

ORIGINAL

**Sebring Lakes**

Docket No. 060368-WS

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

Florida

**VOLUME 6**

**Book 7**

**Set 42 of 57**

Containing  
Additional Engineering Requirements

Monthly Operating Reports

CMP	_____
COM	_____
CTR	_____
ECR	<u>  1  </u>
GCL	_____
OPC	_____
RCA	_____
SCR	_____
SGA	_____
SEC	_____
OTH	_____

Aqua Utilities Florida, Inc.

DOCUMENT NUMBER-DATE

00872 JAN 26 8

FPSC-COMMISSION CLERK

# Aqua Utilities Florida, Inc. Monthly Operating Reports

## Sebring Lakes

	<b>Tab Number</b>	<b>Page Number</b>
<b>Year: 2004</b>		
January	1	3
February	2	3
March	3	3
April	4	3
May	5	3
June	6	3
July	7	3
August	8	3
September	9	3
October	10	3
November	11	3
December	12	3
<b>Year: 2005</b>		
January	1	4
February	2	4
March	3	4
April	4	4
May	5	4
June	6	4
July	7	5
August	8	7
September	9	9
October	10	11
November	11	13
December	12	15

**Docket No. 060368-WS**

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

**Report Missing:**

**Monthly Operating Report**

**Sebring Lakes**

**January to December 2004**

**Aqua Utilities Florida, Inc.**

**Docket No. 060368-WS**

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

**Report Missing:**

**Monthly Operating Report**

**Sebring Lakes**

**January to June 2005**

**Aqua Utilities Florida, Inc.**



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

See page 4 for instructions

**I. General Information for the Month/Year of:** **July-05**

<b>A. Public Water System (PWS) Information</b>	
PWS Name: Sebring Lakes	PWS Identification Number: 5284137
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: 55	Total Population Served at End of Month: 127
PWS Owner: Aqua Utilities Florida	
Contact Person: Carolyn McFalls	Contact Person's Title: Area Manager - Florida
Contact Person's Mailing Address: 6960 Professional Parkway E. Suit	City: Sarasota State: FL Zip Code: 34240
Contact Person's Telephone Number: 941/907-7400	Contact Person's Fax Number: 941/907-7401
Contact Person's E-Mail Address: cfmcfalls@aquamerica.com	

<b>B. Water Treatment Plant Information</b>	
Plant Name: Sebring Lakes	Plant Telephone Number: 941/907-7400
Plant Address: 5313 Knight Ave	City: Sebring State: FL Zip Code: 33875
Type of Water Treated 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: 280,000	
Plant Category (per subsection 62-699.310(4), F.A.C.): C-1	Plant Class (per subsection 62-699.310(4), F.A.C.): V
<b>Licensed Operators</b>	<b>Name License Class License Number Day(s)/Shift(s) Worked</b>
Lead/Chief Operator:	Robert Paver C 12040 3 Days per week
Other Operators:	

**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. 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.

	Robert Paver	C12040
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 5284137 Plant Name: Sebring Lakes

III. Daily Data for the Month Year of: **July-05**

Means of Achieving Four-Log Virus Inactivation/Removal: \*  Ultraviolet Radiation  Other (Describe):

Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

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

Days 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 (T) at C	Disinfectant Contact Time Before or Provided	Lowest CT at First Customer Measurement	Temp of Water	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, sec/cm <sup>2</sup>	Minimum UV Dose Required, mW	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	Total	Average	Maximum	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*		
																	mg-min/L	UV Dose	
1	X	95,100				3.8						1.3							
2		132,950																	
3	X	132,950				3.6						1.1							
4	X	123,300				3.4						1							
5	X	134,700				2.4						1.1							
6	X	259,700				3.3						1.6							
7	X	425,700				2.9						0.9							
8	X	1,300				2.6						0.7							
9		2,300																	
10	X	2,300				2.3						0.6							
11	X	2,200				2.1						0.6							
12	X	15,000				3.9						1.9							
13	X	100				3.7						1.4							
14	X	1,700				3.8						1.4							
15	X	0				3.9						2							
16		0																	
17		125																	
18	X	125				3.9						1.9							
19	X	0				3.9						1.9							
20	X	0				2.3						0.7							
21	X	28,000				3.8						1.3							
22	X	43,500				2						0.6							
23	X	23,000				2.1						0.4							
24		20,800																	
25	X	20,800				1.9						0.2							
26	X	12,100				2						0.2							
27	X	55,500				1.9						0.3							
28	X	740,400				2						0.1							
29	X	313,600				0.7						0.2							
30	X	221,100				1.7						0.2							
31	X	132,100				2.8													
Total		2,940,450																	
Average		94,853																	
Maximum		740,400																	

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



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

See page 4 for instructions

**I. General Information for the Month/Year of:** **August-05**

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

PWS Name: Sebring Lakes		PWS Identification Number: 5284137	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community
Number of Service Connections at End of Month: 55		Total Population Served at End of Month: 127	
PWS Owner: Aqua Utilities Florida			
Contact Person: Carolyn McFalls		Contact Person's Title: Area Manager - Florida	
Contact Person's Mailing Address: 6960 Professional Parkway E. Suit		City: Sarasota	State: FL
Contact Person's Telephone Number: 941/907-7400		Zip Code: 34240	
Contact Person's E-Mail Address: cfmcfalls@aquaamerica.com		Contact Person's Fax Number: 941/907-7401	

**B. Water Treatment Plant Information**

Plant Name: Sebring Lakes		Plant Telephone Number: 941/907-7400		
Plant Address: 5313 Knight Ave		City: Sebring	State: FL	
Type of Water Treated 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: 280,000		Plant Class (per subsection 62-699.310(4), F.A.C.): V		
Plant Category (per subsection 62-699.310(4), F.A.C.): C-1				
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Robert Paver	C	12040	3 Days per week
Other Operators:				

**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. 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	Robert Paver Printed or Typed Name	C12040 License Number
--------------------	---------------------------------------	--------------------------

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

PWS Identification Number: 5284137 Plant Name: Sebring Lakes

III. Daily Data for the Month Year of: **August-05**

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 Demonstrate 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/cm2	Minimum UV Dose Required, mW-sec/cm2			
1	X	24 hrs	359,300		2.7									1.6	
2	X	24 hrs	230,400		2.7									0.4	
3	X	24 hrs	162,900		2.7									0.4	
4	X	24 hrs	9,400		2.9									1.1	
5	X	24 hrs	9,800		2.1									0.7	
6		24 hrs	5,700												
7	X	24 hrs	5,700		2.1									0.8	
8	X	24 hrs	7,200		2.3									0.5	
9	X	24 hrs	9,800		2									0.5	
10	X	24 hrs	8,000		2									0.4	
11	X	24 hrs	65,000		2.1									0.9	
12	X	24 hrs	9,000		1.7									0.4	
13	X	24 hrs	87,000		2									0.9	
14		24 hrs	12,050												
15	X	24 hrs	12,050		1.9									0.9	
16	X	24 hrs	10,300		1.5									0.6	
17	X	24 hrs	12,200		2									0.4	
18	X	24 hrs	32,800		2.5									2	
19	X	24 hrs	50,100		2.1									1.3	
20	X	24 hrs	81,300		2.1									0.8	
21		24 hrs	23,450												
22	X	24 hrs	23,450		2.2									0.4	
23	X	24 hrs	202,700		2.1									1	
24	X	24 hrs	128,800		2.1									0.7	
25	X	24 hrs	126,400		3.5									1.1	
26	X	24 hrs	95,200		4									1.2	
27	X	24 hrs	113,900		2									0.6	
28		24 hrs	140,550												
29	X	24 hrs	140,550		3.7									0.7	
30	X	24 hrs	128,400		2.3									1.2	
31	X	24 hrs	95,600		3.1									1.2	
<b>Total</b>			2,399,000												
<b>Average</b>			77,387												
<b>Maximum</b>			359,300												

