

ORIGINAL

**Piney Woods**

Docket No. 060368-WS

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

Florida

**VOLUME 6**

**Book 7**

**Set 36 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  
00866 JAN 26 8  
FPSC-COMMISSION CLERK

# Aqua Utilities Florida, Inc. Monthly Operating Reports

## Piney Woods

	<b>Tab Number</b>	<b>Page Number</b>
<b>Year: 2004</b>		
January	1	3
February	2	5
March	3	7
April	4	9
May	5	11
June	6	13
July	7	14
August	8	16
September	9	19
October	10	21
November	11	23
December	12	25
<b>Year: 2005</b>		
January	1	27
February	2	29
March	3	31
April	4	33
May	5	35
June	6	38
July	7	40
August	8	42
September	9	44
October	10	47
November	11	50
December	12	53

# 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: Piney Woods		PWS Identification Number: 3351021	
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: 171		Total Population Served at End of Month: 596	
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: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980		
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32731		
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fountaine	C	6813	Days 1st Shift
Other Operators:	Brian Heath	C	5825	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift
	Gary Kissick	C	7846	Days 1st Shift
	Mike Ponticelli	C	8450	Days 1st Shift

**II. Certification by Lead/Chief Operator**

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

2/9/2004 0:00	Will Fountaine	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 ID: 3351021 Plant Name: Piney Woods/Spring Lake Manor

**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

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

Days Plant Stuffed or Visited by Operator	Hours plant in Operation ("X")	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	Before or at First Customer During Peak Flow, mg-minutes	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm <sup>2</sup>	UV Dose Required, mW-sec/cm <sup>2</sup>	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 Demostate Four-Log Virus Inactivation, if Applicable*		
														CT Calculations	UV Dose	UV Dose
1	X	24.0	59,000	1.6								1.4				
2	X	24.0	48,000	1.7								1.2				
3	X	24.0	37,000	1.7												
4		24.0	64,500													
5	X	24.0	64,500	1.8								1.5				
6	X	24.0	38,000	1.9								1.6				
7	X	24.0	42,000	1.8								1.4				
8	X	24.0	38,000	1.7								1.5				
9	X	24.0	52,000	1.7								1.4				
10	X	24.0	30,000	1.6												
11		24.0	47,000													
12	X	24.0	47,000	1.4								1.2				
13	X	24.0	35,000	1.6								1.1				
14	X	24.0	36,500	1.5								1.2				
15	X	24.0	49,000	1.6								1.4				
16	X	24.0	44,000	1.6								1.5				
17	X	24.0	37,000	1.5												
18		24.0	50,000													
19	X	24.0	50,000	1.7								1.4				
20	X	24.0	35,000	1.7								1.5				
21	X	24.0	38,000	1.3								1.1				
22	X	24.0	36,000	1.6								1.3				
23	X	24.0	35,000	1.6												
24	X	24.0	31,000	1.7												
25		24.0	50,000													
26	X	24.0	50,000	1.3								1.0				
27	X	24.0	31,000	1.4								1.2				
28	X	24.0	30,000	1.3								1.0				
29	X	24.0	42,000	1.5								1.3				
30	X	24.0	40,000	1.2								1.1				
31	X	24.0	27,000	1.6												
<b>Total</b>			<b>1,313,500</b>													
<b>Average</b>			<b>42,371</b>													
<b>Maximum</b>			<b>64,500</b>													

\* 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.

<b>I. General Information for the Month/Year of:</b>	February, 2004
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**A. Public Water System (PWS) Information**

PWS Name: Piney Woods		PWS Identification Number: 3351021	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 170		Total Population Served at End of Month: 593	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
		Zip Code: 32860-9520	
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

**B. Water Treatment Plant Information**

Plant Name: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980	
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida
		Zip Code: 32731	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	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 3/9/2004 0:00

Printed or Typed Name Will Fontaine

License Number C-6813

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

PWS ID: 3351021 Plant Name: Piney Woods/Spring Lake Manor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										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 <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1		24.0	38,500												
2	X	24.0	38,500		1.2									1.1	
3	X	24.0	35,000		1.7									1.4	
4	X	24.0	25,400		1.7									1.4	
5	X	24.0	44,000		1.1									1.0	
6	X	24.0	35,000		1.5									1.1	
7		24.0	36,000												
8	X	24.0	36,000		1.5										
9	X	24.0	43,000		1.5									1.2	
10	X	24.0	34,000		1.7									1.4	
11	X	24.0	39,000		1.7									1.4	
12	X	24.0	41,000		1.5									1.3	
13	X	24.0	36,000		1.6									1.3	
14	X	24.0	27,000		1.5										
15		24.0	40,000												
16	X	24.0	40,000		1.5									1.0	
17	X	24.0	29,000		1.5									1.1	
18	X	24.0	39,000		1.5									1.2	
19	X	24.0	35,000		1.6									1.2	
20	X	24.0	37,000		1.5									1.0	
21	X	24.0	44,000		1.5										
22		24.0	46,500												
23	X	24.0	46,500		1.6									1.2	
24	X	24.0	33,000		1.7									1.4	
25	X	24.0	32,000		1.6									1.4	
26	X	24.0	41,000		1.5									1.2	
27	X	24.0	27,000		1.6									1.4	
28	X	24.0	36,000		1.6										
29		24.0	63,500												
<b>Total</b>			1,097,900												
<b>Average</b>			37,859												
<b>Maximum</b>			63,500												

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name: Piney Woods		PWS Identification Number: 3351021	
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: 171		Total Population Served at End of Month: 596	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
Contact Person's Telephone Number: (407) 598-4199		Zip Code: 32860-9520	
Contact Person's E-Mail Address: craiga@florida-water.com		Contact Person's Fax Number: (407) 598-4217	

**B. Water Treatment Plant Information**

Plant Name: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980	
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32731	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b> / <b>Day(s) / Shift(s) Worked</b>
<b>Lead/Chief Operator:</b>	Will Fontaine	C	6813 / Days 1st Shift
<b>Other Operators:</b>	Brian Heath	C	5825 / Days 1st Shift
	John Worrell	C	6597 / Days 1st Shift
	Gary Kissick	C	7846 / Days 1st Shift
	Adam Michaelsen		Trainee / Days 1st Shift

**II. Certification by Lead/Chief Operator**

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

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

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

PWS ID: 3351021 Plant Name: Piney Woods/Spring Lake Manor

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

Days Plant Started or Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C	Lowest CT Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	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 Demostate Four-Log Virus Inactivation, If Applicable*		CT Calculations									
														Lowest Residual Disinfectant Concentration at UV Dose	Lowest UV Dose	Lowest UV Dose	Lowest UV Dose								
1	X	24.0	42.333	1.7										1.5											
2	X	24.0	53.100	1.6										1.3											
3	X	24.0	41.000	1.4										1.2											
4	X	24.0	36.000	1.2										1.0											
5	X	24.0	44.000	1.4										1.0											
6		24.0	46.000	1.4																					
7	X	24.0	57.000																						
8	X	24.0	57.000	1.3										1.2											
9	X	24.0	42.000	1.2										1.0											
10	X	24.0	43.000	1.2										1.0											
11	X	24.0	50.000	1.2										0.9											
12	X	24.0	48.000	1.3										1.1											
13		24.0	50.000	1.4																					
14	X	24.0	70.500	1.2										1.1											
15	X	24.0	70.500	1.2										1.1											
16	X	24.0	33.000	1.2										1.1											
17	X	24.0	44.000	1.3										1.1											
18	X	24.0	37.000	1.2										1.0											
19	X	24.0	52.000	1.6										1.5											
20		24.0	41.000	1.6																					
21	X	24.0	67.500																						
22	X	24.0	67.500	1.6										1.5											
23	X	24.0	72.000	1.7										1.5											
24	X	24.0	40.000	1.5										1.4											
25	X	24.0	64.000	1.5										1.3											
26	X	24.0	39.000	1.8										1.7											
27		24.0	50.000	1.0																					
28	X	24.0	68.500																						
29	X	24.0	68.500	1.4										1.3											
30	X	24.0	64.000	1.2										1.0											
31		24.0	50.000	1.2										0.9											
Total													1,608,433												
Average													51,885												
Maximum													72,000												

\* 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:** April, 2004

**A. Public Water System (PWS) Information**

PWS Name: Piney Woods		PWS Identification Number: 3351021	
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: 171		Total Population Served at End of Month: 596	
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: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980	
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32731	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	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 PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**

