

Imperial Mobile Terrace

Docket No. 060368-WS

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

Florida

VOLUME 6

Book 7

Set 16 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

Imperial Mobile Terrace

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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:	Imperial Terrace			PWS Identification Number:	3350584
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:	242			Total Population Served at End of Month:	605
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:	craig@florida-water.com				

B. Water Treatment Plant Information

Plant Name:	Imperial Terrace			Plant Telephone Number:	352-787-0980
Plant Address:	11709 Magnolia Drive			City:	Tavres
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:	288,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	
				C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked	
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift	
Other Operators:	Brian Heath	C	5825	Days 1st Shift	
	John Worrell	C	6597	Days 1st Shift	
	Gary Kissick	C	7846	Days 1st Shift	
	Mike Ponticelli	C	8450	Days 1st Shift	

II. Certification by Lead/Chief Operator

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

Signature and Date 2/9/2004 0:00

Will Fontaine
Printed or Typed Name

C-6813
License Number

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

PWS Identificaiton Number: 3350584 Plant Name: Imperial Terrace

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 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	1,600		0.9									0.7	
2	X	24.0	3,500		0.9									0.7	
3	X	24.0	1,700		0.8										
4		24.0	4,150												
5	X	24.0	4,150		0.9									0.6	
6	X	24.0	3,500		0.8									0.6	
7	X	24.0	900		0.9									0.7	
8	X	24.0	2,000		0.9									0.7	
9	X	24.0	300		0.9									0.7	
10	X	24.0			0.8										
11		24.0	1,900												
12	X	24.0	1,900		0.8									0.6	
13	X	24.0	600		0.8									0.6	
14	X	24.0	14,490		0.9									0.7	
15	X	24.0	2,200		0.9									0.6	
16	X	24.0	1,200		0.8									0.6	
17		24.0	1,000												
18	X	24.0	1,000		0.8										
19	X	24.0	1,400		0.8									0.6	
20	X	24.0	300		0.8									0.6	
21	X	24.0	600		0.8									0.6	
22	X	24.0	2,000		0.9									0.7	
23	X	24.0	800		0.8									0.6	
24	X	24.0	2,000		1.0										
25		24.0	2,550												
26	X	24.0	2,550		1.0									0.8	
27	X	24.0	466		0.8									0.6	
28	X	24.0	466		0.8									0.6	
29	X	24.0	467		0.8									0.6	
30	X	24.0	1,000		0.8									0.6	
31	X	24.0	1,000												
Total			61,689												
Average			1,990												
Maximum			14,490												

* 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: Imperial Terrace		PWS Identification Number: 3350584	
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: 243		Total Population Served at End of Month: 608	
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: Imperial Terrace		Plant Telephone Number: 352-787-0980	
Plant Address: 11709 Magnolia Drive		City: Taveres	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: 288,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Will Fontaine	C	6813
Other Operators:	Brian Heath	C	5825
	John Worrell	C	6597
	Gary Kissick	C	7846
	Mike Ponticelli	C	8450

II. Certification by Lead/Chief Operator

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

3/9/2004 0:00	Will Fontaine	C-6813
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 3350584 Plant Name: Imperial Terrace

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

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

Days Plant Started or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Measurement Point During Peak Flow, mg/L	Disinfectant Contact Time Before or at First Customer Measurement Point During Peak Flow, minutes	Lowest CT Disinfectant Provided Before or at First Customer Flow, mg-min/L	Temp of Water, °C If Applicable	pH of Water, If Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose Required, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demostatate Four-Log Virus Inactivation, if Applicable*																
														UV Dose	CT Calculations	UV Dose														
1		240	1,050	0.8										0.5																
2	X	240	1,050	0.8										0.5																
3	X	240	500	0.8										0.5																
4	X	240	2,000	0.9										0.7																
5	X	240	25,010	1.3										1.0																
6	X	240	1,800	0.9										0.6																
7	X	240	1,100	0.8																										
8	X	240	1,100	0.8																										
9	X	240	2,100	0.8										0.6																
10	X	240	3,400	0.8										0.5																
11	X	240	3,000	0.7										0.5																
12	X	240	2,700	0.7										0.5																
13	X	240	1,800	0.8										0.6																
14	X	240	2,200	0.9																										
15		240	2,150																											
16	X	240	2,150	1.0										0.7																
17	X	240	400	0.9										0.6																
18	X	240	900	0.9										0.6																
19	X	240	2,000	0.9										0.6																
20	X	240	4,550	1.0										0.7																
21	X	240	3,800	1.0																										
22		240	7,050																											
23	X	240	7,050	1.0										0.7																
24	X	240	400	0.9										0.6																
25	X	240	300	0.9										0.6																
26	X	240	600	0.8										0.6																
27	X	240	1,100	0.9										0.6																
28	X	240	1,100	1.0																										
29		240	2,500																											
Total													84,860																	
Average													2,926																	
Maximum													25,010																	

* 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: 3350584 Plant Name: Imperial Terrace

