

#### Welaka/Saratoga Harbour

Docket No. 060368-WS

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

Florida

**VOLUME 6** 

Book 7

Set 55 of 57

COM

Containing
Additional Engineering Requirements

ECR

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Monthly Operating Reports

OPC

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Aqua Utilities Florida, Inc.

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OTH

# Aqua Utilities Florida, Inc. Monthly Operating Reports

## Welaka/Saratoga Harbour

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V 000F		
Year: 2005	1	48
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September October	10	84
	11	88
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December	12	Ű2



See Pages 4 for Instru	uctions.							
. General Information	for the Month/	Year of: January, 20	004					
A. Public Water System	(PWS) Informa	ntion						
	Sarasota Harbor					PWS Identification Number	r: 2541008	
PWS Type:	✓ Community	Non-Transient Non-Commu	unity Tr	ansient Non-Comr	nunity	Consecutive		
Number of Service Connect	tions at End of Month		<u> </u>			Opulation Served at End of	Month: 117	
PWS Owner:	Florida Water Service	ces				<del></del>		
Contact Person:	Craig Anderson				Contac	et Person's Title:	VP Environmental Services	
Contact Person's Mailing A	ddress:	P.O. Box 609520			City: Orlando	State: Florida	Zip Code:	32860-9520
Contact Person's Telephone	Number:	(407) 598-4199			Contac	t Person's Fax Number:	(407) 598-4217	
Contact Person's E-Mail Ad	ldress:	craiga@florida-water.com						
3. Water Treatment Pla	ant Information							
Plant Name:	Sarasota Harbor					Plant Telephone Number:	904-329-112	.2
Plant Address:	Gibbs Avenue			÷	City: Satsuma	State: Florida	Zip Code:	32189
Type of Water Treatment by		✓ Raw Ground Water	Purchased Finis	shed Water				
Permitted Maximum Day O	perating Capacity of	Plant, gallons per day:		200,000				
Plant Category (per subsect	ion 62-699.310(4), F					ass (per subsection 62-699.3		
Licensed Operators		Name		License Class	License Number		(s) / Shift(s) Worked_	
Lead/Chief Operator:	Paul Thompson			A	7251	Days 1st Shift		
Other Operators:	Donald Holcomb			A	5091	Days 1st Shift		
			*******					
Certification by Lead	/Chief Operato	r						
		t operator licensed in Florida,	am the lead/chie	f operator of the	water treatment n	lant identified in part I	of this report. I certify	that the
		ue and accurate to the best of						
		applicable standards reference						
		ensed operator staffed or visite						
		treatment process performanc						
						iditional operations rec	cords to the PWS owner	SO THE L M S
owner can retain them,	, together with co	ppies of this report, at a conver	nent location for	at least ten year	rs.			
			Paul Thompso	n			A-7251	
Signature and Date			Printed or Typ				License Nur	mber
- G. Start to a 17th			17cd of Typ	1.00000			TACCIOC (AU)	

PWS Id	lentification	n Number:		2541008		Plant Name:	Sarasota Ha	rbor						
III. D	aily Data	for the N	lonth/Year	of:		January, 2004								
			g Virus Inactiv				Chlorine Di	ovido	C Ozone		ined Chlori	a (Chloron	aines)	
1	traviolet R	-	C Othe		-	inornic 1	Cinornie Di	Oxide	1 Ozone	1 Come	inea Chioru	ie (Cinorai	iiiies)	
F.						▼ Free Chle	rine [	Combin	ed Chlorine	(Chloramine	9) [	Chlorine I	Dioxide	
Type	I Disilite	Tant Kesic	luai iviailitai										. 151 W. 164 - 1 1 11	
				·	T Calculations, or		ulations					) Oose		
						CT Calc	ulations	To add to part	A CONTRACTOR	3 3 3	. UVI		Lowest Residual	
1							Lowest CT							
						Disinfectant	Provided	1000	ent 1914					
}	Days Plant				Lowest Residual	Contact Time	Before or at					Minimum	Lowest Residual Disinfectant	
1	Staffed or Visited by		Net Quantity of Finished		Disinfectant Concentration (C)	(T) at C Measurement	First Customer				Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of	Operator	Hours plant		13.835	Before or at First	Point During	During Peak	#15 24 24		Minimum CT	5.00	Required,	Remote Point in	Conditions, Repair of Maintenance Work that
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow me-	Temp of	pH of Water,	Required, mg		mW-	Distribution -	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
1	Х	24.0	8,700		2.5								0.9	
2	X	24.0	15,200		3.0								1.0	
3		24.0 24.0	11,400 11,400											
5	X	24.0	11,400		2.7			<del> </del>		<del> </del>			1.0	
6	X	24.0	8,800		2.5			<del>                                     </del>	-	<del> </del>			0.9	
7	X	24.0	8,100		2.5								1.0	
8	X	24,0	9,700		2.5								0.9	
9	Х	24.0	17,900		2.4								1.0	
10		24.0	11,467											
11	X	24.0 24.0	11,467		3.1					<b> </b>			1,3	
13	$\frac{\lambda}{x}$	24.0	9,100		2.6		ļ						1.7	
14	X	24.0	2,500		2.3			l			-		1.2	
15	Х	24.0	11,100		2.5								0.9	
16	X	24.0	8,900		2.4								1.0	
17		24.0	11,800											
18	- <del>,</del> -	24.0	11,800		3.5								0,8	
20	X	24.0 24.0	11,800 8,400		2.5 2.5		<del></del>	<del></del>					0.8	
21	X	24.0	7,900		2.6		<u> </u>						0.8	
22		24.0	17,200		3.1			_					1.3	
23	Х	24.0	8,500		3.3								1.4	
24		24.0	11,733											
25		24.0	11,733							ļ				
26	X	24.0	11,733		3.1								1.1	
27	X	24.0 24.0	8,700 8,500		3.1			-					1.4	
29	X	24.0	7,700		2.8		ļ	<del> </del>			ļ		1.2	
30	X	24.0	8,600		2.7	L,	<u> </u>	-	<del> </del>	<del> </del>			1.1	
31		24.0	0,000		2.7		<b> </b>	<del>                                     </del>					t	
Total			314,700				<del></del>				•	·		<u> </u>
Avgerag	e	7.5	10,152											

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

DEP Form 62-555-900(3)Alternate



See Pages 4 for Instr								
. General Information	for the Month/Year	of: January, 20	004					
A. Public Water System	(PWS) Information							
PWS Name:	Welaka Mobile Home Parl	<del></del>		· · · · · · · · · · · · · · · · · · ·		PWS Identification Number	er: 2541242	
PWS Type:	✓ Community	Non-Transient Non-Commu	inity T	ransient Non-Com	munity	Consecutive		
Number of Service Connect		96				l Population Served at End of	Month: 237	
PWS Owner:	Florida Water Services					· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
Contact Person:	Craig Anderson				Con	tact Person's Title:	VP Environmental Services	
Contact Person's Mailing A	ddress: P.O. I	Box 609520			City: Orlando	State: Florida	Zip Code:	32860-9520
Contact Person's Telephone	Number: (407)	598-4199			Con	tact Person's Fax Number:	(407) 598-4217	
Contact Person's E-Mail Ad	ldress: <u>crai</u>	ga@florida-water.com						
3. Water Treatment Pla	ant Information							
Plant Name:	Welaka Mobile Home Parl	(				Plant Telephone Number:	904-329-11	22
Plant Address:	Hamilton Road				City: Satsuma	State: Florida	Zip Code:	32189
Type of Water Treatment by	y Plant:	Raw Ground Water	Purchased Fin	ished Water				
Permitted Maximum Day O		<del></del>		108,000				
Plant Category (per subsect	ion 62-699.310(4), F.A.C.):		· · · · · · · · · · · · · · · · · · ·			Class (per subsection 62-699.		
Licensed Operators		Name		License Class	License Numbe		y(s) / Shift(s) Worked	
Lead/Chief Operator:	Paul Thompson			A	7251	Days 1st Shift		
Other Operators:	Donald Holcomb		,	Α	5091	Days 1st Shift	<u> </u>	
				<u> </u>				
				·				
					<del></del>			
					ļ			
		<del>-</del>						
		<del></del>						<del></del>
				<u> </u>				
				<b></b>		-		
				<u> </u>	<u> </u>			
I Certification by Lead	I/Chief Operator							
I, the undersigned water	er treatment plant oper	ator licensed in Florida,	am the lead/chie	of operator of the	water treatment	plant identified in part l	of this report. I certify	that the
		d accurate to the best of r		-			-	
		standards referenced in						
		tor staffed or visited this						
		ess performance records.						
		ort, at a convenient location			these additional	operations records to in	ic i w 5 owner 30 the i v	15 Owner can
readin dioni, togother w	riai copica or una repo	at a convenient location	ni ioi at icast lei	ii yeais.				
			Paul Thompso	on			A-7251	
Signature and Date			Printed or Typ				License Nu	mber

Page 1

DEP Form 62-555 .900(3)Alternate

PWS Io	lentification	n Number:		2541242		Plant Name:	Welaka Mol	oile Home	Park					
HII. D	aily Data	for the N	lonth/Year	of:		January, 2004						···		
			g Virus Inactiv				Chlorine Di	- 1						
1	raviolet R	_		r (Describe):		morne [	Chiorine Di	oxide	Ozone	Comb	ined Chlorii	ne (Chioran	nines)	
+						<b>F</b> a	<del></del>		1.631.1 :	(01.1		Chlorine I		
Type o	d Disinfe	ctant Resid	lual Maintai		ibution System:	▼ Free Chlo				(Chloramine			Dioxide	
		<b>i</b> i		C	T Calculations, or	UV Dose, to	Demostate l	Four-Log	Virus Inac	tivation, if A				네 하실 생겼다는 젊은 한 하는 그리
					<u> </u>	CT Calc	ulations				UVI	Dose		
						11221	Lowest CT		<b>激</b> 注意:				1 × 1 1 10	
		5. 7	Tu Vrv. *			Disinfectant	Provided		<b>4</b>		l' ·			
Ì	Days Plant	.01			Lowest Residual	Contact Time	Before or at						Lowest Residual	
	Staffed or		Net Quantity		Disinfectant	(T) at C	First					Minimum	Disinfectant =	
	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	
Day of	Operator	Hours plant	All the second of the second		Before or at First	Point During	During Peak			Minimum CT		Required,	Remote Point in	
the	(Place	ın	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	lemp of	pH of Water,	Required, mg		mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, C	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
2	X	24.0	8,570		3.0			<del>                                     </del>		ļ			1.6	
$\frac{2}{3}$	- ^-	24.0	12,510 10,317		2.6	<del></del>	<del> </del>				ļ <u> </u>	<u> </u>	1.2	
4		24.0	10,317			· · · · · · · · · · · · · · · · · · ·	···			<b> </b>		<u> </u>		
5	Х	24.0	10,317		2.7		<del></del>	<del> </del>		<u> </u>	<b></b>		1.0	
6	X	24.0	7,620		2.6	-	<del></del>	<del>                                     </del>					1.0	
7	Х	24.0	7,890		2.8								1.1	
- 8	Х	24.0	10,670		2.8								1.0	
9	Х	24.0	9,060		2.5								0.8	
10		24.0	10,047											
11		24.0	10,047											
12	X	24.0	10,047		2.6								1.0	
13	X	24.0	10,920		2.8		***	ļ		ļ			1.3	
15	X	24.0 24.0	11,420 3,380		2.8		<del></del>				<u> </u>	}	1.0	
16	$\frac{}{x}$	24.0	9,900		2.8			-					1.0	
17		24.0	12,637		2.0			<u> </u>		<u> </u>			1.0	
18		24.0	12,637				<del></del>						<del> </del>	
19	Х	24.0	12,637		3.0	· · · · · · · · · · · · · · · · · · ·							1.1	
20	Х	24.0	11,260		3.0								1.3	
21	X	24.0	8,310		2.7								1.0	
22	Х	24.0	9,970		3.0								1.4	
23	X	24.0	9,960		2.6		<b>[</b>				ļ		1.2	
24		24.0	11,430				ļ							
25 26		24.0 24.0	11,430		2.0					<del></del>	<b> </b>			
27	X	24.0	11,430 7,010	ļ	3.0		<u> </u>	<del> </del>		<del>                                     </del>		<b> </b>	1.2	
28	X	24.0	9,500		3.0							<del> </del>	1.1	
29	X	24.0	13,680		2.8		<u> </u>	<del>                                     </del>			†	<b> </b>	1.0	
30	Х	24.0	8,060		3.1							<u> </u>	1.0	
31'-		24.0												
Total			302,980											

13,680

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



See Pages 4 for Instru								
. General Information	for the Month/Y	ear of: February,	2004					
A. Public Water System	(PWS) Informat	tion						
PWS Name:	Sarasota Harbor		*			PWS Identification Number:	2541008	
PWS Type:	✓ Community	Non-Transient Non-Commi	unity T	ransient Non-Comi	munity	Consecutive		
Number of Service Connect	ions at End of Month:	47			To	tal Population Served at End of M	onth: 117	
PWS Owner:	Florida Water Service	es						
Contact Person:	Craig Anderson				Co	ontact Person's Title: V	P Environmental Services	
Contact Person's Mailing A	ddress:	P.O. Box 609520			City: Orlando	State: Florida	Zip Code:	32860-9520
Contact Person's Telephone	Number:	(407) 598-4199			Co	ontact Person's Fax Number: (4	07) 598-4217	
Contact Person's E-Mail Ad	ldress:	craiga@florida-water.com						
3. Water Treatment Pla	ent Information				***			
Plant Name:	Sarasota Harbor					Plant Telephone Number:	904-329-112	.2
Plant Address:	Gibbs Avenue				City: Satsuma	State: Florida	Zip Code:	32189
Type of Water Treatment by	/ Plant:	✓ Raw Ground Water	Purchased Fin	ished Water				
Permitted Maximum Day O	perating Capacity of F	Plant, gallons per day:		200,000				
Plant Category (per subsecti	юп 62-699.310(4), F. <i>A</i>					nt Class (per subsection 62-699.31)		
Licensed Operators		Name		License Class	License Numb	oer Day(s	) / Shift(s) Worked	Fig. 17
Lead/Chief Operator:				Α	7251	Days 1st Shift		
Other Operators:	Donald Holcomb			Α	5091	Days 1st Shift		
				<u> </u>				
<u>'</u>								
	* 1			ļ				
				<u> </u>				
				<b> </b>				
				<u></u>	ļ			
1 134	W. J. 198			<u> </u>	L			
I Certification by Lead	/Chief Operator							
	· · · · · · · · · · · · · · · · · · ·	operator licensed in Florida,	am the lead/chie	ef operator of the	water treatmer	ot plant identified in part I o	f this report. I certify	that the
	•	e and accurate to the best of		•			•	
		applicable standards reference						
		nsed operator staffed or visite						
		reatment process performance			-	e additional operations reco	rds to the PWS owner	so the PWS
owner can retain them,	together with cop	pies of this report, at a conver	nient location for	r at least ten yea	rs.			
			Paul Thompso	on.			A-7251	
Signature and Date			Printed or Tyr				License Nun	nher
orginature and Date			Finited of Ty	peu ivaine			Electise Muli	1001

PWS Id	lentification	n Number:		2541008		Plant Name:	Sarasota Ha	rbor						
III. D	aily Data	for the M	lonth/Year	of:		February, 2004								
			y Virus Inactiv		/al: <b>▼</b> Free C		Chlorine Di	iovide	☐ Ozone	□ Comb	ined Chlori	ne (Chloran	nines)	
l .	traviolet R	-	-	r (Describe):		•	Cinornic Di	oxide	1 Ozone	1 Come	mica emorn	ic (emorai	inics)	
⊢						▼ Free Chlo	rine [	Combin	ed Chlorine	(Chloramine	:s) [	Chlorine I	Dioxide	
1) pe	1	T Test			CT Calculations, or								Lenner West Torks	
					1 Calculations, or	CT Calc			virus mac	uvauon, 11 2	UVI			
·	·					CI Calc	uiations		nia dyfisia i said Nais etga a siid		, UV.	0000		
				- 12			Lowest CT							
	D D					Disinfectant	Provided		a 1.32 1.53					
	Days Plant Staffed or	1	Net Quantity		Lowest Residual Disinfectant	Contact Time	Before or at					Minimum	Lowest Residual Disinfectant	200
	Visited by		of Finished		Concentration (C)	(T) at C Measurement	First Customer				Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of	Operator	Hours plant	and the second of the second		Before or at First	Point During	During Peak			Minimum CT	Operating	Required,	Remote Point in	
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water	Required, mg	UV Dose,	mW-	Distribution *	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
1		24.0	17,150					ļ						
3	X	24.0 24.0	17,150		3.1			<del>                                     </del>			ļ	<u> </u>	1.4	
4	$\frac{x}{x}$	24.0	9,100 1,700		2.8		ļ	<del> </del> -	<del>                                     </del>	<del> </del>	<del> </del>	<del></del>	1.2	
5	X	24.0	7,900	<del> </del>	2.6			<del>                                     </del>	<del> </del>	<del>                                     </del>		<del></del>	1.0	
6	X	24.0	16,300		2.6			<del> </del>				<u> </u>	1.0	
7		24.0	8,767											
8		24.0	8,767											
9	X	24.0	8,767		2.6							ļ	1.1	
10	X	24.0	8,000		2.6					ļ			1.0	
11	X X	24.0 24.0	8,400 8,700		2.6		···· ·· · · · · · · · · · · · · · · ·	ļ		-		<del></del>	1.1	
13	<u> </u>	24.0	8,400		2.5			<del>                                     </del>	ļ	ļ		<del> </del>	1.0	
14		24.0	9,067		2.0			<del>                                     </del>	<b>-</b>	· · · · · · · · · · · · · · · · · · ·			1.v	
15		24.0	9,067					<del>                                     </del>	<del> </del>	<del>                                     </del>	<u> </u>			
16	X	24.0	9,067		2.6		···						_ 1.1	
17	X	24.0	13,400		3.2								1.4	
18	X	24.0	1,500		2.8			ļ	ļ	<u> </u>			1.0	
19	X	24.0	8,700		3.0			<del> </del>		ļ		<u> </u>	1.2	
20	X	24.0 24.0	8,400 8,467		2.9	·		<del> </del>					1.2	
22		24.0	8,467					<del> </del>		<del> </del>			<del>                                     </del>	
23	Х	24.0	8,467		2.9			<del> </del>		<u> </u>			1.0	
24	Х	24.0	8,000		2.5				† · · · · · ·				0.8	
25	Х	24.0	8,600		2.6								1.0	
26	Х	24.0	8,100		1.8			<u> </u>		<u> </u>		ļ	0.7	
27	X	24.0	7,900		2.5		ļ	ļ	ļ	<b></b>		<u> </u>	1.0	
28 29		24.0 24.0	-					<del> </del>	<del> </del>	ļ	<u> </u>	<u> </u>		
29		24.0					<b></b>	+	<del> </del>	<del> </del>				
			<del></del>					<del> </del>		<del>                                     </del>		<del> </del>	<del> </del>	
Total	55		246,300		<u> </u>	<u> </u>	l	<u> </u>	I	<del></del>	L	<del></del>	J	
Avgerag	e		8 493											

17,150

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



See Pages 4 for Instru	uctions.						
I. General Information		Year of:					
	-			· · · · · · · · · · · · · · · · · · ·			
A. Public Water System	<del></del>						
	Welaka Mobile Hor	<del></del>				PWS Identification Number:	2541242
PWS Type:	✓ Community	Non-Transient Non-Commu	nity Ti	ransient Non-Comi	<del></del>	Consecutive	
Number of Service Connect					Tota	al Population Served at End of Month:	237
	Florida Water Servi	ces			1_		
	Craig Anderson				,		onmental Services
Contact Person's Mailing Ac	·	P.O. Box 609520			City: Orlando	State: Florida	Zip Code: 32860-9520
Contact Person's Telephone		(407) 598-4199			Con	tact Person's Fax Number: (407) 598	3-4217
Contact Person's E-Mail Ad		craiga@florida-water.com					
B. Water Treatment Pla	··	<del></del>				Di Ti i Vi i	004 220 1122
	Welaka Mobile Hor	ne Park		<del></del>	G: B.	Plant Telephone Number:	904-329-1122 Zip Code: 32189
<del></del>	Hamilton Road	/ Paul Croud Water	Dunchassed First	ahad Mat	City: Satsuma	State: Florida	Zip Code: 32189
Type of Water Treatment by Permitted Maximum Day O		Raw Ground Water	Purchased Fini				
		<del></del>		108,000	Dlame	Class (per subsection 62-699.310(4), F	A.C.): D
Plant Category (per subsection Licensed Operators	on 62-699.310(4), r	Name V		License Class	License Number		
Lead/Chief Operator:	David Thereses	Name	E LONGE LA COLONIA DE LA C	A	7251	Days 1st Shift	nus) worked
	Donald Holcomb			A	5091	Days 1st Shift	
Omer Operators.	Dollaid Holcomb			A	3091	Days 1st Sillit	
				<del></del>			
				<del> </del>			
				<u> </u>			
		·		<del></del>			
				L	<u> </u>		
I Certification by Lead	/Chief Operato	r					
I, the undersigned water	er treatment plan	t operator licensed in Florida, a	m the lead/chie	f operator of the	water treatment	plant identified in part I of this	report. I certify that the
						ng water treatment chemicals use	
						hat the following additional oper	
						ords of amounts of chemicals use	
						operations records to the PWS	
					these additional	operations records to the 1 wo	owner so the range owner can
retain them, together w	an copies of thi	s report, at a convenient location	ni ioi ai ieasi tei	i years.			
			Paul Thompso	on			A-7251
Signature and Date			Printed or Typ	oed Name			License Number

PWS I	lentificatio	n Number:		2541242		Plant Name:	Welaka Mo	bile Home	Park					
III. D	aily Data	for the N	lonth/Year	of:										
Means	of Achievi	ing Four-Lo	g Virus Inacti	vation/Remov	val: ▼ Free C	Thlorine I	Chlorine D	iosido		<b>F</b>		4011		
	traviolet R			er (Describe):		inoraic	Chlorine D	ioxide	Ozone	☐ Comb	oined Chlori	ne (Chlorai	nines)	
<b>-</b>					ibution System:	FZ Free Chile		Combin	and Chlorian	(Chloramine		Chlorine I	N: :1.	
1 ypc (	Distille	T Kesi	iuai iviailitai I					_					Dioxide	
1.10		ł			T Calculations, or			Four-Log	g Virus Inac	tivation, if				
		1		ļ		CT Calc	ulations				→ UV	Dose		
1		1					Lowest CT					1.0		
	Alert Mill		ł	1		Disinfectant	Provided		1					
	Days Plant	:			Lowest Residual	Contact Time	Before or at				7.112		Lowest Residual	
	Staffed or		Net Quantity		Disinfectant	(T) at C	First	4				Minimum	Disinfectant	
	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of		Hours plant			Before or at First	Point During	During Peak	Taller and		Minimum CI		Required,	Remote Point in	Conditions; Repair or Maintenance Work tha
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water	Required, mg	UV Dose,	mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, C	if Applicable	min/L 🦚	mW-sec/cm <sup>2</sup>	*sec/cm*	System, mg/L	Out of Operation
2	Х	24.0	15,365 15,365	<u> </u>	26			ļ		<b> </b>		<u> </u>		
3	X	24.0	12,900	-	2.6			ļ	<del> </del>	ļ			0.9	
4	X	24.0	7,070		2.8			-		<del> </del>			1.2	
5	X	24.0	10,360	<b>-</b>	3.0			<del>├</del>	<del></del>				1.2	
6	X	24.0	10,350		2.8		<del> </del>	<del> </del>	<del>                                     </del>		<del></del>	<del> </del>	1.3	
7		24.0	10,940					<del>                                     </del>				<del> </del>	1.5	
8		24.0	10,940											
9	X	24.0	10,940		3.0								1.2	
10	X	24.0	11,650		2.9								1.1	
11	X	24.0	9,560		3.2								0.9	
12	X	24.0	11,320		3.0			<u> </u>					1.0	
14	X	24.0 24.0	12,400		3.2								1.1	
15		24.0	10,383	-						ļ		<del> </del>		
16	X	24.0	10,383		2.8		<u> </u>	<del></del> -	<del></del>				1.0	
17	X	24.0	10,980		2.8			-		-			0.8	
18	X	24.0	10,740		3.0		<del> </del>	<del> </del>	<del> </del>	<del> </del>	<del>                                     </del>	<del> </del>	1.1	
19	Х	24.0	12,800		2.8							<del> </del>	1.0	
20	Х	24.0	11,980		3,1					<del></del>			1.0	
21		24.0	13,086							l				
22		24.0	13,086											
23	X	24.0	13,086		2.8								1.1	
24	X	24.0	13,960		3.0								1.2	
26	X	24.0 24.0	11,920		3.0			<u> </u>					1.4	
27	^ X	24.0	9,950 12,670		3.0					ļ			1.3	
28		24.0	12,670		2.8								1.0	
29		24.0										<del> </del>		
-1		2.0						-		-		<del> </del>		
									<del></del>			<u> </u>	<u> </u>	
Total		,	314,569						·	<u> </u>		L		
Avgerage		1 1 1 1	10,847											
Maximu	n		15,365											

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



See Pages 4 for Instr										
l. General Information	for the Month/	Year of: March, 2004								
A. Public Water System	ı (PWS) Informa	ation								
PWS Name:	Sarasota Harbor			<u> </u>			PWS Identification Number:	2:	541008	
PWS Type:	✓ Community	Non-Transient Non-Community	Tr	ansient Non-Comr	nunity		Consecutive			
Number of Service Connec	tions at End of Month				<u> </u>	Total I	Population Served at End of M	fonth: I	17	
PWS Owner:	Florida Water Service	ces			,		<del></del>			
Contact Person:	Craig Anderson					Contac	ct Person's Title: V	P Environmenta	l Services	
Contact Person's Mailing A	.ddress:	P.O. Box 609520			City: Orlando	)	State: Florida	Z	ip Code:	32860-9520
Contact Person's Telephone	: Number:	(407) 598-4199				Contac	ct Person's Fax Number: (4	407) 598-4217		
Contact Person's E-Mail Ac		craiga@florida-water.com								
3. Water Treatment Pla	ant Information									
Plant Name:	Sarasota Harbor						Plant Telephone Number:	9	04-329-112	2
Plant Address:	Gibbs Avenue				City: Satsuma	a	State: Florida	Z	ip Code:	32189
Type of Water Treatment by	<u></u>		ased Finis	shed Water						
Permitted Maximum Day C				200,000						
Plant Category (per subsect	ion 62-699.310(4), F.						lass (per subsection 62-699.31		C	
Licensed Operators		Name		License Class	License Nu	mber	<del>                                     </del>	s) / Shift(s) W	orked	
Lead/Chief Operator:				A	7251		Days 1st Shift			···
Other Operators:	Donald Holcomb			A	5091		Days 1st Shift	· · · · · · · · · · · · · · · · · · ·	<del></del>	
1					<del> </del>					
							<u> </u>			
	·							<del></del>		
	·						<u> </u>	<del></del>		
	L		!				<u> </u>			
I Certification by Leac	l/Chief Operato	r								
I, the undersigned water	er treatment plant	t operator licensed in Florida, am the le	ad/chief	f operator of the	water treatm	ent p	lant identified in part I o	of this report.	I certify	that the
	•	ue and accurate to the best of my know		-		_	<del>-</del>			
-	•	applicable standards referenced in subs	_		•	_	•		-	
		ensed operator staffed or visited this pla								
	-	treatment process performance records		~						
	• • •	• •			•	ese ac	iditional operations recu	orus to the F v	3 Owner	SO the I W.S
owner can retain them.	, together with co	pies of this report, at a convenient loca	uon ior	at teast ten year	S.					
		5	da II-l-	L				A	-5091	
Circulation and Date			ld Holcon						icense Num	hor
Signature and Date		Printe	ed or Type	ea name				L	icense inum	ioci

PWS I	dentificatio	n Number:		2541008	<del></del>	Plant Name:	Sarasota Ha	rbor						
	aily Data	for the N	lonth/Year	of		March, 2004								
1			g Virus Inacti			hlorine [	Chlorine Di	oxide	☐ Ozone	☐ Comb	oined Chlorii	ne (Chloran	nines)	
$\Pi_{-}$ $\Omega$ i	traviolet R	ladiation	┌ Othe	er (Describe):	:									
Type o	of Disinfe	ctant Resid	dual Maintai	ned in Distr	ibution System:	▼ Free Chle	orine [	Combir	ed Chlorine	(Chloramine	es)	Chlorine I	Dioxide	
					CT Calculations, or			Four-Loc	Vine Inco	tivotion if			r	
İ	İ			<del>                                     </del>	or Carculations, or			Our-Log	v II us IIIac	tivation, 41				함께, 이번 회복이 하는데 밝힌 것
İ				<u> </u>		CT Calc	Luiauons	Lean		F	UVI	Jose		[교회에 첫 경찰이 구하는 인흙이 살이
ĺ	İ						Lowest CT						f 1950	요리다 함께 독취, 낚시 하고 됐는 것이
}	1	<b>\</b>		<b>.</b>		Disinfectant	Provided					ļ.		
	Days Plant			l	Lowest Residual	Contact Time	Before or at					2	Lowest Residual	[충보] 이 제도 회사 그리다는 것이다.
	Staffed or		Net Quantity		Disinfectant	(T) at C	First			Y ( ) ( ) ( )	# 1 P. A.S.	Minimum	Disinfectant	
	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of	Operator	Hours plant	the state of the state of the state of		Before or at First	Point During	During Peak		P. T.	Minimum CT		Required,	Remote Point in	Conditions; Repair or Maintenance Work that
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water,	Required, mg	UV Dose,	mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
1	X	24.0	25,700	ļ	2.8	<u> </u>	ļ	L					1.1	
3	X	24.0	8,500	<u> </u>	2.8								1.0	
4	X	24.0	12,900		2.8				L				1.1	
5	X	24.0	3,900	<b>!</b>	2.7		<u> </u>	<u> </u>	<u> </u>				1.0	
6		24.0	17,500 12,100	<del> </del>	3.1				<b></b> _		ļ		1.1	
7	<del>                                     </del>	24.0	12,100	<del> </del>				<u> </u>						
8	Х	24.0	12,100		3.1		<del> </del>	<u> </u>			<u> </u>		1.4	
9	X	24.0	8,300		2.7		<b>!</b>	<del> </del>	<u> </u>	<del> </del>	<b>-</b>		1.4	
10	X	24.0	9,600		2.7			<b></b>		ļ	<u> </u>	ļ	1.0	
11	X	24.0	8,300	<b></b>	2.9				<del></del>		<del> </del>		0,9	
12	Х	24.0	4,300		1.7		<del></del>	<del></del>			<del> </del>		0.6	
13		24.0	11,567					<u> </u>			<del></del>		0.0	
14		24.0	11,567											
15	Х	24.0	11,567		2.1						<del>                                     </del>		0,8	
16	X	24.0	8,600		2.1			<u> </u>		·	· · · · · · · · · · · · · · · · · · ·		0.9	
17	X	24.0	8,400		2,1								1.0	
18	X	24.0	8,300		2.2								0.8	
19	Х	24.0	9,700		2.1								0.9	
20.		24.0	10,633											
21		24.0	10,633			 	<u> </u>	<u> </u>						
22	X	24.0	10,633		2.0								1.1	
23	X	24.0	8,800		2.0		ļ						1.0	
24	X	24.0	8,300		1.9				ļ <u> </u>	ļ			1.0	
25	X	24.0	8,000		2.0		ļ		ļ				0.9	
26 27	X	24.0	8,400		1.8					<u> </u>			1.0	
28		24.0	11,200				ļ				ļ			
28	<del></del>	24.0	11,200											
30	X	24.0 24.0	11,200 8,400		2.0		ļ	<u> </u>			ļ		0.8	
31	$\frac{\lambda}{X}$	24.0	8,400		1.8		<del> </del>		<u> </u>	ļ		ļ	0.7	
Total		24.0	321,100		1.9	L	l	L	L	L	L	L	0.9	
A. VIII	- 14 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	1370 41	321,100											

