

East Lake Harris Estates

Docket No. 060368-WS

Application to Increase Rates and Charges
For a "Class A" Utility
In

Florida

VOLUME 6

Book 7

Set 6 of 57

Containing
Additional Engineering Requirements

Monthly Operating Reports

CMP _____

COM _____

CTR _____

ECR 1 _____

GCL _____

OPC _____

RCA _____

SCR _____

SGA _____

SEC _____

OTH _____

Aqua Utilities Florida, Inc.

DOCUMENT NUMBER-DATE

00836 JAN 26 5

FPSC-COMMISSION CLEARING

Aqua Utilities Florida, Inc. Monthly Operating Reports

East Lake Harris Estates

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: January, 2005

A. Public Water System (PWS) Information

PWS Name: East Lake Harris Estates		PWS Identification Number: 3350322	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 172		Total Population Served at End of Month: 429	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaamerica.com			

B. Water Treatment Plant Information

Plant Name: East Lake Harris Estates		Plant Telephone Number: 352-787-0980			
Plant Address: 13319 Woodland Drive		City: Astatula	State: Florida		
		Zip Code: 34705			
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water					
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 144,000					
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C			
Licensed Operators		Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine		C	6813	Days 1st Shift
Other Operators:	Jim Milicic		C	8195	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 Plant Name: East Lake Harris Estates

III. Daily Data for the Month/Year of: January, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	39,000		1.5										
2		24.0	31,250												
3	X	24.0	31,250		1.4								1.0		
4	X	24.0	33,300		1.3								0.7		
5	X	24.0	37,200		1.2								1.0		
6	X	24.0	28,800		1.3								0.8		
7	X	24.0	29,700		1.2								0.7		
8	X	24.0	26,100		1.2										
9		24.0	34,100												
10	X	24.0	34,100		1.1								0.6		
11	X	24.0	26,000		1.1								0.5		
12	X	24.0	41,800		1.3								0.8		
13	X	24.0	31,900		1.4								0.8		
14	X	24.0			1.1								1.0		
15	X	24.0	23,200		1.3										
16		24.0	35,050												
17	X	24.0	35,050		1.4								0.8		
18	X	24.0	300		1.2								0.8		
19	X	24.0			1.2								0.7		
20	X	24.0	22,100		1.2								0.8		
21	X	24.0	26,600		1.2								0.8		
22	X	24.0	23,300		1.2										
23		24.0	26,600												
24	X	24.0	26,600		1.4								0.9		
25	X	24.0	23,700		1.1								0.7		
26	X	24.0	25,400		1.0								0.6		
27	X	24.0	19,900		1.3								0.8		
28	X	24.0	18,800		1.3								0.8		
29	X	24.0	17,100		1.3										
30		24.0	26,550												
31	X	24.0	26,550		1.2								0.7		
Total			801,300												
Average			25,848												
Maximum			41,800												

* Refer to the instructions for this report to determine which plants must provide this information.
 DEP Form 62-555 900(3)Alternate

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of:	February, 2005
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A. Public Water System (PWS) Information

PWS Name: East Lake Harris Estates		PWS Identification Number: 3350322	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 179		Total Population Served at End of Month: 358	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaamerica.com			

B. Water Treatment Plant Information

Plant Name: East Lake Harris Estates		Plant Telephone Number: 352-787-0980		
Plant Address: 13319 Woodland Drive		City: Astatula	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 144,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Jim Milicic	C	8195	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 Plant Name: East Lake Harris Estates February, 2005

III. Daily Data for the Month/Year of:

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm ²	Lowest UV Dose Required, mW-sec/cm ²	Minimum UV Dose System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	200	1.0									
2	X	17,900	24.0	1.4									0.7
3	X	21,200	24.0	1.3									0.8
4	X	16,500	24.0	1.3									0.6
5	X	17,000	24.0	1.3									
6		26,800	24.0										
7	X	26,800	24.0	1.3									0.7
8	X	20,900	24.0	1.2									0.7
9	X	26,800	24.0	1.2									0.8
10	X	24.0	24.0	1.0									0.8
11	X	20,400	24.0	1.4									0.7
12	X	18,200	24.0	1.3									
13		26,850	24.0										
14	X	26,850	24.0	1.4									0.8
15	X	20,400	24.0	1.4									1.0
16	X	20,800	24.0	1.2									0.8
17	X	21,800	24.0	1.3									0.9
18	X	22,800	24.0	1.2									0.7
19	X	20,500	24.0	1.4									
20		26,650	24.0										
21	X	26,650	24.0	1.2									1.0
22	X	24.0	24.0	1.1									0.9
23	X	20,600	24.0	1.3									1.0
24	X	13,000	24.0	1.4									0.9
25	X	26,900	24.0	1.3									0.8
26	X	21,800	24.0	1.3									
27		23,600	24.0										
28	X	23,600	24.0	1.4									0.9
29		24.0	24.0										
30		24.0	24.0										
31		24.0	24.0										
Total		555,500											
Average		17,919											
Maximum		26,900											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of:	March, 2005
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A. Public Water System (PWS) Information

PWS Name:	East Lake Harris Estates			PWS Identification Number:	3350322
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	179			Total Population Served at End of Month:	358
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquamerica.com				

B. Water Treatment Plant Information

Plant Name:	East Lake Harris Estates			Plant Telephone Number:	352-787-0980	
Plant Address:	13319 Woodland Drive	City:	Astatula	State:	Florida	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	144,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift		
Other Operators:	Jim Miljic	C	8195	Days 1st Shift		

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Will Fontaine	C-6813
	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 Plant Name: East Lake Harris Estates

III. Daily Data for the Month/Year of: March, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	X	24.0	17,300		1.4							0.8	
2	X	24.0	19,700		1.3							0.7	
3	X	24.0	14,100		1.3							0.7	
4	X	24.0	29,900		1.2							0.8	
5	X	24.0	19,300		1.3								
6		24.0	23,400										
7	X	24.0	23,400		1.3							0.7	
8	X	24.0			1.1							1.0	
9	X	24.0			1.0							0.8	
10	X	24.0	500		1.1							0.7	
11	X	24.0	200		1.0							0.8	
12	X	24.0			1.0								
13		24.0	150										
14	X	24.0	150		1.0							0.7	
15	X	24.0			1.1							0.8	
16	X	24.0	25,100		1.3							0.4	
17	X	24.0	19,800		1.4							1.0	
18	X	24.0	17,800		1.4							0.8	
19	X	24.0	10,900		1.3								
20		24.0	27,150										
21	X	24.0	27,150		1.4							0.8	
22	X	24.0	20,000		1.3							1.0	
23	X	24.0	21,400		1.3							0.8	
24	X	24.0	12,800		1.3							0.7	
25	X	24.0	19,100		1.3							1.0	
26	X	24.0	21,700		1.3								
27		24.0	20,950										
28	X	24.0	20,950		1.2							0.7	
29	X	24.0	29,700		1.2							0.8	
30	X	24.0	15,900		1.2							0.7	
31	X	24.0	21,200		1.2							0.7	
Total			479,700										
Average			15,474										
Maximum			29,900										

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: April, 2005

A. Public Water System (PWS) Information

PWS Name:	East Lake Harris Estates	PWS Identification Number:	3350322
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	179	Total Population Served at End of Month:	358
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
		Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaamerica.com		