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	X	24.0	1,667		0.8							0.5	
2	X	24.0	3,400		0.9							0.6	
3	X	24.0	5,700		1.0							0.8	
4	X	24.0	2,300		0.9							0.6	
5	X	24.0	3,300		0.9							0.6	
6		24.0	4,250										
7	X	24.0	4,250		1.1								
8	X	24.0	3,600		0.9							0.6	
9	X	24.0	2,200		0.9							0.6	
10	X	24.0	5,200		1.0							0.8	
11	X	24.0	14,160		1.0							0.8	
12	X	24.0	7,700		1.0							0.8	
13	X	24.0	8,700		1.0								
14		24.0	3,500										
15	X	24.0	3,500		1.0							0.7	
16	X	24.0	2,900		0.9							0.6	
17	X	24.0	3,300		1.0							0.7	
18	X	24.0	2,600		0.9							0.6	
19	X	24.0	2,900		1.0							0.7	
20	X	24.0	6,700		1.0								
21		24.0	5,150										
22	X	24.0	5,150		1.0							0.7	
23	X	24.0	1,400		1.0							0.7	
24	X	24.0	2,100		0.9							0.6	
25	X	24.0	4,000		0.9							0.6	
26	X	24.0	4,800		2.2							1.7	
27	X	24.0	700		1.6								
28		24.0	7,650										
29	X	24.0	7,650		1.3							1.0	
30	X	24.0	1,100		1.3							1.0	
31	X	24.0	1,600		1.3							0.9	
Total			133,127										
Average			4,294										
Maximum			14,160										

* 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:	Imperial Terrace			PWS Identification Number:	3350584
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:	244			Total Population Served at End of Month:	610
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:	craigca@florida-water.com				

B. Water Treatment Plant Information

Plant Name:	Imperial Terrace			Plant Telephone Number:	352-787-0980
Plant Address:	11709 Magnolia Drive		City:	Tavares	State: Florida Zip Code: 32778
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:	288,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked	
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift	
Other Operators:	Brian Heath	C	5825	Days 1st Shift	
	John Worrell	C	6597	Days 1st Shift	
	Gary Kissick	C	7846	Days 1st Shift	
	Adam Michaelson		Trainee	Days 1st Shift	

II. Certification by Lead/Chief Operator

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

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

A. Public Water System (PWS) Information

PWS Name: Imperial Terrace		PWS Identification Number: 3350584	
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: 245		Total Population Served at End of Month: 613	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida Zip Code: 32860-9520
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craig@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Imperial Terrace		Plant Telephone Number: 352-787-0980	
Plant Address: 11709 Magnolia Drive		City: Taveres	State: Florida Zip Code: 32778
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: 288,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number / Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813 / Days 1st Shift
Other Operators:	Brian Heath	C	5825 / Days 1st Shift
	John Worrell	C	6597 / Days 1st Shift
	Gary Kissick	C	7846 / Days 1st Shift
	Adam Michaelson		Trainee / Days 1st Shift

II. Certification by Lead/Chief Operator

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

6/8/2004 0:00	Will Fontaine	C-6813
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 3350584 | Plant Name: Imperial Terrace

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

Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C	Lowest CT Provided Before or at First Customer	Flow, mg-min/L During Peak	Temp of Water, °C If Applicable	pH of Water	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at 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

Day of the Month	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C	Lowest CT Provided Before or at First Customer	Flow, mg-min/L During Peak	Temp of Water, °C If Applicable	pH of Water	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	550	1.2										
2		24.0	550											
3	X	24.0	1,100	1.4										0.9
4	X	24.0	250	1.2										0.8
5	X	24.0	250	1.2										0.8
6	X	24.0	2,900	1.8										1.3
7	X	24.0	26,850	1.7										1.2
8	X	24.0	26,850	1.8										
9		24.0	2,000											
10	X	24.0	2,000	1.7										1.2
11	X	24.0	2,100	1.5										1.1
12	X	24.0	1,100	1.2										1.0
13	X	24.0	1,100	1.6										1.2
14	X	24.0	15,930	1.5										1.0
15	X	24.0	900	0.7										
16		24.0	900											
17	X	24.0	1,800	1.9										1.3
18	X	24.0	100	1.7										1.2
19	X	24.0	700	1.6										1.2
20	X	24.0	4,200	1.6										1.0
21	X	24.0	1,300	1.7										1.0
22	X	24.0	1,650	1.7										
23		24.0	1,650											
24	X	24.0	3,300	1.7										1.1
25	X	24.0	1,700	1.8										1.2
26	X	24.0	4,400	1.8										1.1
27	X	24.0	4,500	1.8										1.2
28	X	24.0	3,900	1.8										1.2
29	X	24.0	4,500	1.8										
30		24.0	4,250											
31	X	24.0	4,250	1.9										1.1
Total		127,530												
Average		4,114												
Maximum		26,850												

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Imperial Terrace		PWS Identification Number: 3350584	
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: 240		Total Population Served at End of Month: 600	
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: Imperial Terrace		Plant Telephone Number: 352-787-0980	
Plant Address: 11709 Magnolia Drive		City: Taveres	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: 288,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Will Fontaine	C	6813
Other Operators:	Brian Heath	C	5825
	John Worrell	C	6597
	Gary Kissick	C	7846

II. Certification by Lead/Chief Operator

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

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

PWS Identificaiton Number: 3350584 Plant Name: Imperial Terrace

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*								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			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	900		1.7								1.0	
2	X	24.0	900		1.7								1.0	
3	X	24.0	5,100		1.9								1.2	
4	X	24.0	2,800		1.9								1.2	
5	X	24.0	400		1.8									
6		24.0	600											
7	X	24.0	600		1.5								1.0	
8	X	24.0	0		1.5								1.0	
9	X	24.0	10,080		1.4								0.8	
10	X	24.0	2,300		1.4								0.9	
11	X	24.0	0		1.3								0.9	
12	X	24.0	58,000		1.7									
13		24.0	1,900											
14	X	24.0	1,900		1.5								0.9	
15	X	24.0	0		1.4								0.8	
16	X	24.0	0		1.4								0.8	
17	X	24.0	1,900		1.5								0.9	
18	X	24.0	300		1.6								1.1	
19		24.0	1,150											
20	X	24.0	1,150		1.6									
21	X	24.0	0		1.5								1.0	
22	X	24.0	0		1.5								1.0	
23	X	24.0	0		1.4								1.0	
24	X	24.0	2,700		1.6								1.0	
25	X	24.0	0		1.5								0.9	
26	X	24.0	0		1.5									
27		24.0	350											
28	X	24.0	350		1.5								1.0	
29	X	24.0	0		1.5								1.0	
30	X	24.0	0		1.3								1.0	
Total			93,380											
Average			4,915											
Maximum			58,000											