25,700

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

DEP Form 62-555 900(3)Alternate



DEP Form 62-555 900(3)Alternate

See Pages 4 for Instru							
. General Information	for the Month/Y	ear of:					
A. Public Water System	(PWS) Informat	ion					
	Welaka Mobile Home					PWS Identification Number:	2541242
PWS Type:	✓ Community	Non-Transient Non-Commu	nity Tr	ransient Non-Comi	munity	Consecutive	
Number of Service Connect	ions at End of Month:	96				Population Served at End of Month:	237
PWS Owner:	Florida Water Service	S	· · · · · · · · · · · · · · · · · · ·				
Contact Person:	Craig Anderson				Conta	ct Person's Title: VP Envir	ronmental Services
Contact Person's Mailing A	ddress: F	P.O. Box 609520	······································		City: Orlando	State: Florida	Zip Code: 32860-9520
Contact Person's Telephone	Number: (	407) 598-4199			Conta	ct Person's Fax Number: (407) 59	8-4217
Contact Person's E-Mail Ad		craiga@florida-water.com					
B. Water Treatment Pla	nt Information						
	Welaka Mobile Home	Park				Plant Telephone Number:	904-329-1122
	Hamilton Road				City: Satsuma	State: Florida	Zip Code: 32189
Type of Water Treatment by		✓ Raw Ground Water	Purchased Fini	shed Water			
Permitted Maximum Day O				108,000			
Plant Category (per subsecti	ол 62-699.310(4), F.A					lass (per subsection 62-699.310(4), F.	
Licensed Operators		Name		License Class	License Number		nift(s) Worked
Lead/Chief Operator:			·	A	7251	Days 1st Shift	
Other Operators:	Donald Holcomb			A	5091	Days 1st Shift	
and the second second							
			·—				
		<del></del>					
	· · · · · · · · · · · · · · · · · · ·						
		<del></del>		l		<u> </u>	
I. Certification by Lead	Chief Operator						
		operator licensed in Florida a	am the lead/chie	f operator of the	water treatment n	lant identified in part I of this	report. Licertify that the
							ed at this plant conform to NSF
						at the following additional ope	
							ed and chemical feed rates; and
(2) if applicable, applicable	priate treatment pi	rocess performance records.	Furthermore, 1 a	agree to provide	tnese additional o	perations records to the PWS	owner so the Pw5 owner can
rciam mem, together w	iui copies of this r	report, at a convenient location	on for at least ten	ı years.			
			Donald Holcor	mb			A-5091
Signature and Date			Printed or Typ	ed Name	<del></del>		License Number

Page 1

PWS I	lentification	n Number:		2541242		Plant Name:	Welaka Mol	ile Home	Park					
III. D	aily Data	for the N	lonth/Year	of:										
			g Virus Inactiv		/al: <b>▼</b> Free C	hlorine [	Chlorine Di	ovida	C Ozone	Comb	imad Chlori	na (Chlorer	nines)	
l.	traviolet R			r (Describe):			Chorne Di	oxide	1 Ozone	1 Come	inea Cinori	ne (Cinorai	nuies)	
<b>-</b>						✓ Free Chlo	i	Combin	ad Chlorina	(Chloramine	e) [	Chlorine I	Niovida	
Туре	I Disinie	i Resid	iuai Maintai		*								Joxide	
					T Calculations, or			our-Log	Virus Inac					
						CT Calc	ulations	1 1 1 1 1 1 1			UV.	Dose -		
							Lowest CT							
]				10.84	Lowest Residual	Disinfectant	Provided							
1	Days Plant					Contact Time	Before or at					<sup>1</sup> Minimum	Lowest Residual	
	Staffed or		Net Quantity	er gilg	Disinfectant	್ಯ.(T) at C	First			in the second of	100 DESCRIPTION OF SEC.		- 高田県の高田等の中の大田 - より	
١	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV. Dose Required,	Concentration at	Emergency or Abnormal Operating
Day of		Hours plant		D 1 24	Before or at First	Point During	During Peak	Temp of	77 - 6377 - 3	Minimum CT	Operating UV Dose,	mW-	Remote Point in	Conditions; Repair or Maintenance Work that Involves Taking Water System Components
the Month	(Place "X")	in Operation	Producted, gal.	Peak Flow Rate, gpd	Customer During Peak Flow, mg/L	Peak Flow, minutes	Flow, mg- min/L	Water OC	if Applicable	Required, mg min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	Distribution System, mg/L	Out of Operation
1	X	24.0	43,420	Rate, gpu	3.0	minues	IIIIVL .	water, C	п Аррисавіс	11111/15	inw-secrem	Sec/ciii	3ystem, mg/L	Out of Operation
2	X	24.0	9,660		3.2				<del> </del>	l			1.0	
3	X	24.0	11,060		3.0								1.0	
4	X	24.0	12,620		2.8								1.1	
5	Х	24.0	14,750		3.0								1.3	
6		24.0	13,517											
7		24.0	13,517				,							
8	X	24.0	13,517		2.8							ļ	1.1	
9	X	24.0	15,440		3.0								1.0	
10 11	X	24.0 24.0	11,850 10,790		2.6					-			1.1	
12	X	24.0	15,320		3.0		<u> </u>	·				<b>-</b>	1.1	
13		24.0	23,043		3.0					<del> </del>			1:1	
14		24.0	23,043									<b>-</b>	<del> </del>	
15	Х	24.0	23,043		2.7								0.9	
16	Х	24.0	28,340		2.8								1.0	
17	X	24.0	30,450		3.0								0.9	
18	X	24.0	44,300		3.2								1.2	
19	X	24.0	43,650		3.0								0.8	
20		24.0	51,743				ļ						ļ	
21	x	24.0 24.0	51,743 51,743		3.2					<u> </u>			1.2	
23	X	24.0	65,020		3.0					<b></b>			1.0	
24	X	24.0	64,810		2.8					<b> </b>	<del> </del>	-	1.0	
25	X	24.0	13,340		3.0								1.2	
26	X	24.0	9,320		3.2					·			1.2	
27		24.0	12,863							l				
28		24.0	12,863											
29	Х	24.0	12,863		2.8								1.0	
30	X	24.0	15,410		3.0								1.2	
31 T-4-1	X	24.0	14,360		3.0				l	<u> </u>			1.0	
Total			777,410											

65,020

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



See Pages 4 for Instruc								
I. General Information fo	or the Month/Y	ear of: April	, 2004				<del>-</del>	
A. Public Water System (1	PWS) Informat	ion						
	arasota Harbor	<del></del>				PWS Identification Number:	2541008	
	✓ Community	Non-Transient Non-C	Community T	ransient Non-Comi	munity [	Consecutive		
Number of Service Connection		47	<u>.                                    </u>			opulation Served at End of Mo	nth: 117	
PWS Owner: FI	lorida Water Service	S			· · · · · · · · · · · · · · · · · · ·			
Contact Person: Ci	Craig Anderson				Contac	et Person's Title: VP	Environmental Services	
Contact Person's Mailing Add	lress: I	P.O. Box 609520			City: Orlando	State: Florida	Zip Code:	32860-9520
Contact Person's Telephone N	lumber: (	407) 598-4199			Contac	et Person's Fax Number: (40	07) 598-4217	
Contact Person's E-Mail Addre	ess: <u>c</u>	craiga@florida-water.	com					
B. Water Treatment Plan	t Information							
Plant Name: Sa	arasota Harbor					Plant Telephone Number:	904-329-112	.2
Plant Address: G	ibbs Avenue				City: Satsuma	State: Florida	Zip Code:	32189
Type of Water Treatment by P	Plant:	✓ Raw Ground Water	Purchased Fir	nished Water				
Permitted Maximum Day Ope	erating Capacity of P	lant, gallons per day:		200,000				
Plant Category (per subsection	1 62-699.310(4), F.A		IV			ass (per subsection 62-699.310	(4), F.A.C.): C	
Licensed Operators		Name		License Class	License Number		/ Shift(s) Worked	
Lead/Chief Operator; Pa	aul Thompson			A	7251	Days 1st Shift		
Other Operators: D	onald Holcomb			A	5091	Days 1st Shift		
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1								
		······································		<u> </u>	<u> </u>			
II Certification by Lead/C	Chief Operator							
			orida, am the lead/chie	ef onerator of the	water treatment n	lant identified in part I of	this report. I certify	that the
						g water treatment chemica		
						fy that the following addi		
nor international stands		ipplicable standards fer	erenced in subsection	: 02-333.320(3),	F.A.C. Taiso certi	ry mai me ronowing addi	amicals used and she	mical feed
plant were prepared each	n day inat a ncen	ised operator started or	visited this plant duri	ing the month the	incated above: (1)	records of amounts of ch	denicals used and the	an the DWS
						lditional operations recor	ds to the PWS owner	so the Pws
owner can retain them, to	ogether with cop	ones of this report, at a c	onvenient location fo	r at least ten yea	rs.			
			ni Tk	·on			A-7251	
Cianatana and Data		<u> </u>	Paul Thomps				License Nur	mber
Signature and Date			Printed or Ty	ped Name			Diceise Nui	HOO

Page 1

DEP Form 62-555..900(3)Alternate

PWS lo	lentification	n Number:		2541008		Plant Name:	Sarasota Ha	bor						
III. D	Daily Data for the Month/Year of: April, 2004													
			g Virus Inactiv		/al: <b>▼</b> Free C	hlorine [	Chlorine Di	oxide	C Ozone	Comb	ined Chlorin	ne (Chloran	nines)	
T UI	traviolet R	adiation	┌ Othe	r (Describe):	•	•	·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, come	nica cinora	(011101111	,	
					ibution System:	▼ Free Chlo	rine [	Combin	ed Chlorine	(Chloramine	s) [	Chlorine I	Dioxide	
1.700		Tunt resid			T Calculations, or									
			₽ .		T Calculations, of	CT Calc		oui-Log	VII US III aC	uvauon, n z		Dose _		
							mations				U V 1	J05C		
						Disinfectant	Lowest CT					1.11		
l	D D.			1			Provided					Minimum		
	Days Plant Staffed or		Net Quantity		Lowest Residual Disinfectant	Contact Time (T) at C	Before or at First					Minimum	Lowest Residual Disinfectant	: - '라고' : - ' 김 김 경기를 잃을 수 있다.
1	Visited by		of Finished		Concentration (C)	Measurement	Customer		A		Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of		Hours plant			Before or at First	Point During	During Peak			Minimum CT	Operating	Required,	and the second s	Conditions; Repair or Maintenance Work that
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water,	Required, mg		mW-	Distribution #	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, <sup>o</sup> C	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
1	X	24.0	17,700		2.9								1.3	
2	Х	24.0	3,200		2.6						<del></del>		1.2	
4		24.0 24.0	12,467 12,467							ļ	<u> </u>			
5	X	24.0	12,467	<u> </u>	2.7					l			1.0	
6	X	24.0	9,700	<u> </u>	2.5							<u> </u>	1.3	
7	Х	24.0	9,200		2.6								1.2	
8	X	24.0	8,400		1.7								0.6	
9 :	X	24.0	8,800		1.6							<u></u>	0.5	
10		24.0	11,533									ļ. <u></u>		
11	х	24.0	11,533 11,533	<b></b>	1.2								0.4	
13	X	24.0	9,000		1.2							<del> </del>	0.5	
14	X	24.0	8,400	<u> </u>	1.2							<del>                                     </del>	0.5	
15	Х	24.0	8,100		1.2								0.5	
16	Х	24.0	16,300		1.6								0.7	
17		24.0	9,100											
18	\	24.0	9,100						<del> </del>			ļ		
19	X	24.0	9,100		2.4			<u> </u>		<del> </del>		<u> </u>	0.9	
21	X	24.0 24.0	8,300 17,100		2.3							<del> </del>	1.0	
22	X	24.0	17,100	l	2.1								0.9	
23	Х	24.0	8,500		2.1								1.0	
24		24.0	11,733											
25		24.0	11,733											
26	X	24.0	11,733		2.1								1.1	
27	X	24.0	8,800		1.5		ļ		ļ	<u> </u>	ļ	ļ	0.8	
28	X	24.0	7,700 9,100		1.7			<del></del>	ļ	<b> </b>	}	<del> </del> -	1.0	
30	$\frac{\hat{x}}{x}$	24.0	17,100		2.2				<u> </u>		<u> </u>	<del>                                     </del>	1.0	
			- 17,100		2.2				l	<del></del> -	ļ	<u> </u>	1.0	
Total		18.18.1	327,400	j'						•			•	

10,913

17,700

Avgerage

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

DEP Form 62-555.900(3)Alternate



See Pages 4 for Instr	uctions.							
. General Information	for the Month/Y	'ear of:						
A. Public Water System	(PWS) Informat	tion				-	-	
PWS Name:	Welaka Mobile Home					PWS Identification Number:	2541242	
PWS Type:	✓ Community	Non-Transient Non-Commu	nity Tr	ansient Non-Comr	munity	Consecutive	<u>_</u>	
Number of Service Connect			,			Population Served at End of Month	: 237	
PWS Owner:	Florida Water Service	······						
Contact Person:	Craig Anderson				Conta	ct Person's Title: VP Er	vironmental Services	
Contact Person's Mailing A	ddress:	P.O. Box 609520	· · · · · · · · · · · · · · · · · · ·		City: Orlando	State: Florida	Zip Code:	32860-9520
Contact Person's Telephone	Number:	(407) 598-4199			Conta	ct Person's Fax Number: (407)	598-4217	
Contact Person's E-Mail Ac	ldress:	craiga@florida-water.com						
3. Water Treatment Pla	ant Information							
Plant Name:	Welaka Mobile Home	e Park				Plant Telephone Number:	904-329-112	22
Plant Address:	Hamilton Road				City: Satsuma	State: Florida	Zip Code:	32189
Type of Water Treatment by	y Plant:	✓ Raw Ground Water	Purchased Fini	shed Water				
Permitted Maximum Day C				108,000				
Plant Category (per subsect	ion 62-699.310(4), F.A					lass (per subsection 62-699.310(4)		
Licensed Operators		Name	186	License Class	License Number	<del>                                     </del>	Shift(s) Worked	
Lead/Chief Operator:	Paul Thompson			A	7251	Days 1st Shift		
Other Operators:	Donald Holcomb			A	5091	Days 1st Shift		
		·		<b></b>				<u> </u>
								<del></del>
						<u> </u>	<del></del>	
I Certification by Lead	/Chief Operator	•						
		operator licensed in Florida, a	m the lead/chie	f operator of the	water treatment r	lant identified in part I of th	is report. I certify	that the
		ne and accurate to the best of n						
International Standard	60 or other appli	cable standards referenced in s	wheation 62.55	55 220(2) E A (	Talso sertify th	at the following additional o	nerations records	for this plant
		operator staffed or visited this						
		process performance records.			tnese additional (	operations records to the Pw	5 owner so the F v	VS OWIEI Call
retain them, together v	vith copies of this	report, at a convenient location	on for at least ter	ı years.				
			Paul Thompso	on			A-7251	
Signature and Date			Printed or Typ				License Nu	mber

PWS Id	lentification	n Number:		2541242		Plant Name:	Welaka Mol	oile Home	Park					
III. D	ans of Achieving Four-Log Virus Inactivation/Removal:													
					at Erec C	hlorina C	OLL : 13:	· · ·		<u> </u>		(0) 1		
i	traviolet R			r (Describe):		morate [	Chlorine Di	oxide	Uzone	1 Comb	ined Chlori	ne (Chloran	nines)	
<b>-</b>								•						
Type o	t Disinted	ctant Resid	lual Maintai		ibution System:	▼ Free Chlo				(Chloramine		Chlorine I	Dioxide	
				C	T Calculations, or	UV Dose, to	Demostate l	Four-Log	Virus Inac	tivation, if A				The first term of the control of the
1.			j.,			CT Calc	ulations				UV	Dose		
						- 2000年第二条基	Lowest CT							
						Disinfectant	Provided							
	Days Plant		" . *		Lowest Residual	Contact Time	Before or at					2 4	Lowest Residual	
	Staffed or		Net Quantity		Disinfectant	(T) at C	First		]			Minimum	Disinfectant	
100	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of	Operator	Hours plant	Water	]	Before or at First	Point During	During Peak			Minimum CT		Required,	Remote Point in	Conditions; Repair or Maintenance Work that
the	(Place	ın	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water,	Required, mg		mW-	Distribution :	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, C	if Applicable	min/L	mW-sec/cm2	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
1 1	X	24.0	9,330	<b> </b>	3.0			ļ	ļ			<u> </u>	1.1	
3	Х	24.0 24.0	7,160	-	2.8								1.2	
4		24.0	10,600			·		<del> </del>	<b>_</b>					
5	Х	24.0	10,600		3.2			-	<del> </del>			<del> </del>	1.2	
6	X	24.0	13,130	<del> </del>	3.4			<del> </del>	<del> </del>			-	1.4	<u> </u>
7	Х	24.0	8,650		3.0			<del> </del>				<del> </del>	1.0	
8	Х	24.0	10,350		3.2	<del></del>							1.1	
9	Х	24.0	9,480		3.5		1						1.3	
10		24.0	11,233									I		
11		24.0	11,233											
12	X	24.0	11,233		1.0				<u> </u>			ļ	0.4	
13	X	24.0	10,080		2.8				<u> </u>				1.1	
14	X	24.0 24.0	9,190		2.6 3.0			1					0.8	
16	X	24.0	10,760		3.0		<del></del>			-			1.1	
17		24.0	11,830		3.0	<del></del>	<u> </u>	<del> </del>	<del> </del>				<del>                                     </del>	
18		24.0	11,830									<del> </del>		
19	Х	24.0	11,830		3.0		<b></b>	† — –					1.2	
20	Х	24.0	11,520		3.0						l		1.0	
21	X	24.0	9,440		2.8								1.1	
22	X	24.0	14,010		3.0				ļ <u>-</u>				1.2	
23	X	24.0	12,580		2.9		<u> </u>	ļ	ļ			ļ	1.0	
24		24.0	10,693					ļ	<b> </b>				ļ <u>-</u>	
25 26	<del></del>	24.0	10,693				<b></b>	ļ	<del> </del>	ļ	ļ <u></u>			
26	X	24.0 24.0	10,693 12,080		2.4		<u> </u>	<del> </del>	<u> </u>	<del> </del>	ļ	ļ	0.8	
28	$\frac{\lambda}{X}$	24.0	9,830		3.0				<del> </del>		<del></del>	<del> </del>	1.0	
29	X	24.0	11,890		3.0			<del>  -</del>	<del>                                     </del>			<u> </u>	1.0	
30	X	24.0	16,400		3.0	,		-					1.2	
1					3.0		<u> </u>	<del>                                     </del>	†				<del>                                     </del>	
Total		. On	330,180							· · · · · · · · · · · · · · · · · · ·				
Avgerag			11,006											
Maximu	m		16.400	1										

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



See	Pages	4	for	Inct	ructions	2
.70	FAVES	4	1111	11121		١.

PWS Type:	See Pages 4 for Instr										
WS Name:   Saraota Harbor   Part Internation   Pa	General Information	for the Month/	Year of: May, 2004	4							
WS Name:   Saraota Harbor   Part Internation   Pa	Public Water System	a (PWS) Informa	ation								
West Type:	PWS Name:			****			<del></del> :	PWS Identification Numb	er:	2541008	
Sumber   Service Connections at End of Month    47	PWS Type:		Non-Transient Non-Comm	nunity	ransient Non-Com	munity	$\neg \top$	<del></del>			
Contact Person's Mailing Address   P.O. Box 609520   City Orland   State   Florida   Zig Code   2860-9520   Contact Person's Telephone Number   (407) 598-4199   Contact Person's Facily Mounted   Part Internation   Part I	Number of Service Connec	<del></del>					Total	Population Served at End o	f Month:	117	
Contact Person's Mailing Address   P.O. Box 609520   Contact Person's Telephone Number   (407) 598-4127	PWS Owner:	Florida Water Service	ces					<del> </del>			
Contact Person's Telephone Number   (407) 598-4199   Contact Person's Fax Number: (407) 598-4217	Contact Person:	Craig Anderson					Conta	ct Person's Title:	VP Environme	ental Services	
Contact Please   Service   Contact Please   Contact Ple	Contact Person's Mailing A	ddress:	P.O. Box 609520			City: Orla	ndo	State: Florida		Zip Code:	32860-9520
Plant Treatment Plant Information   Sarasota Harbor   Plant States   Gibbs Avenue   Plant Address   Gibbs Avenue   Plant Address   Gibbs Avenue   Plant glains per day   Purchased Finished Water   Purchased Finished Water   Purchased Finished Water   Purchased Finished Water   Plant Class (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   Days (s) / Shift(s) Worked   Cadd/Chief Operators   Pond Holcomb   A   Poperators   Pond Holcomb   Pond Ho	Contact Person's Telephone	e Number:	(407) 598-4199				Conta	ct Person's Fax Number:	(407) 598-421	7	
Plant Name   Sarasota Harbor   City   Satsuma   State   Florida   Display   Satsuma   Display   Display   Satsuma   Display	Contact Person's E-Mail Ac	ddress:	craiga@florida-water.com	<u>)</u>							
Plant Address   Gibbs Avenue	Water Treatment Pl	ant Information									
Sye of Water Treatment by Plant:    V	Plant Name:	Sarasota Harbor						Plant Telephone Number:		904-329-112	22
Permitted Maximum Day Operating Capacity of Plant, gallons per day:  Plant Clargory (per subsection 62-699 310(4), F.A.C.):  IV  Plant Class (per subsection 62-699 310(4), F.A.C.):  Days Ist Shift  Days Ist Shift  Days Ist Shift  Days Ist Shift  Description by Lead/Chief Operators:  Certification by Lead/Chief Operator  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, at conform to SISF International Standards of 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:  Paul Thompson  A-7251  A-7251	Plant Address:	Gibbs Avenue				City: Sats	uma	State: Florida		Zip Code:	32189
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   Paul Thompson	<del></del>	<del></del>		Purchased Fin	ished Water						
Licensed Operators: Paul Thompson A 7251 Days 1st Shift  Departors: Donald Holcomb A 5091 Days 1st Shift  Departors: Donald Holcomb A 5091 Days 1st Shift  Departors: Donald Holcomb A 5091 Days 1st Shift  Departors: Donald Holcomb A 5091 Days 1st Shift  Departors: Donald Holcomb A 5091 Days 1st Shift  Departors: Donald Holcomb A 5091 Days 1st Shift  Departors: Donald Holcomb A 5091 Days 1st Shift  Departors: Departor A 5091 Days 1st Shift  Departors: Departor A 5091 Days 1st Shift  Departor A 5091 Days 1st					200,000						_
Dither Operators:  Donald Holcomb  A 7251  Days 1st Shift  Days 1st Days 1st Shift  Days 1st Shift  Days 1st 1st Days 1st Leges  Days 1st Lege											
Donald Holcomb  A 5091  Days 1st Shift  Certification by Lead/Chief Operator  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 Standards 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 twere 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 ates; 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.  Paul Thompson  A-7251			Name	<u> </u>	License Class	License 1	Number		y(s) / Shift(s)	Worked	
Certification by Lead/Chief Operator  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 MSF 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 attes; 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.  Paul Thompson  A-7251		Paul Thompson		····	Α	725	51	Days 1st Shift			
Certification by Lead/Chief Operator  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 destruct to the informational 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 alant 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 ates; 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 were can retain them, together with copies of this report, at a convenient location for at least ten years.  Paul Thompson  A-7251	Other Operators:	Donald Holcomb			Α	509	91	Days 1st Shift			
Certification by Lead/Chief Operator  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 ates; 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.  Paul Thompson  A-7251											
Certification by Lead/Chief Operator  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 ates; 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.  Paul Thompson  A-7251											
Certification by Lead/Chief Operator  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 ates; 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.  Paul Thompson  A-7251					<u> </u>						
Certification by Lead/Chief Operator  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 ates; 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.  Paul Thompson  A-7251	and the second of the second o										
Certification by Lead/Chief Operator , 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 ates; 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.  Paul Thompson  A-7251											
, 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 ates; 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.  Paul Thompson  A-7251											
, 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 ates; 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.  Paul Thompson  A-7251	선생님 이 사람	1									
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NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. 1 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 ates; 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.  Paul Thompson  A-7251											
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Paul Thompson A-7251	ates; and (2) if applic	able, appropriate	treatment process performan	ice records. Furth	hermore, I agree	to provide	these a	dditional operations re	ecords to the	PWS owne	r so the PW
				Paul Thomps	son					A-7251	
	Signature and Date						-			License Nu	mber

PWS Ic	lentification	n Number:		2541008		Plant Name:	Sarasota Ha	rbor						
Ш. О	Daily Data for the Month/Year of:  May, 2004  Is of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine   Chlorine Dioxide   Ozone   Combined Chlorine (Chloramines)													
					(al: T From C									
1	raviolet R	-	-	r (Describe):	•	morne 1	Chlorine Di	oxide	] Ozone	1 Comb	nned Chloru	ne (Chiorar	nines)	
<b>⊢</b>								•			<del>,</del>			
Type o	t Disinte	ctant Resid	dual Maintai		ibution System:	▼ Free Chlo				(Chloramine		Chlorine I	Dioxide	
	to at		ł	C	T Calculations, or			Four-Log	Virus Inac	tivation, if			<b>以</b> 是 2000年	
	1 1 11				· 11 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CT Calc	ulations		<i>8</i> 2 - 1		UV)	Dose	[2] 持续	
			•					14.5			Algeria (A		*	
1 1			1			Disinfectant	Lowest CT Provided							
	Days Plant				Lowest Residual	Contact Time	Before or at						Lowest Residual	
	Staffed or		Net Quantity		Disinfectant	(T) at C	First	1				Minimum	Disinfectant *	
1	Visited by	i.	of Finished		Concentration (C)	Measurement	Customer				Lowest	- UV Dose	Concentration at	Emergency or Abnormal Operating
Day of		Hours plant	Water		Before or at First	Point During	During Peak			Minimum CT	Operating	Required,		Conditions, Repair or Maintenance Work that
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water,	Required, mg		mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, C	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
2		24.0	8,633			ļ <u>.</u>		<b></b>	<del> </del>	ļ		<del></del>		
3	X	24.0	8,633 8,633	<u> </u>	2.2	<del></del>			ļ	<u> </u>			0.9	
4	X	24.0	8,000		2.0			<b> </b>	<b>-</b>	ļ		<del></del>	0.9	
5	X	24.0	8,400		2.3	ļ		<del> </del>	<del> </del>	}	<del> </del>		1.0	
6	X	24.0	8,600		2.0			<del></del>		-		<del> </del>	0.8	
7	Х	24.0	8,600		2.0					1			1.0	
8		24.0	11,833											
9		24.0	11,833											
10	X	24.0	11,833		2.1					<u> </u>			1.0	
11	X	24.0	8,200		2.0			<u> </u>		<u> </u>		L	0.7	
12	X	24.0	9,200		2.3			<del> </del>	<del> </del>	<del> </del>		<del> </del>	0.9	
14	X	24.0	8,500 8,600	<u> </u>	2.1	<del></del>		<b></b>		<del> </del>		<u> </u>	0.8	
15		24.0	11,500		4.1			<del> </del>	<del> </del>	<del> </del>			<del>                                     </del>	
16		24.0	11,500			ļ ———		<del>                                     </del>	<del> </del>	<del> </del>			<del> </del>	
17	X	24.0	11,500		2.3					<b>†</b>			1.0	
18	Х	24.0	8,500		2.3								1.1	
19	X	24.0	9,000		2.8								1.0	
20	X	24.0	8,400		2.0			<u> </u>	<u> </u>	ļ			0.8	
21	X	24.0	8,900		2.1			ļ	<b></b>	<u> </u>			1.0	
22	<u> </u>	24.0	11,833				<u> </u>	<del> </del>	<del> </del>	<del> </del>	ļ	<del> </del>		
23	V	24.0	11,833		24		<u> </u>	<del> </del>	<del> </del>	<b>├</b>			1.1	
25	X	24.0 24.0	11,833 9,100		2.4			<del> </del>	<del> </del>	<del> </del>	<del></del>		1.0	
26	X	24.0	8,200		1.9	<del> </del>	<b></b>	<del> </del>	<b></b>	<del> </del>	<del> </del> -	<del>                                     </del>	0.9	
27	X	24.0	8,800		1.8			<b>†</b>	†	<u> </u>		<del>                                     </del>	0.7	
28	X	24.0	8,200		2.0							<del>                                     </del>	1.0	
29		24.0	14,933											
30		24.0	14,933											
31	X	24.0	14,933		2.0			L		<u> </u>			1.0	
Total			313,400											
Avgerage	P	4	10 110	I										

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



See Pages 4 for Instr				_				
I. General Information	for the Month/	Year of: May, 2004						
A. Public Water System	(PWS) Informa	tion						
PWS Name:	Welaka Mobile Hom					PWS Identification Number:	2541242	
PWS Type:	✓ Community	Non-Transient Non-Commun	ity T	ransient Non-Com	munity	Consecutive	2011213	
Number of Service Connec	tions at End of Month				<del></del>	otal Population Served at End of N	Month: 237	
PWS Owner:	Florida Water Service	es						
Contact Person:	Craig Anderson				Ico	ontact Person's Title:	VP Environmental Services	
Contact Person's Mailing A	ddress:	P.O. Box 609520			City: Orlando	State: Florida	Zip Code:	32860-9520
Contact Person's Telephone	Number:	(407) 598-4199					407) 598-4217	
Contact Person's E-Mail Ac	ldress:	craiga@florida-water.com			•		· · · · · · · · · · · · · · · · ·	
B. Water Treatment Pla	ant Information							
Plant Name:	Welaka Mobile Hom	ne Park				Plant Telephone Number:	904-329-112	2
Plant Address:	Hamilton Road				City: Satsuma	State: Florida	Zip Code:	32189
Type of Water Treatment by	<u></u>	✓ Raw Ground Water	_ Purchased Fini	ished Water				
Permitted Maximum Day O				108,000				
Plant Category (per subsect	ion 62-699.310(4), F.	A.C.): V				nt Class (per subsection 62-699.3	10(4), F.A.C.): D	
Licensed Operators		Name		License Class	License Numl	ber Dayı	(s) / Shift(s) Worked	
Lead/Chief Operator:				A	7251	Days 1st Shift		
Other Operators:	Donald Holcomb			A	5091	Days 1st Shift		
				******				
				<u> </u>				
I Certification by Lead	/Chief Operator	•						
		operator licensed in Florida, ar	n the lead/chie	f operator of the	water treatmen	nt plant identified in part I	of this report   Legrify	that the
		ue and accurate to the best of m						
		cable standards referenced in su						
		operator staffed or visited this p						
		process performance records. F			tnese additiona	al operations records to the	Pws owner so the Pw	S owner can
retain them, together w	iui copies of this	report, at a convenient location	i ior at least ter	i years.				
			Paul Thompso	on			A-7251	
Signature and Date		<del></del>	Printed or Typ	ed Name			License Nun	ıber

PWS Ic	dentification Number: 2541242 Plant Name: Welaka Mobile Home Park  Daily Data for the Month/Year of: May, 2004													
III. D	aily Data	for the N	onth/Year	of:		May, 2004								
			Virus Inactiv				Chlorine Di		Ozone		ined Chlorir	. (Chlore-	sinos)	
1	raviolet R		•	r (Describe):		morate	CHIOTING DI	oxide	Ozone	1 Come	шеа Спюп	ie (Cinoran	inics)	
F.						<b>F</b> B C::	· -	Combi	- J Chlori	(Chloramine	<u></u>	Chlorine I		
Type c	t Disinfec	tant Kesic	lual Maintai		ibution System:	▼ Free Chlo							FIORIGE	
				C	T Calculations, or									
					statisticki (1)	CT Calc	ulations	144			UVI	Oose		
ł							Lowest CT							
l						Disinfectant	Provided					No.		
1	Days Plant				Lowest Residual	Contact Time	Before or at				7		Lowest Residual	
	Staffed or		Net Quantity		Disinfectant	(T) at C	First	V.				Minimum	Disinfectant	
	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of	Operator	Hours plant	Water		Before or at First	Point During	During Peak			Minimum CT		Required,		Conditions, Repair or Maintenance Work that
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water,	Required, mg		mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, C	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
1		24.0	10,183											
2		24.0	10,183				L		<u> </u>		<del> </del>		1.0	
3	X	24.0	10,183		2.6				<u> </u>				0.8	
5	X	24.0 24.0	8,390 10,330		3.0		<del> </del>		<del> </del>	<del> </del>			1.0	
6	X	24.0	7,950	<del></del>	2.5		-	i	<del> </del>		<u> </u>		0.8	
7	X	24.0	9,960		2.8					<del></del>	<del> </del>		0.9	
8		24.0	12,680		2.0						<del> </del> -			
1.9	L	24.0	12,680				<del> </del> -	<del> </del>	<u> </u>					
10	X	24.0	12,680		3.0		<del></del>				· · · · · · · · · · · · · · · · · · ·		1.0	
11	Х	24.0	17,750		2.5								0.7	
12	Х	24.0	14,440	i	3.0								1.1	
13	Х	24.0	10,060		2.9								1.0	
14	X	24.0	7,630		3.1							<u> </u>	0.9	
15		24.0	12,187				<u> </u>			<b>!</b>		<u> </u>	ļ	
16		24.0	12,187	<b></b>			<b>_</b>	ļ	ļ				10	
17	X	24.0	12,187		2.8			<del> </del>	ļ	<del> </del>	<u> </u>		0.7	
18	X	24.0 24.0	8,670 7,850	<del> </del>	2.6		<del> </del>	<del> </del>	<del>                                     </del>	<del> </del>			0.7	
20	X	24.0	11,200		2.4						<del> </del>		0.8	
21	$\frac{\lambda}{X}$	24.0	8,810		3.0		<del> </del>	<del></del>	<del> </del>	<u> </u>	-		1.0	
22		24.0	12,747		3.0		<del> </del>		<del>                                     </del>	ļ	<del>                                     </del>		<del>                                     </del>	
23		24.0	12,747											
24	Х	24.0	12,747		2.8		<del> </del>			1			1.0	
25	Х	24.0	11,390		2.5								0.7	
26	X	24.0	12,230		2.7								1.0	
27	X	24.0	10,690		2.5								0.8	
28	Х	24.0	13,370		2.8				<b> </b>	<u> </u>		ļ	0.9	
29		24.0	_11,390				ļ	L	ļ			ļ	<u> </u>	
30		24.0	11,390				ļ		<del> </del>	<u> </u>	ļ	ļ		
31	X	24.0	11,390		0.8	<u> </u>	L	<u> L.i.,</u>	<u> </u>	<u> </u>	<u> </u>	L	0.4	
Total	- L	프로틴얼	348,280	i										

11,235

17,750

Avgerage \*

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

**Docket No. 060368-WS** 

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

Florida

Report Missing:

**Monthly Operating Report** 

Welaka/Saratoga Harbour

June 2004

Aqua Utilities Florida, Inc.