\* 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 page 4 for instructions

**I. General Information for the Month Year of:** **September-05**

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

PWS Name: Sebring Lakes		PWS Identification Number: 5284137	
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: 55		Total Population Served at End of Month: 127	
PWS Owner: Aqua Utilities Florida			
Contact Person: Carolyn McFalls		Contact Person's Title: Area Manager - Florida	
Contact Person's Mailing Address: 6960 Professional Parkway E. Suit		City: Sarasota	State: FL
		Zip Code: 34240	
Contact Person's Telephone Number: 941/907-7400		Contact Person's Fax Number: 941/907-7401	
Contact Person's E-Mail Address: cfmcfalls@aquaamerica.com			

**B. Water Treatment Plant Information**

Plant Name: Sebring Lakes		Plant Telephone Number: 941/907-7400		
Plant Address: 5313 Knight Ave		City: Sebring	State: FL	
		Zip Code: 33875		
Type of Water Treated 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: 280,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): C-I		Plant Class (per subsection 62-699.310(4), F.A.C.): V		
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Robert Paver	C	12040	3 Days per week
Other Operators:				

**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. 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.

	Robert Paver	C12040
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 5284137 Plant Name: Sebring Lakes

III. Daily Data for the Month Year of: **September-05**

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

Type of Disinfectant Residual Maintained in Distribution System:  Ultraviolet Radiation  Other (Describe):  Chlorine Dioxide

CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable\*  Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide

Plant Days	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 Point During Customer Peak Flow, mg-mn/L	Disinfectant Contact Time Before or During Customer Peak Flow, minutes	Lowest CT Provided	Temp. of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-mn/L	Lowest Operating UV Dose, sec/cm2	Minimum UV Dose Required, mW sec/cm2	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	Total		
															Average	Maximum	31
															3,305,200	110,173	320,400
1	X	24 hrs	62,500	2.5													
2	X	24 hrs	65,300	2.4													
3	X	24 hrs	25,400	2.3													
4		24 hrs	31,200														
5	X	24 hrs	31,200	2													
6	X	24 hrs	54,100	2.7													
7	X	24 hrs	320,400	4.7													
8	X	24 hrs	150,000	2.4													
9	X	24 hrs	195,400	3.8													
10	X	24 hrs	179,500	5													
11		24 hrs	159,300														
12	X	24 hrs	159,300	7.1													
13	X	24 hrs	155,200	4.8													
14	X	24 hrs	116,600	5.1													
15	X	24 hrs	92,100	3													
16	X	24 hrs	97,800	2.8													
17	X	24 hrs	118,900	5													
18		24 hrs	111,600														
19	X	24 hrs	111,600	5.3													
20	X	24 hrs	91,200	5.4													
21	X	24 hrs	111,500	4.6													
22	X	24 hrs	57,300	5.4													
23	X	24 hrs	102,100	5.5													
24	X	24 hrs	102,000	5.1													
25	X	24 hrs	100,000	5.4													
26	X	24 hrs	102,100	5.1													
27	X	24 hrs	100,000	5.3													
28	X	24 hrs	100,200	5.5													
29	X	24 hrs	98,900	5.5													
30	X	24 hrs	102,500	5.4													
31		24 hrs															

\* 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 page 4 for instructions

**I. General Information for the Month/Year of:** October-05

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

PWS Name: Sebring Lakes		PWS Identification Number: 5284137	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community
Number of Service Connections at End of Month: 55		Total Population Served at End of Month: 127	
PWS Owner: Aqua Utilities Florida			
Contact Person: Carolyn McFalls		Contact Person's Title: Area Manager - Florida	
Contact Person's Mailing Address: 6960 Professional Parkway E. Suit		City: Sarasota	State: FL
Contact Person's Telephone Number: 941/907-7400		Zip Code: 34240	
Contact Person's E-Mail Address: cfmcfalls@aquaamerica.com		Contact Person's Fax Number: 941/907-7401	

