

ORIGINAL

Harmony Homes

Docket No. 060368-WS

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

Florida

VOLUME 6

Book 7

Set 12 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

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Aqua Utilities Florida, Inc. Monthly Operating Reports

Harmony Homes

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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, 2004

A. Public Water System (PWS) Information

PWS Name: Harmony Homes	PWS Identification Number: 3590497		
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: 61	Total Population Served at End of Month: 158		
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: Harmony Homes	Plant Telephone Number: 407-339-5424			
Plant Address: 101 Plymouth Avenue	City: Altamonte Spr	State: Florida	Zip Code: 32701	
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: 216,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV	Plant Class (per subsection 62-699.310(4), F.A.C.): C			
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Charles Richmond	C	12429	Days 1st Shift
Other Operators:	Jimmy Johnson	C	4354	Days 1st Shift
	Martin Neal	C	10027	Days 1st Shift
	Dwight Green	B	6309	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	Charles Richmond Printed or Typed Name	C-12429 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3590497 Plant Name: Harmony Homes

III. Daily Data for the Month/Year of: January, 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 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 if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	X	24.0	11,100		3.2							2.8	
2	X	24.0	11,200		4.7							3.8	
3	X	24.0	12,900		3.5							3.2	
4	X	24.0	17,500		3.5							3.1	
5	X	24.0	16,300		3.0							2.5	
6	X	24.0	11,000		1.8							1.5	
7	X	24.0	12,200		1.5							1.3	
8	X	24.0	13,400		1.9							1.4	
9	X	24.0	14,400		1.0							1.0	
10	X	24.0	9,600		1.7							1.4	
11	X	24.0	13,800		1.4							1.1	
12	X	24.0	9,000		1.6							1.3	
13	X	24.0	12,000		1.5							1.2	
14	X	24.0	16,100		3.0							2.8	
15	X	24.0	12,200		3.0							2.6	
16	X	24.0	15,800		2.0							1.6	
17	X	24.0	10,400		2.2							1.6	
18	X	24.0	22,700		1.8							1.5	
19	X	24.0	10,600		1.8							1.6	
20	X	24.0	8,000		2.6							1.8	
21	X	24.0	7,000		1.8							1.3	
22	X	24.0	13,000		2.2							1.7	
23	X	24.0	14,000		2.6							1.9	
24	X	24.0	11,200		2.5							1.7	
25	X	24.0	10,100		2.3							1.9	
26	X	24.0	14,600		2.6							2.0	
27	X	24.0	13,600		1.7							1.4	
28	X	24.0	9,900		2.2							1.9	
29	X	24.0	10,100		2.5							2.0	
30	X	24.0	11,200		2.6							2.0	
31	X	24.0	9,000		2.4							1.9	
Total			383,900										
Average			12,384										
Maximum			22,700										

* 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: February, 2004

A. Public Water System (PWS) Information

PWS Name: Harmony Homes		PWS Identification Number: 3590497	
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: 61		Total Population Served at End of Month: 158	
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: craiga@florida-water.com		Contact Person's Fax Number: (407) 598-4217	

B. Water Treatment Plant Information

Plant Name: Harmony Homes		Plant Telephone Number: 407-339-5424	
Plant Address: 101 Plymouth Avenue		City: Altamonte Spr	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32701	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): IV			
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Charles Richmond	C	12429
Other Operators:	Jimmy Johnson	C	4354
	Martin Neal	C	10027
	Dwight Green	B	6309

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	Charles Richmond Printed or Typed Name	C-12429 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3590497 Plant Name: Harmony Homes

III. Daily Data for the Month/Year of: February, 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	Lowest Operating UV Dose, mW-sec/cm ²	Minimum CT Required, mg-min/L	pH of Water, if Applicable	Temp of Water, °C			Minimum UV Dose Required, mW-sec/cm ²	
1	X	24.0	10,400		2.5									2.0	
2	X	24.0	13,200		2.4									2.0	
3	X	24.0	8,100		2.5									2.2	
4	X	24.0	10,600		2.4									2.0	
5	X	24.0	11,000		2.2									1.8	
6	X	24.0	15,100		2.0									1.5	
7	X	24.0	10,200		2.1									1.8	
8	X	24.0	12,700		2.2									1.9	
9	X	24.0	9,000		2.0									1.6	
10	X	24.0	13,600		1.8									1.5	
11	X	24.0	15,400		1.7									1.3	
12	X	24.0	10,800		2.0									1.7	
13	X	24.0	14,100		2.2									1.7	
14	X	24.0	11,200		2.2									1.8	
15	X	24.0	12,200		2.1									1.4	
16	X	24.0	12,200		2.2									1.6	
17	X	24.0	10,400		2.1									1.6	
18	X	24.0	16,200		2.2									1.7	
19	X	24.0	11,800		2.0									1.6	
20	X	24.0	12,000		2.0									1.7	
21	X	24.0	13,700		2.0									1.8	
22	X	24.0	13,000		2.0									1.8	
23	X	24.0	20,000		2.0									1.7	
24	X	24.0	16,100		1.9									1.4	
25	X	24.0	12,000		2.2									1.6	
26	X	24.0	14,100		2.6									2.0	
27	X	24.0	13,400		2.2									1.8	
28	X	24.0	3,700		1.4									1.0	
29	X	24.0	2,200		2.2									1.7	
Total			348,400												
Average			12,014												
Maximum			20,000												

* 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: March, 2004

A. Public Water System (PWS) Information

PWS Name: Harmony Homes		PWS Identification Number: 3590497	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community
Number of Service Connections at End of Month: 61		Total Population Served at End of Month: 158	
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: craiga@florida-water.com		Contact Person's Fax Number: (407) 598-4217	

B. Water Treatment Plant Information

Plant Name: Harmony Homes		Plant Telephone Number: 407-339-5424	
Plant Address: 101 Plymouth Avenue		City: Altamonte Spr	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: 216,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Charles Richmond	C	12429
Other Operators:	Jimmy Johnson	C	4354
	Martin Neal	C	10027
	Dwight Green	B	6309

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	Charles Richmond Printed or Typed Name	C-12429 License Number
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MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3590497 Plant Name: Harmony Homes March, 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 Measurement	Disinfectant Contact Time Before or at First Measurement (T) at C	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose Required, mW-sec/cm ²	Lowest UV Dose Required, mW-sec/cm ²	System, mg/L	CT Calculations, if Applicable*	
												UV Dose	CT
1	X	4,000	24.0	1.8	1.8						1.5		
2	X	10,800	24.0	2.0	2.0						1.6		
3	X	13,200	24.0	2.0	2.0						1.6		
4	X	12,000	24.0	2.2	2.2						1.8		
5	X	11,300	24.0	2.1	2.1						1.8		
6	X	11,000	24.0	2.2	2.2						1.7		
7	X	16,600	24.0	2.2	2.2						1.8		
8	X	11,200	24.0	2.1	2.1						1.7		
9	X	11,000	24.0	0.7	0.7						0.4		
10	X	14,500	24.0	1.8	1.8						1.5		
11	X	10,800	24.0	0.6	0.6						0.3		
12	X	16,200	24.0	0.8	0.8						0.4		
13	X	13,000	24.0	2.5	2.5						2.0		
14	X	11,600	24.0	2.2	2.2						1.8		
15	X	17,900	24.0	2.0	2.0						1.7		
16	X	11,000	24.0	2.1	2.1						1.6		
17	X	8,400	24.0	2.0	2.0						1.6		
18	X	10,400	24.0	0.6	0.6						0.4		
19	X	13,700	24.0	1.7	1.7						1.0		
20	X	12,900	24.0	1.9	1.9						1.6		
21	X	9,800	24.0	1.8	1.8						1.5		
22	X	18,200	24.0	1.8	1.8						1.6		
23	X	15,200	24.0	1.9	1.9						1.7		
24	X	10,400	24.0	2.0	2.0						1.8		
25	X	15,800	24.0	1.9	1.9						1.6		
26	X	9,900	24.0	1.7	1.7						1.5		
27	X	11,500	24.0	1.5	1.5						1.3		
28	X	13,700	24.0	1.6	1.6						1.2		
29	X	17,000	24.0	1.6	1.6						1.3		
30	X	11,000	24.0	1.8	1.8						1.6		
31	X	22,800	24.0										
Total		396,800											
Average		12,800											
Maximum		22,800											