See Pages 4 for Instructions.	
General Information for the	Mon

See Pages 4 for Instr							
. General Information	for the Month/	Year of: July, 2004					
A. Public Water System	(PWS) Inform	ation					
PWS Name:	Saratoga Harbor				PWS Identification Numb	ber: 2541008	
PWS Type:	✓ Community	Non-Transient Non-Community	Transient Non-Comr	munity	Consecutive		
Number of Service Connec	<del></del>	<del></del>			Total Population Served at End of	of Month: 117	
PWS Owner:	Aqua Utilities Flori						
Contact Person:	Mike Fitzgerald				Contact Person's Title:	Area Manager	
Contact Person's Mailing A		1343 NE 17th Road		City: Ocala	State: Florida	Zip Code:	34470
Contact Person's Telephone	Number:	(352) 732-6027	<u> </u>		Contact Person's Fax Number:	(352) 732-3213	
Contact Person's E-Mail A		mvfitzgerald@aquaamerica.co	m				
3. Water Treatment Pl	ant Information						
Plant Name:	Sarasota Harbor				Plant Telephone Number	904-329-1	122
Plant Address:	Gibbs Avenue			City: Satsum	a State: Florida	Zip Code:	32189
Type of Water Treatment b	y Plant:	✓ Raw Ground Water	Purchased Finished Water				
Permitted Maximum Day (	Operating Capacity of	f Plant, gallons per day:	200,000				
Plant Category (per subsec	tion 62-699.310(4), F	F.A.C.): IV		1	Plant Class (per subsection 62-69		
Licensed Operators		Name	License Class	License Nu	mber Da	ay(s) / Shift(s) Worked	
Lead/Chief Operator:	Mark March		С	8287			
Other Operators:	Paul Thompson		A	7251	Days 1st Shift		
			•				
I Certification by Lea							
I, the undersigned wat	ter treatment plan	nt operator licensed in Florida, am	the lead/chief operator of the	e water treatn	nent plant identified in part	t I of this report. I certif	y that the
information provided	in this report is to	rue and accurate to the best of my k	enowledge and belief. I cert	ify that all dr	inking water treatment che	micals used at this plant	conform to
NSF International Sta	ndard 60 or other	r applicable standards referenced in	subsection 62-555.320(3),	F.A.C. I also	certify that the following	additional operations re	cords for this
plant were prepared e	ach day that a lic	ensed operator staffed or visited th	is plant during the month inc	dicated above	e: (1) records of amounts of	of chemicals used and ch	nemical feed
rates: and (2) if applic	able appropriate	e treatment process performance re	cords Furthermore Lagree	to provide th	ese additional operations r	records to the PWS own	er so the PWS
		opies of this report, at a convenient					
owner can retain them	i, together with the	opies of this report, at a convenient	description at least ten year				
			Mark March			C-8287	
Circuit and Date						License N	umber
Signature and Date			Printed or Typed Name			LICCISE N	uoci

Page 1

PWS Id	S Identification Number: 2541008 Plant Name: Sarasota Harbor													
III. D	III. Daily Data for the Month/Year of: July, 2004													
	_		y Virus Inactiv				Chlorine Di		Ε 0	☐ Comb		(Chl	-:	
1	raviolet Ra			r (Describe):		morme 1	Chiorine Di	oxide	Ozone	1 Come	inea Chiorii	ie (Cinorai	nines)	ļ
<b>-</b>						<b>5</b> 5 60	·	Combin	ad Chlarina	(Chloramine	<u></u>	Chlorine I	Navido	
Type o	I Disinfec	tani Kesid	luai Maintai			▼ Free Chlo							Joxide	THE CONTROL OF THE CO
				C	T Calculations, or									
-			i de la dell				ulations	40 - 1910°			UVI	Oose		
				A CHARLE			Lowest CT		February 1	\$-5 K		2 5 5 7		
						Disinfectant	Provided							
	Days Plant				Lowest Residual	Contact Time	Before or at						Lowest Residual	
] ]	Staffed or		Net Quantity		Disinfectant	(T) at C	First					Minimum	Disinfectant	
1	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	
Day of	Operator		Water	r dia dia manda. Ny farantana	Before or at First	Point During	During Peak			Minimum CT	Operating	Required, mW-	Remote Point in	Conditions, Repair or Maintenance Work that
the	(Place	Saratoga	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	1 cmp of	if Applicable	Required, mg			Distribution	Involves Taking Water System Components Out of Operation
Month 1	X	Harbor 24.0	gal. 8,500	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	water, C	и Аррисаоте	Hunc	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L >	A 140 PAL DE POULOI OPERAGON 1842 PM
2	X	24.0	8,900		2.7		<del> </del>						1.0	
3	3 24.0 11,800													
4														
5	X	24.0	11,800		3.0								1.0	
6	X	24,0	9,400		2.6								0.8	
7	X	24.0	8,200		2.2								1.0	
8	X	24.0	9,600		2.6								1.1	
9	X	24.0	9,300		2.4			<b>└</b>				· · · · · · · · · · · · · · · · · · ·	1.2	
10		24.0	11,233	ļ				ļ				ļ	-	
11	Х	24.0 24.0	11,233 11,233		2.2			<del> </del>		<b> </b>		<u> </u>	1.2	
13	X	24.0	9,100		2.2							<u> </u>	1.1	
14	X	24.0	9,000		1.9			ļ		<del> </del>	<del>                                     </del>		1.1	
15	X	24.0	8,400		1.8					<del>                                     </del>			1.0	
16	X	24.0	17,200		2.0								1.0	
17		24.0	8,567											
18		24.0	8,567											
19	X	24.0	8,567		2.0			ļ					1.0	
20	X	24.0	8,600		2.0			ļ					1.0	
21	X	24.0	8,800		2.0			ļ	ļ	<b> </b>	<del> </del>		1.1	
23	X	24.0 24.0	8,800 4,700		2.0			<del> </del>	<b></b>	<del> </del>	ļ		1.0	
24	^	24.0	14,900		2.0			<del> </del>		<del> </del>	-		1.0	
25		24.0	14,900			<del></del>	<del> </del>	<del> </del>	<b></b>	<del>                                     </del>	<del>                                     </del>	-		
26	X	24.0	14,900		2.8		<del> </del>	<del> </del>	<del>                                     </del>	<del>                                     </del>	<del>                                     </del>	<b></b>	1.0	
27	Х	24.0	12,100		2.8	<del></del>	<b>†</b>					1	0.9	
28	Х	24.0	8,100		2.3		Ī	<u> </u>					1.0	
29	Х	24.0	8,500		2.4					ļ <u>.</u>			1.2	
30	Х	24.0	10,900		2.2								1.2	
31		24.0	7,800				L		L	L	L	İ	<u> </u>	<u> </u>
Total	ladi, jihan jiya Marina kata ili	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	315,400											

17,200

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

DEP Form 62-555 900(3)Altemate



See Pages 4 for Instr	uctions.							
I. General Information	for the Month/Y	ear of: July	, 2004					
A. Public Water Systen	ı (PWS) Informa	tion						
PWS Name:	Welaka Mobile Hom					PWS Identification Numl	ber: 2541242	2
PWS Type:	✓ Community	Non-Transient Non-	Community T	ransient Non-Com	munity	Consecutive		
Number of Service Connec						al Population Served at End	of Month: 237	
PWS Owner:	Aqua Utilities Florid	a				<del></del>		
Contact Person:	Mike Fitzgerald		<del></del>		Со	ntact Person's Title:	Area Manager	
Contact Person's Mailing A	<u> </u>	1343 NE 17th Road			City: Ocala	State: Florida	Zip Cod	le: 34472
Contact Person's Telephone		(352) 732-6027			<u> </u>	ntact Person's Fax Number:	(352) 732-3213	
Contact Person's E-Mail A		mvfitzgerald@aquaa	merica.com					
3. Water Treatment Pl			= <del>====================================</del>					
Plant Name:	Welaka Mobile Hom	e Park				Plant Telephone Number	904-329	)-1122
Plant Address:	Hamilton Road				City: Satsuma	State: Florida	Zip Cod	le: 32189
Type of Water Treatment b	y Plant:	✓ Raw Ground Water	Purchased Fin	ished Water				
Permitted Maximum Day (	Operating Capacity of	Plant, gallons per day:		108,000				
Plant Category (per subsect	tion 62-699.310(4), F.	A.C.):	V		Plan	t Class (per subsection 62-69		
Licensed Operators		Name		License Class	License Numb	er D	ay(s) / Shift(s) Worke	<u>d</u>
Lead/Chief Operator:	Mark March			С	8287			
Other Operators:	Paul Thompson			Α	7251	Days 1st Shift		
A House of the second								
The state of the s								
I. Certification by Lead								
I, the undersigned wat	ter treatment plant	operator licensed in Fl	orida, am the lead/chie	ef operator of the	water treatmen	t plant identified in part	t I of this report. I cer	tify that the
information provided	in this report is tru	ie and accurate to the b	est of my knowledge a	nd belief. I cert	ify that all drink	ing water treatment che	micals used at this pla	int conform to NSF
International Standard	l 60 or other appli	cable standards reference	ced in subsection 62-5	55.320(3), F.A.	C. I also certify	that the following addit	tional operations recor	ds for this plant
were prepared each da	ay that a licensed of	operator staffed or visit	ed this plant during the	e month indicate	d above: (1) red	cords of amounts of che	micals used and chem	ical feed rates; and
						I operations records to		
		report, at a convenient						
							C-8287	,
			Mark March			<del>_</del>		·
Signature and Date			Printed or Ty	ped Name			License	Number

PWS Id	WS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park													
III. D	aily Data	for the N	lonth/Year	of:		July, 2004								
			g Virus Inactiv		val: ▼ Free C		Chlorine Die		□ Ozono	┌ Comb	in al Chlasia	a (Chlanan	-ia)	
	raviolet R			r (Describe):		morate 1	Chiornie Di	oxide	Ozone	1 Come	omea Chiorii	ie (Chioran	nines)	
-					ibution System:	▼ Free Chlo	·	Combin	ad Chlorina	(Chloramine	م ر	Chlorine I	Niida	
Type o	Disinie	Ctant Resid	iuai Maintai							·			Dioxide	10 m of 10 m o
				C	T Calculations, or									
					4	CT Calc	ulations	Control of the Control			UVI	Jose		
	,						Lowest CT		Reservit					
		1				Disinfectant	Provided				4			
	Days Plant			N - V	Lowest Residual	Contact Time	Before or at					en an angalan	Lowest Residual	
	Staffed or		Net Quantity		Disinfectant	(T) at C	First					Minimum	Disinfectant	
	Visited by		of Finished		Concentration (C)	Measurement	Customer	过去在泵			Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of the	(Place	Hours plant in	1	n 1 m	Before or at First	Point During	During Peak	Town of		Minimum CT	Operating UV Dose,	Required, mW-	Remote Point in	Conditions, Repair or Maintenance Work that
Month	"X")	Operation	Producted, gal.	Peak Flow Rate, gpd.	Customer During Peak Flow, mg/L	Peak Flow, minutes	Flow, mg- min/L	Water Of	if Applicable	Required, mg min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	Distribution System, mg/L	Involves Taking Water System Components Out of Operation
1	X	24.0	14,710	Raic, gpu.	2.4	minucs	min	Water, C	путрисани	minut	HEW-SOCION	Secretii	0.8	Out of operation
2	X	24.0	13,440		2.8								1.0	
3		24.0	13,037											
4		24.0	13,037											
5	X	24.0	13,037		2.8								1.1	
6	X	24.0	12,210		2.4								0.9	
7	X	24.0	11,290	ļ	3.0								1.0	
8	X	24.0	13,870 10,720		3.0				<del></del>				1.5	
10	^_	24.0	13,543		3,3								1.3	
11		24.0	13,543											
12	Х	24.0	13,543		2.6								1.2	
13	Х	24.0	13,930		2.4								0.8	
14	Х	24.0	11,890		2.8								1.0	
15	X	24.0	10,740		2.5								1.1	
16	X	24.0	14,450		2.7								1.1	
17		24.0	11,793								<u> </u>			
19	x	24.0 24.0	11,793 11,793		2.5				<u> </u>	<del></del> -	ļ	ļ	1.1	
20	X	24.0	10,420		2.5					<del> </del> -	<del>                                     </del>		1.1	
21	- X	24.0	9,910		2.5				<u> </u>	<del> </del>			1.0	
22	X	24.0	8,440		2.7	********							1.1	
23	Х	24.0	9,330		2.8								1.2	
24		24.0	12,133											
25		24.0	12,133											
26	X	24.0	12,133		3.0								1.3	
27	X	24.0	9,840		2.6			<u> </u>			ļ	<b> </b>	1.1	
28 29	X	24.0 24.0	9,820 11,620		1.5								0.9	
30	X	24.0	8,230		2.0				<del>                                     </del>	<del> </del>	<del>                                     </del>	<del> </del>	1.4	
31		24.0	7,240						<del> </del>		<del>                                     </del>	<del></del>	1.7	
Total	B arada	24.0	363,620		·				l	I	·	L	1	
Avgerage			11.730											

14,710

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



FLORIDA									
See Pages 4 for Instr	cuetions	•							
. General Information		Year of: August, 2004							
		-							<del></del>
A. Public Water System		ation							
PWS Name:	Saratoga Harbor			· <del></del> -		PWS Identification Nur	nber:	2541008	
PWS Type:	✓ Community	Non-Transient Non-Communit	tyTı	ransient Non-Com	nunity	Consecutive			
Number of Service Connec	tions at End of Mont	th: 47	<del></del>			Total Population Served at End	I of Month:	117	
PWS Owner:	Aqua Utilities Flori	da							
Contact Person:	Mike Fitzgerald					Contact Person's Title:	Area Manager		
Contact Person's Mailing A		1343 NE 17th Road	<u> </u>		City: Ocala	State: Florida		Zip Code:	34470
Contact Person's Telephone		(352) 732-6027				Contact Person's Fax Number:	(352) 732-3213		
Contact Person's E-Mail Ac		mvfitzgerald@aquaamerica.	<u>com</u>						
B. Water Treatment Pla	<del></del>								
Plant Name:	Sarasota Harbor					Plant Telephone Number		904-329-1122	
Plant Address:	Gibbs Avenue				City: Satsun	na State: Florida		Zip Code:	32189
Type of Water Treatment by		Raw Ground Water	Purchased Fini	ished Water					
Permitted Maximum Day C				200,000					
Plant Category (per subsect	tion 62-699.310(4), F					Plant Class (per subsection 62-6		С	7 7 8 10 10 10 10 10 10 10 10 10 10 10 10 10
Licensed Operators		Name		License Class	License Nu	imber L	Day(s) / Shift(s) \	Worked	
Lead/Chief Operator:	Mark March			С	8287				
Other Operators:	Paul Thompson			Α	7251	Days 1st Shift			
				ļ					
	<u></u>								
A Section of the section of									
	<u></u>			<u>i                                     </u>					
I Certification by Lead	d/Chief Operate	or .							
		nt operator licensed in Florida, an	a the lead/ahio	f anomaton of the		ment plant identified in pa	rt Lof this report	Logrtify	that the
		rue and accurate to the best of my							
		r applicable standards referenced							
		ensed operator staffed or visited							
rates; and (2) if applic	able, appropriate	treatment process performance i	records. Furth	nermore, I agree	to provide tl	hese additional operations	records to the P	WS owner	so the PWS
owner can retain them	, together with co	opies of this report, at a convenie	ent location for	r at least ten year	rs.				
			Mark March					C-8287	
Signature and Date			Printed or Typ	ped Name			_	License Num	ıber

Page 1

Printed or Typed Name

DEP Form 62-555. 900(3)Alternate

PWS	VS Identification Number: 2541008 Plant Name: Sarasota Harbor													
Ш	aily Data	for the N	lonth/Year	of:		August, 2004						····		
-			y Virus Inactiv				Chlorine Di	ssáda	□ Ozono	☐ Comb	i d Chlorie	. Chlaren	-in ag)	
	traviolet R			r (Describe):	-	morne 1	Chlorine Di	oxide	Ozone	1 Come	nnea Chiorii	ie (Chioran	illies)	
<b>-</b>					ibution System;	<b>▼</b> Free Chlo		Combin	ed Chlorine	(Chloramine	(a) [	Chlorine I	Viovide	
туре	Ji Disimico	tain Kesic	iuai iviaintan										Tioxide	e 과학, 의미국, 과학 교육 부분 회사 기술, 보호 사람이
				C	T Calculations, or				Virus Inac	tivation, if I				
į			. T				ulations	* * * * * * *			UVI	)ose		
1							Lowest CT							
l	1 1			and the	9994 90402	Disinfectant	Provided							
	Days Plant		1. 1.	44	Lowest Residual	Contact Time	Before or at						Lowest Residual	
	Staffed or		Net Quantity		Disinfectant	(T) at C	First					Minimum	Disinfectant	
1	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day o	Operator		Water		Before or at First	Point During	During Peak			Minimum CT		Required,	Remote Point in	Conditions; Repair or Maintenance Work that
the	(Place	Saratoga	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	lemp of	pH of Water,	Required, mg		mW-	Distribution	Involves Taking Water System Components
Monti	"X")	Harbor	gal.	Rate, gpd	Peak Flow, mg/L	minutes	min/L	Water, 'C	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
2	X	24.0 24.0	20,400 20,400	ļ	1.0								0.0	
3	X	24.0	8,400		1.8								0.8	
4	X	24.0	8,400		2.6		-			<del>                                       </del>			1.1	
5	X	24.0	8,200		2.8					-			1.2	
6	X	24.0	8,400		2.3					1	·		1.2	
7	1	24.0	11,100							1				
8		24.0	11,100					_						
9	X	24.0	11,100		2.2								1.2	
10	X	24.0	8,000		2.4								2.0	
11	X	24.0	8,100		1.8								1.4	
12	X	24.0	8,000		1.2								0.5	
13	X	24.0	7,800		3.0								1.5	
14	ļ	24.0	8,700											
15		24.0	8,700											
16	X	24.0	8,700		2.4				<del></del>	ļ		· · · · · · · · · · · · · · · · · · ·	1.2	
18	X	24.0 24.0	7,800		1.6		ļ		<b></b>	<b></b>		<u></u>	1.0	
19	X	24.0	7,900 7,900		2.0				<u> </u>	<del> </del>			0.9	
20	X	24.0	8,700		1.5					<del> </del>			0.8	
21	1 - ^	24.0	11,067		1.3					<del> </del>			0.0	
22	<del>                                     </del>	24.0	11,067				1			<del>                                     </del>				
23	X	24.0	11,067		. 1.5				<del></del>			<u> </u>	0.8	
24	Х	24.0			1.4						<del>                                     </del>	<del> </del>	0.6	
25	Х	24.0	8,000		1.5					l			0.6	_
26	Х	24.0	8,100		1.9								0.8	
27	Х	24.0	7,900		2.6		Ī						1.2	
28		24.0	10,933											
29		24.0	, , , , ,											
		24.0	10,933									<u> </u>		
30	X	24.0 24.0	10,933 10,933		2.6								1.2	
30 31 Total	XXX	24.0	10,933		2.6 2.2								1.2	

20,400

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



See Pages 4 for Instr							
l. General Information	for the Month/Y	ear of: August, 20	004				
A. Public Water System	(PWS) Informat	ion					
PWS Name:	Welaka Mobile Home					PWS Identification Number:	2541242
PWS Type:	✓ Community	Non-Transient Non-Comm	unity T	ransient Non-Comr	nunity	Consecutive	
Number of Service Connect	tions at End of Month:	96			-	Total Population Served at End of Mor	nth: 237
PWS Owner:	Aqua Utilities Florida	l					
Contact Person:	Mike Fitzgerald				- (	Contact Person's Title: Are	ea Manager
Contact Person's Mailing A	ddress:	1343 NE 17th Road			City: Ocala	State: Florida	Zip Code: 34472
Contact Person's Telephone	: Number: (	(352) 732-6027				Contact Person's Fax Number: (35	2) 732-3213
Contact Person's E-Mail Ac	Idress:	mvfitzgerald@aquaameric	a.com				
3. Water Treatment Pla	ant Information						
Plant Name:	Welaka Mobile Home	Park				Plant Telephone Number:	904-329-1122
Plant Address:	Hamilton Road				City: Satsuma	State: Florida	Zip Code: 32189
Type of Water Treatment by	y Plant:	✓ Raw Ground Water	Purchased Fin	shed Water			
Permitted Maximum Day C	perating Capacity of P	Plant, gallons per day:		108,000			
Plant Category (per subsect	ion 62-699.310(4), F.A	A.C.): V				lant Class (per subsection 62-699.310	
Licensed Operators		Name		License Class	License Nur	nber Day(s)	/ Shift(s) Worked
Lead/Chief Operator:	Mark March			C	8287		
Other Operators:	Paul Thompson			Α	7251	Days 1st Shift	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
				<u> </u>			
Ario a							
				L			<del></del>
I Cautification by I am	I/Chi-c O						
I. Certification by Lead			. 4. 1. 1/1*	C			this report I partify that the
						ent plant identified in part I of	
							Is used at this plant conform to NSF
International Standard	60 or other applic	cable standards referenced in	subsection 62-5	55.320(3), F.A.G	C. I also certi	fy that the following additional	operations records for this plant
were prepared each da	y that a licensed o	perator staffed or visited this	s plant during the	month indicated	d above: (1)	records of amounts of chemica	ls used and chemical feed rates; and
					these additio	nal operations records to the P	WS owner so the PWS owner can
retain them, together v	vith copies of this	report, at a convenient locati	ion for at least te	n years.			
			Mark March				C-8287
Cignotuse and Date	· · · · · · · · · · · · · · · · · · ·	···	Mark March	- d NI		-	License Number
Signature and Date			Printed or Ty	peu Name			License Multiper

											167'01	<del>                                     </del>		.00
											10,237		<u> Alexander de la companya dela companya dela companya de la companya de la companya de la companya dela companya de la compan</u>	Avgerage
	A:a			1		1		Τ	T 2:1	<del></del>	055,715		Section of	Letel
	8.0						<del></del>		61	<u> </u>	0/2,8	24.0	X	15
	£.1			ļ			<u></u>	<u> </u>	9.2		020,01	74.0	X	30
			<del> </del>	<b>!</b>		<b>_</b>	<u> </u>	<b></b>			10,020	74.0	ļ	57
	C.1		<del></del>			<del> </del>		<del></del>	C:7		<del></del>	0.4.0	<del>- ,,</del>	87
	1.3		<u> </u>	<del> </del>		ļ	ļ	ļ	7.3	<del> </del>	067,6	0.42	X	27
	0.1					ļ	-	<b></b>	5.0		001'6	24.0	X	97
	0.1					<b>├</b> ──			2.3		007,8	24.0	X	52
	0.6		·			<del></del>		<u> </u>	8.1		009°L	24.0	X	74
	1.2		<u> </u>						7.4		768,8	24.0	X	73
				<del> </del>			ļ	<u></u>		ļ	768,8	24.0	ļ	77
						<u> </u>					768,8	24.0		17
	<b>p</b> .0		ļ <i>_</i>	ļ	ļ	<u> </u>			8.0		092,7	24.0	X	70
	8.0		ļ			<u> </u>		ļ	7.1		076'6	24.0	X	61
	9.0			<u> </u>		ļ			8.0		089'L	24.0	X	81
	0.1	L	<u> </u>	ļ		<b> </b>	<b></b>	ļ	0.2	ļ	064,8	24.0	X	LI
	0.1								61		£68,6	24.0	X	91
	<u> </u>			<b> </b>			ļ	ļ			£68'6	24.0		SI
			ļ			<u> </u>	<u> </u>				£68,6	24.0		71
	8.0		L			ļ			7.2		064'9	0.42	X	13
	8.0			ļ		<u> </u>	ļ		0.2	ļ	009,11	0.42	X	71
	t'l					ļ			2.3		8,920	24.0	X	II
	0.2					<u> </u>			2.5	ļ	01,1,1	0.42	X	10
	£,I	L			<u> </u>	ļ			2.5		10,323	0.42	X	6
						ļ					10,323	0.42		8
						ļ	ļ				10,323	0.42		L
	1.3					<u> </u>	<b></b>		1.2		090'6	74.0	X	9
	0.1					İ		ļ	2.5		12,260	0.42	X	S
	I'I		L	<u> </u>					₽.2		085,01	0.42	X	Þ
	9.0			ļ		<u> </u>	ļ		0.2		006,21	0.42	X	3
	7.1			ļ	<u> </u>	ļ			9.2		S#0'61	0.42	X	7
				ļ		<u> </u>					240,61	24.0		1
notanaqO lo tuO	System, mg/L	sec/cm <sup>2</sup>	my-sec/cm <sup>2</sup>	J\nim	eldsoulddA li	Water, OC	J\nim	səmuim	Peak Flow, mg/L	Rate, gpd.	leg	Operation	("X"	dinoM
Involves Taking Water System Components:	noitudintaid	-Wm	UV Dose,	Required, mg	rsisW to Hq	Temp of	-gm ,wolfl	Peak Flow,	Suring Tanoizu	Peak Flow	Producted,	ni	(Place	ətt
	Remote Point in		Operating	TO muminiM			During Peak	gnind miof	Before or at First	- 44 c	Water	Hours plant		Day of
Emergency or Abnormal Operating	Concentration at	-	Lowest				Customer	Measurement	(D) noingingonoD	1	of Finished		Visited by	
	Disinfectant	mminiM	100				tzul	O is (T)	Disinfectant		Net Quantity	ì	Staffed or	1.
	Lowest Residual	18	- B. 16 1946 .				Before or at	Contact Time	Lowest Residual	it see		ŀ	Days Plant	
				14			Provided	Disinfectant				1		ļ
		21.00 (1.00)				3	Lowest CT			A Section				<b>!</b> .
		2000	T A O	78-11 20-12			Suonen	C1 Calcu						
		9301									1	ł		Ì
									T Calculations, or				L	<u> </u>
	sbixoi	Chlorine D	(:	Chloramines	) suinoldD b	Combine	T agin	roldə əsrə 🔽	bution System:	inteid in Distri	ni <b>stn</b> isM leu	bisəzi met	ootnia (C.)	Cype o
											maiO _1			
	(səuı	e (Chloram	ninolai) bus	Juoo 1	045410	0,000	огд эве с го	9671.43	VINDLE AL TO		estant.			erredi North
							56 E 1 1 MV				Tro Agmo	NET ED	sts(1 vlir	(0.111
					ark.	e Home I		plan Name	1	2541242		і үттреп	nonsoring	PI SMd

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

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DEP Form 62-555 .900(3)Alternate