B. Water Treatment Plant Information

Plant Name:	East Lake Harris Estates	Plant Telephone Number:	352-787-0980
Plant Address:	13319 Woodland Drive	City:	Astatula
		State:	Florida
		Zip Code:	34705
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	144,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	C
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Will Fontaine	C	6813
			Days 1st Shift
Other Operators:	Jim Milicic	C	8195
			Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	<u>Will Fontaine</u> Printed or Typed Name	<u>C-6813</u> License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 | Plant Name: East Lake Harris Estates

III. Daily Data for the Month/Year of: April, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²			
1	X	24.0	18,100		1.2									0.7	
2	X	24.0	16,500		1.3										
3		24.0	23,000												
4	X	24.0	23,000		1.2									0.7	
5	X	24.0	19,400		1.2									0.7	
6	X	24.0	19,000		1.2									0.7	
7	X	24.0	19,300		1.3									0.9	
8	X	24.0	17,300		1.3									0.9	
9	X	24.0	16,600		1.2										
10		24.0	28,750												
11	X	24.0	28,750		1.4									0.7	
12	X	24.0	28,000		1.3									1.0	
13	X	24.0	12,500		1.3									0.6	
14	X	24.0	27,500		1.3									0.8	
15	X	24.0	17,700		1.2									0.8	
16	X	24.0	15,000		1.3										
17		24.0	25,000												
18	X	24.0	25,000		1.3									0.9	
19	X	24.0	16,200		1.2									0.6	
20	X	24.0	23,900		1.1									0.8	
21	X	24.0	19,500		1.2									0.8	
22	X	24.0	19,100		1.0									0.7	
23	X	24.0	26,400		1.1										
24		24.0	23,300												
25	X	24.0	23,300		1.3									0.9	
26	X	24.0	20,500		1.3									1.0	
27	X	24.0	14,300		1.4									0.9	
28	X	24.0	19,000		1.3									0.8	
29	X	24.0	20,600		1.2									0.9	
30	X	24.0	17,900		1.3										
31		24.0													
Total			624,400												
Average			20,142												
Maximum			28,750												

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: May, 2005

A. Public Water System (PWS) Information

PWS Name:	East Lake Harris Estates			PWS Identification Number:	3350322
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	179			Total Population Served at End of Month:	358
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
				Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com				

B. Water Treatment Plant Information

Plant Name:	East Lake Harris Estates			Plant Telephone Number:	352-787-0980	
Plant Address:	13319 Woodland Drive	City:	Astatula	State:	Florida	
				Zip Code:	34705	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	144,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift		
Other Operators:	Jim Milicic	C	8195	Days 1st Shift		

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date

Will Fontaine
Printed or Typed Name

C-6813
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 Plant Name: East Lake Harris Estates

III. Daily Data for the Month/Year of: May, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1		24.0	18,950										
2	X	24.0	18,950		1.2							0.7	
3	X	24.0	15,100		1.4							0.9	
4	X	24.0	15,600		1.3							0.8	
5	X	24.0	9,600		1.4							0.8	
6	X	24.0	17,800		1.4							0.9	
7	X	24.0	7,400		1.3								
8		24.0	23,850										
9	X	24.0	23,850		1.3							0.8	
10	X	24.0	16,100		1.3							0.9	
11	X	24.0	15,700		1.4							0.8	
12	X	24.0	300		1.1							0.9	
13	X	24.0	300		1.2							1.0	
14	X	24.0	13,000		1.3								
15		24.0	19,350										
16	X	24.0	19,350		1.2							0.8	
17	X	24.0	1,100		1.1							0.9	
18	X	24.0	14,000		1.4							0.8	
19	X	24.0	21,200		1.4							1.0	
20	X	24.0	18,000		1.2							0.9	
21	X	24.0	14,000		1.3								
22		24.0	20,550										
23	X	24.0	20,550		1.3							0.8	
24	X	24.0	15,700		1.2							0.7	
25	X	24.0	16,500		1.2							0.8	
26	X	24.0	15,700		1.2							0.7	
27	X	24.0	15,000		1.2							0.8	
28	X	24.0	17,000		1.3								
29		24.0	23,600										
30	X	24.0	23,600		1.4							0.9	
31	X	24.0	24,600		1.5							0.8	
Total			496,300										
Average			16,010										
Maximum			24,600										

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: June, 2005

A. Public Water System (PWS) Information

PWS Name: East Lake Harris Estates		PWS Identification Number: 3350322	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 179		Total Population Served at End of Month: 358	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: East Lake Harris Estates		Plant Telephone Number: 352-787-0980		
Plant Address: 13319 Woodland Drive		City: Astatula	State: Florida Zip Code: 34705	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 144,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Jim Milicic	C	8195	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 Plant Name: East Lake Harris Estates

III. Daily Data for the Month/Year of: June, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	13,600		1.5									1.2	
2	X	24.0	14,800		1.5									1.0	
3	X	24.0	12,600		1.3									0.8	
4	X	24.0	8,000		1.3										
5		24.0	16,800												
6	X	24.0	16,800		1.1									0.5	
7	X	24.0	800		1.1									1.0	
8	X	24.0	15,600		1.2									0.9	
9	X	24.0	12,400		1.3									0.8	
10	X	24.0	12,000		1.2									0.7	
11	X	24.0	11,800		1.3										
12		24.0	15,200												
13	X	24.0	15,200		1.4									0.8	
14	X	24.0	11,000		1.4									0.6	
15	X	24.0	13,800		1.2									0.8	
16	X	24.0	16,400		1.2									0.7	
17	X	24.0	18,600		1.1									0.7	
18	X	24.0	11,000		1.2										
19		24.0	19,900												
20	X	24.0	19,900		1.3									0.6	
21	X	24.0	11,400		1.4									0.8	
22	X	24.0	19,200		1.4									0.9	
23	X	24.0	11,400		1.4									0.8	
24	X	24.0	12,800		1.5									1.0	
25	X	24.0	16,700		1.4										
26		24.0	19,000												
27	X	24.0	19,000		1.2									0.9	
28	X	24.0	9,700		1.3									0.8	
29	X	24.0	12,900		1.3									0.9	
30	X	24.0	8,700		1.4									0.8	
31		24.0													
Total			417,000												
Average			13,452												
Maximum			19,900												

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: July, 2005

A. Public Water System (PWS) Information

PWS Name:	East Lake Harris Estates			PWS Identification Number:	3350322
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	179			Total Population Served at End of Month:	358
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Lecsburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquamerica.com				

B. Water Treatment Plant Information

Plant Name:	East Lake Harris Estates			Plant Telephone Number:	352-787-0980
Plant Address:	13319 Woodland Drive	City:	Astatula	State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water			<input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	144,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked	
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift	
Other Operators:	Jim Milicic	C	8195	Days 1st Shift	

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 Plant Name: East Lake Harris Estates