* 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: July, 2004

A. Public Water System (PWS) Information

PWS Name: Imperial Terrace		PWS Identification Number: 3350584	
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: 240		Total Population Served at End of Month: 600	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 2315 Griffin Road		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: Imperial Terrace		Plant Telephone Number: 352-787-0980	
Plant Address: 11709 Magnolia Drive		City: Taveres	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: 288,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number: Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813 Days 1st Shift
Other Operators:	Brian Heath	C	5825 Days 1st Shift
	John Worrell	C	6597 Days 1st Shift

II. Certification by Lead/Chief Operator

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name:	Imperial Terrace	PWS Identification Number:	3350584
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:	240	Total Population Served at End of Month:	600
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	2315 Griffin Road	City:	Leesburg
		State:	Florida
		Zip Code:	34748
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com		

B. Water Treatment Plant Information

Plant Name:	Imperial Terrace	Plant Telephone Number:	352-787-0980
Plant Address:	11709 Magnolia Drive	City:	Taveres
		State:	Florida
		Zip Code:	32778
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:	288,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

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

II. Certification by Lead/Chief Operator

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

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

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

PWS Identificaiton Number: 3350584 Plant Name: Imperial Terrace

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	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		24.0	150												
2	X	24.0	150		0.9										0.8
3	X	24.0	0		1.5										0.8
4	X	24.0	0		0.5										0.9
5	X	24.0	1,300		0.9										0.6
6	X	24.0	142,000		2.2										2.2
7	X	24.0	0		1.6										
8		24.0	300												
9	X	24.0	300		1.5										1.3
10	X	24.0	0		1.2										1.0
11	X	24.0	6,510		1.4										1.1
12	X	24.0	1,500		1.4										1.2
13	X	24.0	0		1.2										1.2
14	X	24.0	100		1.3										
15		24.0	25,100												
16	X	24.0	25,100		1.5										1.2
17	X	24.0	0		1.4										1.2
18	X	24.0	1,830		1.4										1.1
19	X	24.0	3,100		1.5										1.1
20	X	24.0	0		1.4										1.2
21	X	24.0	1,800		1.4										
22		24.0	2,650												
23	X	24.0	2,650		1.5										1.3
24	X	24.0	1,000		1.4										1.2
25	X	24.0	0		1.0										1.0
26	X	24.0	3,100		1.9										1.0
27	X	24.0	800		1.6										1.1
28	X	24.0	0		1.6										
29		24.0	2,050												
30	X	24.0	2,050		1.7										1.2
31	X	24.0	0		1.4										1.1
Total			223,540												
Average			10,645												
Maximum			142,000												

* 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: 3350584 Plant Name: Imperial Terrace

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

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

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

Month	Day of the Month (Place "X")	Days Plant Staffed or Visited by Operator	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Measurement	Disinfectant Contact Time Before or at First Customer Measurement	Temp of Water, °C if Applicable	pH of Water	Minimum CT Required, mg·min/L	Lowest UV Dose, mW-sec/cm ²	Remote Point in Distribution System, mg/L	CT Calculations			Average	Maximum
													Lowest CT Provided	UV Dose Required	UV Dose		
1	X			24.0	4,440	1.2	1.2					0.9				96,050	8,720
2	X			24.0	5,900	2.2	2.2									3,202	
3	X			24.0	500	1.7	1.7										
4	X			24.0	1,100	1.7	1.7										
5				24.0	1,800												
6	X			24.0	1,800												
7	X			24.0	700	1.4	1.4										
8	X			24.0	4,390	1.6	1.6										
9	X			24.0	6,400	1.5	1.5										
10	X			24.0	800	1.7	1.7										
11	X			24.0	1,800	1.7	1.7										
12				24.0	4,000												
13	X			24.0	4,000	1.5	1.5										
14	X			24.0	1,900	1.6	1.6										
15	X			24.0	8,720	1.6	1.6										
16	X			24.0	3,300	1.7	1.7										
17	X			24.0	4,500	1.8	1.8										
18	X			24.0	4,500	1.7	1.7										
19				24.0	3,550												
20	X			24.0	3,550	1.8	1.8										
21	X			24.0	3,800	1.6	1.6										
22	X			24.0	1,600	1.6	1.6										
23	X			24.0	3,000	1.8	1.8										
24	X			24.0	4,300	1.7	1.7										
25	X			24.0	3,100	1.7	1.7										
26				24.0	1,100												
27	X			24.0	1,100	1.8	1.8										
28	X			24.0	4,000	1.7	1.7										
29	X			24.0	1,000	1.7	1.7										
30	X			24.0	5,400	1.8	1.8										
31				24.0	0												
Total																	
Average																	
Maximum																	

* 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: Imperial Terrace		PWS Identification Number: 3350584	
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: 240		Total Population Served at End of Month: 600	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 2315 Griffin Road		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: Imperial Terrace		Plant Telephone Number: 352-787-0980		
Plant Address: 11709 Magnolia Drive		City: Taveres	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: 288,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Marty Neal	C	10027	Days 1st Shift

