------|-------------------------|
| <u>Customer Connection (Tap-in) Charge</u> | | |
| 5/8 x 3/4" metered service | \$ | |
| 1" metered service | \$ | |
| 1 1/2" metered service | \$ | |
| 2" metered service | \$ | |
| Over 2" metered service | Actual Cost | [1] |
| <u>Guaranteed Revenue Charge</u> | | |
| With Prepayment of Service Availability Charges: | | |
| Residential-per ERC/month (___)GPD | \$ | |
| All others-per gallon/month | \$ | |
| Without Prepayment of Service Availability Charges: | | |
| Residential-per ERC/month (___)GPD | \$ | |
| All others-per gallon/month | \$ | |
| Inspection Fee | Actual Cost | [1] |
| Main Extension Charge | | |
| Residential-per ERC (___)GPD | \$ | |
| All others-per gallon | \$ | |
| or | | |
| Residential-per lot (___ foot frontage) | \$ | |
| All others-per front foot | \$ | |
| Plan Review Charge | Actual Cost | [1] |
| Plant Capacity Charge | | |
| Residential-per ERC (___)GPD | \$ | |
| All others-per gallon | \$ | |
| System Capacity Charge | | |
| Residential-per ERC (___)GPD | \$ | |
| All others-per gallon | \$ | |

[1] Actual Cost is equal to the total cost incurred for services rendered by a customer.

EFFECTIVE DATE -

TYPE OF FILING -

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WASTEWATER TARIFF

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CHC VII, LTD.

ORIGINAL SHEET NO. 24.0

WASTEWATER TARIFF

CUSTOMER'S GUARANTEE DEPOSIT RECEIPT

N/A

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WASTEWATER TARIFF

APPLICATION FOR WASTEWATER SERVICE

SWISS GOLF & TENNIS CLUB MOBILE HOME PARK
LEASE AGREEMENT

THIS LEASE made and entered into this ____ day of _____, 19____, by and between CHC VII, Ltd., known as Swiss Golf & Tennis Club Mobile Home park, hereinafter called the "Community" and _____, hereinafter called the Owner-tenant.

WITNESSETH, that in consideration of the covenants herein contained, on the part of the said Owner-tenant to be kept and performed, the said Community does hereby release to the said Owner-tenant the following described property: Street: _____, Lot No.: _____.

TO HAVE AND TO HOLD the same from the ____ day of _____, 19____, until the 31st day of December, the said Owner-tenant paying the initial monthly base rental of \$_____ from the beginning of this Lease until the 31st day of December, 19____. Annual monthly base rental increases for the calendar years 19____ and subsequent years will be based on no less than \$5.00 or the increase in the Consumer Price Index (defined as the United States Department of Labor Consumer Price Index, U.S. City Average, All Urban Consumers, 1982-84 equals 100) ("CPI"), whichever is greater. Lease renewals and increases will become effective the first day of January of each year thereafter and will be a part of the Lease Agreement for that year.

Base rent will also be increased in calendar years subsequent to the initial year by any increase in real estate or other taxes and assessments by a state or local government. Such increases in taxes and assessments will be based on a prorata computation among all lots in the mobile home park and will be charged to all residents to whom this Prospectus is applicable. The mobile home owner shall be notified of the increase in base rent at least ninety (90) days prior to the increase.

Rental payments are due on or before the 1st day of each month for that month, at the place designated by the Community.

The Owner-tenant covenants and agrees to the following:

1. To make no unlawful, improper, or offensive use of the property.
2. To comply with the Rules & Regulations of the Park. A copy of said Rules & Regulations has been furnished to the Owner-tenant.

(Continued to Sheet No. 25.1)

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WASTEWATER TARIFF

(Continued from Sheet No. 25.0)

3. That the Lease is governed by Chapter 723, Florida Statutes (Florida Mobile Home Act) as currently in effect at the time of execution of this document, the provisions of which are incorporated herein by reference.