III. Daily Data for the Month/Year of: July, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	X	24.0	17,000		1.4							0.8	
2		24.0	14,000										
3	X	24.0	14,000		1.5								
4	X	24.0	15,000		1.2							0.8	
5	X	24.0	22,000		1.2							0.8	
6	X	24.0	26,700		1.3							0.9	
7	X	24.0	14,600		1.2							0.7	
8	X	24.0	25,900		1.3							0.8	
9	X	24.0	11,600		1.3								
10		24.0	20,200										
11	X	24.0	20,200		1.1							0.5	
12	X	24.0	10,700		1.4							1.0	
13	X	24.0	14,500		1.6							1.2	
14	X	24.0	18,800		1.2							0.8	
15	X	24.0	8,400		1.0							0.6	
16	X	24.0	19,000		1.1								
17		24.0	18,950										
18	X	24.0	18,950		1.4							0.8	
19	X	24.0	100		1.1							0.4	
20	X	24.0	3,400		1.0							0.7	
21	X	24.0	400		1.3							0.8	
22	X	24.0	15,200		1.3							0.8	
23	X	24.0	23,600		1.3								
24		24.0	19,800										
25	X	24.0	19,800		1.2							0.5	
26	X	24.0	10,400		1.3							0.8	
27	X	24.0	17,000		1.3							0.8	
28	X	24.0	19,000		1.3							0.7	
29	X	24.0	17,700		1.3							0.8	
30	X	24.0	14,700		1.3								
31		24.0	19,850										
Total			491,450										
Average			15,853										
Maximum			26,700										

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: August, 2005

A. Public Water System (PWS) Information

PWS Name: East Lake Harris Estates		PWS Identification Number: 3350322	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 179		Total Population Served at End of Month: 358	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquamerica.com			

B. Water Treatment Plant Information

Plant Name: East Lake Harris Estates		Plant Telephone Number: 352-787-0980	
Plant Address: 13319 Woodland Drive		City: Astatula	State: Florida Zip Code: 34705
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 144,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813 Days 1st Shift
Other Operators:	Jim Milicic	C	8195 Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 Plant Name: East Lake Harris Estates

III. Daily Data for the Month/Year of: August, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations.					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²			
1	X	24.0	19,850		1.5									0.8	
2	X	24.0	13,900		1.1									0.6	
3	X	24.0	9,100		1.2									0.6	
4	X	24.0	13,300		1.2									0.8	
5	X	24.0	16,600		1.4									0.8	
6	X	24.0	17,400		1.3										
7		24.0	18,050												
8	X	24.0	18,050		1.4									0.8	
9	X	24.0	18,200		1.2									0.8	
10	X	24.0	17,500		1.4									0.8	
11	X	24.0	20,500		1.4									0.7	
12	X	24.0	17,700		1.3									0.7	
13	X	24.0	14,600		1.3										
14		24.0	18,250												
15	X	24.0	18,250		1.3									0.8	
16	X	24.0	300		1.1									0.6	
17	X	24.0	200		1.3									0.7	
18	X	24.0	2,000		1.0									0.5	
19	X	24.0	1,800		1.0									0.8	
20	X	24.0	200		1.0										
21		24.0	100												
22	X	24.0	100		1.0									0.7	
23	X	24.0	100		0.9									0.8	
24	X	24.0	300		1.3									0.7	
25	X	24.0	400		1.3									0.8	
26	X	24.0	300		1.3									0.7	
27	X	24.0	100		1.3										
28		24.0	150												
29	X	24.0	150		1.2									0.8	
30	X	24.0	100		1.0									0.7	
31	X	24.0	200		1.0									0.8	
Total			257,750												
Average			8,315												
Maximum			20,500												

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: September, 2005

A. Public Water System (PWS) Information

PWS Name: East Lake Harris Estates		PWS Identification Number: 3350322	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 179		Total Population Served at End of Month: 358	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: East Lake Harris Estates		Plant Telephone Number: 352-787-0980	
Plant Address: 13319 Woodland Drive		City: Astatula	State: Florida
		Zip Code: 34705	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 144,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Will Fontaine	C	6813
Other Operators:	Jim Milicic	C	8195

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identificaiton Number: 3350322 Plant Name: East Lake Harris Estates

III. Daily Data for the Month/Year of: September, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²			
1	X	24.0	200		1.0									0.8	
2	X	24.0	50		1.0									0.8	
3	X	24.0	50		1.0										
4		24.0	12,150												
5	X	24.0	12,150		1.3									0.6	
6	X	24.0	18,300		1.3									0.6	
7	X	24.0	16,300		1.2									0.7	
8	X	24.0	18,400		1.4									0.8	
9	X	24.0	16,900		1.4									1.0	
10	X	24.0	20,700		1.3										
11		24.0	19,800												
12	X	24.0	19,800		1.2									0.7	
13	X	24.0	18,300		1.2									0.8	
14	X	24.0	17,700		1.4									0.8	
15	X	24.0	17,900		1.4									0.8	
16	X	24.0	21,700		1.3									0.8	
17	X	24.0	15,800		1.3										
18		24.0	26,650												
19	X	24.0	26,650		1.2									0.8	
20	X	24.0	14,600		1.1									0.7	
21	X	24.0	17,000		1.4									0.6	
22	X	24.0	15,700		1.2									0.8	
23	X	24.0	22,600		1.5									1.0	
24	X	24.0	23,600		1.6										
25		24.0	17,700												
26	X	24.0	17,700		1.1									0.6	
27	X	24.0	5,700		1.2									1.0	
28	X	24.0	200		0.9									0.8	
29	X	24.0	200		1.1									0.7	
30	X	24.0	200		1.0									0.8	
31		24.0													
Total			434,700												
Average			14,023												
Maximum			26,650												

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: October, 2005

A. Public Water System (PWS) Information

PWS Name: East Lake Harris Estates		PWS Identification Number: 3350322	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 179		Total Population Served at End of Month: 358	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: East Lake Harris Estates		Plant Telephone Number: 352-787-0980	
Plant Address: 13319 Woodland Drive		City: Astatula	State: Florida
		Zip Code: 34705	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 144,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Will Fontaine	C	6813
Other Operators:	Jim Milicic	C	8195

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 Plant Name: East Lake Harris Estates

III. Daily Data for the Month/Year of: October, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	100		1.0										
2		24.0	100												
3	X	24.0	100		1.0									0.8	
4	X	24.0	100		1.0									0.8	
5	X	24.0	100		1.0									0.8	
6	X	24.0	100		1.0									0.7	
7	X	24.0	100		1.1									0.7	
8	X	24.0	25		1.1										
9		24.0	25												
10	X	24.0	50		1.0									0.6	
11	X	24.0	9,100		1.1									0.7	
12	X	24.0	100		1.5									1.4	
13	X	24.0	100		1.2									1.0	
14	X	24.0	200		1.0									0.9	
15	X	24.0	100		1.0										
16		24.0	200												
17	X	24.0	200		1.2									0.8	
18	X	24.0	100		1.1									0.8	
19	X	24.0	100		1.1									0.9	
20	X	24.0	100		1.0									0.8	
21	X	24.0	200		1.0									0.7	
22	X	24.0	200		1.1										
23		24.0	100												
24	X	24.0	100		1.0									0.8	
25	X	24.0	100		1.0									0.8	
26	X	24.0	4,500		1.3									0.9	
27	X	24.0	16,000		1.1									0.8	
28	X	24.0	50		1.2									0.8	
29	X	24.0	50		1.2										
30		24.0	50												
31	X	24.0	50		1.1									0.8	
Total			32,500												
Average			1,048												
Maximum			16,000												

* Refer to the instructions for this report to determine which plants must provide this information