See Pages 4 for Instru									
General Information	for the Month/Y	car of: September	er, 2004						
. Public Water System	(PWS) Informati	tion							
	Saratoga Harbor		"			PWS Identification Number	er:	2541008	
PWS Type:	✓ Community	Non-Transient Non-Comm	unity Tr	ansient Non-Comr		Consecutive			
Number of Service Connect						opulation Served at End of	Month:	117	
	Aqua Utilities Florida	<del></del>				<del></del>			
Contact Person:	Mike Fitzgerald				Contac	t Person's Title:	Area Manager		
Contact Person's Mailing Ac		1343 NE 17th Road				State: Florida		Zip Code:	34470
Contact Person's Telephone	Number:	(352) 732-6027				t Person's Fax Number:	(352) 732-3213		
Contact Person's E-Mail Ad	dress:	mvfitzgerald@aquaameric	ca.com						
Water Treatment Pla	nt Information							-	
Plant Name:	Sarasota Harbor					Plant Telephone Number:		904-329-11	22
Plant Address:	Gibbs Avenue	- · · · · · · · · · · · · · · · · · · ·		******	City: Satsuma	State: Florida		Zip Code:	32189
Type of Water Treatment by	Plant:	✓ Raw Ground Water	Purchased Fini	shed Water					
Permitted Maximum Day O	perating Capacity of I	Plant, gallons per day:		200,000					
Plant Category (per subsecti	on 62-699.310(4), F.A	A.C.): IV			Plant Cl	ass (per subsection 62-699	310(4), F.A.C.):	С	
Licensed Operators		Name		License Class	License Number		(s) / Shift(s)	Worked	
Lead/Chief Operator:	Mark March			С	8287				
Other Operators:	Paul Thompson			A	7251	Days 1st Shift			
and the									<del></del>
For a second									
									<del></del>
					<u>[</u>				
Cautification by Land	(Ch.:-6.0								
Certification by Lead				0			C41 :	I4:C	41-441-0
		operator licensed in Florida,							
		e and accurate to the best of							
		applicable standards referenc							
		nsed operator staffed or visite							
rates; and (2) if applica	ible, appropriate t	treatment process performance	ce records. Furth	ermore, I agree	to provide these ac	lditional operations re	cords to the P	WS owne	r so the PWS
owner can retain them,	together with cop	pies of this report, at a conve	nient location for	at least ten year	rs.				
								C 9297	
			Mark March				<del>-</del>	C-8287	
Signature and Date			Printed or Typ	ed Name				License Nu	mber

Page 1

32

PWS Io	entification	Number:		2541008		Plant Name:	Sarasota Har	bor						
III. D	aily Data	for the M	lonth/Year	of:		September, 200	4		<del> </del>					
			Virus Inactiv			<del></del>	Chlorine Die	ovide	C Ozone	Comb	ined Chlorin	e (Chloran	nines)	
	raviolet Ra	-	-	r (Describe):	· ·		CHOIDE DR	Muc	Ozone	1 Conto	and Choil	ic (cinorai		
F.					ibution System:	▼ Free Chlo	rine [	Combin	ed Chlorine	(Chloramine	s) [	Chlorine E	Dioxide	
Type	Disiniec	tant Kesio	iuai iviaintali		•								. IOAGC	
			1	C	T Calculations, or			our-Log	virus Inac	uvation, if I	Applicable	\		하는 하셨다면 보는 사람이 되는 것이 되네.
						CT Calc	ulations	40			UVI	Jose		10 전 공격(18 m) 경험, (2 m) 12 H (2 m)
				1 x 7 x 1.		1 S	Lowest CT							
						Disinfectant	Provided		Ž .		Ass.			나는 휴대의 경기 사람이 어느의 사람이
ĺ	Days Plant				Lowest Residual	Contact Time	Before or at					4.55	Lowest Residual	
1	Staffed or		Net Quantity		Disinfectant	(T) at C	First	4.47				Minimum	Disinfectant	
	Visited by		of Finished	Carlot Section	Concentration (C)	Measurement	Customer				Lowest Operating	UV Dose Required,	Concentration at	Emergency or Abnormal Operating
Day of	Operator	<b>C</b>	Water	N. 15 Pt	Before or at First	Point During	During Peak	Temp of		Minimum CT Required, mg		mW-	Distribution &	Conditions, Repair or Maintenance Work that Involves Taking Water System Components
the Month	(Place "X")	Saratoga Harbor	Producted, gal.	Peak Flow Rate, gpd.	Customer During Peak Flow, mg/L	Peak Flow, minutes	Flow, mg- min/L	Water OC	if Applicable	min/I	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
I	x /	24.0	8,000	Kaa, gpa	2.5	minutes	111111111111111111111111111111111111111	vvaice, o	птертосого	, , , , , , , , , , , , , , , , , , ,	III W -SOCICIII	Scorein	1.2	MANAGE STORY SQUARE CONTROL AND A STORY ST
2	X	24.0	8,100		2.5			············					1.1	
3	X	24.0	8,100		2.8								1.4	
4		24.0	11,700											
5		24.0	11,700											
6	Х	24.0	11,700		2.4								1.2	
7	X	24.0									ļ			
8	X	24.0	2,200		2.8					<b></b>			1.0	
9	X	24.0	11,800		2.0						<del>                                     </del>		0.8	
11	X	24.0 24.0	7,500 8,767	<del></del>	2.6								1.2	
12		24.0	8,767							<del> </del>	<u> </u>			
13	Х	24.0	8,767		2.5		<u> </u>						1.2	
14	X	24.0	3,707		2.0								1.4	
15	X	24.0	10,200		2.4								1.7	
16	Х	24.0	7,000		2.5								2.0	
17	X	24.0	1,600		2.4								1.6	
18		24.0	8,533				ļ	ļ				<b></b>		
19	L;	24.0	8,533					<b></b> _	<del> </del>	<u> </u>			1.6	
20 21	X	24.0 24.0	8,533 8,300		2.7		<del> </del>	ļ	<u> </u>	<del> </del>		<b> </b>	1.6	
22	X	24.0	8,300		2.4		ļ	<del> </del> -			<del>                                     </del>	<del> </del>	1.6	
23	X	24.0	8,800		2.0		<u> </u>		<del></del>			<b></b>	0.7	
24	$\frac{x}{x}$	24.0	0,000		2.2					<u> </u>			1.0	
25		24.0	8,000					<u> </u>		f				
26		24.0	8,000											
27	X	24.0	8,000		2.4								1.2	
28	Х	24.0	1,500		1.8								0.4	
29	X	24.0	8,500		2.3		L		ļ		ļ		1.4	
30	X	24.0	8,500		2.5		ļ	<u> </u>		<u></u>	ļ	<b> </b>	1.6	
31 Total		24.0	211 100				L	L	L	1	<u> </u>	L	L	

6,810

11,800

Avgerage

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

DEP Form 62-555 900(3)Alternate



Size Playes 4 for Instructions.    Contract Information for Month Year of: Suptember, 2004													
Public Water System (PWS) Information   PWS Information   PWS Information   PWS Information   PWS Information   PWS Information   Post   Post   Post   Post   Post   Post   Post   Post   PwS Information   PwS													
Westant Mohite Lines Park   Non-Transient Non-Community   Transient Non-Community   Consecutive	I. General Information	for the Month/	Year of: September	, 2004									
Number of Service Connections at End of Months   56   Total Organization Service and End of Months   237	A. Public Water System	ı (PWS) İnforma	ation										
Number of Service Connections at End of Month: 96   Total Population Served at End of Month: 237	PWS Name:	Welaka Mobile Hor	ne Park			1 1	PWS Identification Number	2541242					
Contact Person's Mating Address:   1343 NE 17th Road   City   Ocala   State   Florida   Zip Code   34472	PWS Type:	✓ Community	Non-Transient Non-Commu	nity Tr	ansient Non-Comi	munity	Consecutive						
Contact Person's Title   Area Manager	Number of Service Connec	tions at End of Mont	h: 96	· · · · · · · · · · · · · · · · · · ·		Tot	al Population Served at End of M	Ionth: 237					
Contact Person's Mailing Address   1343 NE 17th Read   City   Ocala   State   Florida   Zip Code   34472	PWS Owner:	Aqua Utilities Florid	da										
Contact Person's Telephone Number: (352) 732-2027   Contact Person's Fax Number: (352) 732-2013	Contact Person:	Mike Fitzgerald				Cor	tact Person's Title: A	rea Manager					
Contact Person's E-Mant Address	Contact Person's Mailing A	ddress:	1343 NE 17th Road			City: Ocala	State: Florida	Zip Code:	34472				
Plant Name   Welaka Mobile Home Park   Welaka Mobile Home Park   Welaka Mobile Home Park   Purchased Finished Water   Purchased	Contact Person's Telephone	Number:	(352) 732-6027			Cor	tact Person's Fax Number: (3	352) 732-3213					
Plant Name: Welaka Mobile Home Park   Plant Telephone Number: 904-329-1122.   Plant Address: Hamilton Road   City: Satsuma   State: Florida   Zip Code: 32189     Premitted Maximum Day Operating Capacity of Plant, gallons per day:   108,000     Plant Claggory (per subsection 62-699-310(4), F.A.C.): V   Plant Class (per subsection 62-699-310(4), F.A.C.): D     Licensed Operators   Name   License Class   License Number   Day(s) / Shift(s)   Worked.     Day (s) / Shift(s)   Worked.   Day (s) / Shift(s)   Worked.     Other Operators:   Paul Thompson   A   7251   Days 1st Shift     Days 1st Shift   Days 1				a.com									
Plant Address: Hamilton Road Type of Water Treatment by Plant:	B. Water Treatment Pl	ant Information											
Type of Water Treatment by Plant:   Raw Ground Water   Purchased Finished Water	Plant Name:	Welaka Mobile Hor	ne Park				Plant Telephone Number:	904-329-112	22				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:    Plant Category (per subsection 62-699 310(4), F.A.C.): V   Plant Class (per subsection 62-699 310(4), F.A.C.): D     License Class   License Class   License Number   Day(s) / Shift(s) Worked     License Class   License Number   Day(s) / Shift(s) Worked     Paul Thompson   A   7251   Days 1st Shift     Paul Thompson   A   7251   Days 1st Shift     Paul Thompson   A   7251   Days 1st Shift     Paul Thompson   A   7251   Days 1st Shift     It is 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.	Plant Address:	Hamilton Road				City: Satsuma	State: Florida	Zip Code:	32189				
Plant Class (per subsection 62-699 310(4), F.A.C.): V Plant Class (per subsection 62-699 310(4), F.A.C.): D Licensed Operators Name License Class License Number Day(s) / Shift(s) Worked - Lead/Chief Operators: Paul Thompson A 7251 Days 1st Shift    Certification by Lead/Chief Operator				Purchased Fini	shed Water								
Lead/Chief Operators Lead/Chief Operator:    Paul Thompson					108,000	··							
Lead/Chief Operators:    Nark March   C   8287   Days 1st Shift		ion 62-699.310(4), F	<del></del>		· · · · · · · · · · · · · · · · · · ·								
Other Operators:  Paul Thompson  A  7251  Days 1st Shift  Days			Name		License Class		er Day(	s) / Shift(s) Worked					
I. 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 1 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.  Mark March  C-8287		<del></del>		· · · · · · · · · · · · · · · · · · ·	С	<del></del>							
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Mark March C-8287		-				these additional	operations records to the	rws owner so me r v	V3 Owner Can				
	retain them, together v	vith copies of this	s report, at a convenient location	on for at least ten	i years.								
								~ ^^~					
Signature and Date Printed or Typed Name License Number						<del></del>							
	Signature and Date			Printed or Typ	ed Name			License Nui	nber				

PWS I	dentificatio	n Number:	··· <del></del> ,	2541242		Plant Name:	Welaka Mol	oile Home	Park					
	aily Data	for the N	lonth/Year	of:		September, 200	)4							
			g Virus Inacti		ral: <b>▽</b> Free C									
		-	-			niorine	Chlorine Di	oxide	Ozone	Comb	oined Chlorii	ne (Chlorar	nines)	
_		Cadiation		er (Describe):		~~~	<u></u>							
Type	of Disinfe	ctant Resid	dual Maintai	ned in Distr	ibution System:	▼ Free Chlo	orine [	Combin	ned Chlorine	(Chloramine	s) I	Chlorine I	Dioxide	
				C	T Calculations, or	UV Dose, to	Demostate	Four-Log	Virus Inac	tivation, if	Applicable <sup>4</sup>			
1 3 4						CT Calc				1.4	UVI			[불발 기다리 : 100 - 10
			N				Lowest CT	M- S	16.	1 33	,			
	1.0									1				
	, DI					Disinfectant	Provided				4.5			[개념] 왕 하게 보고 있는 다.
1 "	Days Plant Staffed or		N. C.		Lowest Residual  Disinfectant	Contact Time	Before or at			10.726 (20.15		Minimum	Lowest Residual Disinfectant	
	Visited by		Net Quantity of Finished	1	Concentration (C)	(T) at C Measurement	First Customer			1 200	Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of					Before or at First	Point During	During Peak			Minimum CT		Required,		Conditions, Repair or Maintenance Work that
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	nH of Water	Required, mg		mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, O	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
1	X	24.0	8,620	, Br	2.8				1				1.2	
2	X	24.0	9,800		2.2			1	1		· · · · · · · · · · · · · · · · · · ·		0.9	
3	Х	24.0	7,990		2.8			<b></b>	1				1.4	
4		24.0	7,187				1	1						
5		24.0	7,187			<u>"</u> -								
6	X	24.0	7,187		2.0								1.0	
7	Х	24.0	2,650											
8 -	X	24.0	9,330		2.8								1.4	
9	X	24.0	12,880		2.5								1.2	
10	X	24.0	20,980		3.0			ļ <u> </u>			<u> </u>		1.2	
11		24.0	13,797					<u> </u>	<u> </u>			<u> </u>	ļ	
12		24.0	13,797					ļ <u>.</u>				ļ		
13	Х	24.0	13,797		2.8		ļ	<u> </u>	<u> </u>	<u> </u>			1.4	
14	Х	24.0	5,930		1.9			ļ	<b></b>	<b></b>	<u> </u>		1.4	
15	X	24.0	15,650		1.7			<del> </del>	ļ	ļ		ļ <u> </u>	1.5	
16	X	24.0	6,850		2.5		ł	-	<del> </del>	<b>}</b>		ļ	1.6	
18	<del> ^</del> -	24.0	12,180 10,327	<del> </del>	2.8		<del>                                     </del>	<del> </del>	<del> </del>	<del> </del>		ļ	1.0	
19	<del> </del>	24.0	10,327	<del> </del>		-		<del> </del>	+		<del> </del>	<del> </del>	<del> </del>	
20	Х	24.0	10,327	<del> </del>	2.2	<del></del>		<del> </del>	<del> </del>	<del> </del>	<del> </del>	<del> </del>	1.0	-
21	X	24.0	9,250	ļ.—	2.4	· · · · · · · · · · · · · · · · · · ·		<del> </del>	<del> </del>	<del> </del>	<del> </del>	<del>                                     </del>	1.0	
22	X	24.0	8,330	<del></del>	1.5	f		1	<del>                                     </del>	<del> </del>	<del>                                     </del>	<del>                                     </del>	1,4	
23	X	24.0	10,450		1.8	-	<b> </b>	† · · · ·	<del>                                     </del>		<u> </u>	<b></b>	0.9	
24	Х	24.0	9,970		2.3			····					1.2	
25		24.0	6,943				<u> </u>			†	· · · · · · · · · · · · · · · · · · ·	<u> </u>		
. 26.		24.0	6,943			<u> </u>			1	1			T	
27	Х	24.0	6,943		2.2								1.2	
28	Х	24.0	10,100		1.5								0.8	
29	Х	24.0	6,840		2.8								1.2	
30	Х	24.0	18,750		3.0								1.5	
31	L	24.0												
Total			301,310		<u> </u>									
Avgerag	e		9,720	i										

Page 2

20,980

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



See	Pages	4 fc	ir In	stru	ctions.

General Information for the Management of the Management of the Management of the Management of the Management of Service Connections at End	nformation arbor nunity Non-Transient Non-Community of Month: 47	☐ Transient Non-Comr		PWS Identification Number:	2541008
PWS Name: Saratoga H PWS Type:	arbor nunity Non-Transient Non-Community of Month: 47	Transient Non-Comr		PWS Identification Number:	2541008
PWS Name: Saratoga H PWS Type:	arbor nunity Non-Transient Non-Community of Month: 47	Transient Non-Comr		PWS Identification Number:	2541008
	of Month: 47	Transient Non-Comr	nunity 1		
Number of Service Connections at End			nunity	Consecutive	
	ies Florida		Total I	Population Served at End of Month:	117
PWS Owner: Aqua Utilit					
Contact Person: Mike Fitzg	erald		Contac	ct Person's Title: Area N	/anager
Contact Person's Mailing Address:	1343 NE 17th Road		City: Ocala	State: Florida	Zip Code: 34470
Contact Person's Telephone Number:	(352) 732-6027		Contac	ct Person's Fax Number: (352)	732-3213
Contact Person's E-Mail Address:	mvfitzgerald@aquaamerica.co	<u>om</u>			
. Water Treatment Plant Infor	nation				
Plant Name Sarasota H	arbor			Plant Telephone Number:	904-329-1122
Plant Address: Gibbs Aver	nue		City: Satsuma	State: Florida	Zip Code: 32189
Type of Water Treatment by Plant:		Purchased Finished Water			
Permitted Maximum Day Operating Ca	pacity of Plant, gallons per day:	200,000			
Plant Category (per subsection 62-699.310(4), F.A.C.):			Plant Class (per subsection 62-699.310(4), F.A.C.):		
Licensed Operators	Name	License Class	License Number	Day(s) //S	hift(s) Worked
Lead/Chief Operator: Mark Marc	<u> </u>	C	8287		
Other Operators: Paul Thom	pson	A	7251	Days 1st Shift	
1970 1 1941, 1944				<u></u>	
Certification by Lead/Chief O					
	nt plant operator licensed in Florida, am				
	ort is true and accurate to the best of my				
NSF International Standard 60 (	or other applicable standards referenced in	n subsection 62-555.320(3),	F.A.C. I also certi	ify that the following additio	nal operations records for this
plant were prepared each day th	at a licensed operator staffed or visited th	is plant during the month inc	licated above: (1)	records of amounts of chem	icals used and chemical feed
rates; and (2) if applicable, appl	opriate treatment process performance re	cords. Furthermore, I agree	to provide these a	dditional operations records	to the PWS owner so the PWS
	with copies of this report, at a convenien			1	
		Mark March			C-8287
Signature and Date		Printed or Typed Name			License Number
Dignature and Date		rinned or Typed Ivaine			gioense i samooi

Page 1

PWS Io	lentification	n Number:		2541008		Plant Name:	Sarasota Ha	rbor						
	aily Data	for the N	lonth/Year	of:	and the second	October, 26								
			e k to lowdia	2. Tagana (1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	0.000	*				ر بر بدور دور دور دور دور دور دور دور دور دور		(CL )		
			f" Othe		. IA 110	hi rinc   1	merate Di	OMES	1 Older	1 Comb	oined Uniori	ne (Unioran	nines)	
-									1.011	(0) 1	<del></del>			
Type	i Disinted	rtant Resid	lual Maintaii		ibution System:					(Chloramine		Chlorine I	Dioxide	
				C	T Calculations, or			Four-Log	Virus Inac	tivation, if				
1						CT Calc	ulations				UV	Dose		
1						AC.	Lowest CT				10000000000000000000000000000000000000		X 748 ( )	
						Disinfectant	Provided					7g. 1 / 1 / 1 / 1		
	Days Plant				Lowest Residual	Contact Time	Before or at						Lowest Residual	
1	Staffed or		Net Quantity		Disinfectant	(T) at C	First					Minimum	Disinfectant	
2.21	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of	Operator		Water		Before or at First	Point During	During Peak			Minimum CT		Required,	Remote Point in	Conditions, Repair or Maintenance Work that
the	(Place	Saratoga	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water,	Required, mg		mW-	Distribution	Involves Taking Water System Components
Month	"X")	Harbor	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, O	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
1	X	24.0	2.600	ļ					ļ	ļ. <u></u>			ļ	
3	<b> </b>	24.0 24.0	8,600 8,600	ļ					<u> </u>	<del> </del> -			<del> </del>	
4	х	24.0	8,600		3.5	ļ — — — — — — — — — — — — — — — — — — —	ļ	<del> </del>	<del> </del> -	ļ <u>-</u>		<del></del>	2.0	
5	$\frac{\hat{x}}{x}$	24.0	8,000		3.5				<del>                                     </del>				2.0	
6	X	24.0	8,600		3.5					<del></del>	<del></del>	<del> </del>	2.0	
7	X	24.0	8,000		3.2		<del> </del>	<del>                                     </del>	<del> </del>	<del> </del>	<del> </del>		1.7	
8	Х	24.0	8,300		2.8				<del> </del>	<u> </u>			1.7	
9-,		24.0	8,167											
10		24.0	8,167											
11	Х	24.0	8,167		2.5								1.2	
12	X	24.0	8,200		2.5					<u> </u>			2.0	
13	X	24.0	10,400		2.6			ļ		ļ			1.6	
14	X	24.0	8,200		2.7	<b></b>			ļ <u>.</u>	ļ	ļ	ļ <u>.</u>	1.6	
15 16	X	24.0 24.0	7,800 11,167		2.4				ļ	ļ		ļ	1.6	
17		24.0	11,167							<del> </del>		<del> </del>	<del> </del>	
18	X	24.0	11,167	<del> </del>	2.2	<del> </del>			<del> </del>	<del> </del>	<del> </del>		1.0	
19 ==	X	24.0	7,800		2.4	1		<del>                                     </del>	<b> </b>	<del>                                     </del>	<del> </del>		1.0	
20	X	24.0	7,600		2.1	<u> </u>				İ			1.0	
21	X	24.0	9,500		2.0								0.8	
22	X	24.0	8,200		2.0								0.9	
23		24.0	10,967									<u> </u>		
24		24.0	10,967		<u> </u>			ļ	ļ			ļ		
25 26	X	24.0	10,967		2.3	<b></b>	ļ	ļ <u> </u>	ļ	<del></del>	<del> </del>		1.0	
27	X	24.0	8,500		3.0				<del> </del>	<del> </del> -		<u> </u>	2.0	
28	X	24.0	7,900 8,700		2.6	<del> </del>			<del> </del>	<del> </del>		<del> </del>	1.0	
29	$\frac{}{x}$	24.0	16,000		1.8	<del> </del>	<del> </del>			<del> </del>	<u> </u>	<del> </del>	1.0	
30	<del>                                     </del>	24.0	11,033		1.0		<del> </del>	<del>                                     </del>	<del> </del>	1	<del>                                     </del>	<del> </del>	1.0	
31		24.0	11,033					<del> </del>	<b>-</b>	<b> </b>	<del>                                     </del>	T	<u> </u>	
Total		Jaur John J	272,466			·		-						

8,789

Avgerage

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

DEP Form 62-555 900(3)Alternate



See Pages 4 for Instru						
I. General Information (	for the Month/Y	ear of: October, 2004				
A. Public Water System	(PWS) Informati	ion				
	Welaka Mobile Home				PWS Identification Number:	2541242
PWS Type:	✓ Community	Non-Transient Non-Community	Transient Non-Com	munity	Consecutive	
Number of Service Connection	ons at End of Month:	96		Total I	Population Served at End of Mo	onth: 237
PWS Owner:	Aqua Utilities Florida					
Contact Person:	Mike Fitzgerald			Contac	ct Person's Title: Ar	ea Manager
Contact Person's Mailing Ad	dress: 1	343 NE 17th Road		City: Ocala	State: Florida	Zip Code: 34472
Contact Person's Telephone	Number: (	352) 732-6027		Conta	et Person's Fax Number: (3:	52) 732-3213
Contact Person's E-Mail Add	lress: <u>r</u>	nvfitzgerald@aquaamerica.co	om .			
B. Water Treatment Plan	nt Information					
	Welaka Mobile Home	Park			Plant Telephone Number:	904-329-1122
Plant Address: I	Hamilton Road			City: Satsuma	State: Florida	Zip Code: 32189
Type of Water Treatment by			Purchased Finished Water			
Permitted Maximum Day Op			108,000			
Plant Category (per subsection	n 62-699.310(4), F.A				ass (per subsection 62-699.310	
Licensed Operators	<u>Arthur Arthur Le</u>	Name	License Class	License Number	Day(s	) / Shift(s) Worked
Lead/Chief Operator:			C	8287		
· -	Paul Thompson		A	7251	Days 1st Shift	
					<u></u>	
II Certification by Lead/	Chief Operator					
		operator licensed in Florida, am	the lead/chief energter of the	water treatment n	lant identified in part I of	this report. I certify that the
						als used at this plant conform to NSF
						l operations records for this plant
						als used and chemical feed rates; and
				these additional o	perations records to the I	PWS owner so the PWS owner can
retain them, together wi	th copies of this r	eport, at a convenient location f	or at least ten years.			
			Mark March			C-8287
Signature and Date		V	Printed or Typed Name			License Number

PWS Id	lentificatio	n Number:		2541242		Plant Name:	Welaka Mol	oile Home	Park					
III. D	aily Data	for the N	lonth/Year	of:		October, 2004								
			g Virus Inactiv		/al: <b>▼</b> Free C	· — · — · · · · · · · · · · · · · · · ·	Chlorine Di		☐ Ozone		. 1611	. (Ch.)		
1	raviolet R			r (Describe):		morate	Chiorine Di	oxide	Ozone	1 Come	oined Chlori	ne (Cniorar	nines)	
<b>⊢</b>						G.E. OU	·	Combin	ad Chlasina	(Chloramine	<u> </u>	Chlorine I		
Type o	Disinte	ctant Resid	dual Maintai		ibution System:	Free Chlo							Jioxide	
					T Calculations, or	and the state of t		Four-Log	Virus Inac	tivation, if A				용고를 보는 그는 이렇게 살랐다고?
1						CT Calc	ulations	<u>. 11 21</u>			# UV	Dose		[불발출기 : 1 이 기 : 그림 그렇게 되
				·	1400	#5#	Lowest CT			1879	TOTAL NO. 1 COM	April 18 Marie		
						Disinfectant	Provided			5-20-5				
	Days Plant		l	1 1 1 1 1 K	Lowest Residual	Contact Time	Before or at		1.				Lowest Residual	
	Staffed or		Net Quantity		Disinfectant	(T) at C	First					Minimum	Disinfectant	
	Visited by		of Finished	1	Concentration (C)	Measurement	Customer		ł		Lowest	UV Dose	Concentration at	
Day of	Operator	Hours plant			Before or at First	Point During	During Peak			Minimum CT	Operating	Required,	Remote Point in	
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	1 emp of	pH of Water,	Required, mg		mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, *C	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
2	X	24.0		ļ	2.6			<del> </del>	<u> </u>	<del> </del>	<u> </u>	ļ	1.5	
3		24.0		<del>                                     </del>		<u> </u>	<del> </del>	<del>}</del>	<b>-</b>	<del> </del>			<u> </u>	
4	Х	24.0			2.6			<del></del>		<del></del>		<del> </del> -	1.5	
5	X	24.0	· · · · · · · · · · · · · · · · · · ·		2.5			<del>                                     </del>	<del></del>	<b>†</b>		<del> </del>	1.5	
6.	X	24.0			2.8			<del>                                     </del>	<del> </del>			<del>                                     </del>	1.6	
7	Х	24.0			2.5			<b></b>	<u> </u>	<u> </u>			1.4	
8	Х	24.0	15,690		2.8								1.4	
9		24.0	10,043											
10		24.0	10,043											
11	Х	24.0	10,043		2.4		L	<u> </u>			ļ		1.4	
12	X	24.0	11,870		2.6				ļ		ļ	<u> </u>	1.6	
13	X X	24.0 24.0	11,820 7,400		2.8			<b></b> _	<u> </u>		<u> </u>	<del> </del>	1.4	
15	X	24.0	13,860		2.3			<del></del>	<u> </u>	<u> </u>	<b> </b>	<del></del>	1.4	
16		24.0	11,180		2.4			<del>                                     </del>	<del> </del>	<del> </del>		<del> </del> -	<u> </u>	
17		24.0	11,180					<del>                                     </del>			<u> </u>	ļ	†	
18	X	24.0	11,180		2.4								1.0	
19	Х	24.0	11,480		2.5			<u> </u>	1				1.0	
20	Х	24.0	7,310		2.7								1.2	
21	X	24.0	12,850		2.0								1.0	
22	Х	24.0	13,850		2.5					ļ			1.2	
23		24.0	11,657									ļ	ļ	
24		24.0	11,657			ļ. —			ļ	<del>                                     </del>		<b></b>		
25	X	24.0 24.0	11,657		2.6			_	<del> </del>	<b></b>	<del> </del>	<del> </del>	1.2	
27	X	24.0	9,660 13,890		1.9				<del>                                     </del>	<del> </del>	<del> </del>	<del> </del>	1.6	
28	X	24.0	9,860		2.5			<del> </del>	<del> </del>	<del>                                     </del>	<del> </del>		1.2	
29	X	24.0	13,480		2.5			<del>                                     </del>	<b> </b>	<u> </u>	<del> </del>	<del> </del>	1.2	
30		24.0	13,183		2.3			<del> </del>	<del>                                     </del>	<del> </del>		<b>†</b>	<del>                                     </del>	
31.		24.0	13,183											
Total			365,736						<u> </u>	-				
Aviorna			11 700	l										

20,780

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



See Pages 4 for Instructions.