PWS ID: 3351021 Plant Name: Piney Woods/Spring Lake Manor

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

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

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 Measurement	Disinfectant Contact Time (T) at C	Disinfectant Provided Before or at First Customer 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 <sup>2</sup>	Lowest UV Dose Required, mW-sec/cm <sup>2</sup>	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	24,000	54,000	1.4									
2	X	24,000	82,000	1.3									
3	X	24,000	33,000	1.4									
4	X	24,000	84,000										
5		24,000	84,000	1.1									
6	X	24,000	48,500	1.6									
7	X	24,000	56,300	1.2									
8	X	24,000	66,000	1.0									
9	X	24,000	44,000	1.1									
10	X	24,000	52,000	1.5									
11		24,000	70,000										
12	X	24,000	70,000	1.4									
13	X	24,000	46,000	1.5									
14	X	24,000	42,000	1.4									
15	X	24,000	50,000	1.5									
16	X	24,000	57,000	1.0									
17		24,000	65,500										
18		24,000	65,500	1.5									
19	X	24,000	68,000	1.2									
20	X	24,000	69,000	1.2									
21	X	24,000	61,000	1.4									
22	X	24,000	82,000	1.4									
23	X	24,000	59,000	1.3									
24	X	24,000	66,000	1.6									
25		24,000	89,000										
26	X	24,000	89,000	1.2									
27	X	24,000	53,000	1.2									
28	X	24,000	65,000	1.2									
29	X	24,000	68,000	1.5									
30	X	24,000	68,000	1.2									
<b>Total</b>		<b>1,906,800</b>											
<b>Average</b>		<b>63,560</b>											
<b>Maximum</b>		<b>89,000</b>											

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name: Piney Woods		PWS Identification Number: 3351021	
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: 171		Total Population Served at End of Month: 593	
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: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980	
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>
<b>Lead/Chief Operator:</b>	Will Fontaine	C	6813
<b>Other Operators:</b>	Brian Heath	C	5825
	John Worrell	C	6597
	Gary Kissick	C	7846
	Adam Michaelson		Trainee

**II. Certification by Lead/Chief Operator**

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

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 ID: 3351021 Plant Name: Pinney Woods/Spring Lake Manor

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.	Disinfectant		Disinfectant Measurement (T at C)		Disinfectant Provided Before or at Lowest CT	Contact Time	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg·min/L	Lowest UV Dose, mW·sec/cm <sup>2</sup>	UV Dose Required, mW·sec/cm <sup>2</sup>	Minimum UV Dose, mW·sec/cm <sup>2</sup>	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	Total	Average	Maximum
				Lowest Residual	Disinfectant Concentration at	Point During Measurement	Peak Flow, mg·min/L													
1	X	24,000	41,000	1.4														24,000	66,297	101,000
2	X	42,000	42,000	1.3														42,000	2,055,200	101,000
3	X	24,000	24,000	1.3														24,000		
4	X	35,000	24,000	1.0														35,000		
5	X	44,000	24,000	1.0														44,000		
6	X	46,000	24,000	1.1														46,000		
7	X	45,000	24,000	1.1														45,000		
8	X	63,000	24,000	1.6														63,000		
9		70,000	24,000															70,000		
10	X	70,000	24,000	1.1														70,000		
11	X	51,000	24,000	1.1														51,000		
12	X	43,000	24,000	1.1														43,000		
13	X	71,200	24,000	1.9														71,200		
14	X	80,000	24,000	1.8														80,000		
15	X	44,000	24,000	1.7														44,000		
16		87,000	24,000															87,000		
17	X	87,000	24,000	1.8														87,000		
18	X	28,000	24,000	1.5														28,000		
19	X	65,000	24,000	1.3														65,000		
20	X	81,000	24,000	1.3														81,000		
21	X	75,000	24,000	1.2														75,000		
22	X	58,000	24,000	1.6														58,000		
23		99,000	24,000															99,000		
24	X	99,000	24,000	1.2														99,000		
25	X	66,000	24,000	1.2														66,000		
26	X	81,000	24,000	1.2														81,000		
27	X	80,000	24,000	1.1														80,000		
28	X	90,000	24,000	1.1														90,000		
29	X	70,000	24,000	1.1														70,000		
30		101,000	24,000															101,000		
31	X	101,000	24,000	1.5														101,000		

\* 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

PWS ID: 3351021 Plant Name: Piney Woods/Spring Lake Manor June, 2004

III. Daily Data for the Month/Year of:

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

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

Days of the Month	Operator Visited by (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 Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm <sup>2</sup>	UV Dose Required, mW-sec/cm <sup>2</sup>	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*										
															CT Calculations										

1	X		24.0	83,000	1.4									
2	X		24.0	61,000	1.2									1.3
3	X		24.0	87,000	1.1									1.0
4	X		24.0	30,000	1.8									0.9
5	X		24.0	49,000	1.8									1.6
6			24.0	61,500										
7	X		24.0	61,500	1.8									1.6
8	X		24.0	32,000	1.8									1.7
9	X		24.0	84,100	1.3									1.1
10	X		24.0	73,000	1.1									1.0
11	X		24.0	47,000	1.3									1.1
12	X		24.0	46,000	1.4									
13			24.0	58,500										
14	X		24.0	58,500	1.3									1.1
15	X		24.0	35,000	1.2									1.0
16	X		24.0	43,000	1.2									1.0
17	X		24.0	62,000	1.5									1.4
18	X		24.0	53,000	1.5									1.4
19	X		24.0	43,000	1.6									
20			24.0	57,000										
21	X		24.0	57,000	1.5									1.7
22	X		24.0	38,000	1.5									1.3
23	X		24.0	31,000	1.7									1.4
24	X		24.0	53,000	2.0									1.8
25	X		24.0	65,000	1.2									1.0
26	X		24.0	33,000	1.6									
27			24.0	55,500										
28	X		24.0	55,500	1.2									1.0
29	X		24.0	45,000	1.2									1.0
30	X		24.0	47,000	1.4									1.1
Total				1,605,100										
Average				53,503										
Maximum				87,000										

\* 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:	Piney Woods			PWS Identification Number:	3351021
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:	168			Total Population Served at End of Month:	586
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:	Piney Woods/Spring Lake Manor			Plant Telephone Number:	352-787-0980	
Plant Address:	2038 Live Oak Drive	City:	Fruitland Park	State:	Florida	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s) / Shift(s) Worked</b>		
<b>Lead/Chief Operator:</b>	Will Fontaine	C	6813	Days 1st Shift		
<b>Other Operators:</b>	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

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

PWS ID: 3351021 | Plant Name: Piny Woods/Spring Lake Manor | July, 2004

III. Daily Data for the Month/Year of:

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

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

Days Staffed or Operator Visited by (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 (T) at C	Disinfectant Provided	Lowest CT	CT Calculations		Lowest CT Before or at Customer	Disinfectant During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	UV Dose, mW-sec/cm <sup>2</sup>	Lowest UV Dose	Minimum 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
							Point During Peak Flow, minutes	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*									
1	X	24,000	63,000	1.5				1.5								1.3	
2	X	40,000	40,000	1.7				1.7								1.4	
3	X	51,000	24,000	1.5				1.5									
4		43,500	24,000														
5	X	43,500	24,000	1.6				1.6								1.2	
6	X	69,000	24,000	1.6				1.6								1.3	
7	X	48,000	24,000	1.5				1.5								1.3	
8	X	54,000	24,000	1.3				1.3								1.0	
9	X	57,200	24,000	1.2				1.2								0.9	
10	X	44,000	24,000	1.2				1.2									
11		68,000	24,000														
12	X	68,000	24,000	1.2				1.2								0.9	
13	X	52,000	24,000	1.3				1.3								1.0	
14	X	61,000	24,000	1.3				1.3								1.1	
15	X	89,000	24,000	1.4				1.4								1.1	
16	X	59,000	24,000	1.4				1.4								1.1	
17	X	39,000	24,000	1.4				1.4									
18		64,000	24,000														
19	X	64,000	24,000	1.2				1.2								1.0	
20	X	37,000	24,000	1.3				1.3								1.0	
21	X	48,000	24,000	1.2				1.2								0.9	
22	X	77,000	24,000	1.4				1.4								1.1	
23	X	41,000	24,000	1.6				1.6								1.3	
24	X	60,000	24,000	1.4				1.4									
25		57,000	24,000														
26	X	57,000	24,000	1.0				1.0								1.0	
27	X	46,000	24,000	1.1				1.1								0.8	
28	X	45,000	24,000	0.9				0.9								0.8	
29	X	56,000	24,000	1.0				1.0								1.0	
30	X	47,000	24,000	1.3				1.3								1.0	
31	X	33,000	24,000														
<b>Total</b>		<b>1,681,200</b>															
<b>Average</b>		<b>54,232</b>															
<b>Maximum</b>		<b>89,000</b>															