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: November, 2005

A. Public Water System (PWS) Information

PWS Name:	East Lake Harris Estates			PWS Identification Number:	3350322	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	179			Total Population Served at End of Month:	358	
PWS Owner:	Aqua Utilities Florida					
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager	
Contact Person's Mailing Address:	PO Box 490310		City:	Lecsburg	State:	Florida
			Zip Code:	34749		
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333	
Contact Person's E-Mail Address:	beheath@aquaamerica.com					

B. Water Treatment Plant Information

Plant Name:	East Lake Harris Estates			Plant Telephone Number:	352-787-0980	
Plant Address:	13319 Woodland Drive		City:	Astatula	State:	Florida
			Zip Code:	34705		
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water				

Permitted Maximum Day Operating Capacity of Plant, gallons per day:	144,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):		C
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift		
Other Operators:	Jim Milicic	C	8195	Days 1st Shift		

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

 Signature and Date

 Will Fontaine
 Printed or Typed Name

 C-6813
 License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322	Plant Name: East Lake Harris Estates
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III. Daily Data for the Month/Year of: November, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	X	24.0	300		0.9							0.7	
2	X	24.0	500		1.4							0.8	
3	X	24.0	7,000		1.2							0.9	
4	X	24.0	100		1.3							0.9	
5	X	24.0	100		1.3								
6		24.0	100										
7	X	24.0	100		1.3							1.0	
8	X	24.0	300		1.3							1.0	
9	X	24.0	200		1.2							0.8	
10	X	24.0	200		1.1							0.8	
11	X	24.0	200		1.1							0.8	
12	X	24.0	400		1.1								
13		24.0	150										
14	X	24.0	150		1.1							0.8	
15	X	24.0	200		1.3							0.9	
16	X	24.0	100		1.2							0.8	
17	X	24.0	200		1.0							1.0	
18	X	24.0	200		1.1							1.0	
19	X	24.0	300		1.1								
20		24.0	300										
21	X	24.0	300		1.2							0.9	
22	X	24.0	100		1.1							0.8	
23	X	24.0	100		1.2							0.8	
24	X	24.0	100		1.3							0.8	
25	X	24.0	100		1.3							0.9	
26	X	24.0	100		1.3								
27		24.0	100										
28	X	24.0	100		1.4							1.0	
29	X	24.0	200		1.4							1.0	
30	X	24.0	100		1.2							0.9	
31		24.0											
Total			12,400										
Average			400										
Maximum			7,000										

* Refer to the instructions for this report to determine which plants must provide this information.

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



Polymer Page 3 Due in December

See Pages 4 for Instructions.

I. General Information for the Month/Year of: December, 2005

A. Public Water System (PWS) Information

PWS Name:	East Lake Harris Estates			PWS Identification Number:	3350322
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	179			Total Population Served at End of Month:	358
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
				Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaamerica.com				

B. Water Treatment Plant Information

Plant Name:	East Lake Harris Estates			Plant Telephone Number:	352-787-0980
Plant Address:	13319 Woodland Drive			City:	Astatula
		State:	Florida	Zip Code:	34705
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	144,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	
				C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked	
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift	
Other Operators:	Jim Milicic	C	8195	Days 1st Shift	

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date

Will Fontaine

Printed or Typed Name

C-6813

License Number

MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number 3350322 Plant Name: East Lake Harris Estates

III. Daily Data for the Month/year of: December, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) at C Measurement Point During Peak Flow, minutes	Disinfectant Contact Time Before or at Lowest CT	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Remote Point in Distribution System, mg/L	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*		UV Dose	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
												CT Calculations	UV Dose			
1	X	24.0	300	1.2											0.9	
2	X	24.0	100	1.1											0.9	
3	X	24.0	100	1.1												
4		24.0	100													
5	X	24.0	100	1.2											0.9	
6	X	24.0	17,100	1.2											0.9	
7	X	24.0	18,800	1.3											0.9	
8	X	24.0	20,000	1.3											1.0	
9	X	24.0	16,300	1.2											0.8	
10	X	24.0	10,000	1.3												
11		24.0	23,000													
12	X	24.0	23,000	1.5											1.1	
13	X	24.0	18,000	1.3											1.0	
14	X	24.0	17,000	1.3											1.0	
15	X	24.0	17,000	1.3											1.0	
16	X	24.0	10,300	1.4											1.1	
17	X	24.0	21,000	1.3												
18		24.0	19,500													
19	X	24.0	19,500	1.3											1.1	
20	X	24.0	18,500	1.5											1.1	
21	X	24.0	19,000	1.5											1.1	
22	X	24.0	200	1.4											1.1	
23	X	24.0	100	1.3											1.1	
24	X	24.0	200	1.3												
25		24.0	100													
26	X	24.0	100	1.2											1.1	
27	X	24.0	300	1.3											1.0	
28	X	24.0	100	1.3											1.0	
29	X	24.0	100	1.3											1.0	
30	X	24.0	200	1.2											1.1	
31	X	24.0	100	1.3												
Total			290,200													
Average			9,361													
Maximum			23,000													

* Refer to the instructions for this report to determine which plants must provide this information
 DEP Form 62-555 9003/Alternate

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: January, 2004

A. Public Water System (PWS) Information

PWS Name: East Lake Harris Estates		PWS Identification Number: 3350322	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 173		Total Population Served at End of Month: 431	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
		Zip Code: 32860-9520	
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: East Lake Harris Estates		Plant Telephone Number: 352-787-0980	
Plant Address: 13319 Woodland Drive		City: Astatula	State: Florida
		Zip Code: 34705	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 144,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Brian Heath	C	5825	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift
	Gary Kissick	C	7846	Days 1st Shift
	Mike Ponticelli	C	8450	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

2/9/2004 0:00	Will Fontaine	C-6813
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 Plant Name: East Lake Harris Estates January, 2004

III. Daily Data for the Month Year of:

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Peak Flow, mg/L	Customer During First Disinfectant Concentration (C) at C	Measurement (T) at C	Contact Time Before or at Customer	Disinfectant Provided Before or at Customer	Lowest CT During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm ²	Lowest UV Dose Required, mW-sec/cm ²	Remote Point in Distribution	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, If Applicable*			
																		UV Dose	CT Calculations	UV Dose	
1	X		24,100	24.0	1.4																
2	X		23,100	24.0	1.4																1.0
3	X		22,900	24.0	1.4																
4			22,000	24.0																	
5	X		22,000	24.0	1.5																1.1
6	X		20,800	24.0	1.3																0.9
7	X		11,600	24.0	1.4																1.0
8	X		19,000	24.0	1.4																1.0
9	X		22,300	24.0	1.3																0.9
10	X		18,800	24.0	1.2																
11			150	24.0																	
12	X		150	24.0	1.2																1.0
13	X		300	24.0	1.3																1.0
14	X		23,400	24.0	1.5																1.1
15	X		27,400	24.0	1.2																1.0
16	X		26,400	24.0	1.3																1.0
17	X		31,500	24.0	1.5																
18			20,650	24.0																	
19	X		20,650	24.0	1.3																1.0
20	X		22,200	24.0	1.5																0.5
21	X		16,300	24.0	1.4																1.0
22	X		25,200	24.0	1.4																0.9
23	X		23,200	24.0	1.2																1.0
24	X		20,100	24.0	1.4																
25			23,750	24.0																	
26	X		23,750	24.0	1.3																1.0
27	X		19,500	24.0	1.3																1.0
28	X		22,600	24.0	1.4																1.1
29	X		22,200	24.0	1.5																1.0
30	X		23,700	24.0	1.7																1.1
31	X		25,500	24.0	1.7																
Total			625,200																		
Average			20,168																		
Maximum			31,500																		