See Pages 4 for Instruction							
l. General Information for th	ne Month/Year of: November, 20	04					
A. Public Water System (PWS	S) Information						
	ga Harbor		, , , , , , , , , , , , , , , , , , , ,		PWS Identification Number:	2541008	
PWS Type:	ommunity Non-Transient Non-Communit	y Transient	Non-Comr	nunity (	Consecutive		
Number of Service Connections at	End of Month: 47			Total P	opulation Served at End of M	10nth: 117	
PWS Owner: Aqua U	Jtilities Florida						
Contact Person: Brian I	leath			Contac	t Person's Title:	Area Manager	
Contact Person's Mailing Address:	1343 NE 17th Road			City: Ocala	State: Florida	Zip Code: 3	34470
Contact Person's Telephone Number	(			Contac	t Person's Fax Number: (3	352) 732-3213	
Contact Person's E-Mail Address:	beheath@aquaamerica.com						
B. Water Treatment Plant In	formation						
	ta Harbor				Plant Telephone Number:	904-329-1122	
	Avenue			City: Satsuma	State: Florida	Zip Code:	32189
Type of Water Treatment by Plant:	✓ Raw Ground Water	Purchased Finished Wa	ater		- 17		
Permitted Maximum Day Operating		200,000					
Plant Category (per subsection 62-6					ass (per subsection 62-699.31		
Licensed Operators	Name		se Class	License Number	Day(s	s) / Shift(s) Worked	
Lead/Chief Operator: Mark N		C		8287			
Other Operators: Paul Th	nompson	A		7251	Days 1st Shift		
100							
The same of the same of							
I Certification by Lead/Chie	f Operator						
	tment plant operator licensed in Florida, am	the lead/chief operat	tor of the	water treatment nl	ant identified in part I o	of this report. I certify the	hat the
	report is true and accurate to the best of my						
	60 or other applicable standards referenced						
	that a licensed operator staffed or visited the						
	ppropriate treatment process performance re						
	· · · · · · · · · · · · · · · · · · ·				iditional operations reco	ords to the PWS owners	so the Pws
owner can retain them, togeth	her with copies of this report, at a convenier	it location for at leas	t ten year	S.			
		Mark March				C-8287	
Signature and Date		Printed or Typed Name	;			License Numb	ber

Page 1

Sarasota Harbor

Plant Name:

											001.55		un	umixeM
											£09,8		ခ	Avgerag
											007,882	7		IstoT
		_								I		24.0		. 18
	9.0		l						0.2		002,8	0.42	X	30
	8.0								1.2	-	££1,8	24.0	X	67
	30								· · · · · · · · · · · · · · · · · · ·		8,133	0.42	<del>  - ^-  </del>	82
								· · - · · · · · · · · · · · · · ·			££1,8	24.0	<del>   </del>	
	2.0								ĽI	<u> </u>	052,8	0.42	X	97
	50								LI	<del></del>	052,8	0.42	<del>  ^ </del>	52
									0:7				<del>  </del>	
	2.0								2.0		000,8	74 <sup>°</sup> 0	X	74
	<b>č</b> .0								0.2		000,8	24.0	X	23
	9.0		ļ						2.2		002,8	0.42	X	77
	9.0								7.2		051,8	0.42	X	17
											051,8	24.0	[	-02
	L'0								7.7		008,7	24.0	X	61
	L'0								0.2		00£,8	74.0	X	81
	9.0		1						0.2		00L'L	24.0	X	Lī
	§.0					i			6'1		001'6	0.42	X	91
	9.0		1	i — —		***			5.2		009'5	24.0	X	SI
			l						i		009'5	0.42		τi
											009'5	24.0	t	£Ι
	9.0	<del></del>	l					-	6.1		009,8	24.0	X	15
	8.0	<del> </del>	<del>                                     </del>						0.2		007,8	24.0	X	11
	2.1		<b></b>						0.2		004,8	0.42	X	01
	4.1		<del> </del>	<del> </del>				<del></del>	£.2		000,81	0.42	X	6
	0.1		<b></b>						5.5		004,8	0.42	X	8
	01		<del>                                     </del>						3.0		001,2	24.0	<del>                                  </del>	- L
		<del> </del>	<del> </del>					<del></del>			001,2	24.0	<b> </b>	9
	0.1	<b> </b>		ļ					0.1				<del>- ,, -  </del>	
	0.1		<del> </del> -	<del> </del>					8.1		005,8	24.0	X	5
	0.1								61		002,8	24.0	X	7
	0.1			ļ					7.2		005,6	24.0	X	· £
	\$.0	ļ		ļ		L			L'I		006,7	0.4.0	X	Σ
	9.0	ou grant at Auril		<b></b>					8.0	10.7	001,55	0.42	X	
	System, mg/L	zmɔ/ɔəs	rmo/oos-Wm	J/nim	if Applicable	Water, OC	J/aim	sənuim ;	Peak Flow, mg/L	Rate, gpd	gal.	rodusH	the state of the s	Month
	notinditizid.	- Wm	UV Dose,	Required, mg	nH of Water,	Jo dwa L	-ут, жоГТ	Peak Flow,	Customer During	Peak Flow	Producted,	Saratoga	(Place	the
Conditions, Repair of Maintenance Work that		Reduired		TO muminiM			During Peak	Point During	Etione or at First		Water			Day of
Émergency or Abnormal Operating	Concentration at	UV Dose	Powest				Customer	Measurement	(O) notation (C)		bənzini To		Visited by	- : : 1
	Disinfectant	muminiM-					First	Jns(T)	Disinfectant		Net Quantity		Staffed or	
	Lowest Residual				4		Before or at	Contact Lime	Lowest Residual				Days Plant	1
	B - 2 - 3						bobivorA	Disinfectant				1		
		mutuniy		<b>!</b>			Lowest CT							
		A OCOV	7%0			45 5 4 1 1 1 3 4 4 4 4 4 1 3 4 1 1 3 5 1 5 4 4	SHOUSIN	CT Calc	Redice in the second	L	1		4	
			TW1	1 5 6 7 7 7 7 7 7			No. 12 Carlotte Co.		12 Process of the con-			1		
		<b>美</b> 亚科克尔	*sldssilaa/	1 i nousvi	Penl suriV	on I-mo			T Calculations, or			<u> </u>	<u> </u>	
		Chlorine D	(s	(Chloramine	ed Chlorine	Combin	ா தவர்	oldO sort 🔽	bution System:	rıtziQ ni bər	iistaisM leul	stant Resid	of Disinfec	Type
											L Otper			
	(sain	пвтопал э	ined Chlorin	I Comp	ozoue	aprixo	Chlorine Dio	I amroun						1
	(304)		, -(40)			~F.F.					vitas Inactiv			
							tz	Movember, 200		:10	outh/1 ear o	TOT THE IN	RIEG ÁHE	7 1111

2541008

PWS Identification Number:

<sup>•</sup> Refet to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instr							
I. General Information	for the Month/	Year of: Nove	mber, 2004				
A. Public Water System	(PWS) Informa	ation					
PWS Name:	Welaka Mobile Hon					PWS Identification Number:	2541242
PWS Type:	✓ Community	Non-Transient Non-C	ommunity T	ransient Non-Com	munity	Consecutive	
Number of Service Connec	tions at End of Month	h: 96	· · · · · · · · · · · · · · · · · · ·		То	tal Population Served at End of M	Ionth: 237
PWS Owner:	Aqua Utilities Floric	da		<del> </del>			
Contact Person:	Brian Heath				Co	ntact Person's Title: A	rea Manager
Contact Person's Mailing A	ddress:	1343 NE 17th Road			City: Ocala	State: Florida	Zip Code: 34472
Contact Person's Telephone	Number:	(352) 732-6027			Co	ntact Person's Fax Number: (3	352) 732-3213
Contact Person's E-Mail Ac		beheath@aquaameric	a.com				
B. Water Treatment Pla	ant Information						
Plant Name:	Welaka Mobile Hon	ne Park				Plant Telephone Number:	904-329-1122
Plant Address:	Hamilton Road				City: Satsuma	State: Florida	Zip Code: 32189
Type of Water Treatment by		✓ Raw Ground Water	Purchased Fin	ished Water			
Permitted Maximum Day O	perating Capacity of	Plant, gallons per day:		108,000			
Plant Category (per subsect	ion 62-699.310(4), F.		V			t Class (per subsection 62-699.31	
Licensed Operators		Name		License Class	License Numb	er Day(	s) / Shift(s) Worked
Lead/Chief Operator:				С	8287		
Other Operators:	Paul Thompson			Α	7251	Days 1st Shift	
		<del></del>					
				<u> </u>			
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			······································	ļ			
				ļ			
			-	<del> </del>			
	<u> </u>			<u> </u>	L		
I Certification by Lead	/Chief Operator	<u> </u>					
			rida am the lead/chie	of operator of the	water treatmen	t plant identified in part I o	f this report. I certify that the
							cals used at this plant conform to N
							al operations records for this plant
				, ,,	•	_	•
							als used and chemical feed rates; a
					these additiona	l operations records to the	PWS owner so the PWS owner can
retain them, together w	ith copies of this	report, at a convenient le	ocation for at least te	n years.			
			Mark March				C-8287
Signature and Date			Printed or Ty	ned Name	. <u></u>		License Number
organis and Date			France of Ty	рей мание			License Number

DWS 14	entification			2541242	KEPOKITOI		Welaka Mob	ile Home	Park					
						November, 200	Δ							
			onth/Year c					.,	<b>–</b> 0		ined Chlorin	a (Chloran	nines)	
			Virus Inactiv		d: Free Ci	norme į	Chlorine Di	oxide	Ozone	1 Comp	ined Cinora	ie (Cinoran	inics)	
	ravielet Ra			(Describe):				<u> </u>	1 Ch la via a	(Chloramine	۰ ۲	Chlorine D	Niovide	
Type c	f Disintec	tani Resid	ual Maintair	ied in Distri		<b>▼</b> Free Chlo					<u> </u>		rioxide	
				C	Γ Calculations, or	UV Dose, to	Demostate I	our-Log	Virus Inac	tivation, if A	Applicable*			
						CT Calc	ulations				UVI	Jose		
							Lowest CT		量的方式	197				
						Disinfectant	Provided							
	Days Plant				Lowest Residual	Contact Time	Before or at	4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4					Lowest Residual	
	Staffed or		Net Quantity		Disinfectant	(T) at C	First	133				Minimum	Disinfectant	
	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest Operating	UV Dose Required,	Concentration at Remote Point in	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that
Day of	Operator	Hours plant	Water		Before or at First	Point During	During Peak	Temp of	-TY - CYY-4	Minimum CT Required, mg		mW-	Distribution	Involves Taking Water System Components
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg- min/L		if Applicable		1	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L 2.1	minutes	min/L	water, C	11 Applicação	A AMPLO	III VV SOCIOLI	000.00	1.0	
1	X	24.0 24.0	39,550 9,900		2.5					<del>                                     </del>			1.5	
2	· X	24.0	12,260		2.2			<del></del>					1.2	
4	X	24.0	11,880		2.0								1.0	
5	X	24.0	12,510		0.6								1.0	
6		24.0	11,067											
7		24.0	11,067							<u> </u>	<del> </del>		0.8	
8	X	24.0	11,067		2.1		<u> </u>	ļ			<u> </u>	ļ	1.2	
9	Х	24.0	8,660		2.7		ļ			<u> </u>	<del> </del>		0.8	
10	Х	24.0	9,110		2.1		<del> </del>				<del> </del>	<del></del>	0.8	
11	X	24.0 24.0	9,990		2.3		<del> </del>	<del>                                     </del>		<del>                                     </del>			0.6	
12	Х	24.0	9,140 9,977				<del> </del>	<del> </del>		T				
14	-	24.0	9,977				<b> </b>							
15	X	24.0	9,977		2.4								0.6	
16	X	24.0	9,190		2.7				ļ <u>.</u>			<u> </u>	0.6	
17	Х	24.0	9,510		2.4				ļ <u>.</u>	<u> </u>		<u> </u>	0.6	
18	Х	24.0	11,550		2.2				<del> </del>	<del> </del>	-	<del> </del> -	0.6	
19	Х	24.0	10,230		2.0		<del> </del>	<del> </del>	├	<del> </del>	<del>                                     </del>	<del>                                     </del>	<del>                                     </del>	
20	<del> </del>	24.0	12,595 12,595		2.3		<del> </del>	<u> </u>		<del>- </del>	<del> </del>		0.6	
21	X	24.0	11,840	<del>                                     </del>	2.3		-	1					0.5	
23	$\frac{\lambda}{x}$	24.0	11,630		2.2		1						0.5	
24	X	24.0	10,200		1.9							ļ	0.5	
25		24.0	12,535						ļ		<u> </u>	<u> </u>	0.5	
26	Х	24.0			2.2		<u> </u>		<u> </u>		ļ	<b>_</b>	0.3	
27		24.0		ļ			<b>_</b>	ļ	<del> </del>	<del> </del>	<del></del>	+	<del>  -                                   </del>	
28	<u> </u>	24.0			2.6		<del> </del>	+		<del>                                     </del>	+	1	0.6	
29	X	24.0		ļ <u>-</u>	2.6		<del> </del>	<del>- </del>	<del> </del>	1	<del> </del>	1	1.0	
30	X	24.0		<del> </del>	2.9	<del> </del>	<del>                                     </del>	1	1					
Total -	<del></del>	1 24.0	354,950			I								
Avgera	ge		11,450	1										

39,550

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



#### Polymer Page 3 Due in December

owner can retain them, together with copies of this report, at a convenient location for at least ten years.

See Pages 4 for Instructions. 1. General Information for the Month/Year of: December 2004 A. Public Water System (PWS) Information PWS Name: 2541008 Saratoga Harbor PWS Identification Number: PWS Type: ✓ Community Non-Transient Non-Community Transient Non-Community Consecutive Number of Service Connections at End of Month 47 Total Population Served at End of Month: 117 PWS Owner Aqua Utilities Florida Contact Person Brian Heath Contact Person's Title: Area Manager Contact Person's Mailing Address: 1343 NE 17th Road State Florida Zip Code: 34470 City: Ocala Contact Person's Telephone Number: (352) 732-6027 Contact Person's Fax Number (352) 732-3213 Contact Person's E-Mail Address: beheath@aguaamerica.com **B. Water Treatment Plant Information** Plant Name 904-329-1122 Sarasota Harbor Plant Telephone Number: Plant Address: Zip Code: Gibbs Avenue City: Satsuma State: Florida 32189 Type of Water Treatment by Plant: Purchased Finished Water ✓ Raw Ground Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200,000 Plant Category (per subsection 62-699.310(4), F.A.C.): IV Plant Class (ner subsection 62-699.310(4), F.A.C.):  $\boldsymbol{C}$ Licensed Operators Name License Class License Number Day(s) / Shift(s) Worked Lead/Chief Operator: Mark March 8287 Days 1st Shift Other Operators: Paul Thompson 7251 Days 1st Shift Il 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

Page 1

Mark March

Printed or Typed Name

Signature and Date

C8287

License Number

PWS Io	WS Identification Number: 2541008 Plant Name: Sarasota Harbor													
III. D	aily Data	for the V	lonth/Year	of:		December, 200	4							
			g Virus Inactiv		ral: <b>▼</b> Free C	·								
l						hlorine	Chlorine Di	oxide	Ozone	Comb	oined Chlorir	ne (Chloran	nines)	
- ·	raviolet R		Othe											
Type o	f Disinfe	ctant Resid	dual Maintair	ned in Distr	ibution System:	▼ Free Chlo	rine	Combin	ed Chlorine	(Chloramine	:s)	Chlorine E	Dioxide	
				C	T Calculations, or	UV Dose, to	Demostate l	Four-Log	Virus Inac	tivation, if	Applicable*			
	30 D										UVI	)ose		[[인기] 이 님, 그는 이번, 그렇게 뭐
						W. 2017	Lowest CT		8		\$ 16 2.	1 W 2		
			ľ						e e				* 45 3.74	
	D Di					Disinfectant	Provided			1.5		and the second		
	Days Plant Staffed or		Net Quantity	. 1	Lowest Residual  Disinfectant	Contact Time	Before or at First					Minimum	Lowest Residual Disinfectant	
	Visited by		of Finished		Concentration (C)	(T) at C  Measurement	Customer				Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of	Operator		Water		Before or at First	Point During	During Peak			Minimum CT	Operating	Required,	Remote Point in	
the	(Place	Saratoga	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water	Required, mg		mW-	Distribution	Involves Taking Water System Components
Month	"X")	Harbor	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
ī	X	24.0		, 51	1.8								0.5	
2	X	24.0	8,000		1.8								0.5	
3	X	24.0			1.6								0.6	
4		24.0	5,133											
- 5		24.0	5,133											
6	X	24.0	5,133		1.9								0.7	
7	Х	24.0			1.9					<b></b>			1.2	
9	X	24.0	9,200		1.9								0.7	
10:	X	24.0 24.0	7,700 9,300		1.9			-	ļ	ļ			0.6	
11		24.0			1.0					<del> </del>	ļ		0.7	
12		24.0	8,100			<del></del>				<del></del>				
13	Х	24.0	8,100		1.9	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				<del> </del>			0.7	
14	Х	24.0	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1.5					·	<del></del>		0.5	
15	X	24.0	8,400		2.0								0.7	
16	X	24.0	8,100		2.0								0.6	
17	X	24.0	8,300		1.8								0.6	
18		24.0	8,167											
19		24.0	8,167							<u>.</u>				
20	X	24.0	8,167		2.9					<u> </u>			0.7	
-21	X	24.0	8,300		3.5					ļ			1.8	
22	X	24.0	8,200		2.3				ļ	<del> </del>			1.0	
23	X X	24.0	7,800	·	2.5					ļ	<u> </u>		0.8	
25	- X	24.0	8,100		2.3				<del></del>	<del> </del>	<del>                                     </del>		0.8	
26		24.0	2,633						<u> </u>	<del> </del>				
27	<del></del>	24.0	2,633		2.4					<del></del>			0.8	
28	X	24.0 24.0	2,633 8,700		2.4			<del> </del>	<del> </del> -	-			0.8	
29	$\frac{\hat{x}}{x}$	24.0	8,700		2.3			<del>                                     </del>	ļ				0.6	
30	$\frac{\lambda}{X}$	24.0			2.3			<del> </del>	<del> </del>	<del> </del>	<del> </del>		0.7	
31	- X	24.0	9,000		2.3			<del></del>	<del> </del>	l	<del> </del>		0.8	
Total	الصفق		204,400		2.5				<del></del>	<u> </u>	1	<u> </u>	<u> </u>	
A			20.,.00											

9,300

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



Car Daniel A. Car J.		Polymer Page 3 Due in D	ecember					
See Pages 4 for Instr. General Information		ook of	2004					
. General information	for the Month/Y	Decemb	per, 2004					
A. Public Water System	(PWS) Informat	ion						
PWS Name:	Welaka Mobile Home	Park				PWS Identification Numb	per: 2541242	
PWS Type:	✓ Community	Non-Transient Non-Com	munity T	ransient Non-Com	munity	Consecutive		
Number of Service Connect	tions at End of Month:	96			То	tal Population Served at End o	of Month: 237	
PWS Owner:	Aqua Utilities Florida	ı						
Contact Person:	Brian Heath				Co	ntact Person's Title:	Area Manager	
Contact Person's Mailing A	ddress: 1	343 NE 17th Road			City: Ocala	State: Florida	Zip Code:	34472
Contact Person's Telephone		352) 732-6027			Co	ontact Person's Fax Number:	(352) 732-3213	
Contact Person's E-Mail Ad		oeheath@aguaamerica.	<u>com</u>					
3. Water Treatment Pla	ant Information							
Plant Name:	Welaka Mobile Home	Park				Plant Telephone Number:		
Plant Address:	Hamilton Road				City: Satsuma	State: Florida	Zip Code:	32189
Type of Water Treatment by		Raw Ground Water	Purchased Fin	ished Water				
Permitted Maximum Day O	<del> </del>			108,000			<u></u>	
Plant Category (per subsect	ion 62-699.310(4), F.A	<u></u>	<i>!</i>			nt Class (per subsection 62-699		<del></del>
Licensed Operators		Name		License Class	License Numb	per Da	ay(s) / Shift(s) Worked	
Lead/Chief Operator:	Mark March			С	8287	Days 1st Shift		
Other Operators:	Paul Thompson			A	7251	Days 1st Shift		
				<u> </u>				
			·					
								<del></del>
				<u> </u>	<u> </u>			<del></del>
1 C-4:0:-4:1	I/CI : CO :							
I Certification by Lead				6 6.1		1 11 12 12	Y C41.1 Y 416	t that the
		operator licensed in Florid						
		e and accurate to the best of						
International Standard	60 or other applic	able standards referenced	in subsection 62-5	55.320(3), F.A.0	<ol><li>I also certify</li></ol>	that the following addit	ional operations records	s for this plant
were prepared each da	y that a licensed of	perator staffed or visited th	nis plant during the	e month indicate	d above: (1) re	cords of amounts of cher	micals used and chemicate	al feed rates; and
(2) if applicable, appro	priate treatment p	rocess performance record	ls. Furthermore, I	agree to provide	these additiona	al operations records to t	he PWS owner so the P	WS owner can
retain them, together w	vith copies of this i	report, at a convenient loca	ation for at least te	n years.				
	•	•		<del>-</del>				
			Mark March				C8287	
Signature and Date			Printed or Ty	ped Name			License N	umber

Page 1

											19,520			munixs\
											12,313	and digital		Avgerage A
											017,185	Parties and		[otal
	9.1								2.5	<u>.</u>	081,81	24.0	X	15
	I.I				ļ		<u> </u>	ļ <u> </u>	3.0		080,81	24.0	X	30
	0.1		ļ			L			8.2		19,520	24.0	X	67
	0.1	<u> </u>	ļ		ļ	<u> </u>			0.£	1	091'8	24.0	X	87
	8.0				<u> </u>	<u> </u>			2.3	1	12,633	24.0	X	LZ
			<u> </u>			<b>_</b>	ļ				12,633	24.0		97
		<u> </u>	ļ								12,633	24.0		52
	9.0		ļ		<u> </u>			ļ <u> </u>	2.3		061,81	0.42	X	24
	9.0				ļ	ļ <u>.</u>	<u> </u>		0.2	1	072,8	0.42	X	23
	0.1	<u></u>				L			2.5		14,210	24.0	X	77
	1.2		<u> </u>		<u> </u>	L			ζ.ξ		10,440	24.0	X	17
	L'0	<u> </u>	<u> </u>		<u> </u>		<u> </u>		2.3		14,127	24.0	X	70
						L	ļ <u></u>	ļ <u></u>	<u> </u>		14,127	24.0		61
	<u> </u>				<u> </u>	L					121,41	24.0		81
	9.0					<b></b>	<u> </u>	ļ <u>.</u>	LI		12,020	0.42	X	<b>L</b> I
	7.0	L		<u> </u>			<u> </u>	ļ	0.2	<u> </u>	018,6	0.42	X	91
	9.0						ļ		0.2	<u> </u>	067,81	0.42	X	SI
	9.0		<u> </u>		ļ	<u> </u>			0.2		10,630	24.0	X	ÞĪ -
	6.0	<u> </u>	<u> </u>			L	<u> </u>		2.5		11,500	0.42	X	13
											002,11	0.42	L	15
			<u> </u>		<u> </u>	<u> </u>		<u> </u>		<u> </u>	008,11	0.42		П
	8.0								7.2	ļ	10,250	0.42	X	01
	8.0		<u> </u>	1			<u> </u>	ļ <u> </u>	L'I	J	088,6	0.42	X	6
	8.0	<u></u>	<u> </u>						0.2		040,6	0.42	X	8.
	8.0		<u> </u>			L		ļ	8.1	<u> </u>	096'01	74.0	X	L
	9.0	<u> </u>	L		1	<u> </u>			61		ZS0'11	0.42	X	9
			L	L	<u> </u>	<u> </u>					LS0'11	24.0		S
			<u> </u>		l						ZS0'11	24.0		· 7
	L'0								2.3		12,460	24.0	X	3-
	L'0		<u> </u>						8.2		15,440	24.0	X	7
	L'0	L	<u> </u>						2.8		14,130	0.42	X	I
nounringO To tuO	System, mg/L	zwo/oos	mW-sec/cm <sup>2</sup>	J\nim	aldsoilqqA li	Water, <sup>o</sup> C	1\mim	sənunu	Peak Flow, mg/L	Rate, gpd.	ે દુવા	Operation	("X.,	Month
Involves Taking Water System Components	nonudrazia	~-Wm	UV Dose,	Required, mg	, tels W lo Hq	Temp of	Flow, mg-	Peak Flow,	Customer During	Peak Flow	Producted,	uı	(Place	əqr
Conditions; Repair or Maintenance Work that	ni miote Point in	Required,	Smits and	Minimum CT		les in a	During Peak	Point During	Before or at First		Water	Hours plant	Operator	Day of
Emergency or Abnormal Operating	Concentration at	UV Dose	Lowest				Customer	Меаѕшетеп	Concentration (C) :		bof Finished		Visited by	X.
	Disinfectant	mminiM					izii4	्र (T) श्र C =	Dismfectant		Net Quantity		To beffetd	
	Lowest Residual						1. 4. 6 性能性性疾病。	Contact Time	Lowest Residual				Days Plant	
				191 2000		10 m = 2 1	Provided	Disinfectant		ĺ	Í .	1 - 6 / 30	Stage 1	
	Santa Talan	- 44.7-1					TO west						74	
		000											50.4	ĺ
		- 9SO(				0		CT Calcu			1			
		IN STALE	*əblicable	A Ii .noiisvi	Virus Inact	our-Log	4 state F	Tot .sec_to I	T Calculations, or					
		Chlorine D	(9	Chloramines	d Chlorine (	Combine	☐ ənin	Free Chlor	bution System:	insiG ni bə	niernieM leu	tant Resid	Disinfec	Lype o
							<del>_</del>			(Descripe):			raviolet Ra	_
	mes)	е (Спютат	uca Culoulu	[ Combi	anoz∪	l əpixi	വെ ഉദ്ദേശവാ	hlorine 🦵						
	(-24:	1107	. 1101								Virus Inactiv			
								December, 2004		:30	onth/Lear o	for the M	aily Data	III D
					VID 1	OHIOLI OH	COLAL PARTICIAL	Catheri mer		7.71.67		Taguina	IODDALLING	DI CALL

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



See Pages 4 for Instr				·			
General Information	for the Month/	Year of: Januar	y, 2005				
. Public Water System	(PWS) Informa	ition					
PWS Name:	Saratoga Harbor					PWS Identification Number:	2541008
PWS Type:	✓ Community	Non-Transient Non-Cor	nmunity T	ransient Non-Comi	munity	Consecutive	
Number of Service Connect	tions at End of Month	1: 47			Total	Population Served at End of N	Month: 117
PWS Owner:	Aqua Utilities Florid	la					
Contact Person:	Brian Heath				Conta	ct Person's Title:	Area Manager
Contact Person's Mailing A	ddress:	PO Box 490310			City: Leesburg	State: Florida	Zip Code: 34749
Contact Person's Telephone	Number:	(352) 787-0980			Conta	ct Person's Fax Number: (	352) 787-6333
Contact Person's E-Mail Ac	ldress:	beheath@aquaamerica	ı.com				
Water Treatment Pla	ant Information						
Plant Name:	Sarasota Harbor					Plant Telephone Number:	(352) 787-0980
Plant Address:	Gibbs Avenue				City: Satsuma	State: Florida	Zip Code: 32189
Type of Water Treatment by	y Plant:	✓ Raw Ground Water	Purchased Fin	ished Water			
Permitted Maximum Day O	perating Capacity of	Plant, gallons per day:		200,000	<u> </u>		
Plant Category (per subsect	ion 62-699.310(4), F.	A.C.):	IV		Plant C	lass (per subsection 62-699.3	10(4), F.A.C.): C
Licensed Operators		Name		License Class	License Number	Day(	s) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson			Α	7251	Days 1st Shift	
Other Operators:							
<u>-</u>							
á.							
**							
	· · · · · · · · · · · · · · · · · · ·						
Certification by Lead							
I, the undersigned wat	er treatment plant	t operator licensed in Flori	da, am the lead/chie	of operator of the	e water treatment p	olant identified in part I	of this report. I certify that the
information provided i	in this report is tr	ue and accurate to the best	of my knowledge a	nd belief. I cert	ify that all drinkin	g water treatment chemi	cals used at this plant conform to
NSF International Star	ndard 60 or other	applicable standards refer	enced in subsection	62-555.320(3),	F.A.C. I also cert	ify that the following ad	ditional operations records for thi
							chemicals used and chemical feed
							ords to the PWS owner so the PW
		pies of this report, at a cor					. +
owner can retain mem	, together with co	pies or tins report, at a cor	ivement ideation to	i ai icasi icii yea	10.		
			Paul Thomps	on			A7251

PWS Io	WS Identification Number: 2541008 Plant Name: Sarasota Harbor													
III. D	aily Data	for the N	lonth/Year	of:		January, 2005								
	•		g Virus Inactiv				Chlorine Di		C Ozone	<u></u>	: - 1 CH - :	- (CL)		
1	traviolet R	-	_	r (Describe):		morne j	Chiorine Di	oxide	Ozone	Com	oined Chlorin	ie (Chioran	nines)	
-									1011	(011 :		011 : 5		
Type o	of Disinfec	tant Resid	dual Maintai		ibution System:	▼ Free Chlo				(Chloramine		Chlorine I	Dioxide	
				C	T Calculations, or	UV Dose, to	Demostate I						1	
1						CT Calc	ulations		1.084		· UV I	Dose		
1							I CT		74.95 × 44.			200 m		
			1.2			Disinfectant	Lowest CT Provided		46.7 / VE	4				
	Days Plant				Lowest Residual	Contact Time	Before or at						Lowest Residual	네마다 하다 나를 하다 못했습니다. 좀 했다.
	Staffed or		Net Quantity		Disinfectant	(T) at C	First					Minimum	Disinfectant	그 회사 그 기반이 됐다고 있는 것이다.
l	Visited by		of Finished		Concentration (C)	Measurement	Customer			45.4	Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of	Operator		Water		Before or at First	Point During	During Peak			Minimum CT		Required,	Remote Point in	Conditions, Repair or Maintenance Work that
the	(Place	Saratoga	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water,	Required, mg	UV Dose,	mW-	Distribution	Involves Taking Water System Components
Month	"X")	Harbor	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
1		24.0	11,067											
2		24.0	11,067											
3	X	24.0	11,067		2.2					ļ			0.8	
4	X	24.0	8,000		2.4								1.6	
5	X	24.0	0.200		2.3		<u> </u>	<b></b>		<del> </del>			1.2	
7	X	24.0 24.0	8,300 8,300		2.2			ļ	ļ	<b></b>			0.7	
8		24.0	11,333		2.2		1	<u> </u>					0.7	
9		24.0	11,333				<u> </u>	<del> </del>		<u> </u>	<del>                                     </del>			
10	Х	24.0	11,333		2.0					<b></b>			0.7	
11	X	24.0	11,555		2.0								0.6	
12	Х	24.0	8,100		2.0		<del> </del>			·			0.6	
13	Х	24.0	8,100		1.6		İ						0.6	
14	Х	24.0	8,200		1.5								0.6	
15		24.0	8,533											
16		24.0	8,533											
17	Х	24.0	8,533		2.0								0.7	
18	X	24.0	7,900		2.0								0.8	
19	X	24.0	8,200		1.9		ļ		ļ	ļ			0.8	
20	X	24.0 24.0	7,500		1.5				<u> </u>				0.5	
22	_ ^	24.0	8,800 4,400		1.3				<b> </b> -	-			0,3	
23		24.0	4,400				<del>                                     </del>	<del> </del>	<del> </del>	<del> </del>		<u> </u>		
24	Х	24.0	4,400		1.9			<b></b>	<del> </del>	<del> </del>	<del>                                     </del>		0.8	
25	X	24.0	3,200		1.8			· · · · · · · · · · · · · · · · · · ·	<u> </u>				0.7	
26	X	24.0	8,000		1.8		l			<u> </u>	<del>                                     </del>		0.7	
27	Х	24.0	8,200		1.8								0.7	
28	Х	24.0	8,000		1.9							·	0.7	
29		24.0	8,167											
30		24.0	8,167											
31	X	24.0	8,167		1.8		<u></u>	L					0.7	
Total			239,300											
Avgerap	e		7,719	l										

11,333

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



See Pages 4 for Instr								
I. General Information	for the Month/Y	ear of: January, 2005						
A. Public Water System	(PWS) Informat	ion						
PWS Name:	Welaka Mobile Home					PWS Identification Number:	2541242	
PWS Type:	✓ Community	Non-Transient Non-Community	Т	ransient Non-Comr	munity	Consecutive		
Number of Service Connect	tions at End of Month:	96				Population Served at End of Mont	h: 237	
PWS Owner:	Aqua Utilities Florida	L					4"	
Contact Person:	Brian Heath				Cont	act Person's Title: Area	Manager	
Contact Person's Mailing A	ddress:	PO Box 490310			City: Leesburg	State: Florida	Zip Code:	34749
Contact Person's Telephone		(352) 787-0980	-		Cont	act Person's Fax Number: (352)	787-6333	
Contact Person's E-Mail Ad		beheath@aquaamerica.com						
B. Water Treatment Pla	ant Information							
Plant Name:	Welaka Mobile Home	Park				Plant Telephone Number:	(352) 787-0	980
Plant Address:	Hamilton Road				City: Satsuma	State: Florida	Zip Code:	32189
Type of Water Treatment by			Purchased Fin					
Permitted Maximum Day O				108,000				
Plant Category (per subsect	ion 62-699.310(4), F.A			1		Class (per subsection 62-699.310(4		V and A section
Licensed Operators		Name	<u> </u>	License Class	License Number		Shift(s) Worked	
Lead/Chief Operator:	Paul Thompson			A	7251	Days 1st Shift		
Other Operators:								
				-				
		<del></del>						
				<del>                                     </del>		<del> </del>		
						<u> </u>		
II Certification by Lead	I/Chief Operator							
I, the undersigned water	er treatment plant	operator licensed in Florida, am	the lead/chie	f operator of the	water treatment	plant identified in part I of the	his report. I certify	that the
information provided i	n this report is tru	e and accurate to the best of my	knowledge a	nd belief. I certi	ify that all drinkin	g water treatment chemicals	s used at this plant	conform to NSF
		able standards referenced in sub						
		perator staffed or visited this pla						
		rocess performance records. Fu						
		report, at a convenient location f			micor additional			
Table Williams	iai copies of this	oport, at a convenient location i	or at rought to	,				
			Paul Thompso	on			A7251	
Signature and Date			Printed or Typ				License Nu	mber