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name: Piney Woods		PWS Identification Number: 3351021	
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: 168		Total Population Served at End of Month: 586	
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		Zip Code: 34748	
Contact Person's E-Mail Address: beheath@aquaaamerica.com		Contact Person's Fax Number: (352) 787-6333	

**B. Water Treatment Plant Information**

Plant Name: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980	
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32731	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number / Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813 / Days 1st Shift
Other Operators:	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
--------------------	--	--------------------------



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

PWS ID: 3351021 Plant Name: Piney Woods\Spring Lake Manor

**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*									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 <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>		
1		24.0	49,500											
2	X	24.0	49,500		1.2								1.0	
3	X	24.0	38,000		1.0								0.9	
4	X	24.0	41,000		1.3								1.1	
5	X	24.0	48,000		1.6								1.3	
6	X	24.0	39,000		0.9								1.1	
7	X	24.0	51,000		1.3									
8		24.0	54,000											
9	X	24.0	54,000		1.2								1.0	
10	X	24.0	44,000		1.1								0.8	
11	X	24.0	32,000		1.1								0.9	
12	X	24.0	58,000		1.5								1.2	
13	X	24.0	52,300		1.1								0.8	
14	X	24.0	61,000		1.1								1.0	
15		24.0	58,500											
16	X	24.0	58,500		1.5								1.5	
17	X	24.0	48,000		1.4								1.2	
18	X	24.0	59,000		1.6								1.4	
19	X	24.0	86,000		1.4								1.1	
20	X	24.0	59,000		1.2								0.9	
21	X	24.0	79,000		1.2								0.9	
22		24.0	54,500											
23	X	24.0	54,500		1.0								0.8	
24	X	24.0	43,000		1.0								0.9	
25	X	24.0	38,000		1.1								0.9	
26	X	24.0	56,000		1.1								0.9	
27	X	24.0	33,000		1.1								0.8	
28	X	24.0	28,000		1.0									
29		24.0	54,500											
30	X	24.0	54,500		1.1								0.9	
31	X	24.0	33,000											
<b>Total</b>			1,568,300											
<b>Average</b>			50,590											
<b>Maximum</b>			86,000											

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

WO#0002160725 ARREDONDO ESTATES CYCLE 33M9 PREM-CODE=644839  
SCH-DATE 122206 PROMISED PR=3 ORDER-DESC RMTR/Read Meter Services  
PRINT-DATE 12/21/06 PRINT-TIME 08:17:59 ORDER-STATUS NEW  
ARREDONDO ESTATES

-----

CUST/PREM	000902223/644839	DIST F	STYP	RSM1
CUST-NAME	FRAZIER, MARIA		SCAT	WTR
SRV-ADDR	5010 SW 63RD CT		SET-MTR	U263442
SRV-CITY	GAINESVILLE FL 32608-3739		SET-DATE	28-DEC-2001
PHONE#	H 352-284-7473 W - -		SET-RDG	006000
M-NAME	NONE		SET-SIZE	5/8
M-ADDR			SET-RMTH	MR
M-CITY		PA	ARB-RMT#	
BILLED	13-DEC-2006	A/R-STAT A	ERT	
DUE-DTE	04-JAN-2007	A/R-BAL 34.85	MIU#	
OCCUPANT		AMT-COL 10.00	SERIAL #	U999999
COMP#	1336567	RC=RS	EXTENS-#	
CRED-CDS		TYPE-HEAT	ROUTE	08350 STOP 02240
BILL-FR=12		SWIM(Y,N) N	MTR-CDS	06
FROZEN			#DL= 5 DD= 0 M= 1/DL= 0 DD= 0 M= 0	
LAST-SIZE	5/8	LAST-DATE 28-DEC-01	MODEL-1	
R-DATE ACTN	READING	CONSUM DYS C	MODEL-2	
120806	READ	6281 21 38 E	AMOUNT	CHG-DATE CAT RATE BILL-CHG
103106	READ	6260 50 22 A	22.48	121206 NONE F481 2.25
			21.91	121206 WTR F201 22.48
				110906 NONE F481 2.19
				110906 WTR F201 21.91
				101206 WTR F201 13.98

MTR-INST:  
WORK-ORDER-REMARKS:  
MS FRAZIER CALLED FOR READ OF MTR

APP-Time Start		End			
Call-Ahead Ord#	2160725	Type	Phone#	Ext #	Min-Before 0

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name: Piney Woods		PWS Identification Number: 3351021	
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: 168		Total Population Served at End of Month: 586	
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: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980	
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida    Zip Code: 32731
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number    Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813    Days 1st Shift
Other Operators:	Brian Heath	C	5825    Days 1st Shift
	John Worrell	C	6597    Days 1st Shift

**II. Certification by Lead/Chief Operator**

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

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

PWS ID: 3351021 Plant Name: Piny Woods/Spring Lake Manor

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

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 (T) at Contact Time	Disinfectant Provided	Lowest CT Before or at First Customer Measurement (T) at Contact Time	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg·min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	System, mg/L	CT Calculations			
													UV Dose	UV Dose		
1	X	24,000	42,000	1.0												
2	X	24,000	34,000	1.1												
3	X	24,000	53,000	1.0												
4	X	24,000	28,200	1.0												
5		24,000	32,150													
6	X	24,000	32,150	1.1												
7	X	24,000	55,000	1.0												
8	X	24,000	17,000	1.1												
9	X	24,000	54,000	1.2												
10	X	24,000	46,000	1.3												
11	X	24,000	22,000	1.3												
12		24,000	52,000													
13	X	24,000	52,000	1.3												
14	X	24,000	41,000	1.3												
15	X	24,000	41,000	1.3												
16	X	24,000	25,000	1.4												
17	X	24,000	45,000	1.2												
18	X	24,000	26,000	1.2												
19		24,000	49,500													
20	X	24,000	49,500	1.3												
21	X	24,000	28,000	1.2												
22	X	24,000	40,000	1.2												
23	X	24,000	41,000	1.1												
24	X	24,000	37,000	1.1												
25	X	24,000	29,000	1.3												
26		24,000	48,500													
27	X	24,000	48,500	1.1												
28	X	24,000	35,000	1.1												
29	X	24,000	38,000	1.2												
30	X	24,000	46,000	1.1												
31		24,000	1,187,500													
		Total	1,187,500													
		Average	38,306													
		Maximum	55,000													

\* 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:** October, 2004

**A. Public Water System (PWS) Information**

PWS Name: Piney Woods		PWS Identification Number: 3351021	
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: 168		Total Population Served at End of Month: 586	
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		Zip Code: 34748	
Contact Person's E-Mail Address: beheath@aquaamerica.com		Contact Person's Fax Number: (352) 787-6333	

**B. Water Treatment Plant Information**

Plant Name: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980	
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32731	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>
<b>Lead/Chief Operator:</b>	Will Fontaine	C	6813
<b>Other Operators:</b>	Brian Heath	C	5825
	John Worrell	C	6597