II. Certification by Lead/Chief Operator

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

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

PWS Identification Number: 3350584 Plant Name: Imperial Terrace

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

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

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

Day of the Month	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 if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	2,800		1.4								1.0	
2	X	24.0	1,760		1.3								0.8	
3	X	24.0	2,600		1.3								9.0	
4	X	24.0	2,300		1.3								0.8	
5	X	24.0	0		1.2								0.9	
6	X	24.0	1,600		1.3									
7		24.0	3,100											
8	X	24.0	3,100		1.3								0.8	
9	X	24.0	3,100		1.6								1.0	
10	X	24.0	0		1.5								1.0	
11	X	24.0	4,100		1.2								0.9	
12	X	24.0	8,400		1.1								1.0	
13	X	24.0	0		1.1									
14		24.0	2,000											
15	X	24.0	2,000		1.0								0.8	
16	X	24.0	0		1.0								0.9	
17	X	24.0	0		0.9								0.9	
18	X	24.0	4,400		1.2								0.9	
19	X	24.0	900		1.1								1.0	
20	X	24.0	300		1.1									
21		24.0	1,900											
22	X	24.0	1,900		1.0								1.0	
23	X	24.0	2,200		1.3								0.8	
24	X	24.0	2,600		1.4								1.0	
25	X	24.0	1,800		1.1								0.9	
26	X	24.0	300		1.0								0.9	
27	X	24.0	0		1.0									
28		24.0	2,250											
29	X	24.0	2,250		0.9								0.8	
30	X	24.0	0		1.0								0.8	
31		24.0	0											
Total			57,660											
Average			2,507											
Maximum			8,400											

* 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



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: Imperial Terrace		PWS Identification Number: 3350584	
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: 240		Total Population Served at End of Month: 600	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 2315 Griffin Road		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: Imperial Terrace		Plant Telephone Number: 352-787-0980	
Plant Address: 11709 Magnolia Drive		City: Taveres	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: 288,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Will Fontaine	C	6813
Other Operators:	Marty Neal	C	10027

II. Certification by Lead/Chief Operator

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

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

PWS Identification Number: 3350584 Plant Name: Imperial Terrace

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

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	Peak Flow, mg/L	Customer During Peak Flow, mg/L	Disinfectant Measurement (T) at C	Disinfectant Before or at Lowest CT	Contact Time	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 Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	System, mg/L	Days of the Month	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*				
																		Lowest Residual Disinfectant Concentration at Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	Minimum UV Dose Required, mW-sec/cm ²	Lowest UV Dose, mW-sec/cm ²		
1	X	24.0	3,890	1.1														1	1.1	24.0	3,890	
2	X	24.0	2,100	1.2															2	1.2	24.0	2,100
3	X	24.0	0	1.0															3	1.0	24.0	0
4	X	24.0	1,600	1.1															4	1.1	24.0	1,600
5		24.0	1,800																5		24.0	1,800
6	X	24.0	1,800	1.0															6	1.0	24.0	1,800
7	X	24.0	900	1.0															7	1.0	24.0	900
8	X	24.0	1,500	0.9															8	0.9	24.0	1,500
9	X	24.0	5,100	1.3															9	1.3	24.0	5,100
10	X	24.0	500	1.1															10	1.1	24.0	500
11	X	24.0	1,200	1.0															11	1.0	24.0	1,200
12		24.0	2,750																12		24.0	2,750
13	X	24.0	2,750	1.3															13	1.3	24.0	2,750
14	X	24.0	200	1.0															14	1.0	24.0	200
15	X	24.0	0	1.0															15	1.0	24.0	0
16	X	24.0	3,000	0.9															16	0.9	24.0	3,000
17	X	24.0	300	0.9															17	0.9	24.0	300
18	X	24.0	600	1.0															18	1.0	24.0	600
19		24.0	3,600																19		24.0	3,600
20	X	24.0	3,600	1.2															20	1.2	24.0	3,600
21	X	24.0	1,500	1.2															21	1.2	24.0	1,500
22	X	24.0	1,100	1.0															22	1.0	24.0	1,100
23	X	24.0	2,500	1.1															23	1.1	24.0	2,500
24	X	24.0	300	1.2															24	1.2	24.0	300
25		24.0	800																25		24.0	800
26	X	24.0	800	1.1															26	1.1	24.0	800
27	X	24.0	1,100	1.0															27	1.0	24.0	1,100
28	X	24.0	1,100	0.9															28	0.9	24.0	1,100
29	X	24.0	1,700	1.0															29	1.0	24.0	1,700
30	X	24.0	4,700	1.1															30	1.1	24.0	4,700
31	X	24.0	2,700	1.3															31	1.3	24.0	2,700
Total																		55,490				
Average																		1,913				
Maximum																		5,100				

* 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 Identificaiton Number: 3350584 Plant Name: Imperial Terrace

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										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	2,600		1.3										
2		24.0	4,450												
3	X	24.0	4,450		1.3									0.9	
4	X	24.0	2,400		1.1									0.8	
5	X	24.0	3,100		1.0									0.9	
6	X	24.0	3,100		1.1									0.9	
7	X	24.0	2,000		1.3									1.0	
8	X	24.0	3,800		1.2										
9		24.0	2,750												
10	X	24.0	2,750		1.4									1.0	
11	X	24.0	5,100		1.3									1.0	
12	X	24.0	4,580		1.3									0.9	
13	X	24.0	4,200		1.3									1.0	
14	X	24.0	300		1.3									0.9	
15	X	24.0	0		1.3										
16		24.0	3,000												
17	X	24.0	3,000		1.6									1.0	
18	X	24.0	2,700		1.4									1.0	
19	X	24.0	2,100		1.6									1.1	
20	X	24.0	1,600		1.4									0.9	
21	X	24.0	3,300		1.6									1.0	
22	X	24.0	4,900		1.5										
23		24.0	950												
24	X	24.0	950		1.4									1.0	
25	X	24.0	1,800		1.3									0.8	
26	X	24.0	1,600		1.4									0.9	
27	X	24.0	4,400		1.5									0.9	
28	X	24.0	6,900		1.5									1.0	
29	X	24.0	4,000		1.5										
30		24.0	7,400												
31	X	24.0	7,400		1.6									1.1	
Total			101,580												
Average			3,386												
Maximum			7,400												