**B. Water Treatment Plant Information**

Plant Name: Sebring Lakes		Plant Telephone Number: 941/907-7400		
Plant Address: 5313 Knight Ave		City: Sebring	State: FL	
Type of Water Treated 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: 280,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): C-I		Plant Class (per subsection 62-699.310(4), F.A.C.): V		
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Robert Paver	C	12040	3 Days per week
Other Operators:				

**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. 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	Robert Paver Printed or Typed Name	C12040 License Number
--------------------	---------------------------------------	--------------------------

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

PWS Identification Number: 5284137

Plant Name: Sebring Lakes

III. Daily Data for the Month Year of: **October-05**

Means of Achieving Four-Log Virus Inactivation/Removal: \*  Ultraviolet Radiation  Other (Describe):

Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

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

Days Sampled or Visited by Operator (Place "X")	Plant in Operation Hours	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (T) at C	Disinfectant Contact Time Before or During Customer Measurement	Lowest CT During Customer Measurement	Temp. of Water, C	pH of Water, if Applicable	Minimum Required CT, mg-min/L	Lowest Operating UV Dose, 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*	
													UV Dose	CT Calculations
1	X	117,000	5.4									3.1		
2	X	94,000	4.3									3.2		
3	X	100,000	4.5									3		
4	X	336,000	4									3.1		
5	X	355,000	5									3		
6	X	34,000	5									3.1		
7	X	172,000	3.8									1.9		
8	X	117,000	5.2									2.7		
9	X	106,000	4.1									2.6		
10	X	105,000	5.1									2.5		
11	X	107,000	5									2.3		
12	X	112,000	5.1									2.1		
13	X	108,000	4.7									1.8		
14	X	106,000	4.8									1.7		
15	X	114,000	5.5									1.9		
16	X	107,000	5.5									2.6		
17	X	109,000	5.5									2.3		
18	X	106,000	5.5									3.5		
19	X	106,000	5.5									2.6		
20	X	106,000	5.5									1.8		
21	X	106,000	5.5									1.5		
22	X	122,000	4											
23	X	122,000	5.5									4.5		
24	X	139,000	5									2.5		
25	X	108,000	5.1									2.3		
26	X	104,000	4.6									2		
27	X	108,000	4.1									2.3		
28	X	109,000	4.6									1.9		
29	X	109,000	5.4											
30	X	109,000	5.4											
31	X	109,000	5.4											
Total		3,843,000												
Average		123,968												
Maximum		355,000												

\* 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 page 4 for instructions

**I. General Information for the Month/Year of:** November-05

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

PWS Name: <u>Sebring Lakes</u>		PWS Identification Number: <u>5284137</u>	
PWS Type: <input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive
Number of Service Connections at End of Month: <u>55</u>		Total Population Served at End of Month: <u>127</u>	
PWS Owner: <u>Aqua Utilities Florida</u>			
Contact Person: <u>Carolyn McFalls</u>		Contact Person's Title: <u>Area Manager - Florida</u>	
Contact Person's Mailing Address: <u>6960 Professional Parkway E. Suit</u>		City: <u>Sarasota</u>	State: <u>FL</u> Zip Code: <u>34240</u>
Contact Person's Telephone Number: <u>941/907-7400</u>		Contact Person's Fax Number: <u>941/907-7401</u>	
Contact Person's E-Mail Address: <u>cfmcfalls@aquaamerica.com</u>			

**B. Water Treatment Plant Information**

Plant Name: <u>Sebring Lakes</u>		Plant Telephone Number: <u>941/907-7400</u>		
Plant Address: <u>5313 Knight Ave</u>		City: <u>Sebring</u>	State: <u>FL</u> Zip Code: <u>33875</u>	
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>280,000</u>				
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>C-I</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>V</u>		
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	<u>Robert Paver</u>	<u>C</u>	<u>12040</u>	<u>3 Days per week</u>
Other Operators:				