* 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: Harmony Homes		PWS Identification Number: 3590497	
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: 61		Total Population Served at End of Month: 158	
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: Harmony Homes		Plant Telephone Number: 407-339-5424	
Plant Address: 101 Plymouth Avenue		City: Altamonte Spr	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: 216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number / Day(s) / Shift(s) Worked
Lead/Chief Operator:	Charles Richmond	C	12429 / Days 1st Shift
Other Operators:	Jimmy Johnson	C	4354 / Days 1st Shift
	Martin Neal	C	10027 / Days 1st Shift
	Dwight Green	B	6309 / Days 1st Shift
	Terry McCarthy	C	4617 / 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

Charles Richmond

Printed or Typed Name

C-12429

License Number

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

PWS Identification Number: 3590497 Plant Name: Harmony Homes

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 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	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Temp of Water, °C		
1	X	24.0	13,200		1.8							1.5	
2	X	24.0	13,200		1.7							1.3	
3	X	24.0	15,900										
4	X	24.0	15,900		1.8							1.6	
5	X	24.0	14,100		2.0							1.8	
6	X	24.0	13,800		2.0							1.6	
7	X	24.0	14,200		1.8							1.5	
8	X	24.0	15,000		1.6							0.9	
9	X	24.0	12,400		2.1							1.8	
10		24.0	18,500										
11	X	24.0	18,500		1.8							1.6	
12	X	24.0	14,000		2.0							1.7	
13	X	24.0	12,000		2.2							1.8	
14	X	24.0	13,200		2.0							1.7	
15	X	24.0	9,000		2.1							1.8	
16	X	24.0	16,100		1.8							1.5	
17		24.0	18,100										
18	X	24.0	18,100		1.6							1.4	
19	X	24.0	11,800		1.7							1.5	
20	X	24.0	23,600		1.6							1.7	
21	X	24.0	15,400		1.3							1.2	
22	X	24.0	14,500		1.6							1.3	
23	X	24.0	19,600		1.4							1.0	
24	X	24.0	17,500		1.8							1.4	
25	X	24.0	15,300		1.5							1.1	
26	X	24.0	16,200		1.6							1.2	
27	X	24.0	18,500		1.7							1.3	
28	X	24.0	10,000		1.8							1.4	
29	X	24.0	22,000		1.8							1.5	
30	X	24.0	16,100		2.2							1.7	
Total			465,700										
Average			15,523										
Maximum			23,600										

* 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: May, 2004

A. Public Water System (PWS) Information

PWS Name: Harmony Homes		PWS Identification Number: 3590497	
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: 61		Total Population Served at End of Month: 158	
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: craiga@florida-water.com		Contact Person's Fax Number: (407) 598-4217	

B. Water Treatment Plant Information

Plant Name: Harmony Homes		Plant Telephone Number: 407-339-5424	
Plant Address: 101 Plymouth Avenue		City: Altamonte Spr	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32701	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): IV			
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Charles Richmond	C	12429
Other Operators:	Jimmy Johnson	C	4354
	Dwight Green	B	6309
	Terry McCarthy	C	4617

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	Charles Richmond Printed or Typed Name	C-12429 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 3590497	Plant Name: Harmony Homes
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III. Daily Data for the Month/Year of: May, 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	15,800		1.8								1.5	
2	X	24.0	14,800		1.8								1.5	
3	X	24.0	18,400		1.7								1.4	
4	X	24.0	11,700		3.5								2.0	
5	X	24.0	18,600		2.2								1.6	
6	X	24.0	18,200		1.8								1.5	
7	X	24.0	14,600		3.5								2.3	
8	X	24.0	22,200		3.5								2.5	
9	X	24.0	25,100		2.5								2.1	
10	X	24.0	29,200		2.4								2.2	
11	X	24.0	23,000		2.0								1.7	
12	X	24.0	20,400		2.0								1.6	
13	X	24.0	20,400		2.0								1.7	
14	X	24.0	18,100		3.5								2.5	
15	X	24.0	20,700		1.8								1.5	
16	X	24.0	15,400		2.0								1.7	
17	X	24.0	29,000		2.0								1.8	
18	X	24.0	21,000		2.0								1.7	
19	X	24.0	39,600		3.5								2.8	
20	X	24.0	25,600		3.0								2.0	
21	X	24.0	26,700		2.0								2.2	
22	X	24.0	24,600		2.2								1.5	
23	X	24.0	26,900		3.0								2.1	
24	X	24.0	29,000		2.6								1.8	
25	X	24.0	18,400		1.6								1.0	
26	X	24.0	24,400		2.2								1.5	
27	X	24.0	15,600		2.5								2.0	
28	X	24.0	38,500		2.0								1.5	
29	X	24.0	29,900		2.5								2.5	
30	X	24.0	16,900		2.6								2.0	
31	X	24.0	27,400		1.5								1.1	
Total			700,100											
Average			22,584											
Maximum			39,600											

* 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, 2004

A. Public Water System (PWS) Information

PWS Name:	Harmony Homes			PWS Identification Number:	3590497
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:	61			Total Population Served at End of Month:	158
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:	craiga@florida-water.com			Contact Person's Fax Number:	(407) 598-4217

B. Water Treatment Plant Information

Plant Name:	Harmony Homes			Plant Telephone Number:	407-339-5424	
Plant Address:	101 Plymouth Avenue			City:	Altamonte Spr	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water	State:	Florida		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator:	Charles Richmond	C	12429	Days 1st Shift		
Other Operators:	Jimmy Johnson	C	4354	Days 1st Shift		
	Dwight Green	B	6309	Days 1st Shift		
	Terrence McCarthy	C	4617	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.