* 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: February, 2005

A. Public Water System (PWS) Information

PWS Name: Imperial Terrace		PWS Identification Number: 3350584	
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: 245		Total Population Served at End of Month: 490	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aquaamerica.com		Contact Person's Fax Number: (352) 787-6333	

B. Water Treatment Plant Information

Plant Name: Imperial Terrace		Plant Telephone Number: 352-787-0980		
Plant Address: 11709 Magnolia Drive		City: Taveres	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32778		
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 288,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Marty Neal	C	10027	Days 1st Shift

II. Certification by Lead/Chief Operator

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

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

PWS Identification Number: 3350584 Plant Name: Imperial Terrace

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	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	3,500		1.5								1.0	
2	X	24.0	3,800		1.5								0.9	
3	X	24.0	3,200		1.5								1.0	
4	X	24.0	2,500		1.4								1.0	
5	X	24.0	3,500		1.4									
6		24.0	6,100											
7	X	24.0	6,100		1.6								1.0	
8	X	24.0	5,200		1.5								0.8	
9	X	24.0	12,100		1.6								1.2	
10	X	24.0	9,000		1.5								1.1	
11	X	24.0	6,300		1.4								1.0	
12	X	24.0	8,200		1.5									
13		24.0	11,900											
14	X	24.0	11,900		1.6								1.0	
15	X	24.0	7,700		1.6								1.2	
16	X	24.0	11,800		2.0								1.4	
17	X	24.0	3,300		1.7								0.8	
18	X	24.0	11,200		1.7								1.3	
19	X	24.0	4,300		1.3									
20		24.0	9,150											
21	X	24.0	9,150		1.6								1.2	
22	X	24.0	5,100		1.7								1.4	
23	X	24.0	3,800		1.2								1.1	
24	X	24.0	6,300		1.6								1.2	
25	X	24.0	3,700		1.4								1.1	
26	X	24.0	3,600		1.5									
27		24.0	3,900											
28	X	24.0	3,900		1.6								1.2	
29		24.0	0											
30		24.0	0											
31		24.0	0											
Total			180,200											
Average			6,436											
Maximum			12,100											

* 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

PWS Identification Number: 3350584 Plant Name: Imperial Terrace

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

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

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

Days Plant Started or Operator Visited by	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C)	Disinfectant Contact Time (T) at C	Lowest CT Before or at Customer	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 Distribution Point in System, mg/L	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*			UV Dose			
													Lowest CT	Disinfectant Provided	Disinfectant Measurement	Peak Flow, mg/L	Customer During Peak	Peak Flow, minutes	Flow, mg-min/L
1	X	240	3,600	1.5															
2	X	240	5,000	1.6															
3	X	240	4,000	1.4															
4	X	240	0	1.4															
5	X	240	4,000	1.5															
6		240	4,250																
7	X	240	4,250	1.6															
8	X	240	4,200	1.6															
9	X	240	1,600	1.3															
10	X	240	5,970	1.3															
11	X	240	3,600	1.4															
12	X	240	3,200	1.3															
13		240	6,800																
14	X	240	6,800	1.3															
15	X	240	300	1.0															
16	X	240	2,300	1.3															
17	X	240	2,600	1.3															
18	X	240	1,300	1.2															
19	X	240	0	1.3															
20		240	4,050																
21	X	240	4,050	1.4															
22	X	240	1,000	1.4															
23	X	240	1,700	1.3															
24	X	240	2,400	1.3															
25	X	240	2,870	1.3															
26	X	240	2,000	1.3															
27		240	2,300																
28	X	240	2,300	1.2															
29	X	240	4,300	1.0															
30	X	240	1,900	1.4															
31	X	240	3,100	1.4															
Total		95,740																	
Average		3,301																	
Maximum		6,800																	

* 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, 2005

A. Public Water System (PWS) Information

PWS Name:	Imperial Terrace			PWS Identification Number:	3350584
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:	245			Total Population Served at End of Month:	490
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com				

B. Water Treatment Plant Information

Plant Name:	Imperial Terrace			Plant Telephone Number:	352-787-0980
Plant Address:	11709 Magnolia Drive		City:	Taveres	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:	288,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	
				C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked	
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift	
Other Operators:	Marty Neal	C	10027	Days 1st Shift	