**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. 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	Robert Paver Printed or Typed Name	C12040 License Number
--------------------	---------------------------------------	--------------------------

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

PWS Identification Number: 5284137 Plant Name: Sebring Lakes

III. Daily Data for the Month Year of: **November-05**

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

Type of Disinfectant Residual Maintained in Distribution System:  Ultraviolet Radiation  Other (Describe):

Free Chlorine  Combined Chlorine (Chloramines)  Chlorine Dioxide  Ozone  Combined Chlorine (Chloramines)

Days Started or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Measurement Point During Peak Flow, mg/l	Disinfectant Contact Time (T) at C	Provided Before or at First Customer Measurement Point During Peak Flow, minutes	Temp. of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, 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*	
												UV Dose	CT
1	X	110,000		4.9							2.3		
2	X	225,000		4.7							2		
3	X	107,000		6.4							2.1		
4	X	92,000		5.1							2.3		
5	X	70,000		5.2							2.5		
6		64,000											
7	X	64,000		4.2							2.2		
8	X	108,000		3.7							1.1		
9	X	101,000		5							4		
10	X	90,000		4.7							3		
11	X	153,000		2.2							1.5		
12	X	172,000		2.1							0.9		
13	X	113,000		2.7							1.4		
14	X	113,000		2.7							1.4		
15	X	163,000		3.1							1.1		
16	X	95,000		2.9							1.2		
17	X	105,000		3.1							0.9		
18	X	129,000		3.2							1.7		
19	X	129,000		3							1.6		
20		94,000											
21	X	94,000		3.1							1.6		
22	X	143,000		2.9							1.1		
23	X	112,000		2.8							1.8		
24	X	82,000		2.5							1.1		
25	X	115,000		2.8							1		
26	X	75,000		2.9							1		
27		72,000											
28	X	72,000		2.7							1.2		
29	X	108,000		3							1.3		
30	X	92,000		3.1							1.4		
31													
Total		3,262,000											
Average		108,733											
Maximum		225,000											

\* 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 page 4 for instructions

**I. General Information for the Month Year of:** December-05

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

PWS Name: Sebring Lakes		PWS Identification Number: 5284137	
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: 55		Total Population Served at End of Month: 127	
PWS Owner: Aqua Utilities Florida			
Contact Person: Carolyn McFalls		Contact Person's Title: Area Manager - Florida	
Contact Person's Mailing Address: 6960 Professional Parkway E. Suit		City: Sarasota	State: FL
		Zip Code: 34240	
Contact Person's Telephone Number: 941/907-7400		Contact Person's Fax Number: 941/907-7401	
Contact Person's E-Mail Address: <a href="mailto:cfmcfalls@aquaaamerica.com">cfmcfalls@aquaaamerica.com</a>			

**B. Water Treatment Plant Information**

Plant Name: Sebring Lakes		Plant Telephone Number: 941/907-7400		
Plant Address: 5313 Knight Ave		City: Sebring	State: FL	
		Zip Code: 33875		
Type of Water Treated 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: 280,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): C-I		Plant Class (per subsection 62-699.310(4), F.A.C.): V		
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Robert Paver	C	12040	3 Days per week
Other Operators:				

**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. 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.

	Robert Paver	C12040
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 5284137