Charles A. Richmond 6-6-04
Signature and Date

Charles Richmond
Printed or Typed Name

C-12429
License Number

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

Identification Number: 3590497 Plant Name: Harmony Homes

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

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	23,300		2.2										1.7	
2	X	24.0	21,200		2.4										1.8	
3	X	24.0	20,800		2.7										2.5	
4	X	24.0	17,700		2.5										2.0	
5	X	24.0	23,200		2.2										2.0	
6	X	24.0	14,900		3.5										2.5	
7	X	24.0	22,300		2.4										1.9	
8	X	24.0	16,400		2.6										2.0	
9	X	24.0	17,400		2.6										2.2	
10	X	24.0	12,200		2.4										2.0	
11	X	24.0	22,000		2.2										1.9	
12	X	24.0	17,900		3.5										3.0	
13	X	24.0	29,800		2.3										1.8	
14	X	24.0	22,000		2.2										1.8	
15	X	24.0	28,700		2.4										1.8	
16	X	24.0	24,000		3.5										3.0	
17	X	24.0	16,400		3.5										3.0	
18	X	24.0	33,800		1.6										1.0	
19	X	24.0	27,900		3.0										2.0	
20	X	24.0	23,700		1.0										0.7	
21	X	24.0	1,300		0.9										0.6	
22	X	24.0			1.0										0.8	
23	X	24.0			0.9										0.7	
24	X	24.0	20,600		2.0										1.6	
25	X	24.0	33,000		2.4										1.7	
26	X	24.0	26,000		3.5										3.0	
27	X	24.0	25,600		3.5										3.0	
28	X	24.0	28,800		1.8										1.5	
29	X	24.0	30,600		2.0										1.6	
30	X	24.0	17,600		3.5										3.0	
Total			619,100													
Average			20,637													
Maximum			33,800													

* 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

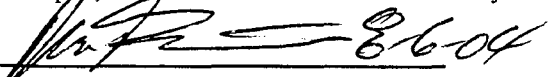
PWS Name:	Harmony Homes			PWS Identification Number:	3590497
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	61			Total Population Served at End of Month:	158
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) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com				

B. Water Treatment Plant Information

Plant Name:	Harmony Homes			Plant Telephone Number:	407-339-5424	
Plant Address:	101 Plymouth Avenue			City:	Altamonte Spr	
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:	216,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C-	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift		
Other Operators:	Terry McCarthy	C	4617	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:  8/6-04
 Will Fontaine
 Printed or Typed Name
 C-6813
 License Number

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

WS Identification Number: 3590497 Plant Name: Harmony Homes July, 2004

I. 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 Measurement (T) at C	Disinfectant Contact Time Provided	Lowest CT	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	Lowest UV Dose Required, mW-sec/cm	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*		CT Calculations	
														UV Dose	UV Dose	UV Dose	UV Dose
X	24.0	47,800	24.0	3.0	3.0	3.0	3.0							2.4	2.4		
X	24.0	10,600	24.0	2.5	2.5	2.5	2.5							2.0	2.0		
X	24.0	29,300	24.0	1.5	1.5	1.5	1.5							1.0	1.0		
X	24.0	18,800	24.0	3.0	3.0	3.0	3.0							2.2	2.2		
X	24.0	22,800	24.0	3.0	3.0	3.0	3.0							1.7	1.7		
X	24.0	25,000	24.0	3.0	3.0	3.0	3.0							2.0	2.0		
X	24.0	33,800	24.0	0.9	0.9	0.9	0.9							0.9	0.9		
X	24.0	15,900	24.0	0.7	0.7	0.7	0.7							0.7	0.7		
X	24.0	21,700	24.0	0.7	0.7	0.7	0.7							0.7	0.7		
X	24.0	22,800	24.0	0.9	0.9	0.9	0.9							0.9	0.9		
X	24.0	16,800	24.0	0.7	0.7	0.7	0.7							0.7	0.7		
X	24.0	14,000	24.0	0.7	0.7	0.7	0.7							0.7	0.7		
X	24.0	14,900	24.0	0.7	0.7	0.7	0.7							0.7	0.7		
X	24.0	19,100	24.0	0.7	0.7	0.7	0.7							0.7	0.7		
X	24.0	10,100	24.0	0.7	0.7	0.7	0.7							0.7	0.7		
X	24.0	17,300	24.0	0.7	0.7	0.7	0.7							0.7	0.7		
X	24.0	14,700	24.0	0.7	0.7	0.7	0.7							0.7	0.7		
X	24.0	13,400	24.0	0.7	0.7	0.7	0.7							0.7	0.7		
X	24.0	12,600	24.0	0.7	0.7	0.7	0.7							0.7	0.7		
X	24.0	16,300	24.0	0.7	0.7	0.7	0.7							0.5	0.5		
X	24.0	13,800	24.0	0.7	0.7	0.7	0.7							0.7	0.7		
X	24.0	16,400	24.0	0.7	0.7	0.7	0.7							0.7	0.7		
X	24.0	11,700	24.0	0.7	0.7	0.7	0.7							0.5	0.5		
X	24.0	19,200	24.0	0.7	0.7	0.7	0.7							0.7	0.7		
X	24.0	15,400	24.0	0.7	0.7	0.7	0.7							0.7	0.7		
X	24.0	14,800	24.0	0.7	0.7	0.7	0.7							0.5	0.5		
X	24.0	14,600	24.0	0.7	0.7	0.7	0.7							0.5	0.5		
X	24.0	6,700	24.0	1.0	1.0	1.0	1.0							0.6	0.6		
X	24.0	14,800	24.0	0.8	0.8	0.8	0.8							0.5	0.5		
X	24.0	14,100	24.0														
		563,400															
		18,174															
		47,800															

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name:	Harmony Homes			PWS Identification Number:	3590497
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:	61			Total Population Served at End of Month:	158
PWS Owner:	Florida Water Services				
Contact Person:	William Trendel			Contact Person's Title:	Senior Operator
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(407)339-5424	Zip Code:	34749-0310		
Contact Person's E-Mail Address:					

B. Water Treatment Plant Information

Plant Name:	Harmony Homes			Plant Telephone Number:	407-339-5424	
Plant Address:	101 Plymouth Avenue	City:	Altamonte Spr	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:	216,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	

License Operator	Name	License Class	License Number	Day(s) Shift(s) Worked
Lead/Chief Operator	William Trendel	C	6411	
Chief Operator	Terrence McCarthy	C	4617	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.

William Trendel 9/1/04
Signature and Date

William Trendel
Printed or Typed Name

C-6411
License Number

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

WS Identification Number: 3590497 Plant Name: Harmony Homes

III. Daily Data for the Month/Year of: August, 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	Disinfectant Added by Plant	Flow Rate (MGD)	Quantity of Finished Water Produced (MG)	C/T Calculations for UV Doses to Demonstrate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Distribution System Outlet	Emergency or Abnormal Operating Conditions Reported, Maintenance Work that may be Taking, Water System Component Out of Operation	
				C/T Calculations				UV Doses						
				Residual Rate (mg/L)	Lowest Residual Disinfectant Concentration (G) Before or After Customer Billing Hourly Flowing to the Distribution System	Disinfectant Contact Time (CT) at C	Lowest Residual Before or After Customer Billing Hourly Flowing to the Distribution System	Minimum UV Dose Required at Distribution System	Operational UV Dose at Distribution System	Minimum UV Dose Required at Distribution System	Operational UV Dose at Distribution System			
1	X	24.0												
2	X	24.0	15,000		1.5								1.0	
3	X	24.0	15,300		1.4								1.0	
4	X	24.0	10,600		0.6								0.8	
5	X	24.0	12,300		2.6								1.8	
6	X	24.0	17,100		0.8								1.0	
7	X	24.0	12,900		0.7								0.5	
8	X	24.0	14,700											
9	X	24.0	14,700		0.9								0.7	
10	X	24.0	10,200		1.5								1.0	
11	X	24.0	14,000		1.7								1.2	
12	X	24.0	12,600		1.4								1.0	
13	X	24.0	17,800		0.8								0.5	
14	X	24.0	15,000		1.0								0.7	
15	X	24.0	14,100		1.2								0.8	
16	X	24.0	13,900		2.5								1.8	
17	X	24.0	21,700		1.8								1.5	
18	X	24.0	16,700		1.6								1.0	
19	X	24.0	19,800		1.7								1.2	
20	X	24.0	20,300		1.7								1.2	
21	X	24.0	20,000		1.7								1.3	
22	X	24.0	14,300											
23	X	24.0	14,300		2.0								1.5	
24	X	24.0	8,000		3.0								2.0	
25	X	24.0	26,400		0.7								0.9	
26	X	24.0	21,500		1.2								0.9	
27	X	24.0	14,400		1.6								1.0	
28	X	24.0	13,000		2.0								1.5	
29	X	24.0	15,200											
30	X	24.0	15,200		1.8								1.3	
31	X	24.0	12,400		1.7								1.3	
Total			463,400											
Average			14,948											
Maximum			26,400											