**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 ID: 3351021 Plant Name: Piney Woods\Spring Lake Manor

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

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

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

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 <sup>2</sup>			Minimum UV Dose Required, mW-sec/cm <sup>2</sup>
1	X	24.0	34,000		1.2								1.0	
2	X	24.0	33,000		1.1									
3		24.0	50,000											
4	X	24.0	50,000		1.3								1.1	
5	X	24.0	43,000		1.2								1.0	
6	X	24.0	44,000		1.2								1.1	
7	X	24.0	46,000		1.3								1.1	
8	X	24.0	60,900		1.2								1.0	
9	X	24.0	54,000		1.3									
10		24.0	64,500											
11	X	24.0	64,500		1.3								1.1	
12	X	24.0	45,000		1.3								1.1	
13	X	24.0	51,000		1.1								0.9	
14	X	24.0	50,000		1.1								0.9	
15	X	24.0	45,000		1.2								1.0	
16	X	24.0	41,000		1.1									
17		24.0	60,000											
18	X	24.0	60,000		1.2								1.0	
19	X	24.0	45,000		1.1								1.0	
20	X	24.0	35,000		1.1								1.0	
21	X	24.0	35,000		1.1								0.9	
22	X	24.0	34,000		1.1								0.9	
23	X	24.0	40,000		1.2									
24		24.0	49,000											
25	X	24.0	49,000		1.2								0.9	
26	X	24.0	43,000		1.1								0.9	
27	X	24.0	38,000		1.1								0.9	
28	X	24.0	51,000		1.2								1.0	
29	X	24.0	37,000		1.1								1.0	
30	X	24.0	37,000		1.1									
31		24.0	37,000											
<b>Total</b>			1,425,900											
<b>Average</b>			45,997											
<b>Maximum</b>			64,500											

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name: Piney Woods		PWS Identification Number: 3351021	
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: 168		Total Population Served at End of Month: 586	
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		Zip Code: 34748	
Contact Person's E-Mail Address: beheath@aquaaamerica.com		Contact Person's Fax Number: (352) 787-6333	

**B. Water Treatment Plant Information**

Plant Name: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980		
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32731		
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	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 PWS'S TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID: 3351021 Plant Name: Finney Woods/Spring Lake Manor

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

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 Measurement (T) at C Point During Peak Flow, minutes	Lowest CT Before or at Customer 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 <sup>2</sup>	Minimum UV Dose, mW-sec/cm <sup>2</sup>	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	CT Calculations
1	X	24.0	98,000	1.1	1.1						0.8		
2	X	24.0	47,000	1.0	1.0						0.8		
3	X	24.0	35,000	1.0	1.0						0.8		
4	X	24.0	73,400	1.4	1.4						1.2		
5	X	24.0	38,000	1.2	1.2						1.0		
6	X	24.0	46,000	1.2	1.2								
7		24.0	64,000										
8	X	24.0	64,000	1.6	1.6						1.3		
9	X	24.0	49,000	1.2	1.2						1.0		
10	X	24.0	47,000	1.2	1.2						1.0		
11	X	24.0	54,000	1.3	1.3						1.0		
12	X	24.0	50,000	1.2	1.2						1.0		
13	X	24.0	39,000	1.2	1.2						1.0		
14		24.0	51,000										
15	X	24.0	51,000	0.9	0.9						0.7		
16	X	24.0	35,000	0.8	0.8						0.7		
17	X	24.0	50,000	1.0	1.0						0.9		
18	X	24.0	57,000	0.8	0.8						0.7		
19	X	24.0	50,000	1.2	1.2						1.0		
20	X	24.0	44,000	1.3	1.3								
21		24.0	60,000										
22	X	24.0	60,000	0.9	0.9						0.8		
23	X	24.0	48,000	0.9	0.9						0.7		
24	X	24.0	52,000	1.0	1.0						0.9		
25	X	24.0	42,000	1.0	1.0						0.8		
26	X	24.0	51,000	1.0	1.0						0.8		
27	X	24.0	44,000	1.0	1.0								
28		24.0	61,000										
29	X	24.0	61,000	1.2	1.2						1.0		
30	X	24.0	52,000	1.1	1.1						1.0		
31		24.0											
Total			1,573,400										
Average			50,755										
Maximum			98,000										

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



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



Polymer Page 3 Due in December

See Pages 4 for Instructions.

<b>I. General Information for the Month/Year of:</b>	December, 2004
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**A. Public Water System (PWS) Information**

PWS Name: Piney Woods		PWS Identification Number: 3351021	
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: 168		Total Population Served at End of Month: 586	
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: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980	
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida
		Zip Code: 32731	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

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

**II. Certification by Lead/Chief Operator**

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

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

PWS ID: 3351021 Plant Name: Piny WoodSpring Lake Manor

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

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

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

Month	Day of the Month	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	Customer First	Peak Flow, mg-minutes	Temp of Water, °C	pH of Water, if Applicable	Minimum CT	Operating UV Dose, mW-sec/cm <sup>2</sup>	Lowest UV Dose Required, mW-sec/cm <sup>2</sup>	Minimum UV Dose, mW-sec/cm <sup>2</sup>	System, mg/L	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*		
																	UV Dose	UV Dose	
1	X			42,000	24.0	1.2													
2	X			43,000	24.0	1.1													
3	X			39,000	24.0	1.0													
4				49,000	24.0														
5	X			49,000	24.0	1.2													
6	X			56,000	24.0	1.2													
7	X			45,000	24.0	1.3													
8	X			35,000	24.0	1.4													
9	X			60,200	24.0	1.3													
10	X			23,000	24.0	1.3													
11	X			29,000	24.0	1.2													
12				41,000	24.0														
13	X			41,000	24.0	1.4													
14	X			38,000	24.0	1.3													
15	X			34,000	24.0	1.6													
16	X			45,000	24.0	1.4													
17	X			35,000	24.0	1.3													
18	X			28,000	24.0	1.5													
19				49,000	24.0														
20	X			49,000	24.0	1.3													
21	X			43,000	24.0	1.2													
22	X			29,000	24.0	1.3													
23	X			47,000	24.0	1.2													
24	X			27,000	24.0	1.4													
25				44,500	24.0														
26	X			44,500	24.0	1.3													
27	X			47,000	24.0	1.3													
28	X			38,000	24.0	1.3													
29	X			36,000	24.0	1.4													
30	X			32,000	24.0	1.5													
31	X			35,000	24.0														
				Total	1,253,200														
				Average	40,426														
				Maximum	60,200														

\* 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:** January, 2005

**A. Public Water System (PWS) Information**

PWS Name: Piney Woods		PWS Identification Number: 3351021	
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: 168		Total Population Served at End of Month: 586	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

**B. Water Treatment Plant Information**

Plant Name: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980		
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida	
		Zip Code: 32731		
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	Brian Heath	C	5825	Days 1st Shift
	John Worrell	C	6597	Days 1st Shift

**II. Certification by Lead/Chief Operator**

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

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

PWS ID: 3351021 Plant Name: Piny Woods Spring Lake Manor

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

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	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*		CT Calculations		UV Dose		Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Out of Operation Involves Taking Water System Components
				Lowest Residual Disinfectant Concentration (C) at Contact Time Provided	Disinfectant Contact Time	Before or at Customer First Measurement (T) at Peak Flow, mg-minutes	Point During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable		

1	X	24,000	42,500	1.5							
2	X	24,000	42,500	1.5							
3	X	24,000	40,000	1.5							
4	X	24,000	45,000	1.3							
5	X	24,000	42,000	1.3							
6	X	24,000	42,000	1.5							
7	X	24,000	38,000	1.3							
8	X	24,000	57,000	1.2							
9		24,000	40,500								
10	X	24,000	40,500	1.2							
11	X	24,000	41,000	1.0							
12	X	24,000	35,000	1.0							
13	X	24,000	43,500	1.3							
14	X	24,000	36,000	1.4							
15	X	24,000	25,000	1.5							
16		24,000	43,000								
17	X	24,000	43,000	1.4							
18	X	24,000	38,000	1.4							
19	X	24,000	34,000	1.6							
20	X	24,000	33,000	1.6							
21	X	24,000	49,000	1.4							
22		24,000	39,000								
23	X	24,000	39,000	1.3							
24	X	24,000	48,000	1.3							
25	X	24,000	33,000	1.3							
26	X	24,000	30,000	1.5							
27	X	24,000	43,000	1.4							
28	X	24,000	37,000	1.4							
29	X	24,000	31,000	1.4							
30		24,000	51,000								
31	X	24,000	51,000								
Total		1,252,500									
Average		40,403									
Maximum		57,000									

\* 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:** February, 2005

**A. Public Water System (PWS) Information**

PWS Name:	Piney Woods			PWS Identification Number:	3351021
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:	175			Total Population Served at End of Month:	613
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaamerica.com				

**B. Water Treatment Plant Information**

Plant Name:	Piney Woods/Spring Lake Manor			Plant Telephone Number:	352-787-0980	
Plant Address:	2038 Live Oak Drive			City:	Fruitland Park	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s) / Shift(s) Worked</b>		
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