PWS Id	Identification Number: 2541242 Plant Name: Welaka Mobile Home Park  Daily Data for the Month/Year of: January, 2005													
III. D	ailv Data	for the M	lonth/Year	of:		January, 2005								
			g Virus Inactiv		/al: □ Eree C	hlorine [	Chli Di				. 1011 .	(0) 1	-:	
	raviolet R	-	-	r (Describe):	•	mornic [	Chiorine Di	oxide	Ozone	1 Comb	inea Chiorir	ie (Chioran	nines)	
<b>-</b>						<b>F</b> 5 CU	. –	C- 11	1.00	(Chloramine		Chlorine I		
Type o	Disinted	tant Kesic	luai Maintaii		ibution System:	Free Chlo							Dioxide	a spile constant from the constant
				<u>C</u>	T Calculations, or									
				3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			ulations		442	(y	∷ UV I			
							Lowest CT				4 7			
						Disinfectant	Provided							
	Days Plant				Lowest Residual	Contact Time	Before or at				15 - 1 3 - 1		Lowest Residual	
1	Staffed or		Net Quantity		Disinfectant	(T) at C	First					Minimum	Disinfectant	
	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	
Day of		Hours plant	Water		Before or at First	Point During	During Peak	т с		Minimum CT	Operating	Required,	Remote Point in	
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	1 emp of	pH of Water, if Applicable	Required, mg		mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation 24.0	gal. 13,070	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	water, C	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
2		24.0	13,070							ļ				
3	X	24.0	13,070		1.5					1			0.7	
4	Х	24.0	11,360		2.4					<b>†</b>	<u> </u>		1.2	
5	Х	24.0	11,030		2.0					<b></b>			1.0	
6	X	24.0	12,090		2.2								0.8	
7	X	24.0	10,910		2.2								0.8	
8		24.0	12,307											
9		24.0	12,307											
10	X	24.0	12,307		2.4				ļ				0.8	
11	X	24.0 24.0	8,970 12,750		2.3								0.7	
13	X	24.0	8,410		1.5				ļ		_		0.6	
14	X	24.0	15,680		1.2					<b>!</b>			0.5	
15		24.0	9,800		1.2	<u> </u>								
16		24.0	9,800										<u> </u>	
17	X	24.0	9,800		1.5								0.8	
18	X	24.0	11,680		2.0					]			1.0	
19	X	24.0	12,830		1.8								0.8	
20	X	24.0	9,210		1.8				ļ				0.7	
21	X	24.0	10,870		1.7								0.7	
22 23		24.0 24.0	10,753 10,753							1				
24	X	24.0	10,753		1.8					<del> </del>			0.8	
25	- X	24.0	6,210		2.0								1.0	
26	- X	24.0	24,050		1,8								0.8	
27	X	24.0	1,160		1.7					<b>†</b>			0.8	
28	X	24.0	8,580		1.8					İ			0.7	
29		24.0	10,280											
30		24.0	10,280											
31	xl	24.0	10,280		1.8								0.8	
Total	2000		344,420											

24,050

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



See Pages 4 for Instr								<del></del>
I. General Information	for the Month/	Year of: February, 2005						
A. Public Water System	(PWS) Informa	tion						
PWS Name:	Saratoga Harbor		***************************************			PWS Identification Number	er: 2541008	
PWS Type:	✓ Community	Non-Transient Non-Community	Т	ransient Non-Comr	munity	Consecutive		
Number of Service Connect	tions at End of Month	50		· · · · · · · · · · · · · · · · · · ·		Population Served at End of	Month: 175	
PWS Owner:	Aqua Utilities Florid	a						
Contact Person:	Brian Heath				Conta	ct Person's Title:	Area Manager	
Contact Person's Mailing A	ddress:	PO Box 490310			City: Leesburg	State: Florida	Zip Code:	34749
Contact Person's Telephone	Number:	(352) 787-0980			Conta	ct Person's Fax Number:	(352) 787-6333	
Contact Person's E-Mail Ac	ldress:	beheath@aquaamerica.com						
B. Water Treatment Pla	ant Information							
Plant Name:	Sarasota Harbor					Plant Telephone Number:	(352) 787-	-0980
Plant Address:	Gibbs Avenue				City: Satsuma	State: Florida	Zip Code:	32189
Type of Water Treatment by	y Plant:	✓ Raw Ground Water F	Purchased Fini	shed Water				
Permitted Maximum Day C	perating Capacity of	Plant, gallons per day:		200,000				
Plant Category (per subsect	ion 62-699.310(4), F.	A.C.): IV			Plant C	lass (per subsection 62-699.		
Licensed Operators	thus the factor	Name		License Class	License Number	Day	(s) / Shift(s) Worked	
Lead/Chief Operator:	Paul Thompson			A	7251	Days 1st Shift		
Other Operators:								
*								
			-					
الله الله الله الله الله الله الله الله								
A								
		·						
		-						
I Certification by Lead					•			
_	-	operator licensed in Florida, am t		-			=	-
information provided i	in this report is tru	ue and accurate to the best of my k	mowledge a	nd belief. I certi	ify that all drinking	g water treatment chem	nicals used at this plan	t conform to
NSF International Star	ndard 60 or other	applicable standards referenced in	subsection	62-555.320(3),	F.A.C. I also certi	ify that the following a	dditional operations re	cords for this
plant were prepared ea	ach day that a lice	nsed operator staffed or visited the	is plant duri	ng the month inc	dicated above: (1)	records of amounts of	chemicals used and cl	nemical feed
	•	treatment process performance rec	•	-				
		pies of this report, at a convenient						· <del>-</del>
o nor oun rotain thom	, together with co	pros or and report, at a convenient	. Iooution for	at loast ton you				
			Paul Thompso	nn			A7251	
Signature and Date			Printed or Tyr	·	<del></del>		License N	umber
organical date			Tranca or Typ	ou rame			Electise IV	w

PWS I	lentification	Number:		2541008		Plant Name:	Sarasota Ha	rbor						
III. D	aily Data	for the N	lonth/Year	of:	-	February, 2005								
$\overline{}$			g Virus Inactiv			hlorine [		and da	C Ozono		ined Chlori	no (Chloror	ninos)	
	traviolet R		-	r (Describe):		morate	Chlorine Di	oxide	OZORE	1 Comb	inea Chori	ne (Cinoran	illies)	
<b>-</b>						<b>—</b> — — — — — — — — — — — — — — — — — —	· –	. C1:-	- 1 Ch1	(Chloramine	\	Chlorine I	Name de	
Type	of Disinfec	tant Resid	lual Maintaii		ibution System:	Free Chlo							Jioxide	
l				C	T Calculations, or					tivation, if A				
							ulations		. 107		UV	Dose		
1							Lowest CT							
l						Disinfectant	Provided							
	Days Plant				Lowest Residual	Contact Time	Before or at		E.				Lowest Residual	
	Staffed or	- Saire	Net Quantity		Disinfectant	(T) at C	First					Minimum	Disinfectant	
	Visited by		of Finished		Concentration (C)	Measurement	Customer			l u v a ±i	Lowest	UV Dose	Concentration at	
Day of		1.00	Water		Before or at First	Point During	During Peak			Minimum CT	Operating	Required,		Conditions, Repair or Maintenance Work that
the	(Place	Saratoga	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water	Required, mg	UV Dose,	mW-	the state of the s	Involves Taking Water System Components
Month	"X")	Harbor	gal.	Rate, gpd.	Peak Flow, mg/L	:minutes 3.5	min/L	Water, 'C	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
1	X	24.0			1.7				<del> </del>			ļ	0.8	
3	X	24.0 24.0	8,500		1.8		<u> </u>	-	<del> </del>	<b> </b>		-	0.7	
4	X	24.0	7,900 8,200		2.0			<u> </u>	<del> </del>	}	<del></del> -	ļ	0.8	
5	1	24.0	8,433		2.0				<del>                                     </del>				0.8	
6	<del>  </del>	24.0	8,433			······································			<del>                                     </del>	1				
7	X	24.0	8,433	-	1.8			t	<u> </u>	<u> </u>			0.6	
8	Х	24.0	7,800		2.0				<u> </u>	· · · · · · · · · · · · · · · · · · ·	1000	<u> </u>	1.2	
9	Х	24.0	8,000		1.8			1	<u> </u>				1.0	
10	Х	24.0			2.0				1				1.1	
11	Х	24.0	16,000		1.8								1.0	
12		24.0	8,400											
13	<b>.</b>	24.0	8,400											
14	X	24.0	8,400		1.8		ļ						0.8	
15	X	24.0	8,100		2.0				-			ļ	0.8	
17	X	24.0 24.0	8,300		1.8					<b>.</b>			1,0	
18	$\frac{\lambda}{x}$	24.0	8,300		1.8		-		<u> </u>				0.7	
19	<del>  ^  </del>	24.0	8,267		1.0			<del> </del>	<del> </del>	<del> </del>		<b>-</b>		
20		24.0	8,267					<del>                                     </del>	<del> </del>					
21.	Х	24.0	8,267		1.8				<u> </u>	<del>                                     </del>		† · · · · · · · · · · · · · · · · · · ·	0.8	
22	Х	24.0	8,600		1.8								0.7	
23	Х	24.0	7,900		1.8								0.7	
24	Х	24.0	8,600		2.0								0.9	
25	Х	24.0	8,300		2.2								0.9	
26		24.0	5,633					ļ			ļ. <u> </u>			
27	ļ	24.0	5,633							<b>_</b>			ļ	
28	Х	24.0	5,633		2.1		ļ	ļ	1		ļ	<b> </b>	0.9	<u> </u>
30		24.0						<del>                                     </del>	<del> </del>	<del> </del>		<del> </del>	<del> </del>	
31		24.0		-			ļ	<b> </b>	<del> </del>	1	<del></del>	<del> </del>	<del>                                     </del>	
Total		24.0	206,700				L	<u> </u>		1	l	L	<u> </u>	1
	e.4		6,668											
Maximu			16.000											

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

DEP Form 62-555-900(3)Alternate



See Pages 4 for Instr					-				
I. General Information	for the Month/	Year of: February, 2005							
A. Public Water System	ı (PWS) Informa	ntion							
PWS Name:	Welaka Mobile Hom					PWS Identificati	on Number:	2541242	
PWS Type:	✓ Community	Non-Transient Non-Community	Tr	ansient Non-Comi	munity	Consecutive			
Number of Service Connect	tions at End of Month	1: 108		**	Т	otal Population Served	at End of Month:	324	
PWS Owner:	Aqua Utilities Florid	la				· · · · · · · · · · · · · · · · · · ·			
Contact Person:	Brian Heath				C	Contact Person's Title:	Area N	1anager	
Contact Person's Mailing A	.ddress:	PO Box 490310			City: Leesburg	State: Florida		Zip Code:	34749
Contact Person's Telephone	: Number:	(352) 787-0980			C	Contact Person's Fax Nu	umber: (352)	787-6333	
Contact Person's E-Mail Ad	idress:	beheath@aquaamerica.com							
B. Water Treatment Pla	ant Information								_
Plant Name:	Welaka Mobile Hom	ne Park				Plant Telephone	Number:	(352) 787-09	180
Plant Address:	Hamilton Road				City: Satsuma	State: Florida		Zip Code:	32189
Type of Water Treatment by	<del>,</del>		Purchased Fini	·····					
Permitted Maximum Day O				108,000					
Plant Category (per subsect		<del></del>				ant Class (per subsection			
Licensed Operators		Name		License Class	License Num	iber	Day(s)/S	Shift(s) Worked	
Lead/Chief Operator:	Paul Thompson			A	7251	Days 1st Shift			
Other Operators:									
to the Smelley Company of the Same Same Same Same Same Same Same Sam									
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- 10 mg	<u> </u>								
I Certification by Lead	I/Chief Operato	r							
		t operator licensed in Florida, am t	ha laad/ahia	f amount or of the	water treatme	ent mlant identified	in nort Lafthi	a ranget Lagetify	that the
	-			•		-	-	•	
		ue and accurate to the best of my k							
		cable standards referenced in subs							
		operator staffed or visited this plan	-						
	•	process performance records. Fur	-		these addition	al operations reco	rds to the PWS	S owner so the PW	/S owner can
retain them, together w	vith copies of this	report, at a convenient location for	or at least ten	ı years.					
			Paul Thompso	n				A7251	
Signature and Date			Printed or Typ	ed Name				License Nun	ıber

Plant Name: Welaka Mobile Home Park

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					ļ <u> </u>							24.0	<u> </u>	56
	7.0		<u> </u>						2.0		10,303	24.0	X	87
											£0£,01	24.0		LZ
											£0£,01	24.0		97
	L'0	<u> </u>							8.I		050'01	24.0	X	57
	9.0								8.I		12,340	24.0	X	74.
	8.0					L			0.2		7,120	24.0	X	23
	8.0								8.I		15,370	74.0	X	77
	۲0								8 I		750,11	24.0	X	1.7
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	0.1								8.1		11,240	24.0	X	.91
	0.1								1.2		017'6	74.0	X	SI
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	1.0								8.1		12,770	24.0	Х	П
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	L'0	-	ĺ						8.I		072,11	24.0	Х	ζ
	9.0								S.I		015,6	0.42	Х	I
Outof Operation,	System, mg/L	zwo/oos	mW-sectom <sup>2</sup>	1\nim	oldsoilqqA Ii	Water, °C	J\nun	munges	Peak Flow, mg/L	Rate, gpd	[हर्ष	Operation	("X.,	Month
Involves Taking Water System Components	nonudrusiQ	-Wm		Required, mg	, Totaw To Hq	to duiet	-gm ,wol4	Peak Flow,	Customer During	Peak Flow	Producted,	uı	(Place	эцз
Conditions, Repair of Maintenance Work that	Remote Point in	Required		Minimum CT			During Peak	Point During	Before or at First			Hours plant		Гау об
CHICLEGICS OF ACTION OF CHICLES	Concentration at	UV Dose	Lowest	n / El Televi Egge op bet			Customer	Measurement	Concentration (C)		of Finished		Visited by	_
	Disinfectant	mminiM		9500000	4.5		First	OM (T)	Disinfectant		Net Quantity		Staffed or	
	Lowest Residual		1122038				Before or at	Contact Time	Lowest Residual				Days Plant	
						3	Provided	Disinfectant						
			生光学表演				Lowest CT					<b>.</b>		.
					4.000			1971年1971年			<b>有效</b>			.
		980(	IAN		STOP TO		snotisli	CI Calci	1.0					
									T Calculations, or	)				
The control of the co	ODDO:										ממו וגופווונקוו	NICONI MIRO	20111162-7	20061
	ahixoi	Chlorine D	<u></u>	(Chloramine	eginold') be	midmo?		№ Free Chlor	ibution System:			hise A trist	vatnisi(I)	2 anvT
										r (Describe):			Raviolet R	
	(sənir	e (Chloran	ined Chlorir	L Comb	əuozO 🔟	əbixo	Chlorine Die	hlorine	od: 🔽 Free C	vorison/Remov	virus Inactiv	ig Four-Log	имэінэА 10	Means
			<del> </del>					Ревгиагу, 2005			neo'/\dino			
								Pabener 200c		.,,,,	-noo Whitan	or ordered	atoff wite	उ ॥।

2541242

PWS Identification Number:

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



See	Pages	4	for	Instructions.

See Pages 4 for Insti								
. General Information	n for the Month	Year of: March, 2005						
A. Public Water Systen	n (PWS) Inform	ation						
PWS Name:	Saratoga Harbor				· · · · · · · · · · · · · · · · · · ·	PWS Identification Number:	2541008	
PWS Type:	✓ Community	Non-Transient Non-Communit	у	Fransient Non-Comi	munity	Consecutive		
Number of Service Connec	<u>.</u>				<del></del>	otal Population Served at End of Month:	175	
PWS Owner:	Aqua Utilities Flor							
Contact Person:	Brian Heath				C	ontact Person's Title: Area Ma	nager	
Contact Person's Mailing A	Address:	PO Box 490310			City: Leesburg	State: Florida	Zip Code:	34749
Contact Person's Telephon	e Number:	(352) 787-0980			C	ontact Person's Fax Number: (352) 78	7-6333	
Contact Person's E-Mail A	ddress:	beheath@aquaamerica.com						
8. Water Treatment Pl	lant Information	1						
Plant Name:	Sarasota Harbor					Plant Telephone Number:	(352) 787-09	
Plant Address:	Gibbs Avenue				City: Satsuma	State: Florida	Zip Code:	32189
Type of Water Treatment b		Raw Ground Water	Purchased Fir					
Permitted Maximum Day (				200,000	,			
Plant Category (per subsec				· 1· · · · · · · · · · · · · · · · · ·		nt Class (per subsection 62-699.310(4), F.		et es estat
Licensed Operators		Name		License Class	<del></del>	ber Day(s) 7 Shi	itt(s) Worked	<u> </u>
Lead/Chief Operator:	Paul Thompson			Α	7251	Days 1st Shift		
Other Operators:								
	<u> </u>							
	1							
and the second of the				<u> </u>				
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	<u> </u>			<del></del>				
The second of the second of the second	1			<u> </u>	I			· · · · · · · · · · · · · · · · · · ·
I Certification by Lea	d/Chief Operat	or						
			the lead/chi	ef operator of the	e water treatme	nt plant identified in part I of this	report. I certify	that the
						king water treatment chemicals us		
NSF International Sta	ndard 60 or othe	er applicable standards referenced	in subsection	62-555 320(3)	FAC Lalso	certify that the following additional	d operations reco	ords for this
						(1) records of amounts of chemic		
						e additional operations records to		
						se additional operations records to	the rws owner	so the r ws
owner can retain them	n, together with c	copies of this report, at a convenience	nt location fo	or at least ten yea	rs.			
			Paul Thomps	son			A7251	
Signature and Date			Printed or Ty				License Num	nber
- C			,	•				

PWS I	lentification	Number:		2541008		Plant Name:	Sarasota Ha	ьог	-					
	aily Data	for the N	lonth/Year	of:		March, 2005								
			Virus Inactiv		ral: <b>▼</b> Free C		Chlorine Di	. ,				461.1		
1	traviolet Ra		Other		•	morme	Chiorine Di	oxide	1 Ozone	Comb	ined Chlori	ne (Cnioran	nines)	
⊢'									1.011	(CI)		Chlorine I	N	
Type o	of Disinfec	tant Resid	lual Maintaii		ibution System:	Free Chlo				(Chloramine			noxide	9
	1				T Calculations, or			our-Log	Virus Inac	tivation, if				
	i					CT Calc	ulations				· · · · UV	Dose:		
							Lowest CT				土 生活一种		±	
				2.5		Disinfectant	Provided				1947,至漢	22.00		
1	Days Plant				Lowest Residual	Contact Time	Before or at						Lowest Residual	[19] [18] - [18]
]	Staffed or		Net Quantity		Disinfectant	(T) at C	First					Minimum	Disinfectant	
	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of	Operator		Water		Before or at First	Point During	During Peak	Town of		Minimum CT		Required, mW-	Remote Point in	Conditions, Repair or Maintenance Work that
the Month	(Place "X")	Saratoga Harbor	Producted, gal.	Peak Flow Rate, gpd.	Customer During Peak Flow, mg/L	Peak Flow, minutes	Flow, mg- min/L	Water OC	if Applicable	Required, mg min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	Distribution System, mg/L	Involves Taking Water System Components Out of Operation
1	X	24.0	8,500	Nate, gpu.	1.9	imilates	IIIIVL	water, C	п дррисавіс	HIMPLE	III W-SCOTCIII	Secrem	0.7	Out of Operation
2	X	24.0	7,800		2.1								0.7	
3	Х	24.0	, <u>,</u>		2.0								0.9	
4	Х	24.0	8,400		1,9								0.7	
5		24.0	11,400											
6		24.0	11,400											
7	X	24.0	11,400		1.8			ļ		ļ			0.7	
8	X	24.0	8,000 8,700		1.9								0.8	
10	X	24.0	8,700		1.8			<b>!</b>					0.8	
11	X	24.0	8,000		1.8	_					<u> </u>		0.8	
12		24.0	11,333											
13		24.0	11,333											
14	X	24.0	11,333		1.6								0.8	
15	Х	24.0	8,400		1.8								0.7	
16	X	24.0	8,200		1.8								0.8	
17	X	24.0 24.0	8 200		1.7		<u> </u>						0.6	
19	-^-	24.0	8,200 8,500		1.7		<del> </del>		-				0.6	
20		24.0	8,500			~			<del>                                     </del>	<del>                                     </del>	· ·			
21	х	24.0	8,500		1.7								0.7	
22	Х	24.0	7,800		1.6		•						0.5	
23	X	24.0	4,300		1.7								0.7	
24	Х	24.0	4,000		2.0					ļ			0.8	
25	X	24.0	7,700		1.7					<del></del>		ļ	0.6	
26		24.0 24.0	8,100 8,100						-	-	<del> </del>	<u> </u>		
28	Х	24.0	8,100		1.7			<del> </del>	<del> </del>		<del>                                     </del>	<del> </del>	0.9	
29	X	24.0	8,200		1.8							<del>                                     </del>	1.0	
30	X	24.0	8,000	,	1.5								0.7	
31	Х	24.0	8,300		1.5								0.8	
Total	W Lay	14 D A C C C	240,500									· · · · · · · · · · · · · · · · · · ·		
Avgerag			7,758											
Maximu	m	6 1	11,400											

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



See Pages 4 for Instr	uctions.							
l. General Information	for the Month/Y	ear of: Ma	rch, 2005					
A. Public Water System	(PWS) Informat	tion						
PWS Name:	Welaka Mobile Home						PWS Identification Number:	2541242
PWS Type:	✓ Community	Non-Transient Non	-Community	T	ransient Non-Comi	munity	Consecutive	
Number of Service Connect		108					Total Population Served at End of Month:	324
PWS Owner:	Aqua Utilities Florida	l					Total Topolation Served at Esta of Monat.	
Contact Person:	Brian Heath	·				10	Contact Person's Title: Area M	lanager
Contact Person's Mailing A	ddress:	PO Box 490310				City: Leesburg		Zip Code: 34749
Contact Person's Telephone	Number:	(352) 787-0980				<u> </u>	~ <del> </del>	787-6333
Contact Person's E-Mail Ad	ldress	beheath@aquaamer	rica.com			L		
3. Water Treatment Pla	ant Information							
Plant Name:	Welaka Mobile Home	e Park					Plant Telephone Number:	(352) 787-0980
Plant Address:	Hamilton Road					City: Satsuma	State: Florida	Zip Code: 32189
Type of Water Treatment by	<u> </u>	✓ Raw Ground Water	☐ P	urchased Fini	shed Water			
Permitted Maximum Day O					108,000			
Plant Category (per subsect	ion 62-699.310(4), F.A	N.C.):	V			Pl	lant Class (per subsection 62-699.310(4),	F.A.C.): D
Licensed Operators		Name			License Class	License Nun	nber Day(s) / S	Shift(s) Worked
Lead/Chief Operator:	Paul Thompson				A	7251	Days 1st Shift	
Other Operators:	-							
								•
I Certification by Lead	/Chief Operator							
			المستعلم المشام		C C -1		. 1 . 1	I Code de
							ent plant identified in part I of this	
							nking water treatment chemicals u	
							fy that the following additional op	
were prepared each day	y that a licensed o	perator staffed or visit	ed this plan	t during the	month indicated	d above: (1) r	records of amounts of chemicals u	sed and chemical feed rates; and
(2) if applicable, appro	priate treatment p	rocess performance re	cords. Furt	hermore, I a	agree to provide	these addition	nal operations records to the PWS	owner so the PWS owner can
retain them, together w	ith copies of this	report, at a convenient	location for	r at least ten	years.			
				Paul Thompso	n			A7251
Signature and Date			-					A7251
Signature and Date				Printed or Typ	ed Name			License Number

Welaka Mobile Home Park

Plant Name:

											088.71			mmixeM
											016,6			gsrigyA
											307,210		-	- lsto l
	6.01								91		05 <del>1</del> '6	0.42	T x	18
	1.2		<u> </u>						S.I		8,310	24.0	X	30
	6.0			1			†		£.1		00£,8	0.42	X	67
	0.1								91		051'6	0.42	X	82
	<u> </u>		<u> </u>	<del>                                     </del>			<del> </del>				051'6	24.0	<del> </del>	LZ
			<del>                                     </del>	<b>.</b>							051'6	24.0	<del> </del>	97
	0.1			1				<del></del>	9.1		000,6	24.0	X	52
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			<u> </u>	<del> </del>			<del>                                     </del>		9'1	1	091'6	24.0	X	
	T.0			<del> </del>			<del> </del>		<del> </del>	<del> </del>	<del></del>		X	73
	Γ.0		ļ	<del>                                     </del>			<b>_</b>		5.1	ļ	10,320	0.4.0		77
	9.0			ļ			<u> </u>		£.1		061,01	0.4.0	X	17
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							<b></b>			ļ	061,01	24.0		61
	8.0		ļ	<b> </b>			L	<u> </u>	9.1	<b> </b>	095,8	0.42	X	81
	T.0						<b>!</b>		8.1	ļ	016,8	0.42	X	LI
	r.0						ļ	ļ	9'1	<b></b>	051,8	24.0	X	91
	2.0								5.1		0+9'L	24.0	X	51
	0.1			<u> </u>					2.5		082,6	0.42	X	14
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											082,6	24.0		71
	9.0								<i>L</i> '1		17,880	24.0	Х	П
	S.I	1							3.0		12,630	24.0	X	01.
	8.0			1					LI		072,6	0.42	Х	6
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	2.0								91		052,7	0.42	Х	٤
	8.0						<del>                                     </del>	<u> </u>	61		0446	0.42	Х	7
	8.0			T					0.2	-	010,21	24.0	Х	I
Out of Operation	System, mg/L	sec/cm <sup>2</sup>	my-sec/cm	J/nim	əldsəilqqA li	Waler, C		səmurtu	Peak Flow, mg/L	Rate, gpd	हिन	Operation	("X"	Month
Involves Taking Water System Components	noindinsia	-Wm		Required, mg	pH of Waler,	rempor	-8m ,wol4	Peak Flow,	Customer During	Peak Flow	Producted,	uı	Place	əųı
Conditions; Repair or Maintenance Work that		Required,		Minimum CT		30 41401	During Peak	Point During	Before or at First		Water	Hours plant		Гау об
Emergency or Abnormal Operating	Concentration at	Donicod IV Dose	Lowest				Customer	Measurement	Concentration (C)		bədzini To		Visited by	, u
	Disinfectant		touro I				121iT	O18 (T)	Disinfectant		Net Quantity		Staffed or	
	TOMOST ICSUROR	muminiM				áju – Ž	Before or at	Contact Time	Lowest Residual				Days Plant	
		1	1	1			Provided	Disinfectant	1				, Id - G	
							Lowest CT						}	
		əsog	. OAD			<b>1</b>	snotiali	US Calcu						
		F 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	pplicable*	A II , noits vi	Virus Inaci	go.l-nuo	)emostate F	UV Dose, to L	T Calculations, or	$\mathfrak{I}$				
	opport.			·					pntion System:		HEJHIRIAL IRD	יימונו עכצום	TAISIIII CO	o adki
	abixoi	Chlorine D	<u>'</u>	Chloramines	egizold') be									_
											∟ оғры		raviolet Ra	
	(səui	e (Chloram	ned Chlorin	idmoD 🗍	əuozO 📙	əbixo	Ohlorine Dio	alorine —	al: 🔽 Free Cl	ation/Remov	Virus Inactiv	god-no9 ga	of Achievir	Means
								March, 2005		;10	onth/Year o	TOP THE IVE	any Data	a uu
I								2000 1 1						

7241747

PWS Identification Number:

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



See Pages 4 for Instr								
. General Information	for the Month/	Year of: April, 2005						
A. Public Water System	(PWS) Informa	ation						
PWS Name:	Saratoga Harbor					PWS Identification Number:	2541008	
PWS Type:	✓ Community	Non-Transient Non-Commur	nityT	ransient Non-Comr	nunity	Consecutive		
Number of Service Connect	tions at End of Montl	h: 50			Total F	Population Served at End of Mo	onth: 175	
PWS Owner:	Aqua Utilities Florid	da		-,				
Contact Person:	Brian Heath				Contac	et Person's Title: Ar	ea Manager	
Contact Person's Mailing A	ddress:	PO Box 490310			City: Leesburg	State: Florida	Zip Code:	34749
Contact Person's Telephone		(352) 787-0980			Contac	et Person's Fax Number: (3:	52) 787-6333	
Contact Person's E-Mail Ac		beheath@aquaamerica.cor	<u>m</u>					
B. Water Treatment Pla	ant Information							
Plant Name:	Sarasota Harbor					Plant Telephone Number:	(352) 787-09	980
Plant Address:	Gibbs Avenue				City: Satsuma	State: Florida	Zip Code:	32189
Type of Water Treatment by	·	✓ Raw Ground Water	Purchased Fin	ished Water	·			
Permitted Maximum Day C	<u> </u>			200,000				
Plant Category (per subsect	ion 62-699.310(4), F					lass (per subsection 62-699.310		
Licensed Operators	20 T T	Name	general and the	License Class	License Number	Day(s)	/Shift(s) Worked	Alah Santa
Lead/Chief Operator:				С	7082	Days 1st Shift		
Other Operators:	Paul Thompson			A	7251	Days 1st Shift		
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				<u> </u>			<u> </u>	
1 Certification by Leac	I/Chief Operate							
			41 1 1/-1.	- C C - L C - L		land identified in most Lot	Ethia manant Laartifu	that the
		t operator licensed in Florida, a						
		rue and accurate to the best of n						
		applicable standards reference						
		ensed operator staffed or visited						
		treatment process performance			•	dditional operations recor	rds to the PWS owner	r so the PWS
owner can retain them	, together with co	opies of this report, at a conven	ient location for	r at least ten year	rs.			
			Larry White				C7082	
Signature and Date			Printed or Ty	ned Name		· · · · · · · · · · · · · · · · · · ·	License Nur	mher
orgnature and Date			rance of Ty	реи глание		•	License (vui	