* 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: September, 2004

A. Public Water System (PWS) Information

PWS Name:	Harmony Homes			PWS Identification Number:	3590497
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:	61			Total Population Served at End of Month:	158
PWS Owner:	Aqua Utilities, Fl.				
Contact Person:	William Trendel			Contact Person's Title:	Senior Operator
Contact Person's Mailing Address:	140 Hope St.	City:	Longwood	State:	Florida
Contact Person's Telephone Number:	407-339-5424	Contact Person's Fax Number:	407-339-7490		
Contact Person's E-Mail Address:					

B. Water Treatment Plant Information

Plant Name:	Harmony Homes			Plant Telephone Number:	407-339-5424
Plant Address:	101 Plymouth Avenue			City:	Altamonte Springs
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:	216,000				

Plant Category (per subsection 62-699.310(4), F.A.C.):		Plant Class (per subsection 62-699.310(4), F.A.C.):	
IV		C	
Licensee Name	License Class	License Number	Days 1st Shift
William Trendel	C	6411	Days 1st Shift
Terry McCarthy	C	4617	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 reviewed 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.

<u>William Trendel</u> Signature and Date	<u>William Trendel</u> Printed or Typed Name	<u>C-6411</u> License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED TREATED WATER

Identification Number: 3590497 Plant Name: Harmony Homes

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

Date	Days Plant Operated (Y/N)	Hours plant in operation	Quantity of Disinfectant Applied (gallons)	Calculations of FTV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable				Minimum (mg/L) Required in Distribution System (mp)	Notes
				Flow Rate (MGD)	Residual Concentration (mg/L)	Calculation	Result (mg/L)		
9/1	X	24.0	13,100		1.3			0.9	
9/2	X	24.0	14,400		1.5			1.1	
9/3	X	24.0	12,600		1.7			1.3	
9/4	X	24.0	15,900		1.2			0.8	
9/5	X	24.0	9,800		1.7			1.2	
9/6	X	24.0	700		0.7			0.5	
9/7	X	24.0	13,500		0.6			0.4	
9/8	X	24.0	11,900		1.1			0.3	
9/9	X	24.0	12,900		1.5			0.8	
9/10	X	24.0	9,800		1.7			1.1	
9/11	X	24.0	14,200						
9/12	X	24.0	14,300		1.2			0.7	
9/13	X	24.0	16,000		1.3			0.8	
9/14	X	24.0	8,000		2.4			1.5	
9/15	X	24.0	12,300		1.7			1.4	
9/16	X	24.0	17,300		1.0			0.7	
9/17	X	24.0	12,400		0.7			0.5	
9/18	X	24.0	14,800						
9/19	X	24.0	14,800		2.2			1.5	
9/20	X	24.0	12,500		1.9			1.5	
9/21	X	24.0	9,300		1.8			1.5	
9/22	X	24.0	15,300		0.7			0.9	
9/23	X	24.0	14,000		0.9			0.5	
9/24	X	24.0	11,900		1.1			0.7	
9/25	X	24.0	6,900						
9/26	X	24.0			0.7			0.4	
9/27	X	24.0	11,600		1.2			0.8	
9/28	X	24.0	11,500		1.6			1.0	
9/29	X	24.0	8,600		1.8			1.0	
9/30									
Total			350,100						
Average			11,670						
Maximum			17,300						

• 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:	Harmony Homes			PWS Identification Number:	3590497
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:	61			Total Population Served at End of Month:	158
PWS Owner:	Aqua Utilities, Florida				
Contact Person:	William Trendel			Contact Person's Title:	Senior Facilities Operator
Contact Person's Mailing Address:	140 Hope Street	City:	Longwood	State:	Florida
Contact Person's Telephone Number:	(407) 339-5424	Contact Person's Fax Number:	(407) 339-7490		
Contact Person's E-Mail Address:	btrendel@aquaamerica.com				

B. Water Treatment Plant Information

Plant Name:	Harmony Homes			Plant Telephone Number:	407-339-5424	
Plant Address:	101 Plymouth Avenue	City:	Altamonte Spr	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:	216,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Operator Name	License No.	Class	Shift			
William Trendel	C		6411			
Ference McCarthy	C		4617	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.

William Trendel
Signature and Date

William Trendel
Printed or Typed Name

C-6411
License Number



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name:	Harmony Homes			PWS Identification Number:	3590497
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:	61			Total Population Served at End of Month:	158
PWS Owner:	Aqua Utilities, Ft.				
Contact Person:	William Trendel			Contact Person's Title:	Senior Operator
Contact Person's Mailing Address:	140 Hope St.	City:	Longwood	State:	Florida
Contact Person's Telephone Number:	407-339-5424	Contact Person's Fax Number:	407-339-7490		
Contact Person's E-Mail Address:					

B. Water Treatment Plant Information

Plant Name:	Harmony Homes			Plant Telephone Number:	407-339-5424
Plant Address:	101 Plymouth Avenue			City:	Altamonte Spr
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:	216,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	
					C
	William Trendel	C	6414	Days 1st Shift	
	Terry McCarthy	C	4617	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.

William Trendel 12/3/04 William Trendel C-6411
 Signature and Date Printed or Typed Name License Number

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:	Harmony Homes			PWS Identification Number:	3590497
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:	61			Total Population Served at End of Month:	158
PWS Owner:	Aqua Utilities Florida				
Contact Person:	William Trendel			Contact Person's Title:	Senior Facilities Operator
Contact Person's Mailing Address:	140 Hope Street	City:	Longwood	State:	Florida
Contact Person's Telephone Number:	(407) 339-5424	Contact Person's Fax Number:	(407) 339-7490		
Contact Person's E-Mail Address:	btrendel@aquaaamerica.com				

B. Water Treatment Plant Information

Plant Name:	Harmony Homes			Plant Telephone Number:	407-339-5424	
Plant Address:	101 Plymouth Avenue	City:	Allamore Sp	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:	216,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	AV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
	William Trendel	C	6417			
	Terrence McCarthy	C	4617	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.

William Trendel 1/5/05
Signature and Date

William Trendel
Printed or Typed Name

C-6411
License Number

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

PWS Identification Number: 3590497 Plant Name: Harmony Homes

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	Time	Free Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Ozone (mg/L)	Combined Chlorine (mg/L)	Temperature (°F)	pH	Total Hardness (mg/L)	Total Solids (mg/L)	Other
X	24:0	9:800								1.5
X	24:0	12:400								0.9
X	24:0	11:400								0.6
X	24:0	14:600								0.5
X	24:0	9:500								1.1
X	24:0	9:500								1.2
X	24:0	13:200								0.8
X	24:0	12:100								1.5
X	24:0	10:600								1.5
X	24:0	11:300								1.1
X	24:0	9:200								1.0
X	24:0	9:300								1.5
X	24:0	9:100								1.5
X	24:0	9:800								1.5
X	24:0	14:600								1.0
X	24:0	6:700								1.7
X	24:0	9:900								1.6
X	24:0	14:200								0.8
X	24:0	12:100								1.1
X	24:0	12:100								0.7
X	24:0	9:700								1.1
X	24:0	11:600								1.3
X	24:0	11:100								1.5
X	24:0	12:700								1.5
X	24:0	10:900								1.7
X	24:0	10:300								1.0
X	24:0	13:600								0.7
X	24:0	7:500								1.3
X	24:0	10:100								1.4
X	24:0	14:700								0.9
X	24:0	11:100								0.6
		344,300								
		11,106								
		14,700								

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



#VALUE!