* Refer to the instructions for this report to determine which plants must provide this information

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: February, 2004

A. Public Water System (PWS) Information

PWS Name:	East Lake Harris Estates			PWS Identification Number:	3350322
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	174			Total Population Served at End of Month:	434
PWS Owner:	Florida Water Services				
Contact Person:	Craig Anderson			Contact Person's Title:	VP Environmental Services
Contact Person's Mailing Address:	P.O. Box 609520		City:	Orlando	State: Florida Zip Code: 32860-9520
Contact Person's Telephone Number:	(407) 598-4199			Contact Person's Fax Number:	(407) 598-4217
Contact Person's E-Mail Address:	craig@florida-water.com				

B. Water Treatment Plant Information

Plant Name:	East Lake Harris Estates			Plant Telephone Number:	352-787-0980
Plant Address:	13319 Woodland Drive		City:	Astatula	State: Florida Zip Code: 34705
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	144,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked	
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift	
Other Operators:	Brian Heath	C	5825	Days 1st Shift	
	John Worrell	C	6597	Days 1st Shift	
	Gary Kissick	C	7846	Days 1st Shift	
	Mike Ponticelli	C	8450	Days 1st Shift	

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

3/9/2004 0:00
Signature and Date

Will Fontaine
Printed or Typed Name

C-6813
License Number

MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 Plant Name: East Lake Harris Estates February, 2004

III. Daily Data for the Month/year of:

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Measurement (T) at C Before or at First Customer During Peak Flow, mg-minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*	
													UV Dose	UV Dose
1	X	24,0	25,150	1.5	1.5	1.5								
2	X	24,0	22,300	1.5	1.5	1.5								
3	X	24,0	22,300	1.5	1.5	1.5								
4	X	24,0	19,800	1.5	1.5	1.5								
5	X	24,0	27,600	1.4	1.4	1.4								
6	X	24,0	21,000	1.5	1.5	1.5								
7	X	24,0	22,700	1.4	1.4	1.4								
8	X	24,0	22,700	1.4	1.4	1.4								
9	X	24,0	21,800	1.4	1.4	1.4								
10	X	24,0	30,400	1.5	1.5	1.5								
11	X	24,0	21,800	1.5	1.5	1.5								
12	X	24,0	24,900	1.2	1.2	1.3								
13	X	24,0	22,100	1.3	1.3	1.4								
14	X	24,0	26,300	1.4	1.4	1.5								
15		24,0	21,050											
16	X	24,0	21,050	1.5	1.5	1.5								
17	X	24,0	26,400	1.5	1.5	1.4								
18	X	24,0	18,200	1.4	1.4	1.4								
19	X	24,0	25,500	1.4	1.4	1.4								
20	X	24,0	22,400	1.4	1.4	1.4								
21	X	24,0	26,300	1.5	1.5	1.5								
22		24,0	25,050											
23	X	24,0	25,050	1.5	1.5	1.5								
24	X	24,0	22,800	1.5	1.5	1.4								
25	X	24,0	17,600	1.4	1.4	1.4								
26	X	24,0	21,700	1.4	1.4	1.4								
27	X	24,0	21,800	1.6	1.6	1.6								
28	X	24,0	18,200	1.5	1.5	1.5								
29		24,0	27,150											
		Total	673,950											
		Average	23,240											
		Maximum	30,400											

* Refer to the instructions for this report to determine which plants must provide this information

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: March, 2004

A. Public Water System (PWS) Information

PWS Name: East Lake Harris Estates		PWS Identification Number: 3350322	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 172		Total Population Served at End of Month: 429	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: East Lake Harris Estates		Plant Telephone Number: 352-787-0980	
Plant Address: 13319 Woodland Drive		City: Astatula	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 144,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Will Fontaine	C	6813
Other Operators:	Brian Heath	C	5825
	John Worrell	C	6597
	Gary Kissick	C	7846
	Adam Michaelsen		Trainee

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

4/8/2004 0:00	Will Fontaine	C-6813
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

3350322 Plant Name: East Lake Harris Estates

III. Daily Data for the Month/Year of: March, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	18,100		1.5								1.1	
2	X	24.0	30,500		1.5								1.1	
3	X	24.0	24,300		1.4								1.1	
4	X	24.0	33,100		1.4								1.0	
5	X	24.0	25,000		1.5								1.1	
6		24.0	23,650											
7	X	24.0	23,650		1.4									
8	X	24.0	28,500		1.5								1.0	
9	X	24.0	26,800		1.4								1.0	
10	X	24.0	18,000		1.4								1.0	
11	X	24.0	24,000		1.4								1.0	
12	X	24.0	21,200		1.5								1.1	
13	X	24.0	22,900		1.4									
14		24.0	24,300											
15	X	24.0	24,300		1.4								1.0	
16	X	24.0	18,600		1.4								0.9	
17	X	24.0	18,200		1.4								1.0	
18	X	24.0	19,300		1.5								1.0	
19	X	24.0	26,800		1.5								1.0	
20	X	24.0	19,900		1.5									
21		24.0	30,400											
22	X	24.0	30,400		1.5								1.0	
23	X	24.0	22,200		1.5								1.0	
24	X	24.0	22,500		1.4								1.0	
25	X	24.0	21,800		1.4								0.9	
26	X	24.0	21,800		1.3								0.9	
27	X	24.0	16,600		1.3									
28		24.0	28,000											
29	X	24.0	28,000		1.3								0.9	
30	X	24.0	26,000		1.3								0.9	
31	X	24.0	22,400		1.4								1.0	
Total			741,200											
Average			23,910											
Maximum			33,100											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: April, 2004

A. Public Water System (PWS) Information

PWS Name:	East Lake Harris Estates	PWS Identification Number:	3350322
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	173	Total Population Served at End of Month:	431
PWS Owner:	Florida Water Services		
Contact Person:	Craig Anderson	Contact Person's Title:	VP Environmental Services
Contact Person's Mailing Address:	P.O. Box 609520	City:	Orlando
		State:	Florida
Contact Person's Telephone Number:	(407) 598-4199	Zip Code:	32860-9520
Contact Person's E-Mail Address:	craig@florida-water.com	Contact Person's Fax Number:	(407) 598-4217

B. Water Treatment Plant Information

Plant Name:	East Lake Harris Estates	Plant Telephone Number:	352-787-0980
Plant Address:	13319 Woodland Drive	City:	Astatula
		State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	144,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Brian Heath	C	5825	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift
	Gary Kissick	C	7846	Days 1st Shift
	Adam Michaelsen		Trainee	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date: 5/7/2004 0:00 Printed or Typed Name: Will Fontaine License Number: C-6813

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identificaiton Number: 3350322 Plant Name: East Lake Harris Estates