II. Certification by Lead/Chief Operator

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

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

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

PWS Identification Number: 3350584 Plant Name: Imperial Terrace

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										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	2,400		1.4									1.1	
2	X	24.0	1,200		0.7										
3		24.0	3,100												
4	X	24.0	3,100		1.3									1.1	
5	X	24.0	3,200		1.4									1.0	
6	X	24.0	2,200		1.3									1.0	
7	X	24.0	4,700		1.5									1.1	
8	X	24.0	0		1.4									1.0	
9		24.0	2,500												
10	X	24.0	2,500		1.3										
11	X	24.0	2,500		0.6									0.9	
12	X	24.0	1,400		1.4									1.0	
13	X	24.0	0		1.2									0.9	
14	X	24.0	6,090		1.5									0.8	
15	X	24.0	3,500		1.4									0.4	
16	X	24.0	0		1.2										
17		24.0	5,350												
18	X	24.0	5,350		1.4									1.0	
19	X	24.0	2,600		1.3									0.8	
20	X	24.0	0		1.2									0.9	
21	X	24.0	6,800		1.5									1.0	
22	X	24.0	2,500		1.4									1.0	
23	X	24.0	1,400		1.0									0.9	
24		24.0	21,000												
25	X	24.0	21,000		0.7									0.8	
26	X	24.0	0		0.7									0.8	
27	X	24.0	0		0.7									1.0	
28	X	24.0	3,200		0.5									0.9	
29	X	24.0	1,400		0.8									0.8	
30	X	24.0	0		0.8										
31		24.0	0												
Total			108,990												
Average			4,739												
Maximum			21,000												

* 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: May, 2005

A. Public Water System (PWS) Information

PWS Name: Imperial Terrace		PWS Identification Number: 3350584	
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: 245		Total Population Served at End of Month: 490	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aguaamerica.com		Contact Person's Fax Number: (352) 787-6333	

B. Water Treatment Plant Information

Plant Name: Imperial Terrace		Plant Telephone Number: 352-787-0980	
Plant Address: 11709 Magnolia Drive		City: Tavares	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32778	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 288,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): V			
Licensed Operators	Name	License Class	License Number / Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813 / Days 1st Shift
Other Operators:	Marty Neal	C	10027 / Days 1st Shift

II. Certification by Lead/Chief Operator

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

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

PWS Identification Number: 3350584 Plant Name: Imperial Terrace
 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

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	Contact Time (T) at C	Lowest CT Disinfectant Provided Before or at First Measurement	Flow, mg-min./l.	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min./l.	Operating UV Dose, mW-sec/cm ²	Required UV Dose, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*	
														UV Dose	UV Dose
1	X	24.0	1,000	0.6										0.9	
2	X	24.0	1,000	0.6										1.0	
3	X	24.0	500	0.6										0.9	
4	X	24.0	500	0.6										0.9	
5	X	24.0	1,200	0.7										0.9	
6	X	24.0	20	0.5										0.9	
7	X	24.0	200	0.7										0.9	
8	X	24.0	200	0.7										0.9	
9	X	24.0	200	0.7										0.9	
10	X	24.0	200	0.7										0.9	
11	X	24.0	2,050	0.7										0.9	
12	X	24.0	1,900	1.4										1.0	
13	X	24.0	517	1.3										1.0	
14	X	24.0	517	1.2										0.8	
15		24.0	517												
16	X	24.0	1,550	1.3										0.9	
17	X	24.0	833	1.2										1.0	
18	X	24.0	833	1.0										0.9	
19	X	24.0	833	1.3										0.9	
20	X	24.0	400	1.3										1.0	
21	X	24.0	400	1.1											
22		24.0	400												
23	X	24.0	800	1.0										0.8	
24	X	24.0	600	1.0										0.8	
25	X	24.0	600	0.9										0.9	
26	X	24.0	5,200	1.1										0.9	
27	X	24.0	1,500	1.3										1.0	
28	X	24.0	1,100	1.3											
29		24.0	2,550												
30	X	24.0	1,275	1.3										0.9	
31	X	24.0	1,275	1.2										0.9	
Total		30,670													
Average		989													
Maximum		5,200													

* 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:	Imperial Terrace	PWS Identification Number:	3350584
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:	245	Total Population Served at End of Month:	490
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
		Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaamerica.com		

B. Water Treatment Plant Information

Plant Name:	Imperial Terrace	Plant Telephone Number:	352-787-0980
Plant Address:	11709 Magnolia Drive	City:	Tavares
		State:	Florida
		Zip Code:	32778
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:	288,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Marty Neal	C	10027	Days 1st Shift

II. Certification by Lead/Chief Operator

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

Signature and Date	<u>Will Fontaine</u>	<u>C-6813</u>
	Printed or Typed Name	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: July, 2005

A. Public Water System (PWS) Information

PWS Name: <u>Imperial Terrace</u>		PWS Identification Number: <u>3350584</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>245</u>		Total Population Served at End of Month: <u>490</u>	
PWS Owner: <u>Aqua Utilities Florida</u>			
Contact Person: <u>Brian Heath</u>		Contact Person's Title: <u>Area Manager</u>	
Contact Person's Mailing Address: <u>PO Box 490310</u>		City: <u>Leesburg</u>	State: <u>Florida</u> Zip Code: <u>34749</u>
Contact Person's Telephone Number: <u>(352) 787-0980</u>		Contact Person's Fax Number: <u>(352) 787-6333</u>	
Contact Person's E-Mail Address: <u>beheath@aquaaamerica.com</u>			

B. Water Treatment Plant Information

Plant Name: <u>Imperial Terrace</u>		Plant Telephone Number: <u>352-787-0980</u>		
Plant Address: <u>11709 Magnolia Drive</u>		City: <u>Tavares</u>	State: <u>Florida</u> Zip Code: <u>32778</u>	
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: <u>288,000</u>				
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>V</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	<u>Will Fontaine</u>	<u>C</u>	<u>6813</u>	<u>Days 1st Shift</u>
Other Operators:	<u>Marty Neal</u>	<u>C</u>	<u>10027</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.