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

PWS ID: 3351021 Plant Name: Piny Woods Spring Lake Manor February, 2005

III. Daily Data for the Month/year of:

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

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

Day of the Month	Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Measurement	Contact Time (T) at C	Lowest CT Provided	First Customer During Peak Flow, mg-ml/L	Temp of Water, °C if Applicable	pH of Water, if Applicable	Required, mg-ml/L	Minimum CT Operating UV Dose, mW-sec/cm <sup>2</sup>	Lowest UV Dose Required, mW-sec/cm <sup>2</sup>	Concentration at Disinfectant Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions Requiring Water System Components Involves Taking System Components Out of Operation	CT Calculations, or UV Dose, to Demostatate Four-Log Virus Inactivation, if Applicable*	CT Calculations		
																	UV Dose	UV Dose	
1	X		24.0	29,000		1.2								1.0					
2	X		24.0	47,000		1.2								1.1					
3	X		24.0	39,000		1.3								1.1					
4	X		24.0	34,000		1.1								1.0					
5			24.0	38,000															
6	X		24.0	38,000		0.6													
7	X		24.0	37,000		0.9								0.8					
8	X		24.0	34,000		1.3								1.0					
9	X		24.0	36,000		1.1								1.0					
10	X		24.0	44,000		1.3								1.1					
11	X		24.0	39,300		1.2								1.1					
12	X		24.0	35,000		1.1													
13			24.0	32,500															
14	X		24.0	32,500		1.2								1.1					
15	X		24.0	77,000		1.2								1.1					
16	X		24.0	38,000		1.1								1.1					
17	X		24.0	63,000		1.1								1.1					
18	X		24.0	35,000		1.1								1.1					
19	X		24.0	41,000		1.1								1.1					
20			24.0	56,000															
21	X		24.0	56,000		1.4								1.2					
22	X		24.0	47,000		1.4								1.2					
23	X		24.0	50,000		1.3								1.2					
24	X		24.0	41,000		1.2								1.1					
25	X		24.0	49,000		1.3								1.1					
26	X		24.0	27,000		1.3													
27			24.0	50,000															
28	X		24.0	50,000		1.3								1.1					
29			24.0																
30			24.0																
31			24.0																
Total			1,195,300																
Average			38,558																
Maximum			77,000																

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name:	Piney Woods			PWS Identification Number:	3351021
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:	175			Total Population Served at End of Month:	613
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:	<a href="mailto:beheath@aquaamerica.com">beheath@aquaamerica.com</a>				

**B. Water Treatment Plant Information**

Plant Name:	Piney Woods/Spring Lake Manor			Plant Telephone Number:	352-787-0980
Plant Address:	2038 Live Oak Drive	City:	Fruitland Park	State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water			<input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	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

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

PWS ID: 3351021 Plant Name: Piney Woods/Spring Lake Manor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to 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 <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	31,000		1.4									1.2	
2	X	24.0	45,000		1.3									1.1	
3	X	24.0	31,000		1.1									1.0	
4	X	24.0	39,400		1.0									0.9	
5	X	24.0	43,000		1.1										
6		24.0	41,500												
7	X	24.0	41,500		1.4									1.2	
8	X	24.0	42,000		1.2									1.1	
9	X	24.0	48,000		1.0									0.9	
10	X	24.0	35,000		1.1									0.9	
11	X	24.0	36,000		1.2									0.9	
12	X	24.0	31,000		1.1										
13		24.0	56,000												
14	X	24.0	56,000		1.1									0.9	
15	X	24.0	42,000		1.3									1.0	
16	X	24.0	46,000		1.4									1.2	
17	X	24.0	38,000		1.4									1.3	
18	X	24.0	25,000		1.5									1.3	
19	X	24.0	33,000		1.2										
20		24.0	43,500												
21	X	24.0	43,500		1.2									1.0	
22	X	24.0	37,000		1.2									0.9	
23	X	24.0	42,000		1.0									0.9	
24	X	24.0	37,000		1.2									0.9	
25	X	24.0	30,000		1.4									1.2	
26	X	24.0	31,000		1.5										
27		24.0	43,000												
28	X	24.0	43,000		1.2									1.1	
29	X	24.0	41,000		1.2									0.9	
30	X	24.0	52,000		1.2									1.0	
31	X	24.0	46,000											1.0	
<b>Total</b>			1,249,400												
<b>Average</b>			40,303												
<b>Maximum</b>			56,000												

\* 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:** April, 2005

**A. Public Water System (PWS) Information**

PWS Name:	Piney Woods	PWS Identification Number:	3351021
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:	175	Total Population Served at End of Month:	613
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
		Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com		

**B. Water Treatment Plant Information**

Plant Name:	Piney Woods/Spring Lake Manor	Plant Telephone Number:	352-787-0980
Plant Address:	2038 Live Oak Drive	City:	Fruitland Park
		State:	Florida
		Zip Code:	32731
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	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 ID: 3351021 Plant Name: Pinney Woods/Spring Lake Manor

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

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 Contact Time Before or at First Measurement (T) at C	Disinfectant 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 <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*	CT Calculations	
													Lowest CT	UV Dose
1	X	44,000	24.0	1.4							1.2			
2	X	37,000	24.0	1.3										
3		42,500	24.0	1.3										
4	X	42,500	24.0	1.3							1.0			
5	X	42,500	24.0	1.3							1.1			
6	X	47,000	24.0	1.3							1.1			
7	X	48,200	24.0	1.4							1.3			
8	X	57,000	24.0	1.3							1.1			
9	X	23,000	24.0	1.4							1.1			
10		53,000	24.0											
11	X	53,000	24.0	1.3							1.0			
12	X	35,000	24.0	1.0							0.9			
13	X	42,000	24.0	1.2							1.0			
14	X	44,000	24.0	1.5							1.2			
15	X	44,000	24.0	1.4							1.2			
16	X	34,000	24.0	1.3										
17		63,000	24.0											
18	X	63,000	24.0	1.2							1.0			
19	X	59,000	24.0	1.2							1.1			
20	X	62,000	24.0	1.0							0.9			
21	X	66,000	24.0	1.2							1.0			
22	X	70,000	24.0	1.3							1.1			
23		49,000	24.0											
24	X	49,000	24.0	1.2										
25	X	44,000	24.0	1.0							0.8			
26	X	41,000	24.0	1.0							0.8			
27	X	35,000	24.0	1.1							1.0			
28	X	40,000	24.0	1.0							0.9			
29	X	39,000	24.0	1.2							1.0			
30		47,000	24.0											
31			24.0											
Total		1,415,700												
Average		45,668												
Maximum		70,000												

\* 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: Piney Woods		PWS Identification Number: 3351021	
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: 175		Total Population Served at End of Month: 613	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

**B. Water Treatment Plant Information**

Plant Name: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980	
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida
		Zip Code: 32731	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Will Fontaine	C	6813
Other Operators:	Brian Heath	C	5825
	John Worrell	C	6597

**II. Certification by Lead/Chief Operator**

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

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

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

PWS ID: 3351021 Plant Name: Pinney Woods/Spring Lake Manor May, 2005

III. Daily Data for the Month/Year of:

Means of Achieving Four-Log Virus Inactivation/Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)  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	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*							CT Calculations	Lowest CT Provided Before or at First Measurement (T) at C	Disinfectant Contact Time	Lowest Residual Disinfectant Concentration (C) 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 UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	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	
				Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg-min/L	Disinfectant Contact Time	Lowest Residual Disinfectant Concentration (C) 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 UV Dose, mW-sec/cm <sup>2</sup>												Minimum UV Dose Required, mW-sec/cm <sup>2</sup>
1	X	24,000	94,000	1.2																		
2	X	24,000	43,000	1.6																		
3	X	24,000	44,000	1.5																		
4	X	24,000	45,000	1.3																		
5	X	24,000	29,000	1.3																		
6	X	24,000	38,500	1.1																		
7	X	24,000	30,000	1.2																		
8		24,000	52,000																			
9	X	24,000	52,000	1.1																		
10	X	24,000	45,000	1.2																		
11	X	24,000	47,000	1.2																		
12	X	24,000	46,000	1.1																		
13	X	24,000	37,000	1.0																		
14	X	24,000	47,000	1.0																		
15		24,000	62,500																			
16	X	24,000	62,500	1.0																		
17	X	24,000	49,000	1.0																		
18	X	24,000	48,000	0.9																		
19	X	24,000	42,000	0.9																		
20	X	24,000	72,000	0.9																		
21	X	24,000	45,000	1.3																		
22		24,000	61,500																			
23	X	24,000	61,500	1.0																		
24	X	24,000	38,000	1.0																		
25	X	24,000	68,000	1.1																		
26	X	24,000	57,000	1.2																		
27	X	24,000	75,000	1.4																		
28		24,000	62,000																			
29	X	24,000	62,000	1.4																		
30	X	24,000	80,000	1.4																		
31	X	24,000	70,000	1.4																		
Total		1,665,500																				
Average		53,726																				
Maximum		94,000																				