See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name:	Harmony Homes	PWS Identification Number:	3590497
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:	64	Total Population Served at End of Month:	158
PWS Owner:	Aqua Utilities, Florida		
Contact Person:	William Trendel	Contact Person's Title:	Senior Facilities Operator
Contact Person's Mailing Address:	140 Hope Street	City:	Longwood
		State:	Florida
		Zip Code:	32750
Contact Person's Telephone Number:	(407) 339-5424	Contact Person's Fax Number:	(407) 339-7490
Contact Person's E-Mail Address:	wtrendel@aquaaamerica.com		

B. Water Treatment Plant Information

Plant Name:	Harmony Homes	Plant Telephone Number:	407-339-5424
Plant Address:	101 Plymouth Avenue	City:	Altamonte Springs
		State:	Florida
		Zip Code:	32701
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:	216,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	TV	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Operator	Name	License Class	License Number	Days/Shift(s) Worked
Lead/Chief Operator	William Trendel	C	6411	
Other Operators	Terrence McCarthy	C	4617	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.

William Trendel 2/12/05
 Signature and Date

William Trendel
 Printed or Typed Name

C-6411
 License Number

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

PWS Identification Number: 3590497 Plant Name: Harmony Homes

III. Daily Data for the Month/Year of: Jan. 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

Date	Time	Flow (MGD)	Chlorine Dose (mg/L)	Chlorine Residual (mg/L)						Total Chlorine Residual (mg/L)	Free Chlorine Residual (mg/L)	Combined Chlorine Residual (mg/L)	Chlorine Dioxide Residual (mg/L)	Ozone Residual (mg/L)	Other Residual (mg/L)	
				at Plant	at 100 ft	at 200 ft	at 300 ft	at 400 ft	at 500 ft							
X		24.0	12,400													1.0
X		24.0	13,600													
X		24.0	13,600													0.5
X		24.0	9,100													0.9
X		24.0	12,200													1.6
X		24.0	14,100													1.5
X		24.0	10,300													1.0
X		24.0	14,250													
X		24.0	14,250													0.7
X		24.0	18,400													1.1
X		24.0	10,600													1.0
X		24.0	14,900													1.2
X		24.0	14,300													1.2
X		24.0	17,800													0.8
X		24.0	31,800													1.0
X		24.0	12,100													
X		24.0	12,200													0.8
X		24.0	9,900													1.4
X		24.0	10,900													1.6
X		24.0	8,000													1.6
X		24.0	9,900													1.5
X		24.0	11,100													1.0
X		24.0	12,200													
X		24.0	11,300													0.8
X		24.0	11,400													1.1
X		24.0	9,400													1.1
X		24.0	15,300													0.6
X		23.0	11,400													1.1
X		24.0	10,600													0.6
X		24.0	11,500													
X		24.0	11,100													1.5
			399,700													
			12,894													
			31,800													

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

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

PWS Identification Number: 3590497 Plant Name: Harmony Homes

III. Daily Data for the Month/Year of: February 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	Day Plant Started or Washed (Place X)	Hours plant in operation	Net Quantity of Water Produced (gals)	Calculations of CT Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Emergency/Abnormal Operating Conditions/Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose							
				Peak Flow Rate (gpm)	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow (mg/l)	Disinfectant Contact Time (T) in minutes	Lowest CT Provided Before or at First Customer During Peak Flow (min/l)	Minimum CT Required (min/l)	Peak Flow Rate (gpm)	Lowest UV Dose (mWsec/cm ²)	Minimum UV Dose Required (mWsec/cm ²)	Lowest Residual Disinfectant Concentration at Remote Point of Distribution System (mg/l)				
1		24.0	11,200		1.8										1.3	
2		24.0	11,400		2.0										1.4	
3		24.0	9,100		2.1										1.5	
4		24.0	9,800		1.7										1.2	
5		24.0	11,300													
6		24.0	11,300		1.6										1.4	
7		24.0	13,800		0.9										1.0	
8		24.0	10,000		1.5										1.0	
9		24.0	15,000		1.8										1.3	
10		24.0	12,200		2.0										1.5	
11		24.0	15,200		0.9										1.1	
12		24.0	11,700		0.9										0.7	
13		24.0	11,000													
14		24.0	11,000		1.6										1.1	
15		24.0	3,300		1.3										1.0	
16		24.0	12,000		1.2										0.7	
17		24.0	13,000		1.8										1.2	
18		24.0	9,000		1.3										0.9	
19		24.0	12,000													
20		24.0	12,000		1.5										1.1	
21		24.0	13,600		0.9										0.7	
22		24.0	13,500		1.4										1.0	
23		24.0	13,000		0.9										0.6	
24		24.0	11,000		0.9										0.6	
25		24.0	11,300		1.0										0.6	
26		24.0	12,600		0.9										0.5	
27		24.0	11,600													
28		24.0	14,600		2.2										1.6	
29		24.0														
30																
Total			323,500													
Average			11,553													
Maximum			15,200													

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



#VALUE!

See Pages 4 for Instructions.

I. General Information for the Month/Year of: Jan 2005 March 2005

A. Public Water System (PWS) Information

PWS Name:	Harmony Homes			PWS Identification Number:	3590497
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:	64			Total Population Served at End of Month:	158
PWS Owner:	Aqua Utilities, Florida				
Contact Person:	William Trendel			Contact Person's Title:	Senior Facilities Operator
Contact Person's Mailing Address:	140 Hope Street	City:	Longwood	State:	Florida
Contact Person's Telephone Number:	(407)339-5424	Zip Code:	32750		
Contact Person's E-Mail Address:	btrendel@aguaamerica.com				
Contact Person's Fax Number:	(407) 339-7490				

B. Water Treatment Plant Information

Plant Name:	Harmony Homes			Plant Telephone Number:	407-339-5424	
Plant Address:	101 Plymouth Avenue	City:	Altamonte Spr	State:	Florida	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water	Zip Code: 32701			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	

Name	License Number	Shift
William Trendel	C	6411
Terrence McCarthy	C	4617 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.

William Trendel 4/8/05
Signature and Date

William Trendel
Printed or Typed Name

C-6411
License Number

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: <u>Harmony Homes</u>		PWS Identification Number: <u>3590497</u>	
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: <u>64</u>		Total Population Served at End of Month: <u>158</u>	
PWS Owner: <u>Aqua Utilities, Florida</u>			
Contact Person: <u>William Treadel</u>		Contact Person's Title: <u>Senior Facilities Operator</u>	
Contact Person's Mailing Address: <u>140 Hope Street</u>		City: <u>Longwood</u>	State: <u>Florida</u>
Contact Person's Telephone Number: <u>(407) 339-5424</u>		Zip Code: <u>32750</u>	
Contact Person's E-Mail Address: <u>btreadel@aquamerica.com</u>		Contact Person's Fax Number: <u>(407) 339-7490</u>	

B. Water Treatment Plant Information

Plant Name: <u>Harmony Homes</u>		Plant Telephone Number: <u>407-339-5424</u>	
Plant Address: <u>106 Plymouth Avenue</u>		City: <u>Ahamonte Spr</u>	State: <u>Florida</u>
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: <u>32701</u>	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>216,000</u>			
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>IV</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>	
<u>William Treadel</u>	<u>C</u>	<u>6411</u>	
<u>Terence McCarthy</u>	<u>C</u>	<u>4617</u>	<u>Days 1st Shift</u>

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.