4. Actions by the Owner-tenant which constitute grounds for eviction under Section 723.061, Florida Statutes, shall be a violation of this Lease. Failure of the Community to evict a tenant for violation of any one of the grounds set forth in Section 723.061, Florida Statutes, or for any grounds provided for in this Lease, shall not waive the right for the Community to consider any subsequent violation of the same grounds, or the violation of any other grounds, a breach of this Lease by Owner-tenant so long as permitted by Chapter 723, Florida Statutes.

5. As provided in the Rules & Regulations, rules and regulations may be modified, eliminated, or additional rules and regulations adopted by the Community upon giving the Owner-tenant notice thereof as required by law and said Rules & Regulations in accordance with Chapter 723, Florida Statutes.

6. This Lease and the privileges contained herein are not assignable, and said Lease is only valid as long as those executing this Lease reside upon the premises set forth in this Lease, and are in full conformance of all provisions of this Lease and the park Rules & Regulations, except that a new home owner may assume, in writing, the balance of the annual Lease through December 31, of the year of purchase in accordance with Chapter 723, Florida Statutes.

7. Owner-tenant expressly understands and agrees that, upon execution of this Lease, all prior leases, rental agreement, negotiations, and other agreements between the parties regarding the lot leased are hereby terminated, void, and of no legal force and effect.

8. Storm Drainage is included in the lot rental amount and charged in accordance with Sections VII and VII(J) of the Prospectus.

(Continued to Sheet No. 25.2)

Ray Moats
President of General Partner

WASTEWATER TARIFF

(Continued from Sheet No. 25.1)

9. Other financial obligations of the Owner-tenant, not including user fees, are as follows:

| | <u>Fees or Charges</u> |
|---|--|
| Yard Maintenance (not charged unless owner fails to maintain yard) | \$ <u>20.00</u> per cut |
| Water and Sewer | \$ <u>15.71</u> |
| up to <u>8000</u> gallons | \$ <u>1.31</u> |
| excess per <u>1000</u> gal. over <u>8000</u> up to <u>10,000</u> | \$ <u>2.09</u> |
| excess per <u>1000</u> gal. over <u>10,000</u> | |
| lots 1001 through 1086 | charged by the City of Winter Haven in accordance with its current rates |
| Tree Trimming/Removal, Debris Removal (not charged unless Owner-tenant fails to provide services himself) | \$ <u>billed amount</u> |
| Late Check Charge after 5th day | \$ <u>1.50</u> per day |
| Bad Check Charge | \$ <u>15.00</u> |
| Extra Resident Fee | \$ <u>10.00</u> per person |
| Debris Removal | charged in accordance with Section VIII(K) of the Prospectus |
| Governmental Assessments, Fees, Surcharges, Charges | charged in accordance with Section VIII(J) of the Prospectus |

The fees will be charged and increased as set out in Sections VIII(F) through (K) of the Prospectus. No services are included in the lot rental amount other than those services stated above.

10. The Community reserves the right to pass on and pass through charges in accordance with the Prospectus and Chapter 723, Florida Statutes.

11. Owner-tenant(s) acknowledge that they have read the foregoing, the Rules & Regulations, and the Prospectus, and that Owner-tenant was offered the foregoing Lease prior to occupancy.

(Continued to Sheet No. 25.3)

Ray Moats
President of General Partner

CHC VII, LTD.

ORIGINAL SHEET NO. 25.3

WASTEWATER TARIFF

(Continued from Sheet No. 25.2)

We have read and understand this Agreement and agree to the terms set out herein.

WITNESS our hands and seals of the date set out above.

Owner-tenant

Community Representative

Owner-tenant

(Continued to Sheet No. 25.4)

Ray Moats
President of General Partner

WASTEWATER TARIFF

(Continued from Sheet No. 25.3)

HIDDEN GOLF CLUB MOBILE HOME PARK
LEASE AGREEMENT

THIS LEASE made and entered into this ____ day of _____, 19____, by and between CHC VII, Ltd., known as Hidden Golf Club Mobile Home park, hereinafter called the "Community" and _____, hereinafter called the Owner-tenant.