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											698°L		2.0	vgerage.
											243,933		- Y	
	*****							I				74.0	T	18
											11,233	24.0	<u> </u>	30
	2.0								5.1		000,8	24.0	X	67
	9.0								€.1		001,8	24.0	X	82
	7.0								£.1	·	004,8	24.0	X	77
	9.0					-			2.1		000,8	24.0	X	97
	9.0								£.1		££8,8	24.0	X	52
	70										££8,8	24.0	<u> </u>	74
								<u> </u>			££8,8	24.0	<u> </u>	52
	7.0			· · · · · · · · · · · · · · · · · · ·					L'I		002,8	24.0	X	77
	6.0								8.1		008,6	24.0	X	17
	L'0								6.1	·	008,8	24.0	X	02
			<b></b>						1.2		10038	24.0	X	
	6.0							}	†'I		11,267	24.0	X	61 81
	70							<del> </del>	F 1		795,11	0.42	<del>  ^</del>	21 21
			ļ								192,11	0.42	<del> </del>	91
	(:0		ļ					<del> </del>	9.1		000'8	0.42	x	- 91 - 51
	8.0 7.0		ļ	ļ	ļ			<del> </del>	L'1		008°L	24.0	X	-
					<u> </u>				<del> </del>		000,8	24.0	<u> </u>	71
	9.0								S'1		006'L		X	13
	8.0								S'1			0.42	X	71
	5.0	ļ							9.1		001,8	0.4.0	X	H
											001,8	0.12		10
									0:7		001,8	0.4.0	<del> </del>	6
	6'0								2.0		000,8	0.4.0	X	8
	L'0						<u> </u>		6.1		002,8	24.0	X	· L
	8.0								LI			24.0	X	9
	T.0								L'I		8,100	24.0	X	ς
	€.0						ļ . <del> </del>		8.0		££†'I	24.0	X	Þ
							ļ				1,433	24.0	<b></b>	ε
		ļ	<b>!</b>								1,433	24.0		7
	9.0								£.1		002,82	24.0	X	1
s wonsied Operation	System, mg/L	sec/cm <sup>2</sup>	my-sec/cm	1 J/nim	eldsoilqqA li	Water, <sup>o</sup> C	J\nim	səinnim	Peak Flow, mg/L	Rate, gpd.	Esl	Нагрог	("X"	dtnoM
Involves Taking Water System Components	noitudinteiQ	-Mm	'asoct A O	Required, mg	pH of Water,	Temp of	Flow, mg-	Peak Flow,	Customer During	Peak Flow	Producted,	Saratoga	(Place	the
Conditions, Repair or Maintenance Work that	Remote Point in	Required,	Operating	Minimum CT			During Peak	Point During	Before or at First	Major K. Ali	Water		Орегатог	Day of
Emergency of Approximat Operating	Concentration at	UV Dose	TOMOSI				Customer	Measurement	Concentration (C)		bedsinid to		Visited by	
	Disinfectant			销售 代於			First	O is (T)	Disinfectant		Net Quantity		Staffed or	l
		muminiM		MARINE							Tailor O told			l
MCT MILE TO THE TOTAL THE	Lowest Residual		10 1 A 1 A 1 A 1 A	War and the			Before or at	Contact Time	Lowest Residual			i	Days Plant	1
A THE SECTION ASSESSMENT			19. 海通空道				Provided	Disinfectant			I			I
							Lowest CT		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
		14.14	事 表示器			and the second								
Emergency or Abnormal Operating	100		1 VU	等·第一:会会										ŀ
		- 11-11-12	ypplicable*	Yation, it	Virus Inact	307-ino	Demostate F	UV Dose, to L	T Calculations, or	$\overline{\mathfrak{I}}$				
	2DIXOL							<del></del>			HEMHENAL TEN	<b>n</b> isora naze	anusia:	o adki
	abixoi	Chlorine D	<u> </u>	egimenold)	, ouisold ) be			Free Chlos						
				_						:(ədri ente)	्रमाल ः	5	2 / K = 12	1
	(səni.	msroidD) s	nino!d? som	стоЭ		-MC (4)	or <b>G</b> oracle	. ar 116		COMES IN THE	underge in a	70 julius 1	the second	
			August 1	Line of the distance of				100		the sales		11 - 15 - 15 - 15 - 15 - 15 - 15 - 15 -		t a sacras à l
						90%	wH etopolies,	Sur Vame	1	2541008		Number	notissition	PLSMe

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

Page 2



A. Public Water System (PWS) Information
PWS Name:       Welaka Mobile Home Park       PWS Identification Number:       2541242         PWS Type:       ✓ Community       Non-Transient Non-Community       Consecutive
PWS Name:     Welaka Mobile Home Park     PWS Identification Number:     2541242       PWS Type:        ✓ Community      Non-Transient Non-Community      Transient Non-Community      Consecutive
PWS Type:
PWS Owner: Aqua Utilities Florida
Contact Person: Brian Heath Contact Person's Title: Area Manager
Contact Person's Mailing Address: PO Box 490310 City: Leesburg State: Florida Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980 Contact Person's Fax Number: (352) 787-6333
Contact Person's E-Mail Address: beheath@aquaamerica.com
B. Water Treatment Plant Information
Plant Name: Welaka Mobile Home Park Plant Telephone Number: (352) 787-0980
Plant Address: Hamilton Road City: Satsuma State: Florida Zip Code: 32189
Type of Water Treatment by Plant:
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 108,000
Plant Category (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): D
Licensed Operators Name License Class License Number Day(s) 7 Shift(s) Worked
Lead/Chief Operator: Larry White C 7082 Days 1st Shift
Other Operators: Paul Thompson A 7251 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
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 p
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 rate
(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
retain them, together with copies of this report, at a convenient location for at least ten years.
Larry White C7082
Signature and Date Printed or Typed Name License Number

PWS I	lentification	n Number:		2541242		Plant Name:	Walaka Mol	oile Home	Park	NAD AAV				
		71								y-, base 4-				
247					10 Miles - Control - Contr								A.A	
					91. <b>V</b> 1.255.	imb bo :	tine Di	oxade	F Ozone	Comb	omed Chloru	ne (Chloran	nines)	
			(Tothe										<del></del>	
Тура:	a Latinfer	itaat Resid	lual Maintai	ned in Distr	ibution System:	Free Chlo	rine [	Combin	ned Chlorine	(Chloramine	es) $\Gamma$	Chlorine I	Dioxide	
				C	T Calculations, or	UV Dose, to	Demostate l	Four-Log	Virus Inac	tivation, if	Applicable <sup>4</sup>	4.4		
					The state of the s			1.50	Sec. 10.00		NOT STATE			
							Lowest CT	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			¥			
	Days Plant			1. 1 July 1	Lowest Residual	Disinfectant	Provided		Alga Athening			Art Alleria		[
	Staffed or		Net Quantity		Disinfectant	Contact Time (T) at C	Before or at First					Minimum	Lowest Residual Disinfectant	
	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Dibinicounit.	Emergency or Abnormal Operating
Day of		Hours plant			Before or at First	Point During	During Peak			Minimum CT	<ul><li>株理製作とし、日、日、春味・</li></ul>	Required,	- Controlled to the	Conditions; Repair or Maintenance Work that
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-			Required, mg		mW-	Distribution	Involves Taking Water System Components
Month	`"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
l	Х	24.0	9,680		1.5								1.0	
2		24.0	8,767											
3		24.0	8,767											
4	Х	24.0	8,767		1.8								1.2	
5	X	24.0	9,920		1.6			ļ <u>.</u>					1.1	
7	X	24.0	8,250		1.6				ļ	<u> </u>		ļ	1.1	
8	X	24.0	9,810		1.7					ļ			1.0	
9	X	24.0 24.0	7,880		1.6			ļ					1.1	,
10		24.0	9,467 9,467				<b> </b>		ļ					
11	X	24.0	9,467		1.5		<b></b>		<del> </del>				0.9	
12	X	24.0	8,830		3.5			<u> </u>	<del> </del>	<del> </del>		ļ	2.1	
13	X	24.0	9,690		1.4		<del> </del>	ļ		1			1.2	
14	X	24.0	8,280		1.6					1			1.0	
15	Х	24.0	8,470		1.6	- /			<b></b>				1.2	
16		24.0	9,690				· · · · · · · · · · · · · · · · · · ·							
17.		24.0	9,690											
18	X	24.0	9,690		1.3								1.0	
19	X	24.0	10,470		1.7								1.4	
20	X	24.0	11,370		1.8								1.2	
21	X	24.0	7,630		1.4					ļ	ļ	ļ	1.0	
22	X	24.0	11,330		1.3								0.9	
23		24.0	13,973	ļ							ļ			
25	<del>- ,  </del>	24.0 24.0	13,973			· · · · · · · · · · · · · · · · · · ·		ļ. <u>.                                   </u>			ļ			(Anti-Carlo
26	X	24.0	13,973 11,390		1.5								0.9	
27.	$\frac{\hat{x}}{x}$	24.0	15,190		1.7			<b></b>			<del> </del>		1.0	
28	$\frac{\hat{x}}{x}$	24.0	14,520		1.7								0.9	
29	$\frac{\lambda}{x}$	24.0	13,510		1.5				<del>                                     </del>	<del> </del>			1.1	
30	<del></del>	24.0	14,519		1.3	<del></del>				<del>                                     </del>	<b> </b>		,.,	
31		24.0	7-, 7-, 7-,							<del>                                     </del>				
Total	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	115 88 44	316,429				·		<u> </u>	•		·	1	
Avgerag			10,207											
Marrian			15 100											

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

15,190



See Pages 4 for Instr	uctions.						
I. General Information	for the Month/\	fear of: May, 2005					
A. Public Water System	ı (PWS) Informa	tion					
PWS Name:	Saratoga Harbor					PWS Identification Number:	2541008
PWS Type:	✓ Community	Non-Transient Non-Commu	inity T	ransient Non-Comr	nunity	Consecutive	
Number of Service Connec	tions at End of Month	: 50		<del></del>	<del></del>	Population Served at End of Mon	nth: 175
PWS Owner:	Aqua Utilities Florid	a					
Contact Person:	Brian Heath				Conta	ct Person's Title: Area	a Manager
Contact Person's Mailing A	ddress:	PO Box 490310		***************************************	City: Leesburg	State: Florida	Zip Code: 34749
Contact Person's Telephone	Number:	(352) 787-0980			Conta	ct Person's Fax Number: (352	2) 787-6333
Contact Person's E-Mail Ac	ldress:	beheath@aquaamerica.co	m		· · · · · · · · · · · · · · · · · · ·		
3. Water Treatment Pla							
Plant Name:	Sarasota Harbor					Plant Telephone Number:	(352) 787-0980
Plant Address:	Gibbs Avenue				City: Satsuma	State: Florida	Zip Code: 32189
Type of Water Treatment by	y Plant:	✓ Raw Ground Water	Purchased Fin	ished Water	•		
Permitted Maximum Day C				200,000			
Plant Category (per subsect	ion 62-699.310(4), F.	A.C.): IV			Plant C	lass (per subsection 62-699.310(4	4), F.A.C.): C
Licensed Operators		Name	10.13	License Class	License Number	Day(s) /	Shift(s) Worked
Lead/Chief Operator:	Paul Thompson			A	7251	Days 1st Shift	
Other Operators:							
And the second							
Contification by I	1/C1 : CO						
I Certification by Lead							
I, the undersigned water	er treatment plant	operator licensed in Florida, a	am the lead/chie	f operator of the	water treatment p	lant identified in part I of the	his report. I certify that the
information provided i	n this report is tru	e and accurate to the best of n	ny knowledge a	nd belief. I certi	fy that all drinking	g water treatment chemicals	s used at this plant conform to
NSF International Star	ndard 60 or other a	applicable standards reference	ed in subsection	62-555.320(3), 1	F.A.C. I also certi	ify that the following additi	ional operations records for this
plant were prepared ea	ch day that a licer	nsed operator staffed or visited	d this plant duri	ng the month ind	icated above: (1)	records of amounts of cher	micals used and chemical feed
rates; and (2) if applica	able, appropriate t	reatment process performance	e records. Furth	ermore, I agree	to provide these a	dditional operations records	s to the PWS owner so the PWS
owner can retain them,	together with cor	pies of this report, at a conven	ient location for	at least ten year	s.		
			Paul Thompso	n			A7251
Signature and Date	·		Printed or Typ				License Number
			rimed or Typ	es ranc			License Number

Mems of Achieving Four-Log Virus Inactivation/Removal:	PWS Id	lentificatio	n Number:		2541008		Plant Name:	Saratoga Ha	arbor						
Means of Achieving Four-Log Virus Inactivation/Removal   To Other (Describe)   To Othe	III. D	aily Data	for the N	lonth/Year	of:										
Type of Disinfectant Residual Maintained in Distribution System:								Chlar' : D	التاما	F.C.		: 1600	(OL)		
Type of Disinfectant Residual Maintained in Distribution System:							mornic	Chiorine Di	ioxide	1 Ozone	Comt	oined Chloru	ne (Chloran	nines)	
Days Plant   Suffed or Visited by   Days Plant   Suffed or Visited by   Days Plant   Suffed or Visited by   Days Plant   Suffed or Visited by   Days Plant   Suffed or Visited by   Days Plant   Suffed or Visited by   Days Plant   Suffed or Visited by   Days Plant   Suffed or Visited by   Days Plant   Days Plant   Days Plant   Suffed or Visited by   Days Plant   Days	<b> </b>						₩ Erro Chle		Combin	ned Chlorina	(Chloromino		Chlorian I	Niovido.	
Days Plant   Safete or Visited by Operator the (Park Plow)   Park Plow   Par	Турс	or Distinct	Lain Nesi	Tuai Maimai								_		Jioxide	er (d. Angere politika) (n. 1911) (n
Days Plant   Staffed or Visited by   Day of the the Month   The					<u> </u>	1 Calculations, or	UV Dose, to	Demostate.	rour-Lo	g Virus Inac	tivation, if	Applicable			
Name of Visited by Visited by Visited by Visited by Visited by Visited by Visited by Visited by Visited by Operator the Horizon (Place Real Producted, Peak Flow Month Name of Peak Flow Month Name									All the second	##Disast i		UVI	Jose		
Name of Visited by Visited by Visited by Visited by Visited by Visited by Visited by Visited by Visited by Operator the Horizon (Place Real Producted, Peak Flow Month Name of Peak Flow Month Name							A SERVE	Lowest CT	1.57.5						
Name of Visited by Visited by Visited by Visited by Visited by Visited by Visited by Visited by Visited by Operator the Horizon (Place Real Producted, Peak Flow Month Name of Peak Flow Month Name					]	A STATE OF THE STA	Disinfectant								Park Control of the C
Name of Visited by Visited by Visited by Visited by Visited by Visited by Visited by Visited by Visited by Operator the Horizon (Place Real Producted, Peak Flow Month Name of Peak Flow Month Name					1	the second second second second second	A - At the state of the state o	Before or at		1				Lowest Residual	
Dept of the the the the the the the the the the	1	A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			<b>!</b>				34.00		la serie		the transfer bearing and the second	Disinfectant 7/2	
Peak Flow   Peak Flow   Peak Flow   Peak Flow   Rate, grd   Rate	Day of				1						Minimum CT	and the second of the second			
Month   X"   Harbor   gal   Rate, gpd   Peak Flow, mg/L   minutes   min/L   Water, C   if Applicable   min/L   mW-sec/cm²   sec/cm²   System, mg/L   Out of Operation			Saratoga		Peak Flow	<ul> <li>** 100 ** 100 ** 100 ** 100 ** 1</li> </ul>			Temp of	pH of Water	Required me				
1       24.0       16.850       2.1       1.0         2       X       24.0       16.850       2.1       1.0         3       X       22.0       1.0       1.0         4       X       24.0       8,000       2.2       1.1         5       X       24.0       8,000       1.7       0.8         6       X       24.0       8,300       1.9       0.9         7       24.0       5,633       0.9       0.9         8       24.0       5,633       1.5       0.7         10       X       24.0       5,633       1.5       0.7         11       X       24.0       5,633       1.5       0.7         11       X       24.0       5,633       1.5       0.7         11       X       24.0       5,633       1.5       0.7         11       X       24.0       5,633       1.5       0.7         11       X       24.0       9,400       1.8       0.9         12       X       24.0       8,000       1.4       0.8         13       X       24.0       8,000       1.4       0.8	Month	"X")		1		1			Water, O	if Applicable	min/L			System, mg/L	Out of Operation
3	1														
4       X       24.0       8,000       2.2       1.1         5       X       24.0       8,100       1.7       0.8         6       X       24.0       8,300       1.9       0.9         7       24.0       5,633       0.9       0.9         8       24.0       5,633       0.7       0.7         10       X       24.0       8,400       1.6       0.9         11       X       24.0       9,400       1.8       0.9         12       X       24.0       9,400       1.8       0.8         13       X       24.0       8,700       1.6       0.8         13       X       24.0       8,700       1.4       0.8         16       X       24.0       11,500       0.9         16       X       24.0       11,500       0.9         17       X       2.40       800       1.2       0.8         18       X       24.0       400       1.1       0.8				16,850	ļ										
5       X       24.0       8,100       1.7       0.8         6       X       24.0       8,300       1.9       0.9         7       24.0       5,633       0.8       0.9         8       24.0       5,633       0.7       0.7         10       X       24.0       8,400       1.6       0.9         11       X       24.0       9,400       1.8       0.9         12       X       24.0       8,200       1.6       0.8         13       X       24.0       8,700       1.4       0.8         14       24.0       11,500       0.8         15       24.0       11,500       0.9         16       X       24.0       11,500         16       X       24.0       11,500         17       X       24.0       800       1.2         18       X       24.0       400       1.1								ļ	ļ	1	ļ			<del></del>	
6       X       24.0       8,300       1.9       0.9         7       24.0       5,633       0.9       0.9         8       24.0       5,633       0.7       0.7         10       X       24.0       5,633       1.5       0.7         11       X       24.0       8,400       1.6       0.9         11       X       24.0       9,400       1.8       0.9         12       X       24.0       8,200       1.6       0.8         13       X       24.0       8,700       1.4       0.8         14       24.0       11,500       0.8         15       24.0       11,500       0.9         16       X       24.0       11,500         16       X       24.0       11,500         17       X       24.0       800       1.2         18       X       24.0       400       1.1					<del> </del>		<u></u>		<del></del>		ļ <u></u>				
7       24.0       5,633					<del> </del>		· · · · · · · · · · · · · · · · · · ·	<b></b>	-		<del>                                  </del>				
8       24.0       5,633       1.5       0.7         9       X       24.0       5,633       1.5       0.7         10       X       24.0       8,400       1.6       0.9         11       X       24.0       9,400       1.8       1.0         12       X       24.0       8,200       1.6       0.8         13       X       24.0       8,700       1.4       0.8         14       24.0       11,500       0.8         15       24.0       11,500       0.9         16       X       24.0       11,500       0.9         17       X       24.0       800       1.2       0.8         18       X       24.0       400       1.1       0.7	-	A				1.9		<del> </del>	<del> </del>	-	<del> </del>			0.9	
9       X       24.0       5,633       1.5       0.7         10       X       24.0       8,400       1.6       0.9         11       X       24.0       9,400       1.8       1.0         12       X       24.0       8,200       1.6       0.8         13       X       24.0       8,700       1.4       0.8         14.       24.0       11,500       0.8       0.9         15       24.0       11,500       0.9       0.9         16       X       24.0       11,500       0.8         17       X       24.0       800       1.2       0.8         18       X       24.0       400       1.1       0.7	8								<del>                                     </del>		<del></del>				
11       X       24.0       9,400       1.8       1.0         12       X       24.0       8,200       1.6       0.8         13       X       24.0       8,700       1.4       0.8         14       24.0       11,500       0.8         15       24.0       11,500       0.9         16       X       24.0       11,500       0.9         17       X       24.0       800       1.2       0.8         18       X       24.0       400       1.1       0.7	9	X	24.0			1.5			<del> </del>	<del>†</del>	<del></del>			0.7	
12       X       24.0       8.200       1.6       0.8         13       X       24.0       8,700       1.4       0.8         14       24.0       11,500       0.8         15       24.0       11,500       0.9         16       X       24.0       11,500       0.9         17       X       24.0       800       1.2       0.8         18       X       24.0       400       1.1       0.7						1.6				1	<u> </u>			0.9	
13       X       24.0       8,700       1.4       0.8         14       24.0       11,500       0.8         15       24.0       11,500       0.9         16       X       24.0       11,500       0.9         17       X       24.0       800       1.2       0.8         18       X       24.0       400       1.1       0.7															
14     24.0     11,500       15     24.0     11,500       16     X     24.0     11,500       17     X     24.0     800       18     X     24.0     400       1.1     0.7									ļ., <u>.</u> ,	ļ	ļ.,			<u> </u>	
15     24.0     11,500       16     X     24.0     11,500       17     X     24.0     800       18     X     24.0     400       1.1     0.7		- X				1.4					<u> </u>	<b></b>		0.8	
16     X     24.0     11,500     1.4       17     X     24.0     800     1.2       18     X     24.0     400     1.1					<del> </del>				· <del> </del>	+					
17         X         24.0         800         1.2         0.8           18         X         24.0         400         1.1         0.7		X			·	1.4					1			0.9	
18 X 24.0 400 1.1 0.7									<u> </u>	-	<u> </u>			<del></del>	
		X	24.0	400						<u> </u>	<del> </del>	<del> </del>		<u> </u>	
0.0	19	X	24.0			0.8		,						0.6	
20 X 24.0 0.9 0.5		X				0.9								0.5	
21 24.0 1,933									<b></b>						
22		- <del>  </del>				0.0				<u> </u>	<b></b>		ļ		
23     X     24.0     1,933     0.9       24     X     24.0     2,200     1.4					·				<u> </u>	<del> </del>	ļ	ļ			
25 X 24.0 800 1.2 0.7					<b> </b>			1	<b></b>	<del>                                     </del>	<del> </del>				
26 X 24.0 14,500 1.0 0.5									· · · · · ·	<del> </del>	<del> </del>				
27 X 24.0 9,300 1.1									<b> </b>	<b> </b>	·		-		
28 24.0 11,500				11,500											
29 24.0 11,500															
30 X 24.0 11,500 1.0 0.5									ļ <u>.</u>					<del></del>	
31 X 24.0 18,500 1.1 0.6 Total 231,000		X	24.0			1.1		l	L	1	<u> </u>	1	l	0.6	<u> </u>
Total 231,000   Avgerage 7,452															

18,500

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

DEP Form 62-555 900(3)Alternate



See Pages 4 for Instru	uctions.							
l. General Information	for the Month/Y	ear of: May, 2005						
A. Public Water System	(PWS) Informat	tion						
	Welaka Mobile Home					PWS Identification Number:	2541242	
PWS Type:	✓ Community	Non-Transient Non-Commun	nityT	ransient Non-Com	nunity	Consecutive		
Number of Service Connect	tions at End of Month:	108				Total Population Served at End of Mo	onth: 324	
PWS Owner:	Aqua Utilities Florida	1						
Contact Person:	Brian Heath				(	Contact Person's Title: Ar	ea Manager	
Contact Person's Mailing A	ddress:	PO Box 490310			City: Leesburg	State: Florida	Zip Code: 34749	
Contact Person's Telephone	Number:	(352) 787-0980			(	Contact Person's Fax Number: (3:	52) 787-6333	
Contact Person's E-Mail Ad		beheath@aquaamerica.cor	<u>n</u>					
B. Water Treatment Pla	ant Information							
Plant Name:	Welaka Mobile Home	e Park				Plant Telephone Number:	(352) 787-0980	
Plant Address:	Hamilton Road				City: Satsuma	State: Florida	Zip Code: 32189	
Type of Water Treatment by	<u> </u>	✓ Raw Ground Water	Purchased Fin	ished Water				
Permitted Maximum Day O				108,000				
Plant Category (per subsecti	ion 62-699.310(4), F.A					ant Class (per subsection 62-699.310		
Licensed Operators		Name		License Class	License Nun		) / Shift(s) Worked	t as a
Lead/Chief Operator:	Paul Thompson			A	7251	Days 1st Shift		
Other Operators:								
				<del>                                     </del>				
		<u> </u>						
	·							
	· · · · · · · · · · · · · · · · · · ·							
**************************************				-				
			<del></del>	<u> </u>				
I Certification by Lead	/Chief Operator			-				
		operator licensed in Florida, a	m the lead/chie	f operator of the	water treatm	ent plant identified in part I of	this report. I certify that the	
		e and accurate to the best of n						
		cable standards referenced in s						
		perator staffed or visited this						
		process performance records.			tnese additio	nai operations records to the i	WS Owner so the F WS Own	51 Call
retain them, together w	viun copies of this	report, at a convenient locatio	n for at least te	n years.				
			D 177				A7251	
Cinnet			Paul Thompso	<del> </del>				
Signature and Date			Printed or Typ	ped Name			License Number	

PWS Id	lentificatio	n Number:		2541242		Plant Name:	Welaka Mol	oile Home	Park					
III. D	aily Data	for the N	lonth/Year	of:		May, 2005								
			g Virus Inacti		/al: <b>▼</b> Free C		O11 : D:							
1	traviolet R			er (Describe):		mornie į	Chlorine Di	oxide	Ozone	Comb     Comb	oined Chlorii	ne (Chloran	nines)	i
-													***	
Type	of Disinfe	ctant Resid	dual Maintai		ibution System:	▼ Free Chlo				(Chloramine		Chlorine [	Dioxide	
	l			C	T Calculations, or			Four-Log	Virus Inac	tivation, if			(XX)	
						E CT Calc	ulations	100			UV	Dose		
ŀ			1				Lowest CT				A. E. E. 使期	September 1	rangis).	
			·			Disinfectant	Provided							[1]
	Days Plant				Lowest Residual	Contact Time	Before or at						Lowest Residual	
1	Staffed or		Net Quantity		Disinfectant	(I) at C	First					Minimum	Disinfectant	
	Visited by		of Finished		Concentration (C)	Measurement	Customer				Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of		Hours plant	§ .		Before or at First	Point During	During Peak		fact, the same	Minimum CI		Required,	Remote Point in	Conditions; Repair or Maintenance Work that
Month	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	1emp of	pH of Water,	Required, mg		mW-	Distribution	Involves Taking Water System Components
1	"X")	Operation 24.0	gal. 21,780	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, C	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
2	Х	24.0	21,780		1.8					<del> </del>	ļ. — —		1.3	
3	X	24.0	9,500		1.7								1.3	
4	Х	24.0	8,950		1.8						-	-	1.2	
5	X	24.0	8,710		1.5				<b></b>	<u> </u>	· · · · · · · · · · · · · · · · · · ·	<b></b>	1.3	
6	Х	24.0	9,380		1.9								1.0	
7		24.0	10,197											
8		24.0	10,197											
9	X	24.0	10,197		1.8								1.2	
10	X	24.0	13,860		1.8								1.4	
12	X	24.0 24.0	10,230 8,520		1.6					<u> </u>			1.4	
13	X	24.0	11,830		1.6				<u> </u>	-		<u> </u>	1.5	
14		24.0	10,483		1.0		···· ·—·				-		1.0	
15		24.0	10,483									-		
16	X	24.0	10,483		1.2	<del></del>							0.7	
17	X	24.0	7,290		1.5								1.0	
18	Х	24.0	25,940		2.1								1.0	
19	X	24.0	20,090		2.4					L			1.9	
20	Х	24.0	28,700		1.8								1,3	
22		24.0 24.0	26,173 26,173		·				ļ	<b></b>	ļ		<u> </u>	
23	x	24.0	26,173		2.0								1.4	
24	- <del>X</del>	24.0	13,290		1.7								1.4	
25	Х	24.0	10,660		1.6								1.1	
26	Х	24.0	8,250		1.9								1.3	
27	Х	24.0	10,100		1.6								1.0	
28		24.0	13,960											
29		24.0	13,960											
30 31	X	24.0	13,960		1.8						ļ		1.2	
Total	X	24.0	12,800		1.8			<u> </u>		<u></u>	<u> </u>	<u> </u>	1.2	<u> </u>
Avgerage			444,100											

28,700

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



See Pages 4 for Instr								
I. General Information	1 for the Month/	Year of: June, 2005						
A. Public Water Systen	n (PWS) Informa	ation						
PWS Name:	Saratoga Harbor					PWS Identification Number:	2541008	
PWS Type:	✓ Community	Non-Transient Non-Commu	nity T	ransient Non-Comr	munity	Consecutive		
Number of Service Connec	ctions at End of Mont				Total	Population Served at End of Month	n: 175	
PWS Owner:	Aqua Utilities Florie	da			<del></del>			
Contact Person:	Brian Heath				Cont	act Person's Title: Area	Manager	
Contact Person's Mailing A	Address:	PO Box 490310			City: Leesburg	State: Florida	Zip Code: 34749	
Contact Person's Telephon	e Number:	(352) 787-0980			Cont	act Person's Fax Number: (352)	787-6333	
Contact Person's E-Mail A	ddress:	beheath@aquaamerica.cor	<u>n</u>					
B. Water Treatment Pl	ant Information							
Plant Name:	Sarasota Harbor		,			Plant Telephone Number:	(352) 787-0980	
Plant Address:	Gibbs Avenue				City: Satsuma	State: Florida	Zip Code: 32189	
Type of Water Treatment b	<u>.                                    </u>	✓ Raw Ground Water	Purchased Fin	ished Water				
Permitted Maximum Day (				200,000				
Plant Category (per subsec				_		Class (per subsection 62-699.310(4)		
Licensed Operators		Name		License Class	License Number		Shift(s) Worked	
Lead/Chief Operator:				С	7082	Days 1st Shift		
Other Operators:	Paul Thompson	=		A	7251	Days 1st Shift		
		· · · · · · · · · · · · · · · · · · ·						
	·}			<u> </u>				
	<u> </u>			ļ		· · · · · · · · · · · · · · · · · · ·		
				<del> </del>		<u> </u>		
				l				
I Certification by Lea	d/Chief Operato	Γ						
		t operator licensed in Florida, a	m the lead/chie	ef operator of the	water treatment	plant identified in part I of th	is report. I certify that the	;
		rue and accurate to the best of n						
		applicable standards reference						
		ensed operator staffed or visited						
		treatment process performance				additional operations records	to the Pws owner so the	rws
owner can retain them	i, together with co	opies of this report, at a conven	ient location for	r at least ten year	rs.			
			Larry White				C7082	
Signature and Date			Printed or Ty	ped Name		····	License Number	
=			71	•				