William Treadel 5/4/05
 Signature and Date

William Treadel
 Printed or Typed Name

C-6411
 License Number



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name:	Harmony Homes			PWS Identification Number:	3590497
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:	64			Total Population Served at End of Month:	158
PWS Owner:	Aqua Utilities, Florida				
Contact Person:	William Trendel				
Contact Person's Mailing Address:	140 Hope Street			Contact Person's Title:	Senior Facilities Operator
Contact Person's Telephone Number:	(407) 339-5424		City:	Longwood	State: Florida
Contact Person's E-Mail Address:	btrendel@aquaaamerica.com			Zip Code:	32750
			Contact Person's Fax Number:	(407) 339-7490	

B. Water Treatment Plant Information

Plant Name:	Harmony Homes			Plant Telephone Number:	407-339-5424
Plant Address:	101 Plymouth Avenue			City:	Altamonte Springs
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water	State:	Florida	
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000			Zip Code:	32701
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV				

Name	License Class	License Number	Plant Class (per subsection 62-699.310(4), F.A.C.)	
			Category	Day(s)/Shift(s) Worked
William Trendel	C	6411		
Terrence McCarthy	C	4617	Days 1st Shift	

U. 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 in this plant conform to the 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.

William Trendel 5/2005
Signature and Date

William Trendel
Printed or Typed Name

C-6411
License Number

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

PWS Identification Number: **3590497** Plant Name: **Harmony Homes**

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	System (Plant)	Flow (MGD)	Volume (MG)	Free Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Ozone (mg/L)	Combined Chlorine (mg/L)	Chlorine Dioxide (mg/L)
5/1	X	28.0	16,900					
5/2	X	24.0	17,000	0.6				0.4
5/3	X	24.0	12,900	0.9				0.6
5/4	X	24.0	17,000	0.9				0.6
5/5	X	24.0	19,200	1.4				0.9
5/6	X	24.0	16,400	0.9				0.5
5/7	X	25.0	18,000	1.5				
5/8	X	24.0	8,200	1.0				
5/9	X	24.0	15,700	1.0				0.6
5/10	X	24.0	15,700	1.4				0.9
5/11	X	24.0	16,000	1.3				0.7
5/12	X	24.0	15,100	1.4				
5/13	X	24.0	12,000	0.8				0.6
5/14	X	24.0	17,300					
5/15	X	21.0	17,300	0.8				0.5
5/16	X	24.0	17,800	0.9				0.6
5/17	X	24.0	15,300	0.6				0.7
5/18	X	24.0	15,500	0.7				

5/19		24.0		0.6				0.1
5/20		24.0		1.1				
5/21	X	24.0	24,400	0.5				0.3
5/22	X	24.0	20,100	1.6				1.0
5/23	X	24.0	20,800	1.2				0.7
5/24	X	24.0	21,000	1.1				
5/25	X	24.0	17,750					
5/26	X	24.0	17,750	1.0				0.6
5/27	X	24.0	20,900	1.5				1.0
5/28			540,300					
5/29			17,365					
5/30			24,400					

* 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: June, 2005

A. Public Water System (PWS) Information

PWS Name:	Harmony Homes			PWS Identification Number:	3590497	
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:	64			Total Population Served at End of Month:	158	
PWS Owner:	Aqua Utilities Florida					
Contact Person:	William Trendel			Contact Person's Title:	Senior Facilities Operator	
Contact Person's Mailing Address:	140 Hope Street		City:	Longwood	State:	Florida
Contact Person's Telephone Number:	(407)339-5424			Contact Person's Fax Number:	(407) 339-7490	
Contact Person's E-Mail Address:	btrendel@aquaamerica.com					

B. Water Treatment Plant Information

Plant Name:	Harmony Homes			Plant Telephone Number:	407-339-5424		
Plant Address:	101 Plymouth Avenue			City:	Altamonte Spr	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:	216,000						
Plant Category (per subsection 62-699.31(4), F.A.C.):	IV			Plant Class (per subsection 62-699.31(4), F.A.C.):	C		
Operator Name	William Trendel	License Number	C	6411	Shift		
Operator Name	Terrence McCarthy	License Number	C	4617	Days 1st Shift		
Operator Name		License Number					
Operator Name		License Number					
Operator Name		License Number					
Operator Name		License Number					
Operator Name		License Number					
Operator Name		License Number					

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.

William Trendel 7/5/05
 Signature and Date

William Trendel
 Printed or Typed Name

C-6411
 License Number

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

PWS Identification Number: 3590497 Plant Name: Harmony Homes

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

Date	Time	Flow (MGD)	Chlorine (mg/L)	Calculation of 4-Log Virus Inactivation/Removal (if applicable)		Total Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Ozone (mg/L)	Combined Chlorine (mg/L)	pH	Temperature (°F)	Turbidity (NTU)	Total Chlorine (mg/L)
				Free Chlorine (mg/L)	Chlorine Dioxide (mg/L)								
X	24.0	13,400			1.8								1.2
X	24.0	14,100			1.1								0.7
X	24.0	14,400			1.3								0.8
X	24.0	13,050											
X	24.0	13,050			1.5								1.0
X	24.0	15,100			1.0								0.7
X	24.0	15,400			0.7								0.5
X	24.0	17,200			1.5								1.0
X	24.0	19,600			1.2								0.8
X	24.0	18,500			1.4								0.9
X	24.0	11,500			1.9								1.5
X	24.0	14,700											
X	24.0	14,700			1.5								1.0
X	24.0	15,900			1.7								1.1
X	24.0	16,000			1.9								1.3
X	24.0	15,900			2.3								1.6
X	24.0	17,000			1.2								0.9
X	24.0	16,150											
X	24.0	16,150			1.5								1.0
X	24.0	19,100			1.3								0.8
X	24.0	16,600			1.6								1.0
X	24.0	18,000			2.2								1.7
X	24.0	17,400			1.8								1.4
X	24.0	16,700			1.6								1.0
X	24.0	16,000			2.0								1.4
X	24.0	12,700											
X	24.0	12,700			1.4								0.9
X	24.0	12,800			1.8								1.4
X	24.0	11,000			1.4								0.9
X	24.0	11,200			1.4								1.0
X	24.0												
		456,000											
		15,200											
		19,600											

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name:	Harmony Homes			PWS Identification Number:	3590497
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:	64			Total Population Served at End of Month:	158
PWS Owner:	Aqua Utilities, Florida				
Contact Person:	William Trendel			Contact Person's Title:	Senior Facilities Operator
Contact Person's Mailing Address:	140 Hope Street	City:	Longwood	State:	Florida
				Zip Code:	32750
Contact Person's Telephone Number:	(407) 339-5424			Contact Person's Fax Number:	(407) 339-7490
Contact Person's E-Mail Address:	btrendel@aquaaamerica.com				

B. Water Treatment Plant Information

Plant Name:	Harmony Homes			Plant Telephone Number:	407-339-5424
Plant Address:	101 Plymouth Avenue	City:	Altamonte Spr	State:	Florida
				Zip Code:	32701
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:	216,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Person Operator	Name	License Class	License Number	Day(s) Shift(s) Worked
Lead/Chief Operator	William Trendel	C	6411	
Other Operators	Terrence McCarthy	C	4617	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.