III. Daily Data for the Month/Year of: April, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	20,000		1.4								1.0	
2	X	24.0	29,400		1.3								0.9	
3	X	24.0	21,600		1.5									
4		24.0	26,250											
5	X	24.0	26,250		1.4								1.0	
6	X	24.0	20,600		1.4								1.0	
7	X	24.0	18,100		1.3								1.0	
8	X	24.0	22,000		1.4								0.9	
9	X	24.0	20,500		1.3								0.9	
10	X	24.0	24,300		1.5									
11		24.0	25,850											
12	X	24.0	25,850		1.3								0.9	
13	X	24.0	17,300		1.3								0.9	
14	X	24.0	15,700		1.2								0.9	
15	X	24.0	20,200		1.2								0.8	
16	X	24.0	17,800		1.2								0.9	
17	X	24.0	16,800		1.4									
18		24.0	23,850											
19	X	24.0	23,850		1.4								1.0	
20	X	24.0	18,500		1.4								1.0	
21	X	24.0	14,700		1.3								0.9	
22	X	24.0	26,700		1.3								0.9	
23	X	24.0	26,500		1.4								0.9	
24	X	24.0	17,100		1.5									
25		24.0	20,950											
26	X	24.0	20,950		1.3								0.8	
27	X	24.0	19,600		1.2								0.8	
28	X	24.0	14,200		1.4								0.8	
29	X	24.0	21,700		1.2								0.9	
30	X	24.0	17,000		1.2								0.9	
Total			634,100											
Average			21,137											
Maximum			29,400											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: May, 2004

A. Public Water System (PWS) Information

PWS Name:	East Lake Harris Estates	PWS Identification Number:	3350322
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	170	Total Population Served at End of Month:	424
PWS Owner:	Florida Water Services		
Contact Person:	Craig Anderson	Contact Person's Title:	VP Environmental Services
Contact Person's Mailing Address:	P.O. Box 609520	City:	Orlando
		State:	Florida
		Zip Code:	32860-9520
Contact Person's Telephone Number:	(407) 598-4199	Contact Person's Fax Number:	(407) 598-4217
Contact Person's E-Mail Address:	craig@florida-water.com		

B. Water Treatment Plant Information

Plant Name:	East Lake Harris Estates	Plant Telephone Number:	352-787-0980
Plant Address:	13319 Woodland Drive	City:	Astatula
		State:	Florida
		Zip Code:	34705
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	144,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Brian Heath	C	5825	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift
	Gary Kissick	C	7846	Days 1st Shift
	Adam Michaelsen		Trainee	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date 6/8/2004 0:00

Printed or Typed Name Will Fontaine

License Number C-6813

MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 Plant Name: East Lake Harris Estates May, 2004

III. Daily Data for the Month/Year of:

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Visited or Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Measurement Point During Peak Flow, mg/L.	Disinfectant Contact Time Before or at First Customer During Peak Flow, minutes.	Lowest CT During Peak Flow, mg-min/L.	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L.	Lowest Operating UV Dose, mW-sec/cm ² .	Minimum UV Dose Required, mW-sec/cm ² .	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L.	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation.
1	X	19,600	24.0	1.6									
2		22,150	24.0	1.5									
3	X	24.0	22,150	1.5									
4	X	1,800	24.0	1.4									
5	X	18,800	24.0	1.4									
6	X	16,200	24.0	1.4									
7	X	19,100	24.0	1.6									
8	X	17,000	24.0	1.4									
9		21,500	24.0										
10	X	21,500	24.0	1.4									
11	X	17,000	24.0	1.4									
12	X	13,800	24.0	1.4									
13	X	18,500	24.0	1.3									
14	X	17,800	24.0	1.3									
15	X	18,300	24.0	1.5									
16		25,000	24.0										
17	X	25,000	24.0	1.4									
18	X	14,300	24.0	1.5									
19	X	16,700	24.0	1.4									
20	X	21,500	24.0	1.5									
21	X	24,500	24.0	1.5									
22	X	36,100	24.0	1.5									
23		28,350	24.0										
24	X	28,350	24.0	1.5									
25	X	21,000	24.0	1.5									
26	X	14,700	24.0	1.4									
27	X	25,000	24.0	1.4									
28	X	18,300	24.0	1.3									
29	X	25,500	24.0	1.6									
30		33,000	24.0										
31	X	33,000	24.0	1.3									
		Total	655,500										
		Average	21,145										
		Maximum	36,100										

* Refer to the instructions for this report to determine which plants must provide this information. DEP Form 62-555 900(3) Alternate

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: June, 2004

A. Public Water System (PWS) Information

PWS Name: East Lake Harris Estates		PWS Identification Number: 3350322	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 172		Total Population Served at End of Month: 429	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
		Zip Code: 32860-9520	
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: East Lake Harris Estates		Plant Telephone Number: 352-787-0980	
Plant Address: 13319 Woodland Drive		City: Astatula	State: Florida
		Zip Code: 34705	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 144,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Will Fontaine	C	6813
Other Operators:	Brian Heath	C	5825
	John Worrell	C	6597
	Gary Kissick	C	7846

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 | Plant Name: East Lake Harris Estates | June, 2004

III. Daily Data for the Month/year of: June, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Started or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Disinfectant Residual	Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant (T) at C Measurement Point During Peak Flow, mg/L	Lowest CT Before or at Customer During Peak Flow, mg-minutes	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg/L	UV Dose, mW-sec/cm ²	Lowest UV Dose Required, mW-sec/cm ²	System, mg/L	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, If Applicable*		UV Dose
														CT Calculations	UV Dose	

Month	Day of the Month	Peak Flow	Rate, gpd	Disinfectant Residual	Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant (T) at C Measurement Point During Peak Flow, mg/L	Lowest CT Before or at Customer During Peak Flow, mg-minutes	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg/L	UV Dose, mW-sec/cm ²	Lowest UV Dose Required, mW-sec/cm ²	System, mg/L	Total	Average	Maximum
	1	X	24,200	24,0	14	14	14						1.0	613,400	20,447	32,000
	2	X	21,300	24,0	14	14	14						1.0			
	3	X	21,700	24,0	13	13	13					0.9				
	4	X	15,200	24,0	13	13	13					1.0				
	5	X	15,900	24,0	14	14	14									
	6		18,350	24,0	14	14	14					1.0				
	7	X	18,350	24,0	14	14	14					1.0				
	8	X	13,700	24,0	14	14	14					1.0				
	9	X	17,700	24,0	13	13	13					0.9				
	10	X	15,300	24,0	13	13	13					1.0				
	11	X	24,700	24,0	13	13	13					0.9				
	12	X	15,900	24,0	13	13	13									
	13		21,650	24,0	14	14	14					1.0				
	14	X	21,650	24,0	14	14	14					1.0				
	15	X	25,100	24,0	14	14	14					1.0				
	16	X	19,900	24,0	15	15	15					0.9				
	17	X	26,600	24,0	14	14	14					1.1				
	18	X	18,800	24,0	14	14	14									
	19		23,000	24,0	15	15	15					1.0				
	20	X	23,000	24,0	14	14	14					1.0				
	21	X	19,900	24,0	14	14	14					1.0				
	22	X	32,000	24,0	14	14	14					1.0				
	23	X	15,700	24,0	13	13	13					1.0				
	24	X	23,000	24,0	13	13	13					1.1				
	25	X	20,000	24,0	14	14	14									
	26	X	19,600	24,0	16	16	16									
	27		20,000	24,0												
	28	X	20,000	24,0	14	14	14					1.0				
	29	X	15,500	24,0	14	14	14					1.0				
	30	X	25,700	24,0	13	13	13					0.9				