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

WO#0002160727 ARREDONDO ESTATES CYCLE 33M9 PREM-CODE=644839  
SCHE-D-DATE 122206 PROMISED PR=3 ORDER-DESC MSMT/Miscellaneous Maintena  
PRINT-DATE 12/21/06 PRINT-TIME 08:23:41 ORDER-STATUS NEW  
ARREDONDO ESTATES

-----  
CUST/PREM 000902223/644839 DIST F STYP RSM1  
CUST-NAME FRAZIER, MARIA SCAT WTR  
SRV-ADDR 5010 SW 63RD CT SET-MTR U263442  
SRV-CITY GAINESVILLE FL 32608-3739 SET-DATE 28-DEC-2001  
PHONE# H 352-284-7473 W - - SET-RDG 006000  
M-NAME NONE SET-SIZE 5/8  
M-ADDR NONE SET-RMTH MR  
M-CITY NONE ARB-RMT#  
BILLED 13-DEC-2006 A/R-STAT PA ERT  
DUE-DTE 04-JAN-2007 A/R-BAL A MIU#  
OCCUPANT AMT-COL 34.85 SERIAL # U999999  
COMP# 1336567 RC=RS EXTENS-#  
CRED-CDS TYPE-HEAT ROUTE 08350 STOP 02240  
BILL-FR=12 SWIM(Y,N) N MTR-CDS 06  
FROZEN #DL= 5 DD= 0 M= 1/DL= 0 DD= 0 M= 0  
LAST-SIZE 5/8 LAST-DATE 28-DEC-01 MODEL-1  
PREM-ID MODEL-2  
-----

-----  
READ ONLY: DATE INSIDE READ REMOTE EMP#  
TIME  
-----  

REM	DATE	READING	MK	METER NUMBER	TEST YEAR	SZ	TYPE HEAT	CHECK X RESEALED	SEAL	OCC DATE
SET								SEALED		

  
CURB STOP: ON OFF SWIM POOL: YES NO EMP#  
-----

ERT#-----REMARKS:-----  
-----

-----  

R-DATE	ACTN	READING	CONSUM	DYS	C	AMOUNT	CHG-DATE	CAT	RATE	BILL-CHG
120806	READ	6281	21	38	E	22.48	121206	NONE	F481	2.25
103106	READ	6260	50	22	A	21.91	121206	WTR	F201	22.48
							110906	NONE	F481	2.19
							110906	WTR	F201	21.91
							101206	WTR	F201	13.98

-----

MTR-INST:  
WORK-ORDER-REMARKS:  
MS FRAZIER IS ASKING FOR CALL ABOUT MOVING MTR  
HER NUMBER IS 352 374 2140 BECAUSE OF SITUATION  
SHE DOES NOT FEEL SAFE. PLEASE CALL EARLY MORNING

APP-Time Start End  
Call-Ahead Ord# 2160727 Type Phone# Ext # Min-Before 0

# 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: Piney Woods		PWS Identification Number: 3351021	
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: 175		Total Population Served at End of Month: 613	
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: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980	
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32731	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Will Fontaine	C	6813
Other Operators:	Brian Heath	C	5825
	John Worrell	C	6597

**II. Certification by Lead/Chief Operator**

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

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

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

PWS ID: 3351021 Plant Name: Piney Woods\Spring Lake Manor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1	X	24.0	35,000		1.2										1.0	
2	X	24.0	51,000		1.2										1.0	
3	X	24.0	28,700		1.0										0.9	
4	X	24.0	32,000		1.2											
5		24.0	48,000													
6	X	24.0	48,000		1.0										0.8	
7	X	24.0	43,000		1.0										0.9	
8	X	24.0	45,300		1.2										1.0	
9	X	24.0	47,000		1.1										1.0	
10	X	24.0	23,000		1.1										0.9	
11	X	24.0	43,000		1.0											
12		24.0	46,500													
13	X	24.0	46,500		1.0										0.8	
14	X	24.0	43,000		0.9										0.8	
15	X	24.0	35,000		1.0										0.8	
16	X	24.0	51,000		1.1										0.9	
17	X	24.0	46,000		1.0										0.9	
18	X	24.0	45,000		1.2											
19		24.0	52,500													
20	X	24.0	52,500		1.1										0.9	
21	X	24.0	43,000		1.0										0.9	
22	X	24.0	40,000		1.2										1.0	
23	X	24.0	39,000		1.2										1.0	
24	X	24.0	32,000		1.0										0.8	
25	X	24.0	47,000		0.9											
26		24.0	47,500													
27	X	24.0	47,500		1.0										0.8	
28	X	24.0	37,000		1.0										0.8	
29	X	24.0	37,000		1.0										0.9	
30	X	24.0	47,000		1.1										0.9	
31		24.0														
<b>Total</b>			1,279,000													
<b>Average</b>			41,258													
<b>Maximum</b>			52,500													

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name:	Piney Woods			PWS Identification Number:	3351021
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:	175			Total Population Served at End of Month:	613
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquamerica.com				

**B. Water Treatment Plant Information**

Plant Name:	Piney Woods/Spring Lake Manor			Plant Telephone Number:	352-787-0980
Plant Address:	2038 Live Oak Drive	City:	Fruitland Park	State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000				

Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s) / Shift(s) Worked</b>	
<b>Lead/Chief Operator:</b>	Will Fontaine	C	6813	Days 1st Shift	
<b>Other Operators:</b>	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



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

PWS ID: 3351021 Plant Name: Piney Woods/Spring Lake Manor July, 2005

III. Daily Data for the Month/Year of:

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

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

CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable\*  
 CT Calculations

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)	Disinfectant Contact Time Before or at First Measurement (T) at C	Flow, mg-min/L During Peak	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm <sup>2</sup>	Required UV Dose, mW-sec/cm <sup>2</sup>	UV Dose		
												Lowest Residual Disinfectant Concentration at	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
1	X	46,000	24.0	1.0									0.9	
2		43,500	24.0	1.0										
3	X	43,500	24.0	1.0										
4	X	56,000	24.0	1.2									0.9	
5	X	49,000	24.0	1.1									0.9	
6	X	46,000	24.0	1.0									0.8	
7	X	49,300	24.0	1.0									0.8	
8	X	50,000	24.0	1.0									0.9	
9		37,500	24.0	1.0										
10	X	37,500	24.0	1.0										
11	X	44,000	24.0	0.9									0.7	
12	X	43,000	24.0	1.0									0.8	
13	X	35,000	24.0	1.1									0.8	
14	X	42,000	24.0	1.0									0.8	
15	X	37,000	24.0	1.0									0.8	
16	X	31,000	24.0	1.1									0.8	
17		61,500	24.0											
18	X	61,500	24.0	1.0									0.8	
19	X	55,000	24.0	1.0									0.8	
20	X	57,000	24.0	1.3									0.9	
21	X	57,000	24.0	1.6									1.3	
22	X	62,000	24.0	1.3									1.0	
23		56,000	24.0											
24	X	56,000	24.0	1.0										
25	X	44,000	24.0	1.0									0.8	
26	X	27,700	24.0	0.8									0.8	
27	X	71,000	24.0	0.9									0.7	
28	X	36,000	24.0	0.8									0.7	
29	X	50,000	24.0	0.9									0.7	
30	X	28,000	24.0	1.2										
31		50,500	24.0											
Total		1,463,500												
Average		47.210												
Maximum		71,000												

\* 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.