William Trendel 8/3/05
Signature and Date

William Trendel
Printed or Typed Name

C-6411
License Number

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

PWS Identification Number: 3590497 Plant Name: Harmony Homes

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

Month	Day of Month	Operating Hours	Volume of Water Treated (MG)	CT Calculations for Virus Inactivation (if applicable)							Minimum Residual Concentration (mg/L)	Minimum Residual Concentration (mg/L) in Distribution System	Minimum Residual Concentration (mg/L) at Point of Delivery
				Disinfectant Concentration (mg/L)	Disinfectant Contact Time (min)	Disinfectant Measurement Point	Disinfectant Measurement Point	Disinfectant Measurement Point	Disinfectant Measurement Point	Disinfectant Measurement Point			
X	24.0	15,000	0.7								0.5		
X	24.0	19,000											
X	24.0	19,000	1.2								1.0		
X	24.0	13,800	1.2								0.9		
X	24.0	14,700	1.5								1.0		
X	24.0	13,800	1.0								0.7		
X	24.0	15,500	0.7								0.9		
X	24.0	800	0.5								0.3		
X	24.0	18,400	0.6								0.4		
X	24.0	12,100											
X	24.0	12,200	1.7								1.2		
X	24.0	12,900	0.9								0.7		
X	24.0	13,500	1.1								0.9		
X	24.0	12,400	1.4								1.0		
X	24.0	14,600	1.1								0.7		
X	24.0	12,800											
X	24.0	12,800	1.3								0.6		
X	24.0	14,100	1.3								1.1		
X	24.0	13,200	1.0								0.8		
X	24.0	18,100	1.5								1.2		
X	24.0	14,700	1.7								1.4		
X	24.0	10,300	0.7								0.5		
X	24.0	14,200	0.9								0.7		
X	24.0	11,300											
X	24.0	11,400	1.4								1.0		
X	24.0	11,100	0.9								0.6		
X	24.0	14,200	1.5								1.0		
X	24.0	16,500	1.7								1.2		
X	24.0	10,200	0.7								1.5		
X	24.0	13,050											
X	24.0	13,050	1.1								0.4		
Total			418,700										
Average			13,506										
Maximum			19,000										

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

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

PWS Identification Number: 3590497 Plant Name: Harmony Homes

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

Date	Plant	Operating Hours	Quantity of Finished Water (MGD)	CFR Calculations for UVa Dose to Domestic Cold-Log Virus Inactivation, if Applicable													
				Disinfectant Concentration (mg/L)	Disinfectant Measurement Point	Flow Rate (MGD)	Flow Rate (MGD)	Flow Rate (MGD)	Flow Rate (MGD)	Flow Rate (MGD)	Flow Rate (MGD)	Flow Rate (MGD)	Flow Rate (MGD)	Flow Rate (MGD)			
8/1	X	24.0	10,400	0.6													0.2
8/2	X	24.0	12,500	0.6													0.4
8/3	X	24.0	14,100	1.6													1.1
8/4	X	24.0	10,700	1.8													1.4
8/5	X	24.0	17,700	2.0													1.6
8/6	X	24.0	11,600	0.4													0.2
8/7	X	24.0	11,500	0.7													0.7
8/8	X	24.0	11,500	1.0													0.7
8/9	X	24.0	11,900	1.0													0.6
8/10	X	24.0	12,500	0.9													0.6
8/11	X	24.0	14,000	1.2													0.8
8/12	X	24.0	12,500	1.3													1.0
8/13	X	24.0	12,900														
8/14	X	24.0	12,900	1.2													0.7
8/15	X	24.0	12,000	1.4													1.1
8/16	X	24.0	11,100	1.2													0.8
8/17	X	24.0	12,000	1.9													1.5
8/18	X	24.0	12,300	1.4													1.0
8/19	X	24.0	11,300	1.3													1.0
8/20	X	24.0	13,400	1.5													1.1
8/21	X	24.0	13,200														
8/22	X	24.0	13,200	1.3													0.8
8/23	X	24.0	12,400	0.9													0.5
8/24	X	24.0	12,500	1.5													1.0
8/25	X	24.0	13,300	1.4													1.0
8/26	X	24.0	12,700	1.3													0.8
8/27	X	24.0	12,700														
8/28	X	24.0	12,700	1.5													1.1
8/29	X	24.0	15,100	1.2													0.9
8/30	X	24.0	10,700	1.0													0.6
8/31	X	24.0	11,000	1.6													1.1
Total			418,700														
Average			13,506														
Maximum			17,700														

* 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: September, 2005

A. Public Water System (PWS) Information

PWS Name: Harmony Homes	PWS Identification Number: 3590497
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: 64	Total Population Served at End of Month: 158
PWS Owner: Aqua Utilities, Florida	
Contact Person: William Trendel	Contact Person's Title: Senior Facilities Operator
Contact Person's Mailing Address: 140 Hope Street	City: Longwood State: Florida Zip Code: 32750
Contact Person's Telephone Number: (407) 339-5424	Contact Person's Fax Number: (407) 339-7490
Contact Person's E-Mail Address: wtrendel@aquamerica.com	

B. Water Treatment Plant Information

Plant Name: Harmony Homes	Plant Telephone Number: 407-339-5424
Plant Address: 101 Plymouth Avenue	City: Altamonte Spr State: Florida Zip Code: 32701
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: 215,000	
Plant Category (per subsection 62-699.310(4), F.A.C.): IV	Plant Class (per subsection 62-699.310(4), F.A.C.): C

Licensed Operator	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator	William Trendel	C	6411	
Other Operator	Terrence McCarthy	C	4617	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.

William Trendel 10/6/05
Signature and Date

William Trendel
Printed or Typed Name

C-6411
License Number

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

PWS Identification Number: 3590497 Plant Name: Harmony Homes

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

Date	Time	Flow (MGD)	Quantity of Disinfectant Applied (MG)	Concentration of Disinfectant Residual (mg/L)										Minimum Residual (mg/L)	Notes
				At Plant	At Entry to Distribution System	At End of Distribution System	At Farthest Point of Distribution System	At Point of Consumption	At Point of Entry to Distribution System	At Point of Entry to Distribution System	At Point of Entry to Distribution System	At Point of Entry to Distribution System	At Point of Entry to Distribution System		
X	24.0	10,400		0.6										0.2	
X	24.0	12,500		0.6										0.4	
X	24.0	14,100		1.6										1.1	
X	24.0	10,700		1.8										1.4	
X	24.0	17,700		2.0										1.6	
X	24.0	11,600		0.4										0.2	
X	24.0	11,500		0.7										0.7	
X	24.0	11,500		1.0										0.7	
X	24.0	11,900		1.0										0.6	
X	24.0	12,500		0.9										0.6	
X	24.0	14,000		1.2										0.8	
X	24.0	13,500		1.3										1.0	
X	24.0	12,900													
X	24.0	12,900		1.2										0.7	
X	24.0	12,000		1.4										1.1	
X	24.0	11,100		1.2										0.8	
X	24.0	12,000		1.9										1.5	
X	24.0	12,300		1.4										1.0	
X	24.0	11,300		1.3										1.0	
X	24.0	13,400		1.5										1.1	
X	24.0	13,200													
X	24.0	13,200		1.3										0.8	
X	24.0	12,400		0.9										0.5	
X	24.0	12,500		1.5										1.0	
X	24.0	13,300		1.4										1.0	
X	24.0	12,700		1.3										0.8	
X	24.0	12,700													
X	24.0	12,700		1.5										1.1	
X	24.0	15,100		1.2										0.9	
X	24.0	10,700		1.0										0.6	
X	24.0	11,000		1.6										1.1	
Total		378,900													
Average		12,630													
Maximum		17,700													

* 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: October, 2005

A. Public Water System (PWS) Information

PWS Name: Harmony Homes		PWS Identification Number: 3590497	
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: 64		Total Population Served at End of Month: 158	
PWS Owner: Aqua Utilities, Florida			
Contact Person: William Trendel		Contact Person's Title: Senior Facilities Operator	
Contact Person's Mailing Address: 140 Hope Street		City: Longwood	State: Florida
		Zip Code: 32750	
Contact Person's Telephone Number: (407)339-5424		Contact Person's Fax Number: (407) 339-7490	
Contact Person's E-Mail Address: btrendel@aquamerica.com			

B. Water Treatment Plant Information

Plant Name: Harmony Homes		Plant Telephone Number: 407-339-5424	
Plant Address: 101 Plymouth Avenue		City: Altamonte Spr	State: Florida
		Zip Code: 32701	
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: 216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator	William Trendel	C	6411
Other Operators	Terrence McCarthy	C	4617

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.