Plant Name: Sebring Lakes

III. Daily Data for the Month Year of: **December-05**

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	Plant or Staffed Days	Hours in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Point During Peak Flow, mg-m/L	Disinfectant Contact Time Before or at First Customer Point During Peak Flow, minutes	Lowest CT	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-m/L	Lowest Operating UV Dose, sec-cm <sup>2</sup>	Minimum UV Dose Required, sec-cm <sup>2</sup>	CT Calculations		Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
													UV Dose	System, mg/L		
1	X	24 hrs	52,000	3	3	3	3								1.8	
2	X	24 hrs	99,800	2.9											1.8	
3	X	24 hrs	205,500	3.6											1.8	
4		24 hrs	434,300													
5	X	24 hrs	434,300	3.1											1.4	
6	X	24 hrs	135,400	2.9											1.2	
7	X	24 hrs	120,300	3											1.8	
8	X	24 hrs	185,800	2.4											1.1	
9	X	24 hrs	106,000	2											1.4	
10	X	24 hrs	95,600	3											1.7	
11		24 hrs	71,800													
12	X	24 hrs	71,800	3											1.7	
13	X	24 hrs	104,800	3.8											1.5	
14	X	24 hrs	51,000	3.4											1.2	
15	X	24 hrs	120,100	4.2											1.5	
16	X	24 hrs	99,200	4.5											1	
17	X	24 hrs	98,700	4.9											2.1	
18	X	24 hrs	58,700	4.3											1.6	
19	X	24 hrs	45,300	4.1											1.5	
20	X	24 hrs	176,300	1.6											1.4	
21	X	24 hrs	67,000	1.6											1.3	
22	X	24 hrs	12,500	2.7											1.7	
23	X	24 hrs	94,300	2.4											1.5	
24	X	24 hrs	37,000	3.7											1.1	
25		24 hrs	61,450													
26	X	24 hrs	61,450	3.8											2	
27	X	24 hrs	114,300	3.3											1.7	
28	X	24 hrs	89,900	4.5											2.2	
29	X	24 hrs	179,600	4.9											2.1	
30	X	24 hrs	117,800	2.8											2	
31	X	24 hrs	144,200	2.1											2.1	
<b>Total</b>			<b>3,746,200</b>													
<b>Average</b>			<b>120,845</b>													
<b>Maximum</b>			<b>434,300</b>													

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



WO#0002156052 SKYCREST CYCLE 3306 PREM-CODE=637360  
 SCHED-DATE 121906 PROMISED ALL DAY ORDER-DESC MVIN/Move In Customer  
 PRINT-DATE 12/21/06 PRINT-TIME 11:07:16 ORDER-STATUS REVISED  
 SKYCREST

-----  
 CUST/PREM 000982353/637360 DIST F STYP RSM1  
 CUST-NAME SHELTON, FAWN R. SCAT WTR  
 SRV-ADDR 2932 SOUTH DR SET-MTR U09152795  
 SRV-CITY FRUITLAND PARK FL 34731-5413 SET-DATE 01-JAN-1700  
 PHONE# H 352-504-5651 W - - SET-RDG 011560  
 M-NAME SET-SIZE 5/8  
 NONE SET-RMTH MR  
 M-ADDR ARB-RMT#  
 M-CITY PA ERT  
 BILLED A/R-STAT A MIU#  
 DUE-DTE A/R-BAL .00 SERIAL # U999999  
 OCCUPANT AMT-COL .00 EXTENS-#  
 COMP# 1336421 RC=RS ROUTE 08427 STOP 01140  
 CRED-CDS TYPE-HEAT MTR-CDS 06  
 BILL-FR=12 SWIM(Y,N) N #DL= 5 DD= 0 M= 1/DL= 0 DD= 0 M= 0  
 FROZEN MODEL-1  
 LAST-SIZE 5/8 LAST-DATE 01-JAN-00 MODEL-2  
 PREM-ID

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

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

MTR-INST:  
 WORK-ORDER-REMARKS:  
 SETT 11-01-06 WATER IS ON/ALREADY GAVE INFO BUT NOT IN COMPUTER  
 rv to 12/22/6 PLSE GET METER READ SO W/O CAN BE CLOSED. THANKS

APP-Time Start 18-DEC-2006 08:00:00 End 18-DEC-2006 20:00:00  
 Call-Ahead Ord# 2156052 Type Phone# Ext # Min-Before 0