WITNESSETH, that in consideration of the covenants herein contained, on the part of the said Owner-tenant to be kept and performed, the said Community does hereby release to the said Owner-tenant the following described property: Street: _____, Lot No.: _____.

TO HAVE AND TO HOLD the same from the ____ day of _____, 19____, until the 31st day of December, the said Owner-tenant paying the initial monthly base rental of \$_____ from the beginning of this Lease until the 31st day of December, 19____. Annual monthly base rental increases for the calendar years 19____ and subsequent years will be based on no less than \$5.00 or the increase in the Consumer Price Index (defined as the United States Department of Labor Consumer Price Index, U.S. City Average, All Urban Consumers, 1982-84 equals 100) ("CPI"), whichever is greater. Lease renewals and increases will become effective the first day of January of each year thereafter and will be a part of the Lease Agreement for that year.

Base rent will also be increased in calendar years subsequent to the initial year by any increase in real estate or other taxes and assessments by a state or local government. Such increases in taxes and assessments will be based on a prorata computation among all lots in the mobile home park and will be charged to all residents to whom this Prospectus is applicable. The mobile home owner shall be notified of the increase in base rent at least ninety (90) days prior to the increase.

Rental payments are due on or before the 1st day of each month for that month, at the place designated by the Community.

The Owner-tenant covenants and agrees to the following:

1. To make no unlawful, improper, or offensive use of the property.
2. To comply with the Rules & Regulations of the Park. A copy of said Rules & Regulations has been furnished to the Owner-tenant.
3. That the Lease is governed by Chapter 723, Florida Statutes (Florida Mobile Home Act) as currently in effect at the time of execution of this document, the provisions of which are incorporated herein by reference.

(Continued to Sheet No. 25.5)

Ray Moats
President of General Partner

WASTEWATER TARIFF

(Continued from Sheet No. 25.4)

4. Actions by the Owner-tenant which constitute grounds for eviction under Section 723.061, Florida Statutes, shall be a violation of this Lease. Failure of the Community to evict a tenant for violation of any one of the grounds set forth in Section 723.061, Florida Statutes, or for any grounds provided for in this Lease, shall not waive the right for the Community to consider any subsequent violation of the same grounds, or the violation of any other grounds, a breach of this Lease by Owner-tenant so long as permitted by Chapter 723, Florida Statutes.

5. As provided in the Rules & Regulations, rules and regulations may be modified, eliminated, or additional rules and regulations adopted by the Community upon giving the Owner-tenant notice thereof as required by law and said Rules & Regulations in accordance with Chapter 723, Florida Statutes.

6. This Lease and the privileges contained herein are not assignable, and said Lease is only valid as long as those executing this Lease reside upon the premises set forth in this Lease, and are in full conformance of all provisions of this Lease and the park Rules & Regulations, except that a new home owner may assume, in writing, the balance of the annual Lease through December 31, of the year of purchase in accordance with Chapter 723, Florida Statutes.

7. Owner-tenant expressly understands and agrees that, upon execution of this Lease, all prior leases, rental agreement, negotiations, and other agreements between the parties regarding the lot leased are hereby terminated, void, and of no legal force and effect.

8. Storm drainage is included in the lot rental amount and charged in accordance with Sections VII and VIII(J) of the Prospectus.

9. Other financial obligations of the Owner-tenant, not including user fees, are as follows:

| | <u>Fees or Charges</u> |
|--|---|
| Yard Maintenance (not charged unless owner fails to maintain yard) | \$ <u>20.00</u> per cut |
| Water and Sewer | up to <u>8000</u> gallons \$ <u>15.71</u> |
| | excess per <u>1000</u> gal. over <u>8000</u> up to <u>10,000</u> \$ <u>1.31</u> |
| | excess per <u>1000</u> gal. over <u>10,000</u> \$ <u>2.09</u> |
| Tree Trimming/Removal, Debris Removal (not charged unless Owner-tenant fails to provide services himself) | \$ <u>billed amount</u> |

(Continued to Sheet No. 25.6)