William Trendel 11/3/05
Signature and Date

William Trendel
Printed or Typed Name

C-6411
License Number

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

PWS Identification Number: 3590497 Plant Name: Harmony Homes

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

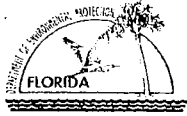
Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

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 (Y/N)	Hours plant in Operation	Net Quantity of Finished Water Produced (gal)	CT/Cl Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable										Emergency or Abnormal Operating Conditions Reached or Maintenance Work that Involves Taking Water System Components Out of Operation		
				Peak Flow Rate (mgd)	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow (mg/L)	Disinfectant Contact Time (C) at CT Measurement Point During Peak Flow (minutes)	Lowest CT Provided Before or at First Customer During Peak Flow (mg-min/L)	Temperature of Water (°C)	pH of Water (if Applicable)	Minimum CT Required (mg-min/L)	Lowest Operating UV Dose (mW-sec/cm)	Minimum UV Dose Required (mW-sec/cm)	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System (mg/L)			
1	X	24.0	12,500		0.7										0.5	
2	X	24.0	9,000													
3	X	24.0	9,000		2.0										1.7	
4	X	24.0	13,500		1.1										0.7	
5	X	24.0	6,600		1.2										1.0	
6	X	24.0	9,700		1.8										1.5	
7	X	24.0	8,800		0.7										1.5	
8	X	24.0	11,500													
9	X	24.0	22,400		1.6										1.3	
10	X	24.0	8,000		1.5										1.4	
11	X	24.0	10,400		1.3										1.0	
12	X	24.0	13,600		2.0										1.5	
13	X	24.0	10,000		1.9										1.5	
14	X	24.0	7,900		1.1										0.8	
15	X	24.0	12,300		0.8										0.6	
16	X	24.0	16,500													
17	X	24.0	16,500		0.8										0.6	
18	X	24.0	12,300		1.4										1.1	
19	X	24.0	10,700		1.5										1.2	
20	X	24.0	11,100		1.6										1.4	
21	X	24.0	7,900		1.4										1.2	
22	X	24.0														
23	X	24.0	23,900		1.4										1.1	
24	X	24.0														
25	X	24.0	800		1.0										0.8	
26	X	24.0	9,300		1.7										1.4	
27	X	24.0	15,600		0.7										0.5	
28	X	24.0	9,000		1.7										1.3	
29	X	24.0	10,300		1.5										1.3	
30	X	24.0	10,100													
31	X	24.0	10,100		1.7										1.4	
Total			317,800													
Average			10,252													
Maximum			16,500													

* 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: Nov. 2005

A. Public Water System (PWS) Information

PWS Name:	Harmony Homes			PWS Identification Number:	3590497
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input checked="" type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	64			Total Population Served at End of Month:	158
PWS Owner:	Aqua Utilities, Florida				
Contact Person:	William Trendel			Contact Person's Title:	Senior Facilities Operator
Contact Person's Mailing Address:	140 Hope Street	City:	Longwood	State:	Florida
Contact Person's Telephone Number:	(407)339-5424			Zip Code:	32750
Contact Person's E-Mail Address:	btrendel@aquaamerica.com				
Contact Person's Fax Number:	(407) 339-7490				

B. Water Treatment Plant Information

Plant Name:	Harmony Homes			Plant Telephone Number:	407-339-5424	
Plant Address:	101 Plymouth Avenue	City:	Altamonte Spr	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:	216,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator:	William Trendel	C	6411			
Other Operators:						
	Terrence McCarthy	C	4617	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.

William Trendel 12/7/05
 Signature and Date

William Trendel
 Printed or Typed Name

C-6411
 License Number

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

PWS Identification Number: 3590497 Plant Name: Harmony Homes

III. Daily Data for the Month/Year of: Nov. 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 Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										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 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	11,600		1.6										1.3
2	X	24.0	10,600		1.7										1.3
3	X	24.0	12,100		0.5										0.7
4	X	24.0	11,300		1.1										0.8
5	X	24.0	10,500												
6	X	24.0	10,500		1.2										0.7
7	X	24.0	12,600		1.1										0.8
8	X	24.0	12,400		1.0										0.8
9	X	24.0	10,800		2.0										1.7
10	X	24.0	12,200		2.0										1.7
11	X	24.0	13,300		0.9										0.9
12	X	24.0	15,700		1.0										0.7
13	X	24.0	11,200												
14	X	24.0	11,200		1.6										1.3
15	X	24.0	11,600		1.1										0.9
16	X	24.0	11,200		1.4										1.2
17	X	24.0	12,400		0.7										1.0
18	X	24.0	15,000		1.2										1.0
19	X	24.0	10,600												
20	X	24.0	10,600		1.4										1.2
21	X	24.0	8,000		1.5										1.2
22	X	24.0	11,300		1.3										1.1
23	X	24.0	11,700		0.8										0.6
24	X	24.0	13,100		0.8										0.5
25	X	24.0	13,400		1.1										0.7
26	X	24.0	16,100		0.8										0.6
27	X	24.0	11,200												
28	X	24.0	11,200		1.0										0.8
29	X	24.0	10,300		2.0										1.7
30	X	24.0	10,400		1.0										0.8
31	X	24.0													
Total			354,100												
Average			11,803												
Maximum			16,100												

* 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: Dec. 2005

A. Public Water System (PWS) Information

PWS Name:	Harmony Homes			PWS Identification Number:	3590497
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input checked="" type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	64			Total Population Served at End of Month:	158
PWS Owner:	Aqua Utilities, Florida				
Contact Person:	William Trendel			Contact Person's Title:	Senior Facilities Operator
Contact Person's Mailing Address:	140 Hope Street	City:	Longwood	State:	Florida
Contact Person's Telephone Number:	(407)339-5424			Contact Person's Fax Number:	(407) 339-7490
Contact Person's E-Mail Address:	btrendel@aquaamerica.com				

B. Water Treatment Plant Information

Plant Name:	Harmony Homes			Plant Telephone Number:	407-339-5424
Plant Address:	101 Plymouth Avenue	City:	Altamonte Spr	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:	216,000				

Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C
Licensed Operators:	Name	License Class	License Number	Day(s) / Shift(s) Worked	
Lead/Chief Operator:	William Trendel	C	6411		
Other Operators:					
	Terrence McCarthy	C	4617	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.

William Trendel 11/6/06
Signature and Date

William Trendel
Printed or Typed Name

C-6411
License Number