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

PWS Identificaiton Number: 3350584 Plant Name: Imperial Terrace

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	X	24.0	10		0.8							0.8	
2		24.0	50										
3	X	24.0	10		0.9								
4	X	24.0	10		0.9							0.8	
5	X	24.0	10		0.8							0.8	
6	X	24.0	10		0.7							0.8	
7	X	24.0	700		1.0							0.9	
8	X	24.0	300		1.1							0.9	
9	X	24.0	10		1.0								
10		24.0	10										
11	X	24.0	10		0.9							0.8	
12	X	24.0	10		0.9							0.9	
13	X	24.0	10		0.9							0.8	
14	X	24.0	110		1.0							0.8	
15	X	24.0	20		1.0							0.9	
16	X	24.0	100		1.0								
17		24.0	50										
18	X	24.0	50		1.0							0.8	
19	X	24.0	10		1.0							0.8	
20	X	24.0	10		0.9							1.0	
21	X	24.0	100		0.7							0.8	
22	X	24.0	500		0.9							0.8	
23	X	24.0	10		0.9								
24		24.0	10										
25	X	24.0	10		0.8							0.8	
26	X	24.0	400		0.9							0.8	
27	X	24.0	300		1.0							0.9	
28	X	24.0	2,300		1.0							1.0	
29	X	24.0	300		0.8							0.9	
30	X	24.0	200		0.9								
31		24.0	300										
Total			5,930										
Average			191										
Maximum			2,300										

* 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 Identificaiton Number: 3350584 Plant Name: Imperial Terrace

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				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	300		0.9								0.9	
2	X	24.0	10		0.9								0.8	
3	X	24.0	160		1.2								0.9	
4	X	24.0	500		1.1								0.9	
5	X	24.0	10		1.0								0.8	
6	X	24.0	300		1.0									
7		24.0	300											
8	X	24.0	300		0.7								0.8	
9	X	24.0	100		0.7								0.9	
10	X	24.0	2,210		0.9								0.9	
11	X	24.0	2,450		1.0								0.8	
12	X	24.0	100		1.0								0.9	
13	X	24.0	100		1.1									
14		24.0	500											
15	X	24.0	500		1.0								0.9	
16	X	24.0	10		1.0								0.9	
17	X	24.0	10		0.9								1.0	
18	X	24.0	1,300		0.9								0.9	
19	X	24.0	10		0.9								0.8	
20	X	24.0	400		0.9									
21		24.0	400											
22	X	24.0	400		1.0								0.9	
23	X	24.0	1,500		1.0								1.0	
24	X	24.0	3,400		1.0								0.9	
25	X	24.0	1,200		1.0								1.0	
26	X	24.0	10		0.8								0.8	
27	X	24.0	200		0.9									
28		24.0	200											
29	X	24.0	300		1.0								0.8	
30	X	24.0	10		1.0								0.9	
31	X	24.0	10		1.0								0.9	

Total	17,200
Average	555
Maximum	3,400

* 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, 2005

A. Public Water System (PWS) Information

PWS Name: Imperial Terrace		PWS Identification Number: 3350584	
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: 245		Total Population Served at End of Month: 490	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Imperial Terrace		Plant Telephone Number: 352-787-0980		
Plant Address: 11709 Magnolia Drive		City: Tavares	State: Florida	
		Zip Code: 32778		
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: 288,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Marty Neal	C	10027	Days 1st Shift

II. Certification by Lead/Chief Operator

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

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

PWS Identification Number: 3350584 Plant Name: Imperial Terrace

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

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

Ultraviolet Radiation Other (Describe):

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	X	24.0	1,000		1.1							0.9	
2	X	24.0	185		1.0							0.9	
3	X	24.0	175		1.0								
4		24.0	175										
5	X	24.0	175		1.0							0.9	
6	X	24.0	10		0.9							0.9	
7	X	24.0	370		1.0							0.9	
8	X	24.0	10		0.9							0.8	
9	X	24.0	10		0.8							0.9	
10	X	24.0	10		0.9								
11		24.0	600										
12	X	24.0	600		1.1							0.9	
13	X	24.0	100		1.0							0.9	
14	X	24.0	100		1.1							0.9	
15	X	24.0	100		1.0							0.9	
16	X	24.0	1,000		0.9							0.8	
17	X	24.0	200		0.9								
18		24.0	100										
19	X	24.0	100		1.0							0.9	
20	X	24.0	300		1.1							0.9	
21	X	24.0	1,300		1.0							0.9	
22	X	24.0	300		1.3							0.9	
23	X	24.0	200		1.1							0.9	
24	X	24.0	100		1.1								
25		24.0	700										
26	X	24.0	700		1.0							0.9	
27	X	24.0	100		1.0							0.9	
28	X	24.0	400		1.1							0.9	
29	X	24.0	2,100		1.3							1.1	
30	X	24.0	79,400		2.0							0.9	
31		24.0	0										
Total			90,620										
Average			3,021										
Maximum			79,400										

* 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: October, 2005

A. Public Water System (PWS) Information

PWS Name: <u>Imperial Terrace</u>		PWS Identification Number: <u>3350584</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>245</u>		Total Population Served at End of Month: <u>490</u>	
PWS Owner: <u>Aqua Utilities Florida</u>			
Contact Person: <u>Brian Heath</u>		Contact Person's Title: <u>Area Manager</u>	
Contact Person's Mailing Address: <u>PO Box 490310</u>		City: <u>Leesburg</u>	State: <u>Florida</u> Zip Code: <u>34749</u>
Contact Person's Telephone Number: <u>(352) 787-0980</u>		Contact Person's Fax Number: <u>(352) 787-6333</u>	
Contact Person's E-Mail Address: <u>beheath@aquaaamerica.com</u>			

B. Water Treatment Plant Information

Plant Name: <u>Imperial Terrace</u>		Plant Telephone Number: <u>352-787-0980</u>		
Plant Address: <u>11709 Magnolia Drive</u>		City: <u>Tavares</u>	State: <u>Florida</u> Zip Code: <u>32778</u>	
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: <u>288,000</u>				
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>V</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	<u>Will Fontaine</u>	<u>C</u>	<u>6813</u>	<u>Days 1st Shift</u>
Other Operators:	<u>Marty Neal</u>	<u>C</u>	<u>10027</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.