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: July, 2004

A. Public Water System (PWS) Information

PWS Name:	East Lake Harris Estates			PWS Identification Number:	3350322
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	172			Total Population Served at End of Month:	429
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	2315 Griffin Rd	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-0980
Contact Person's E-Mail Address:	beheath@aquaamerica.com				

B. Water Treatment Plant Information

Plant Name:	East Lake Harris Estates			Plant Telephone Number:	352-787-0980	
Plant Address:	13319 Woodland Drive			City:	Astatula	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water			<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	144,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators:	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift		
Other Operators:	Brian Heath	C	5825	Days 1st Shift		
	John Worrell	C	6597	Days 1st Shift		

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

_____ Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 Plant Name: East Lake Harris Estates July, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Started or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L.	Disinfectant Contact Time (T) at C	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L.	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg-min/L.	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration in Distribution System, mg/L.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*	
													UV Dose	CT Calculations
1	X	24.0	17,100	1.3								0.8		
2	X	27,700	24.0	1.4								0.9		
3	X	24,400	24.0	1.4										
4		16,600	24.0	1.4										
5	X	16,600	24.0	1.4								1.0		
6	X	18,000	24.0	1.4								1.0		
7	X	19,200	24.0	1.3								0.9		
8	X	23,000	24.0	1.3								0.9		
9	X	25,500	24.0	1.4								0.9		
10	X	12,600	24.0	1.4										
11		22,500	24.0	1.4										
12	X	22,500	24.0	1.4								1.1		
13	X	8,400	24.0	1.3								1.0		
14	X	18,900	24.0	1.3								1.0		
15	X	14,500	24.0	1.5								1.1		
16	X	22,700	24.0	1.5								1.1		
17	X	12,600	24.0	1.5										
18		18,600	24.0	1.5										
19	X	18,600	24.0	1.5								1.1		
20	X	14,000	24.0	1.5								1.1		
21	X	24,100	24.0	1.6								1.1		
22	X	17,700	24.0	1.5								1.0		
23	X	13,000	24.0	1.5								1.1		
24	X	17,000	24.0	1.5										
25		24,700	24.0	1.5										
26	X	24,700	24.0	1.5								1.1		
27	X	12,200	24.0	1.5								1.2		
28	X	23,000	24.0	1.4								1.0		
29	X	17,000	24.0	1.4								1.0		
30	X	18,000	24.0	1.4								1.0		
31	X	16,700	24.0	1.4								1.1		
Total		582,100												
Average		18,777												
Maximum		27,700												

* Refer to the instructions for this report to determine which plants must provide this information.

DEP Form 62-555 900(3) Alternate

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: August, 2004

A. Public Water System (PWS) Information

PWS Name: East Lake Harris Estates		PWS Identification Number: 3350322	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 172		Total Population Served at End of Month: 429	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 2315 Griffin Rd		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34748	
Contact Person's E-Mail Address: beheath@aquaamerica.com		Contact Person's Fax Number: (352) 787-0980	

B. Water Treatment Plant Information

Plant Name: East Lake Harris Estates		Plant Telephone Number: 352-787-0980	
Plant Address: 13319 Woodland Drive		City: Astatula	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 34705	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 144,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Brian Heath	C	5825	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 Plant Name: East Lake Harris Estates August, 2004

III. Daily Data for the Month/Year of:

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Staffed or Visted by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Measurement	Contact Time (T) at C	Disinfectant Provided Before or at First Customer Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Required UV Dose, mW-sec/cm ²	Minimum Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*	
													UV Dose	UV Dose
1	X	22,000	24.0											
2	X	22,000	24.0											
3	X	23,400	24.0											
4	X	17,500	24.0											
5	X	24,500	24.0											
6	X	15,800	24.0											
7	X	25,500	24.0											
8		26,750	24.0											
9	X	26,750	24.0											
10	X	17,700	24.0											
11	X	24,800	24.0											
12	X	14,600	24.0											
13	X	25,400	24.0											
14	X	16,000	24.0											
15		27,350	24.0											
16	X	27,350	24.0											
17	X	18,400	24.0											
18	X	26,200	24.0											
19	X	17,600	24.0											
20	X	21,700	24.0											
21	X	28,400	24.0											
22		24,050	24.0											
23	X	24,050	24.0											
24	X	20,100	24.0											
25	X	23,800	24.0											
26	X	25,500	24.0											
27	X	23,200	24.0											
28	X	18,300	24.0											
29		30,850	24.0											
30	X	30,850	24.0											
31	X	25,000	24.0											
Total		715,400												
Average		23,077												
Maximum		30,850												

* Refer to the instructions for this report to determine which plants must provide this information

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: September, 2004

A. Public Water System (PWS) Information

PWS Name:	East Lake Harris Estates			PWS Identification Number:	3350322
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	172			Total Population Served at End of Month:	429
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	2315 Griffin Rd	City:	Leesburg	State:	Florida
				Zip Code:	34748
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-0980
Contact Person's E-Mail Address:	beheath@aquaamerica.com				

B. Water Treatment Plant Information

Plant Name:	East Lake Harris Estates			Plant Telephone Number:	352-787-0980	
Plant Address:	13319 Woodland Drive	City:	Astatula	State:	Florida	
				Zip Code:	34705	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	144,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift		
Other Operators:	Jim Milicic	C	8195	Days 1st Shift		

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 Plant Name: East Lake Harris Estates

III. Daily Data for the Month/Year of: September, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	X	24.0	28,500		1.5							1.1	
2	X	24.0	27,500		1.5							1.1	
3	X	24.0	21,200		1.5							1.1	
4	X	24.0	17,200		1.5								
5		24.0	17,350										
6	X	24.0	17,350		1.6							1.0	
7	X	24.0	26,100		1.4							1.0	
8	X	24.0	18,300		1.4							1.0	
9	X	24.0	23,800		1.5							1.1	
10	X	24.0	23,000		1.5							1.1	
11	X	24.0	17,000		1.5								
12		24.0	24,400										
13	X	24.0	24,400		1.4							1.0	
14	X	24.0	19,000		1.8							0.4	
15	X	24.0	31,300		1.5							0.3	
16	X	24.0	22,000		1.1							0.5	
17	X	24.0	25,700		1.3							0.5	
18	X	24.0	22,100		1.4								
19		24.0	23,800										
20	X	24.0	23,800		1.2							0.4	
21	X	24.0	18,900		1.2							0.8	
22	X	24.0	20,300		1.4							0.7	
23	X	24.0	19,800		1.5							0.9	
24	X	24.0			1.1							0.6	
25	X	24.0	16,100		1.5								
26		24.0	17,200										
27	X	24.0	17,200		1.5							0.6	
28	X	24.0	24,700		1.5							1.0	
29	X	24.0	25,500		1.2							0.7	
30	X	24.0											
31		24.0											
Total			613,500										
Average			19,790										
Maximum			31,300										

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: October, 2004

A. Public Water System (PWS) Information

PWS Name: East Lake Harris Estates		PWS Identification Number: 3350322	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 172		Total Population Served at End of Month: 429	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 2315 Griffin Rd		City: Leesburg	State: Florida Zip Code: 34748
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: East Lake Harris Estates		Plant Telephone Number: 352-787-0980	
Plant Address: 13319 Woodland Drive		City: Astatula	State: Florida Zip Code: 34705
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 144,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813 Days 1st Shift
Other Operators:	Jim Milicic	C	8195 Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 Plant Name: East Lake Harris Estates October, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