Ray Moats
President of General Partner

WASTEWATER TARIFF

(Continued from Sheet No. 25.5)

| | |
|---|--|
| Late Check Charge after 5th day | \$ <u>1.50</u> per day |
| Bad Check Charge | \$ <u>15.00</u> |
| Extra Resident Fee | \$ <u>10.00</u> per person |
| Debris Removal | charged in accordance with Section VIII(K) of the Prospectus |
| Governmental Assessments, Fees, Surcharges, and Charges | charged in accordance with Section VIII(J) of the Prospectus |

The fees will be charged and increased as set out in Sections VIII(F) through (K) of the Prospectus. No services are included in the lot rental amount other than those services stated above.

10. The Community reserves the right to pass on and pass through charges in accordance with the Prospectus and Chapter 723, Florida Statutes.

11. Owner-tenant(s) acknowledge that they have read the foregoing, the Rules & Regulations, and the Prospectus, and that Owner-tenant was offered the foregoing Lease prior to occupancy.

We have read and understand this Agreement and agree to the terms set out herein.

WITNESS our hands and seals of the date set out above.

Owner-tenant

Community Representative

Owner-tenant

Ray Moats
President of General Partner

WASTEWATER TARIFF

COPY OF CUSTOMER'S BILL

HIDDEN GOLF CLUB
 P.O. BOX 5252 • LAKELAND, FL 33807
 BILLING INQUIRIES CALL 9-5 647-1581

FORWARDING & ADDRESS
 CORRECTION REQUESTED
 REQUEST UTILITY BILLING DEPT.

| TYPE OF SERVICE | METER READING | | USED | CHARGES |
|-----------------|---------------|----------|------|---------|
| | PRESENT | PREVIOUS | | |
| | | | | |

PLEASE BRING THIS ENTIRE BILL TO OFFICE
 OR MAIL THIS STUB WITH YOUR PAYMENT.

| CUSTOMER | | PAY GROSS AMOUNT AFTER THIS DATE |
|------------------------------|---------|-------------------------------------|
| ROUTE | ACCOUNT | |
| | | |
| NET AMOUNT TO BE PAID | | GROSS AMOUNT TO BE PAID |
| | | |

| METER READ | | CLASS | NET AMOUNT TO BE PAID | LATE FEE | GROSS AMOUNT TO BE PAID |
|------------|-----|-------|-----------------------|----------|-------------------------|
| MONTH | DAY | | | | |
| | | | | | |

SWISS GOLF AND TENNIS
 P.O. BOX 5252 • LAKELAND, FL 33807
 BILLING INQUIRIES CALL 9-5 647-1581

FORWARDING & ADDRESS
 CORRECTION REQUESTED
 REQUEST UTILITY BILLING DEPT.

| TYPE OF SERVICE | METER READING | | USED | CHARGES |
|-----------------|---------------|----------|------|---------|
| | PRESENT | PREVIOUS | | |
| | | | | |

PLEASE BRING THIS ENTIRE BILL TO OFFICE
 OR MAIL THIS STUB WITH YOUR PAYMENT.

| CUSTOMER | | PAY GROSS AMOUNT AFTER THIS DATE |
|------------------------------|---------|-------------------------------------|
| ROUTE | ACCOUNT | |
| | | |
| NET AMOUNT TO BE PAID | | GROSS AMOUNT TO BE PAID |
| | | |

| METER READ | | CLASS | NET AMOUNT TO BE PAID | LATE FEE | GROSS AMOUNT TO BE PAID |
|------------|-----|-------|-----------------------|----------|-------------------------|
| MONTH | DAY | | | | |
| | | | | | |

Ray Moats
 President of General Partner

WASTEWATER TARIFF

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Ray Moats
President of General Partner

CHC VII, LTD.

ORIGINAL SHEET NO. 28.0

WASTEWATER TARIFF

SERVICE AVAILABILITY POLICY

N/A

Ray Moats
President of General Partner

CHC VII, LTD.

ORIGINAL SHEET NO. 29.0

WASTEWATER TARIFF

HELD FOR FUTURE USE

Ray Moats
President of General Partner