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

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

PWS Identification Number: 3350584 Plant Name: Imperial Terrace

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

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 Point During Customer Flow, mg/L	Disinfectant Contact Time Provided Before or at First Measurement Point During Customer Flow, minutes	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg·min/L	UV Dose, Operating UV Dose, mW·sec/cm ²	Lowest UV Dose, mW·sec/cm ²	Remone Point in Distribution System, mg/L	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*		CT Calculations		
												UV Dose	UV Dose	Lowest CT	UV Dose, Required	
1	X	240	100	1.8												
2		240	350													
3	X	240	350	2.5												
4	X	240	500	2.2												
5	X	240	100	1.8												
6	X	240	3,140	1.9												
7	X	240	500	1.2												
8	X	240	200	1.3												
9		240	300													
10	X	240	300	1.0												
11	X	240	400	0.9												
12	X	240	1,200	1.0												
13	X	240	1,000	1.1												
14	X	240	900	1.1												
15	X	240	100	1.0												
16		240	1,550													
17	X	240	1,550	1.0												
18	X	240	114,530	1.6												
19	X	240	900	1.4												
20	X	240	3,000	1.3												
21	X	240	2,000	1.3												
22		240	32,320													
23	X	240	32,320	1.5												
24	X	240	500	1.4												
25	X	240	200	1.3												
26	X	240	1,400	1.3												
27	X	240	500	1.2												
28	X	240	200	1.2												
29		240	333													
30		240	333													
31	X	240	333	1.2												
Total		201,410														
Average		6,497														
Maximum		114,530														

* 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: 3350584 Plant Name: Imperial Terrace

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										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	500		1.2										0.9
2	X	24.0	200		1.1										0.9
3	X	24.0	1,350		1.3										0.9
4	X	24.0	500		1.3										1.0
5	X	24.0	200		1.3										
6		24.0	500												
7	X	24.0	500		1.5										1.0
8	X	24.0	600		1.4										1.0
9	X	24.0	200		1.4										1.0
10	X	24.0	1,000		1.3										1.0
11	X	24.0	600		1.3										0.9
12	X	24.0	900		1.2										
13		24.0	1,100												
14	X	24.0	1,100		1.4										1.3
15	X	24.0	800		1.2										1.2
16	X	24.0	2,000		1.3										1.1
17	X	24.0	2,700		1.3										1.1
18	X	24.0	800		1.5										1.1
19	X	24.0	45,710		1.5										
20		24.0	850												
21	X	24.0	850		1.3										1.0
22	X	24.0	500		1.3										0.9
23	X	24.0	2,400		1.3										1.1
24	X	24.0	9,000		1.5										1.1
25	X	24.0	600		1.4										1.0
26	X	24.0	500		1.4										
27		24.0	850												
28	X	24.0	850		1.3										0.9
29	X	24.0	100		1.2										0.9
30	X	24.0	1,100		1.3										0.9
31		24.0	0												
Total			78,860												
Average			2,629												
Maximum			45,710												

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

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



Polymer Page 3 Due in December

See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Imperial Terrace		PWS Identification Number: 3350584	
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: 245		Total Population Served at End of Month: 490	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aquaaamerica.com		Contact Person's Fax Number: (352) 787-6333	

B. Water Treatment Plant Information

Plant Name: Imperial Terrace		Plant Telephone Number: 352-787-0980		
Plant Address: 11709 Magnolia Drive		City: Tavares	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: 288,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Marty Neal	C	10027	Days 1st Shift

II. Certification by Lead/Chief Operator

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

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

PWS Identification Number: 3350584 Plant Name: Imperial Terrace

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	X	24.0	500		1.2							0.8	
2	X	24.0	1,500		1.3							0.9	
3	X	24.0	700		1.3								
4		24.0	500										
5	X	24.0	500		1.3							0.9	
6	X	24.0	100		1.2							0.8	
7	X	24.0	3,210		1.3							0.8	
8	X	24.0	1,200		1.3							0.9	
9	X	24.0	100		1.2							0.9	
10	X	24.0	500		1.3								
11		24.0	1,550										
12	X	24.0	1,550		1.3							1.0	
13	X	24.0	100		1.2							1.0	
14	X	24.0	100		1.2							0.9	
15	X	24.0	300		1.2							1.0	
16	X	24.0	300		1.1							0.9	
17	X	24.0	800		1.1								
18		24.0	200										
19	X	24.0	200		1.1							0.9	
20	X	24.0	4,200		1.2							0.9	
21	X	24.0	5,500		1.2							1.0	
22	X	24.0	1,000		1.1							0.9	
23	X	24.0	200		1.1							0.9	
24	X	24.0	100		1.1								
25		24.0	500										
26	X	24.0	500		1.2							0.9	
27	X	24.0	1,200		1.2							0.9	
28	X	24.0	6,500		1.3							1.0	
29	X	24.0	2,000		1.3							1.0	
30	X	24.0	200		1.2							1.0	
31	X	24.0	700		1.3								
Total			36,510										
Average			1,178										
Maximum			6,500										

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