<b>I. General Information for the Month/Year of:</b>	August, 2005
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**A. Public Water System (PWS) Information**

PWS Name: Piney Woods			PWS Identification Number: 3351021		
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: 175			Total Population Served at End of Month: 613		
PWS Owner: Aqua Utilities Florida					
Contact Person: Brian Heath			Contact Person's Title: Area Manager		
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida	Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980			Contact Person's Fax Number: (352) 787-6333		
Contact Person's E-Mail Address: beheath@aquaaamerica.com					

**B. Water Treatment Plant Information**

Plant Name: Piney Woods/Spring Lake Manor			Plant Telephone Number: 352-787-0980		
Plant Address: 2038 Live Oak Drive			City: Fruitland Park	State: Florida	Zip Code: 32731
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water					
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000			Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Plant Category (per subsection 62-699.310(4), F.A.C.): IV					
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s) / Shift(s) Worked</b>	
<b>Lead/Chief Operator:</b>	Will Fontaine	C	6813	Days 1st Shift	
<b>Other Operators:</b>	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

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

PWS ID: 3351021 Plant Name: Piney Woods\Spring Lake Manor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>				
1	X	24.0	50,500		1.0										0.7	
2	X	24.0	36,000		0.9										0.7	
3	X	24.0	40,000		0.9										0.8	
4	X	24.0	42,000		1.2										1.0	
5	X	24.0	41,000		1.4										1.1	
6	X	24.0	40,000		1.4											
7		24.0	45,000													
8	X	24.0	45,000		1.1										0.8	
9	X	24.0	38,000		1.0										0.9	
10	X	24.0	40,000		1.1										0.9	
11	X	24.0	42,100		1.2										1.0	
12	X	24.0	58,000		1.0										0.9	
13	X	24.0	43,000		1.2											
14		24.0	53,500													
15	X	24.0	53,500		1.0										0.8	
16	X	24.0	40,000		1.0										0.9	
17	X	24.0	46,000		1.1										0.9	
18	X	24.0	48,000		1.2										0.9	
19	X	24.0	48,000		1.1										0.9	
20	X	24.0	52,000		1.2											
21		24.0	50,500													
22	X	24.0	50,500		1.2										1.0	
23	X	24.0	32,000		1.3										1.0	
24	X	24.0	55,000		1.3										1.1	
25	X	24.0	43,000		1.0										0.9	
26	X	24.0	35,000		1.1										0.9	
27	X	24.0	47,000		1.2											
28		24.0	58,000													
29	X	24.0	58,000		0.9										0.7	
30	X	24.0	35,000		1.0										0.7	
31	X	24.0	40,000												0.9	
<b>Total</b>			1,405,600													
<b>Average</b>			45,342													
<b>Maximum</b>			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.

<b>I. General Information for the Month/Year of:</b>	September, 2005
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### A. Public Water System (PWS) Information

PWS Name: Piney Woods		PWS Identification Number: 3351021	
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: 175		Total Population Served at End of Month: 613	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquamerica.com			

### B. Water Treatment Plant Information

Plant Name: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980		
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida	
		Zip Code: 32731		
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	Days 1st Shift
Other Operators:	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

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

PWS ID: 3351021 | Plant Name: Piney Woods

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

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 Measurement	Contact Time Disinfectant Provided Before or at Lowest CT	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm <sup>2</sup>	Lowest UV Dose Required, mW-sec/cm <sup>2</sup>	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	40,000	24.0	1.4	1.4					0.9		
2	X	24.0	37,000	1.4	1.4							
3	X	24.0	42,000	1.4	1.4					0.9		
4		24.0	48,500									
5	X	24.0	48,500	1.4	1.4					1.0		
6	X	24.0	60,000	1.3	1.3					0.8		
7	X	24.0	38,000	1.3	1.3					0.9		
8	X	24.0	61,000	1.2	1.2					0.7		
9	X	24.0	71,000	1.2	1.2					0.9		
10	X	24.0	39,000	1.4	1.4							
11		24.0	54,000		1.0					0.6		
12	X	24.0	54,000									
13	X	24.0	47,000	1.2	1.2					0.7		
14	X	24.0	41,000	1.5	1.5					0.8		
15	X	24.0	66,000	1.8	1.8					1.3		
16	X	24.0	58,000	1.9	1.9					1.4		
17	X	24.0	49,000	1.8	1.8							
18		24.0	62,500									
19	X	24.0	62,500	1.9	1.9					1.2		
20	X	24.0	53,000	1.5	1.5					1.2		
21	X	24.0	43,000	1.3	1.3					1.0		
22	X	24.0	45,000	1.3	1.3					0.9		
23	X	24.0	41,000	1.3	1.3					0.9		
24	X	24.0	41,000	1.3	1.3							
25		24.0	54,500									
26	X	24.0	54,500	1.1	1.1					0.7		
27	X	24.0	45,000	1.2	1.2					0.7		
28	X	24.0	55,000	1.5	1.5					0.9		
29	X	24.0	49,000	1.6	1.6					1.0		
30	X	24.0	53,000	1.5	1.5					1.1		
31		24.0										

Total	1,513,000	Average	48,806	Maximum	71,000
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\* 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 ID: 3351021 Plant Name: Spring Lake Manor

**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*										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 <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0			1.1									0.9	
2	X	24.0			1.2									0.9	
3	X	24.0			1.2										
4		24.0													
5	X	24.0			1.2									1.0	
6	X	24.0			1.1									0.8	
7	X	24.0	300		1.0									0.9	
8	X	24.0			0.9									0.7	
9	X	24.0			1.0									0.9	
10	X	24.0			1.1										
11		24.0													
12	X	24.0			0.7									0.6	
13	X	24.0			0.8									0.7	
14	X	24.0			1.1									0.8	
15	X	24.0			1.7									1.3	
16	X	24.0			1.7									1.4	
17	X	24.0			1.6										
18		24.0													
19	X	24.0			1.6									1.2	
20	X	24.0			1.4									1.2	
21	X	24.0			1.1									1.0	
22	X	24.0			1.1									0.9	
23	X	24.0			1.2									0.9	
24	X	24.0			1.2										
25		24.0													
26	X	24.0			0.8									0.7	
27	X	24.0			0.9									0.7	
28	X	24.0			1.1									0.9	
29	X	24.0			1.3									1.0	
30	X	24.0			1.3									1.1	
31		24.0													
<b>Total</b>			300												
<b>Average</b>			10												
<b>Maximum</b>			300												

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name: Piney Woods		PWS Identification Number: 3351021	
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: 175		Total Population Served at End of Month: 613	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida    Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

**B. Water Treatment Plant Information**

Plant Name: Piney Woods/Spring Lake Manor		Plant Telephone Number: 352-787-0980	
Plant Address: 2038 Live Oak Drive		City: Fruitland Park	State: Florida    Zip Code: 32731
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 216,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b> <b>Day(s) / Shift(s) Worked</b>
<b>Lead/Chief Operator:</b>	Will Fontaine	C	6813    Days 1st Shift
<b>Other Operators:</b>	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 ID: 3351021 Plant Name: Piney Woods

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								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 <sup>2</sup>		
1	X	24.0	54,000		1.5								
2		24.0	62,500										
3	X	24.0	62,500		1.3							0.9	
4	X	24.0	47,000		1.5							1.1	
5	X	24.0	53,000		1.4							1.0	
6	X	24.0	38,000		1.3							1.0	
7	X	24.0	52,000		1.4							1.0	
8	X	24.0	34,000		1.4								
9		24.0	54,000										
10	X	24.0	54,000		1.3							0.9	
11	X	24.0	53,000		1.3							0.8	
12	X	24.0	44,000		1.4							0.9	
13	X	24.0	44,000		1.4							1.0	
14	X	24.0	62,000		1.4							0.9	
15	X	24.0	54,000		1.4								
16		24.0	59,500										
17	X	24.0	59,500		1.5							1.0	
18	X	24.0	50,000		1.4							1.0	
19	X	24.0	59,000		1.4							1.0	
20	X	24.0	63,000		1.3							0.8	
21	X	24.0	68,000		1.4							1.0	
22		24.0	44,500										
23	X	24.0	44,500		1.2								
24	X	24.0	58,000		1.1							0.8	
25	X	24.0	45,000		1.1							0.7	
26	X	24.0	41,000		1.2							0.7	
27	X	24.0	41,000		1.1							0.8	
28	X	24.0	46,000		1.4							1.0	
29	X	24.0	52,000		1.4								
30		24.0	54,000										
31	X	24.0	54,000		1.3							0.9	
<b>Total</b>			1,607,000										
<b>Average</b>			51,839										
<b>Maximum</b>			68,000										