CT Calculations, or UV Dose, to Demostatate Four-Log Virus Inactivation, if Applicable*
 CT Calculations
 Lowest Residual Disinfectant Provided Before or at First Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, mg-min/L
 Temp of Water, °C if Applicable
 pH of Water
 Minimum CT Required, mg-min/L
 Lowest Operating UV Dose, mW-sec/cm²
 Minimum UV Dose Required, mW-sec/cm²
 Lowest Residual Disinfectant Concentration at Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
 Remote Point in Distribution System, mg/L
 0.8

Day of the Month	Days of Operator Visited by Operator ("X")	Hours in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Measurement Point During Peak Flow, mg-min/L	Temp of Water, °C if Applicable	pH of Water	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	Remote Point in Distribution System, mg/L	Average		Total
														23,435	36,500	
1	X	24.0	22,300	24.0	1.2											22,000
2	X	24.0	20,500	24.0	1.2											21,500
3		24.0	30,350	24.0	1.2											29,600
4	X	24.0	30,350	24.0	1.3											29,600
5	X	24.0	36,500	24.0	1.2											23,800
6	X	24.0	27,600	24.0	1.2											23,800
7	X	24.0	24,800	24.0	1.3											23,800
8	X	24.0		24.0	0.9											15,500
9	X	24.0	19,300	24.0	1.3											28,100
10		24.0	30,150	24.0	0.9											28,100
11	X	24.0	30,150	24.0	0.9											28,100
12	X	24.0	2,100	24.0	0.9											28,100
13	X	24.0	27,800	24.0	1.0											28,100
14	X	24.0	19,900	24.0	1.6											28,100
15	X	24.0	26,100	24.0	1.5											28,100
16	X	24.0	12,100	24.0	1.4											28,100
17		24.0	29,450	24.0	1.2											28,100
18	X	24.0	29,450	24.0	1.2											28,100
19	X	24.0	19,500	24.0	1.3											28,100
20	X	24.0	24,300	24.0	1.5											28,100
21	X	24.0	18,800	24.0	1.4											28,100
22	X	24.0	27,600	24.0	1.4											28,100
23	X	24.0	14,800	24.0	1.2											28,100
24		24.0	28,100	24.0												28,100
25	X	24.0	28,100	24.0	1.3											28,100
26	X	24.0	15,500	24.0	1.4											28,100
27	X	24.0	23,800	24.0	1.2											28,100
28	X	24.0	34,000	24.0	1.1											28,100
29	X	24.0	29,600	24.0	1.2											28,100
30	X	24.0	21,500	24.0	1.3											28,100
31		24.0	22,000	24.0												28,100
														23,435	36,500	726,500

* Refer to the instructions for this report to determine which plants must provide this information

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: November, 2004

A. Public Water System (PWS) Information

PWS Name: East Lake Harris Estates		PWS Identification Number: 3350322	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 172		Total Population Served at End of Month: 429	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 2315 Griffin Rd		City: Leesburg	State: Florida Zip Code: 34748
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-0980	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: East Lake Harris Estates		Plant Telephone Number: 352-787-0980		
Plant Address: 13319 Woodland Drive		City: Astatula	State: Florida Zip Code: 34705	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 144,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators:	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Jim Milicic	C	8195	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 Plant Name: East Lake Harris Estates

III. Daily Data for the Month/Year of: November, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out-of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	56,100		1.6									1.2	
2	X	24.0	26,400		1.3									0.8	
3	X	24.0	25,300		1.2									0.6	
4	X	24.0	22,900		1.1									0.6	
5	X	24.0	24,800		1.2									0.8	
6	X	24.0	19,300		1.2										
7		24.0	31,150												
8	X	24.0	31,150		1.1									0.6	
9	X	24.0	22,500		1.3									0.8	
10	X	24.0	18,500		1.4									0.8	
11	X	24.0	6,200		1.3									0.8	
12	X	24.0	28,000		1.3									0.8	
13	X	24.0	21,500		1.3										
14		24.0	26,600												
15	X	24.0	26,600		1.3									0.9	
16	X	24.0			1.0									0.6	
17	X	24.0	20,600		1.3									0.6	
18	X	24.0	30,700		1.2									0.8	
19	X	24.0	20,700		1.2									0.8	
20	X	24.0	18,500		1.2										
21		24.0	28,250												
22	X	24.0	28,250		1.2									0.8	
23	X	24.0	23,200		1.2									0.8	
24	X	24.0	21,300		1.3									0.8	
25	X	24.0	30,100		1.3									0.9	
26	X	24.0	31,300		1.2									0.9	
27	X	24.0	29,800		1.2										
28		24.0	25,000												
29	X	24.0	25,000		1.2									0.9	
30	X	24.0	27,200		1.2									0.9	
31		24.0													
Total			746,900												
Average			24,094												
Maximum			56,100												

* Refer to the instructions for this report to determine which plants must provide this information.

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



Polymer Page 3 Due in December

See Pages 4 for Instructions.

I. General Information for the Month/Year of: December, 2004

A. Public Water System (PWS) Information

PWS Name: East Lake Harris Estates		PWS Identification Number: 3350322	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 172		Total Population Served at End of Month: 429	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 2315 Griffin Rd		City: Leesburg	State: Florida Zip Code: 34748
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-0980	
Contact Person's E-Mail Address: beheath@aquaamerica.com			

B. Water Treatment Plant Information

Plant Name: East Lake Harris Estates		Plant Telephone Number: 352-787-0980		
Plant Address: 13319 Woodland Drive		City: Astatula	State: Florida Zip Code: 34705	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 144,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Jim Milicic	C	8195	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Will Fontaine Printed or Typed Name	C-6813 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3350322 Plant Name: East Lake Harris Estates

III. Daily Data for the Month/Year of: December, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	26,100		1.2									0.9	
2	X	24.0	25,500		1.2									0.8	
3	X	24.0	20,100		1.2									0.8	
4	X	24.0	15,900		0.7										
5		24.0	150												
6	X	24.0	150		1.0									0.7	
7	X	24.0			1.1									0.9	
8	X	24.0	500		1.1									0.8	
9	X	24.0			1.2									0.8	
10	X	24.0			1.3									1.0	
11	X	24.0	100		1.4										
12		24.0													
13	X	24.0			1.5									1.1	
14	X	24.0			1.4									1.1	
15	X	24.0			1.4									1.1	
16	X	24.0			1.4									1.0	
17	X	24.0			1.4									1.0	
18	X	24.0			1.4										
19		24.0													
20	X	24.0			1.4									1.1	
21	X	24.0			1.3									1.1	
22	X	24.0			1.3									1.0	
23	X	24.0	27,700		0.9									0.5	
24	X	24.0	17,500		1.0									0.7	
25		24.0	27,800												
26	X	24.0	27,800		1.1										
27	X	24.0	29,500		1.3									0.9	
28	X	24.0	30,500		1.2									0.9	
29	X	24.0	33,000		1.3									1.0	
30	X	24.0	33,300		1.3									1.0	
31	X	24.0	25,000		1.2									0.9	
Total			340,600												
Average			10,987												
Maximum			33,300												

* Refer to the instructions for this report to determine which plants must provide this information.