\* 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 ID: 3351021 Plant Name: Spring Lake Manor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										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 <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>			
1	X	24.0			1.3										
2		24.0													
3	X	24.0			1.2									0.9	
4	X	24.0			1.3									1.1	
5	X	24.0			1.2									1.0	
6	X	24.0			1.1									1.0	
7	X	24.0	500		1.2									1.0	
8	X	24.0			1.2										
9		24.0													
10	X	24.0			1.1									0.9	
11	X	24.0			1.1									0.8	
12	X	24.0			1.1									0.9	
13	X	24.0			1.1									1.0	
14	X	24.0			1.1									0.9	
15	X	24.0			1.0										
16		24.0													
17	X	24.0			1.2									1.0	
18	X	24.0			1.2									1.0	
19	X	24.0			1.1									1.0	
20	X	24.0			1.0									0.8	
21	X	24.0			1.2									1.0	
22		24.0													
23	X	24.0			1.1										
24	X	24.0			1.0									0.8	
25	X	24.0			0.9									0.7	
26	X	24.0			0.9									0.7	
27	X	24.0			0.9									0.8	
28	X	24.0			1.1									1.0	
29	X	24.0			1.0										
30		24.0													
31	X	24.0			1.1									0.9	
<b>Total</b>			500												
<b>Average</b>			16												
<b>Maximum</b>			500												

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

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



See Pages 4 for Instructions.

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

**A. Public Water System (PWS) Information**

PWS Name:	Piney Woods	PWS Identification Number:	3351021
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:	175	Total Population Served at End of Month:	613
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:	Piney Woods\Spring Lake Manor	Plant Telephone Number:	352-787-0980
Plant Address:	2038 Live Oak Drive	City:	Fruitland Park
		State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water	Zip Code:	32731
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

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

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

PWS ID: 3351021 Plant Name: Piney Woods November 2005

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

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

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

CT Calculations, or UV Dose, to Demostatice Four-Log Virus Inactivation, if Applicable\*  
 CT Calculations  
 Lowest CT Disinfectant Contact Time Before or at First Measurement (T) at C  
 Disinfectant Concentration (C) Before or at First Measurement (T) at C  
 Peak Flow, mg/L Customer During Peak Flow, mg-nun/L  
 Temp of Water, °C if Applicable  
 pH of Water, Required, mg/ml  
 Minimum CT Operating UV Dose, mW-sec/cm<sup>2</sup>  
 Lowest UV Dose Required, mW-sec/cm<sup>2</sup>  
 Minimum 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

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-nun/L	Temp of Water, °C if Applicable	pH of Water, Required, mg/ml	Minimum CT Operating UV Dose, mW-sec/cm <sup>2</sup>	Lowest UV Dose Required, mW-sec/cm <sup>2</sup>	Minimum 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	48,000	24.0	1.2							
2	X	40,000	24.0	1.3							0.8
3	X	53,000	24.0	1.4							0.8
4	X	44,000	24.0	1.4							1.0
5	X	37,000	24.0	1.5							1.0
6		61,000	24.0								
7	X	61,000	24.0	1.4							0.9
8	X	55,000	24.0	1.4							0.9
9	X	47,000	24.0	1.4							1.0
10	X	49,000	24.0	1.3							1.0
11	X	58,000	24.0	1.3							1.0
12	X	48,000	24.0	1.3							0.9
13		62,500	24.0								
14	X	62,500	24.0	1.4							0.9
15	X	47,000	24.0	1.3							0.9
16	X	55,000	24.0	1.3							0.8
17	X	57,000	24.0	1.4							0.8
18	X	47,000	24.0	1.3							1.0
19	X	41,000	24.0	1.3							0.9
20		61,000	24.0								
21	X	61,000	24.0	1.3							0.9
22	X	50,000	24.0	1.3							1.0
23	X	35,000	24.0	1.4							1.0
24	X	47,000	24.0	1.5							1.1
25	X	47,000	24.0	1.6							1.1
26	X	57,000	24.0	1.6							1.2
27		56,500	24.0								
28	X	56,500	24.0	1.6							1.1
29	X	34,000	24.0	1.6							1.1
30	X	45,000	24.0	1.5							1.1
31		24.0									
Total		1,535,000									
Average		49,516									
Maximum		62,500									

\* 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 ID: 3351021 Plant Name: Spring Lake Manor

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

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

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

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

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

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



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:	Piney Woods			PWS Identification Number:	3351021
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:	175			Total Population Served at End of Month:	613
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaamerica.com				

**B. Water Treatment Plant Information**

Plant Name:	Piney Woods/Spring Lake Manor			Plant Telephone Number:	352-787-0980	
Plant Address:	2038 Live Oak Drive	City:	Fruitland Park	State:	Florida	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	216,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s) / Shift(s) Worked</b>		
<b>Lead/Chief Operator:</b>	Will Fontaine	C	6813	Days 1st Shift		
<b>Other Operators:</b>	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 \_\_\_\_\_

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

PWS ID: 3351021 Plant Name: Pinney Woods

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

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) (T at C)	Disinfectant Contact Time Before or at First Customer Measurement	Lowest CT Provided Before or at First Customer Measurement	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg·min/L	Lowest UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	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	CT Calculations

Day of the Month	Peak Flow, mg/L	Peak Flow, gpd	Lowest Residual Disinfectant Concentration (C) (T at C)	Disinfectant Contact Time	Lowest CT Provided	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg·min/L	Lowest UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW-sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	CT Calculations	UV Dose
1	X	24.0	42,000	1.6									
2	X	24.0	44,000	1.5									
3	X	24.0	29,000	1.6									
4		24.0	68,500										
5	X	24.0	68,500	1.6									
6	X	24.0	39,000	1.8									
7	X	24.0	36,000	1.7									
8	X	24.0	42,000	1.7									
9	X	24.0	36,000	1.5									
10	X	24.0	31,000	1.5									
11		24.0	45,500										
12	X	24.0	45,500	1.5									
13	X	24.0	38,000	1.4									
14	X	24.0	46,000	1.5									
15	X	24.0	44,000	1.7									
16	X	24.0	32,000	1.5									
17	X	24.0	40,000	1.6									
18		24.0	44,000										
19	X	24.0	44,000	1.3									
20	X	24.0	46,000	1.3									
21	X	24.0	40,000	1.2									
22	X	24.0	40,000	1.3									
23	X	24.0	38,000	1.4									
24	X	24.0	37,000	1.4									
25		24.0	45,500										
26	X	24.0	45,500	1.5									
27	X	24.0	54,000	1.5									
28	X	24.0	41,000	1.3									
29	X	24.0	46,000	1.4									
30	X	24.0	35,000	1.5									
31	X	24.0	44,000	1.5									
Total			1,327,000										
Average			42,806										
Maximum			68,500										

\* 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 ID: 3351021 Plant Name: Spring Lake Manor

December, 2005

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

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

Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Measurement Point During Peak Flow, mg/L	Disinfectant Contact Time Before or at First Customer Peak Flow, minutes	Lowest CT Provided Before or at First Customer Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose, mW-sec/cm <sup>2</sup>	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	CT Calculations
1	X	24.0		1.4								1.2		
2	X	24.0		1.2								1.1		
3	X	24.0		1.5										
4		24.0	600											
5	X	24.0	600	1.4								1.2		
6	X	24.0		1.5								1.4		
7	X	24.0		1.5								1.3		
8	X	24.0		1.5								1.3		
9	X	24.0		1.3								1.1		
10	X	24.0		1.3								1.1		
11		24.0												
12	X	24.0		1.3								1.0		
13	X	24.0	200	1.2								1.0		
14	X	24.0		1.1								1.0		
15	X	24.0		1.4								1.2		
16	X	24.0		1.4								1.2		
17	X	24.0		1.4										
18		24.0												
19	X	24.0		1.1								0.9		
20	X	24.0		1.0								0.9		
21	X	24.0		1.0								0.8		
22	X	24.0		1.1								0.8		
23	X	24.0		1.1								0.9		
24	X	24.0		1.1										
25		24.0												
26	X	24.0		1.4								1.1		
27	X	24.0		1.3								1.1		
28	X	24.0		1.2								1.0		
29	X	24.0		1.2								1.0		
30	X	24.0		1.4								1.1		
31	X	24.0		1.3										

Total	1,400
Average	45
Maximum	600

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