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	91								0.2		8,400	74'0	X	67
	7.1		T						S.I		008,7	24.0	X	87
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											£££,8	24.0	T	97
											<b>EEE,8</b>	0.42	1	57
<u></u>	L'I								1.2	1	007,8	0.42	X	74
	s.I								0.2		007.8	74.0	X	23
	0.1							T	61	1	000,8	74.0	X	77
	7.1								1.2		005,8	24.0	X	717
	1.1		<u> </u>				İ		S.I	<del>                                     </del>	11,300	0.42	X	oz
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			<u> </u>							<del>                                     </del>	00€,11	0.42	<del> </del>	181
	£.1				·	·			8.1		009,8	24.0	X	Z1
	0.1	<del> </del>	<del>                                     </del>			<u> </u>	-	<u> </u>	2.1		002,8	0.42	X	91
	8.1	<del> </del>			<del>                                     </del>		<del>                                     </del>	<del> </del>	£.2	<del> </del>	000'8	0.42	X	351
	8.0	<del></del>	<del> </del>		· · · ·		<del> </del>		€1	<del>                                     </del>	000.8	0.42	X	71
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	111		<del> </del>			<del>                                     </del>	<del> </del>	<del>                                     </del>	· · · · · · · · · · · · · · · · · · ·	<del> </del>	EE2,11	0 72	<del>  ^ </del>	71
		<del>                                     </del>	<del>                                     </del>		<del> </del>	<del> </del>	<del> </del>			<del> </del>	EE2,11	24.0	<del> </del>	
	<b>†</b> 0	<del> </del>			<del> </del>		<del> </del>		£.1	<del> </del>	006,7	0.42	<del> </del>	11
	10	<del>                                     </del>	1				<del> </del>		0.1	· · · · · · · · · · · · · · · · · · ·	002,8		X	10
	2.0	<del></del>	<del> </del>		<del></del>	<del> </del>	ł		2.1	<del> </del>	002,8	24.0	X	6
	9.0		<del> </del>	ļ <u>.</u>	<del> </del>		<del> </del>		£.1	ļ — —	<del></del>	24.0	X	8
		<del> </del>		<del> </del>		<del>}</del>	<del> </del>	<del> </del>	<del> </del>	<del> </del>	006,8	74.0	X	L
	4.0	<del>                                     </del>	<del></del>	ļ	<u> </u>	<b></b>	<del> </del>	ļ	6.0	<del> </del>	£££,11	24.0	X	9
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	2:0	<del>                                     </del>	<del> </del>		<b></b>		<del> </del>	<del> </del>	7:1	<del> </del>	11,333	24.0	<del> </del>	l b
	9.0	<del> </del>	<del>}</del>	ļ	<del>                                     </del>		<del> </del>	<del> </del>	2.1		006,7	24.0	X	3
	4.0	<del> </del>	<del> </del> -	<del>                                     </del>	<del></del>	<del> </del>	<del> </del>	<u> </u>	11	<b></b> -	00£,9	74.0	X	7
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Involves Taking Water System Components	nonudrusid	-Wm		Required, mg		Temp of	-gm, wold	Peak Flow,	Customer During	Peak Flow	Producted,	Saratoga	(Place	the
Conditions; Repair or Maintenance Work that		Required,	gninnsqO	TO muminiM			During Peak	[1] M. M. E. M. M. M. M. M. M. M. M. M. M. M. M. M.	Before or at First	1.	Water		Operator	Day of
Emergency or Abnormal Operating	Concentration at	UV Dose	Lowest			1 1 1 K	Customer	Measurement	Concentration (C)		bədsini To		Visited by	
[ - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Disinfectant	mminiM		1.		J. 1993	izni4	One (T)	Disinfectant	1	Met Quantity	)	Staffed or	ł
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	ioxide	Chlorine D	1 (9	(Chloramines	ourona d	Combine	inc 1	L Free Chlor	bution System:	ed in Distri	nal Maintair	nant Kesid	Disintec	ι λbε οι
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								June, 2005		:J(	onth/Year o	for the M	sily Data	III' D
						100	Saratoga Har	Plant Name:		8001457			entification	
						-54	-110+0-03	, 14 , via	1	00011756				TI 3/11/0

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



See Pages 4 for Instr							
I. General Information	for the Month/	Year of: June, 2005					
A. Public Water System	(PWS) Informa	ation ———					
PWS Name:	Welaka Mobile Hon				PWS Identification Number	er: 2541242	
PWS Type:	✓ Community	Non-Transient Non-Community	Transient Non-Comm		Consecutive		
Number of Service Connect	tions at End of Month				Population Served at End of	f Month: 324	
PWS Owner:	Aqua Utilities Florid	la					
Contact Person:	Brian Heath			Contac	ct Person's Title:	Area Manager	
Contact Person's Mailing A		PO Box 490310		City: Leesburg	State: Florida	Zip Code:	34749
Contact Person's Telephone		(352) 787-0980		Contac	ct Person's Fax Number:	(352) 787-6333	
Contact Person's E-Mail Ad		beheath@aquaamerica.com					
B. Water Treatment Pla							
Plant Name:	Welaka Mobile Hom	ne Park			Plant Telephone Number:	(352) 787-09	
Plant Address:	Hamilton Road			City: Satsuma	State: Florida	Zip Code:	32189
Type of Water Treatment by			ased Finished Water				
Permitted Maximum Day O			108,000				- <del></del>
Plant Category (per subsection Licensed Operators	ion 62-699.310(4), F.		L. C.		lass (per subsection 62-699.		
Lead/Chief Operator:	T 3371-1-	Name	License Class	License Number		y(s) / Shift(s) Worked	
			C	7082	Days 1st Shift		
Outer Operators.	Paul Thompson		A	7251	Days 1st Shift		
9.50							
	***						
					I		
II. Certification by Lead	/Chief Operator	•					
I, the undersigned water	er treatment plant	operator licensed in Florida, am the le	ad/chief operator of the	water treatment p	lant identified in part I	of this report. I certify	that the
		ue and accurate to the best of my know					
		cable standards referenced in subsection					
		operator staffed or visited this plant du					
		process performance records. Furthern					
		report, at a convenient location for at		arese additionar o	perations records to th	ic i wis owner so the i w	5 owner can
The state of the s	ini copies of this	report, at a convenient totation for at	icasi icii years.				
		Lam	White			C70 <b>82</b>	
Signature and Date		<del></del>	ed or Typed Name	<del></del>		License Num	nher
G. arrain or any		rimi	ed of Typed Manie			License Ivuii	1001

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	L'ī								2.3		0£2,8	24.0	X	. 67
	9.1								7.0		088,8	24.0	X	87
	8.1				ļ				4.2		12,223	24.0	Х	7.7
											12,223	24.0		- 97
											12,223	24.0		72
	t'l								0.2		088,01	24.0	X	77
	8.0								0.1		097'6	24.0	Х	23
	1.3								<i>L</i> '1		014,7	74.0	Х	77
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											LE9'6	0.42		61
								<u> </u>			LE9'6	74.0		81
	I'I								2.1	<u> </u>	0£2,8	24.0	X	- LI
	1.2	T				<u> </u>		<u> </u>	9·I	1	14,010	0.42	X	91
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					İ	<u> </u>			· · · · · · · · · · · · · · · · · · ·		090'51	24.0	<del>  ^</del>	5
			1			<del>                                     </del>					090'51	0.42		7
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	£.1					<b></b>			91		066,11	24.0	X	7
	2.1		1	1		<del> </del>		<u> </u>	9'1		055,8	24.0	X	1
Om of Operation	System, mg/L:	zec/cm <sup>2</sup>	my-sec/cm	J/nim "	eldsəilqqA i	Water, C	7/uitu	sənnrim 🥳 🤇	Peak Flow, mg/L	Rate, gpd.	. lag	Operation		
Involves Taking Water System Components	Distribution	2.17		Required, mg	tores to tid	0	-gm ,wol-l	Peak Flow,	Customer During	Peak Flow			("X"	Month
Conditions: Repair or, Maintenance Work that	Remote Point in	-Wm		Minimum CT		To ams T	During Peak	Point During	Before or at First	Wold Jeed	Producted,	umd emove	908lT)	the the
CINCIPERA OF CONDITION OPERATION	Concentration at	Required,	1	12) 111/11/11/1		A Company of the Company	Customer Door	Measurement	Concentration (C)		Water	Hours plant		Day of
	InstoolniziG	osod VU	Lowest			12-15 (100- 100 (25-15)	First	On (T)		3-1	barlaini To		Visited by	
	Lowest Residual	muminiM			37		Before or at	Contact Time	Lowest Residual Disinfectant		Vet Quantity	rain trans	To boffetd or	
Emergency or Abgornal Operating							Provided	Disinfectant	loubise d transc I				Days Plant	
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	əbixoi	Chlorine D	<u> </u>	(Chloramines	) aninoldD b	Sombine		N Free Chlo	bution System:	mziA ni bər	ristnisM lsu	tant Resid	off Disinfe	o agyT]
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	(səni	e (Chloram	ined Chlorin	L Combi	əuozO 🔟	əbixo	Chlorine Dic	hlorine [			vitas Inactiv			
								June, 2005			onth/1 ear			H
										•30	areo Voltato			
					Park	amoH ali	Welaka Mob	Plant Name:	I	7241747		: Number:	entification	PI SMd

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



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100	Pages	4	tor	Inctrii	ctions.

See Pages 4 for Instr		Variation						
. General Information	for the Wonth/	Year of: July, 2005						
A. Public Water System	ı (PWS) Informa	ation						
PWS Name:	Saratoga Harbor					PWS Identification Number:	2541008	
PWS Type:	✓ Community	Non-Transient Non-Community Transient Non-Community				Consecutive		
Number of Service Connec	mber of Service Connections at End of Month: 50 Total						th: 175	
PWS Owner:	Aqua Utilities Florid	da						
Contact Person:	Brian Heath				Contac	ct Person's Title: Area	Manager	
Contact Person's Mailing Address: PO Box 490310 City: Leesburg State: Fl							Zip Code: 34749	
Contact Person's Telephone	e Number:	(352) 787-0980			Contac	ct Person's Fax Number: (352	2) 787-6333	
Contact Person's E-Mail Ac		beheath@aquaamerica.co	<u>m</u>					
. Water Treatment Pla	ant Information							
Plant Name:	Sarasota Harbor					Plant Telephone Number:	(352) 787-0980	
Plant Address:	Gibbs Avenue				City: Satsuma	State: Florida	Zip Code: 32189	
Type of Water Treatment b	<del></del>	Raw Ground Water	Purchased Fin	ished Water				
Permitted Maximum Day C				200,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV						nt Class (per subsection 62-699.310(4), F.A.C.):		
Licensed Operators		Name		License Class	License Number	Day(s) /	Shift(s) Worked	
Lead/Chief Operator:				Α	7251	Days 1st Shift		
Other Operators:	Larry White			С	7082	Days 1st Shift		
10 17 17	David Haring			С	14091	Days 1st Shift		
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Certification by Lead	UChief Operate							
			om the lead/-1-1-	of an austau of the	v vvatar traatmasst s	lant identified in next Laft	this report. I certify that the	
		t operator licensed in Florida,						
							s used at this plant conform to	
							ional operations records for this	
plant were prepared ea	ach day that a lice	ensed operator staffed or visite	d this plant duri	ng the month inc	dicated above: (1)	records of amounts of che	micals used and chemical feed	
rates; and (2) if applic	able, appropriate	treatment process performance	e records. Furth	nermore, I agree	to provide these ac	dditional operations record	ls to the PWS owner so the PWS	
owner can retain them	, together with co	opies of this report, at a conven	nient location for	r at least ten year	rs.			
			Paul Thomps	on			A7251	
Signature and Date			Printed or Ty	· · · · · · · · · · · · · · · · · · ·		<del>-</del>	License Number	
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	L'0								1.2		002,2	0.42	X	77
	2.0								0.1		12,700	0.42	X	17
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				1			<del>                                     </del>				494,11	24.0		7
	1.1								<u>L'1</u>	<b>!</b>	000,6	24.0	X	I
Out of Operation	System, mg/L <sup>-</sup>	zwo/oəs	my-sec/cm	7/uim	if Applicable	Water, C	J/nim	səmuru	Peak Flow, mg/L	Rate, gpd.	gal.	Harbor	("X"	Month
Involves Taking Water System Components	notivorized	-Wm		Required, mg	INRW TO FIG	Do Torin	-gm, wolf	Peak Flow,	Customer During	Peak Flow	Producted,	Saratoga	Place	əqı
Conditions, Repair or Maintenance Work that			annuado	TO muminiM		lo amaT	During Peak		Before or at First	ell deed	Water		Operator	Day of
Ernergency or Abnormal Operating	Concentration at	Required,	and the second second	μ.,			Customer	Measurement	Concentration (C)	Į	bedzini To		Visited by	30 1100
	Disinfectant	Minimum UV Dose	Lowest				First	Ois(T)	Disinfectant	ĺ	Met Quantity		Staffed or	
	TOMOSI KCZIONSI		50 m 2 m 3 m 3 m 3 m 3 m 3 m 3 m 3 m 3 m 3	4.5			Before or at	Contact Time	Lowest Residual		Ludanon O July	1.1	Days Plant	:
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\* Refer to the instructions for this report to determine which plants must provide this information.

\*\*DEP Form 62-555 900(3)Aitemate



Public Water System (PWS) Information   PwS Identification Number   2541242	See Pages 4 for Instr							
FWN Same   Welsta Mobile Time Park   PMS Indication Number   2541242   FWS Topic   2   Community   Non-Transert Non-Community   Translert Non-Community   Consecutive   State   Consecutive   State   Consecutive   State   Consecutive   State   Consecutive   State   Consecutive   State   Consecutive   State   Consecutive   State   Consecutive   State   Consecutive   State   Consecutive   State   Consecutive   State   Consecutive   State   Consecutive   State   Consecutive   State   Consecutive   State   Consecutive   State   Consecutive   State	I. General Information	for the Month/Year of:	July, 2005					
Non-Francient Non-Community	A. Public Water System	(PWS) Information						
Number of Service Connections at End of Month  108   Total Population Served at End of Month  324     PWS Owner	PWS Name:	Welaka Mobile Home Park				PWS Identification Number:	2541242	
Sumbor of Service Connections at End of Month   108   Total Population Served at End of Month   324	PWS Type:	✓ Community Non-T	ransient Non-Community	Transient Non-Comr	nunity	Consecutive		
Contact Person   Brain Heath   Contact Person's Title   Area Manager	Number of Service Connect				Total 1	Population Served at End of Mo	onth: 324	
Contact Person's Mailing Address   PO Box 490310   City   Leesburg   State   Florida   Zip Code   34749	PWS Owner:	Aqua Utilities Florida			. , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·		
Contact Person's Telephone Number: (352) 787-0980 Contact Person's E-Mail Address  Deheath@aquaamerica.com  Swater Treatment Plant Information  Plant Address  Welaka Mobile Home Park  Plant Information  Plant Name  Welaka Mobile Home Park  Permitted Maximum Day Operating Capacity of Plant, gallors per day:  108,000  Plant Class (per subsection 62-699-310(4), F.A.C.)  Delated Address  Name  License Class  License Number  Day(s) / Shift(s) Worked  Lary White  C 7082  Days 1st Shift  David Haring  C 14091  Days 1st Shift  C 14091  Days 1st Shift  C 14091  Days 1st Shift  C 1600  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 current them, together with copies of this report, at a convenient location for at least ten years.  Paul Thompson  A2251	Contact Person:	Brian Heath			Conta	et Person's Title: Are	ea Manager	
Contribution by Lead/Chief Operators   Lead/Chief Operator   Lea	Contact Person's Mailing A	ddress: PO Box 4903	0		City: Leesburg	State: Florida	Zip Code: 347	49
Plant Name   Welaka Mobile Home Park   Welaka Mobile Home Park   Welaka Mobile Home Park   Plant Telephone Number   G52) 787-0980	Contact Person's Telephone	Number: (352) 787-098	0		Conta	et Person's Fax Number: (35	52) 787-6333	
Plant Name:   Welaka Mobile Home Park   Plant Telephone Number: (352) 787-0980     Plant Address:   Hamilton Road   Zip Code: 32189     Plant Address:   Hamilton Road   Zip Code: 32189     Premitted Maximum Day Operating Capacity of Plant, gallons per day:   108,000     Plant Category (per subsection 62-699 310(4), F.A.C.):   V	Contact Person's E-Mail Ad	dress: beheath@	aquaamerica.com					
Plant Address   Hamilton Road   City   Satsuma   State   Florida   Zip Code: 32189	B. Water Treatment Pla	int Information						
Type of Water Treatment by Plant Permitted Maximum Day Operating Capacity of Plant, gallons per day:    108,000   Plant Classy (per subsection 62-699 310(4), F.A.C.) D   Licensed Operators   License Class   License Class   License Number   Day(s) / Shift(s) Worked     Licensed Operators   Lad/Chief Operator: Plant Thompson   A   7251   Days 1st Shift     Other Operators:   Larry White   C   7082   Days 1st Shift     David Haring   C   14091   Days 1st Shift     David Haring   C   14091   Days 1st Shift     David Haring   C   14091   Days 1st Shift     License Class   License Class   License Class   License Class   License Class     License Number   Day(s) / Shift(s) Worked     License Operators:   License Class   License Number   Days 1st Shift     David Haring   C   14091   Days 1st Shift     License Operators   License Class   License Number   Days 1st Shift     License Number   Days 1st Shift     License Operators   License Class   License Number   Days 1st Shift     License Operators   License Class   License Number   Days 1st Shift     David Haring   C   14091   Days 1st Shift     License Number   Days 1st Shift     David Haring   C   14091   Days 1st Shift     License Number   Days 1st Shift     David Haring   David Haring   Days 1st Shift     David Haring   David Haring   Days 1st Shift     License Number   Days 1st Shift     David Haring   David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift     David Haring   Days 1st Shift	Plant Name:	Welaka Mobile Home Park				Plant Telephone Number:	(352) 787-0980	
Pennt Category (per subsection 62-699 310(4), F.A.C.): V Plant Class (per subsection 62-699 310(4), F.A.C.): D Licensed Operators Lead/Chief Operator:    Day 1					City: Satsuma	State: Florida	Zip Code: 321	89
Plant Clategory (per subsection 62-699 310(4), F.A.C.): D Licensed Operators Licensed Operators Name License Class License Number Days 1st Shift Days 1st Shift Other Operators: Lard/Chief Operators Lary White David Haring C 14091 Days 1st Shift Days 1st Shift David Haring C 14091 Days 1st Shift C 14091 Days 1st Shift C 14091 Days 1st Shift C 14091 Days 1st Shift C 15000 C				ed Finished Water				
Lead/Chief Operators Lead/Chief Operator: Paul Thompson A 7251 Days 1st Shift  C 7082 Days 1st Shift  Day of Haring C 144091 Days 1st Shift  Days 1st Shift  Days 1st Shi			per day:	108,000				
Lead/Chief Operators:   Days 1st Shift   Days 1st Shift							( '/,, ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	
Other Operators:    Larry White   C   7082   Days 1st Shift			Name	License Class		<del></del>	) / Shift(s) Worked	, partial and
David Haring  C   14091   Days 1st Shift    14091   Days 1st Shift								
I. 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.  Paul Thompson  A7251								
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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.  Paul Thompson  A7251								<del> </del>
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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.  Paul Thompson  A7251	I, the undersigned water	er treatment plant operator lie	ensed in Florida, am the lead	chief operator of the	water treatment p	lant identified in part I of	this report. I certify that	t the
International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.  Paul Thompson  A7251								
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(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.  Paul Thompson  A7251								
retain them, together with copies of this report, at a convenient location for at least ten years.  Paul Thompson A7251								
Paul Thompson A7251					these additional o	perations records to the r	W3 OWIEL SO LICT W5 O	wher car
	retain them, together w	nui copies of this report, at a	convenient location for at lea	ist tell years.				
			Paul The	ompson			A7251	
	Signature and Date						License Number	

PWS I	dentificatio	n Number:		2541242		Plant Name:	Welaka Mot	ile Home	Park	·····		·		
HIND	aily Data	for the N	lonth/Year	of:		July, 2005								
			g Virus Inactiv											
1	traviolet R			r (Describe):		niorine	Chlorine Die	oxide	C Ozone	Comb	ined Chlori	ne (Chloran	nines)	
-								<del> </del>						
Type	of Disinfe	ctant Resid	dual Maintair		ibution System:					(Chloramine		Chlorine I	Dioxide	
			!	· C	T Calculations, or			our-Log	Virus Inac	tivation, if A	Applicable	10 10 10 10 10 10 10 10 10 10 10 10 10 1		
						- CT Calc	ulations	d di			UV	Dose		[하고 그는 그 그 바다는 함시 쥬기
	1				.4 · 14 · 4	and the en			K					내 그리고 그는 사이 했다다
1				ł		Disinfectant	Lowest CT Provided	1.5				五条 装领		
	Days Plant		1	İ	Lowest Residual	Contact Time	Before or at			***			Lowest Residual	
	Staffed or		Net Quantity		Disinfectant	(T) at C	First		2.5			Minimum	Disinfectant	
	Visited by		of Finished	•	Concentration (C)	Measurement	Customer	1.0	2		Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of	Operator	Hours plant	Water		Before or at First	Point During	During Peak			Minimum CT	Operating	Required,	Remote Point in	Conditions, Repair or Maintenance Work that
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water,	Required, mg	UV Dose,	mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
1	Х	24.0	6,670		2.1								1.0	
3		24.0	8,257		i									
4	x	24.0	8,257 8,257	ļ	20								, ,	
5	X	24.0	26,050	<u> </u>	2.0				ļ			ļ	1.6	
6	X	24.0	8,930		1.8		-					-	1.5	
7	X	24.0	8,480	<del>                                     </del>	2.0							<del> </del>	1.4	
8	X	24.0	8,510		1.9				,	<b></b>		<del> </del>	1.7	
9		24.0	8,260									<del>                                     </del>		
10		24.0	8,260									<del>                                     </del>		
11	X	24.0	8,260		1.8								1.5	
12	X	24.0	6,050		1.0								0.7	
13	Х	24.0	11,300		2.1								1.6	
14	Х	24.0	12,090		1.8								1.4	
15	Х	24.0	8,510		1.7								1.4	
16 17		24.0 24.0	11,210						<u> </u>			1		
18	X	24.0	11,210		1.4								1.2	
19	X	24.0	10,010		1.6				<del> </del>				1.3	
20	X	24.0	7,850		1.6				ļ	<del>                                     </del>		<del> </del>	1.3	
21	X	24.0	6,860		1.6					<del> </del>		<del> </del>	1.2	
22	Х	24.0	5,020		1.7				<b>-</b>				1.2	
23		24.0	12,093											
24		24.0	12,093											
25	X	24.0	12,093		1.8						,		1.2	
26	Х	24.0	10,880		1.7								1.2	
27	X	24.0	6,890		1.7								1.2	
28	X	24.0	8,930		1.7					<u> </u>		ļ	1.1	
29 30	X	24.0	7,900		2.0								1.5	
31		24.0 24.0	7,516 7,516		-				<u> </u>	-		-	ļ	
Total		∠4.0	295,422	!					l	Li		L	L	L
Avgerag			9,530											
Maximu			26,050											

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



Saa	Родов	4	for	Inct	uctions.
See	rages	4	юг	Insu	TUCHONS.

I. General Information		'ear of: August, 2005							
A. Public Water System	(PWS) Informa	tion							
PWS Name:	Saratoga Harbor					PWS Identification Num	ber:	2541008	
PWS Type:	✓ Community	Non-Transient Non-Community	Tr	ansient Non-Comr	nunity	Consecutive			
Number of Service Connect	tions at End of Month	: 50			Total	Population Served at End	of Month:	175	
PWS Owner:	Aqua Utilities Florid	a							
Contact Person:	Brian Heath					act Person's Title:	Area Manager	<del>,</del>	
Contact Person's Mailing A		PO Box 490310			City: Leesburg	State: Florida		Zip Code:	34749
Contact Person's Telephone	· · · · · · · · · · · · · · · · · · ·	(352) 787-0980			Conta	ect Person's Fax Number:	(352) 787-6333	3	
Contact Person's E-Mail Ad		beheath@aquaamerica.com		· · · · · · · · · · · · · · · · · · ·					
B. Water Treatment Pla									
Plant Name:	Sarasota Harbor					Plant Telephone Number		(352) 787-0	
Plant Address:	Gibbs Avenue	····			City: Satsuma	State: Florida		Zip Code:	32189
Type of Water Treatment by			Purchased Fini						
Permitted Maximum Day O				200,000					
Plant Category (per subsect	ion 62-699.310(4), F.					Class (per subsection 62-69		C	ez deser en en en en en en en
Licensed Operators		Name	<u> </u>	License Class	License Number		ay(s) / Shift(s)	w orked	
Lead/Chief Operator:		<u> </u>		A	7251	Days 1st Shift	<del></del> -		
Other Operators:	Larry White			C	7082	Days 1st Shift			
	David Haring			С	14091	Days 1st Shift			
						<del> </del>	···		
						1			
	<del></del>		<del></del>						
			<u></u>					<del></del>	
			<del></del>				<del></del>		-
I Certification by Lead	/Chief Operator	7							
		operator licensed in Florida, am	the lead/chie	f operator of the	water treatment i	plant identified in part	t I of this repor	t. I certify	that the
		ue and accurate to the best of my							
		applicable standards referenced i							
nlant were prepared ea	ich day that a lice	nsed operator staffed or visited the	is plant duri	or the month inc	licated above: (1)	records of amounts of	of chemicals us	sed and ch	emical feed
rates: and (2) if applies	abla appropriata	treatment process performance re	no plant duri	ermore I seree	to provide these s	dditional operations	records to the l	PWS owne	er so the PWS
						idditional operations i	ccords to the i	W B OWING	a so the r vie
owner can retain them.	, together with co	pies of this report, at a convenien	i location for	at teast ten year	15.				
			Paul Thompso	ın				A7251	
Signature and Date			Printed or Tyr				<del></del>	License Nu	mber
Signature and Date			rimicu or Typ	eu maine				Electise 140	

Saratoga Harbor

Plant Name:

2541008

PWS Identification Number:

											008 85			umixeM
											20,345			<b>Avgerag</b>
											007,058	A March	4.6	IstoT
	8.0								5'1		000'11	0.42	Х	Iε
	<b>č.</b> 0				*				***************************************		009'99	0.4.0	X	0ε
	<b>p</b> .0								T.0		001,42	24.0	X	67
											001,42	0.42	<u> </u>	87
							_				001.42	24.0	<del></del>	
	1.0					<u> </u>			0'0	<del> </del>			<del> </del>	- ZZ
	4.0								9.0	ļ	001,12	24.0	X	97
	9.0								2.1		008,82	0.4.0	X	72
	9.0								0.1		005,2	24.0	X	74
	č.0								0.1		15,300	24.0	X	23
	¿.0						l		0.1		22,300	0.42	X	77
											22,300	0.4.0		17
											22,300	24.0		70
	4.0								8.0	·	007,01	0.4.0	Х	61
	5.0					-			I'I		10,600	24.0	X	81
	5.0					<u> </u>			2.1	<u> </u>	12,500	24.0	X	ZT
	9.0								2.1	<del>                                     </del>	002,21	24.0	X	9I
	2.0								[1]	<del>                                     </del>		24.0	x	SI
								<u> </u>		<del> </del>	EE1,E1	24.0	^_	71
						<u> </u>				<del></del>	13,133	0.42		EI
	L:-0					<u> </u>			0.1		007,01			
	70							ļ	1.0	ļ		24.0	X	71
	₱.0								0.1	ļ	008'11	24.0	X	
	2.0								I.I		12,400	0.4.0	X	10
	2.0								I'I		008,2	0.42	X	6
	6.0								8.1	l	00£,6	24.0	X	8
											00£,6	24.0		L
											00£,6	24.0		9
	L'0								S'I		11,100	0.4.0	X	S
	9.1								2.5		009'\$	0.42	X	<b>→</b>
	8.1								9.2		004'9	0.4.0	X	ε
	6.1								2.6		10,000	24.0	X	7
	91								9.2		001'11	24.0	X	1
Out of Operation	System, mg/L	zwo/oəs	mW-sec/cm	J\nim	əldsəilqqA li	O SIGIRA	J/uim	minutes	Peak Flow, mg/L	Rate, gpd.	हिश्र	Harbor	("X"	Month
Involves Taking Water System Components	Distribution			Required, mg	pit or water,	00 -0,011	Flow, mg-	Peak Flow,	Customer During	Peak Flow	Producted,	Saratoga		
Conditions, Repair or Maintenance Work that	Remote Point in	-Wm			SetoW 30 Hg	To amsT	During Peak	Point During	Before or at First	mola joed	1.00	enotere2	(Place	oth the
[	Concentration at	Required,		TO muminiM	, , , , , , , , , , , , , , , , , , ,	9	Customer	Measurement	Concentration (C)		Water		Operator	Day of
Emergency or Abnormal Operating	Disinfectant R noticettranged	UV Dose	Lowest	11.5	g ways	Įā.	tzui-T	O is (T)	Disinfectant (2)	j	Net Quantity  of Finished	1	Visited by	
		mminiM				1247 1940-1951	Before or at	the state of the s			vittnsuO JeM	4 1	Staffed or	ſ
	Lowest Residual			했는 글				Contact Time	Lowest Residual				Days Plant	
						<b>表标成</b>	Provided	Disinfectant						I
							Lowest CT			5.054.50				ŀ
gineració Operating		2000	1 \( \O \)	34		ens -Au	SUODEIT	CT Calca				47		1
								2 Sept 1 Mary 107 4 No. 10	to fellolininoino z		[		1	ľ
			*aldsailan/	7 i noitevii	nent striiV	on Lano	4 atsizoma(	Lot aso(IVI)	T Calculations, or		<u> </u>	12.1	<u>_</u>	
	əbixoi	Chlorine D	(s	(Chloramine	ed Chlorine	Combine	_l əni⊤	Erce Chlo	bution System:	inteid ni bər	ristrisM Isul	stant Resid	of Disinfe	Lype (
							<del>.</del>			(Descripe):			Iraviolet R	- 4
	(Same	ic (Cithoram	иеа сиюц	Г Сошр	auozo I	anixe	Chlorine Dic	hlorine						
[			. 113 690:	· ~			-: G seissins		—·		viros Inactiv			1
								August, 2005		:10	onth/Lear	for the N	aily Data	III. D

DEP Form 62-555.900(3)Alternate

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



A. Public Water System (PWS) Information  PWS Name: Welaka Mobile Home Park  PWS Type: ✓ Community Non-Transient Non-Community  Number of Service Connections at End of Month: 108  PWS Owner: Aqua Utilities Florida		Inuc H. (C. ci., Newborn	
PWS Name: Welaka Mobile Home Park  PWS Type:		Investi de di Manha	
PWS Name: Welaka Mobile Home Park  PWS Type:		DWC 11 4'C 4' Nowham	
PWS Type:		PWS Identification Number:	2541242
Number of Service Connections at End of Month: 108	nsient Non-Community	Consecutive	
		tal Population Served at End of Month:	324
Contact Person: Brian Heath	C	ontact Person's Title: Area Manager	ſ
Contact Person's Mailing Address: PO Box 490310	City: Leesburg	State: Florida	Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980	C	ontact Person's Fax Number: (352) 787-633	33
Contact Person's E-Mail Address: beheath@aquaamerica.com			
3. Water Treatment Plant Information			
Plant Name: Welaka Mobile Home Park		Plant Telephone Number:	(352) 787-0980
Plant Address: Hamilton Road	City: Satsuma	State: Florida	Zip Code: 32189
Type of Water Treatment by Plant:	ned Water		
	08,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):		nt Class (per subsection 62-699.310(4), F.A.C.	
	License Class   License Num	per Day(s) / Shift(s	) Worked /
Lead/Chief Operator: Paul Thompson A	7251	Days 1st Shift	
Other Operators: Larry White C		Days 1st Shift	
David Haring C	14091	Days 1st Shift	
	<u>_</u>		
I Certification by Lead/Chief Operator			
I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief	operator of the water treatme	at plant identified in part Lof this repo	ort I certify that the
information provided in this report is true and accurate to the best of my knowledge and			
International Standard 60 or other applicable standards referenced in subsection 62-555			
were prepared each day that a licensed operator staffed or visited this plant during the n			
(2) if applicable, appropriate treatment process performance records. Furthermore, I ag		of operations records to the PWS own	er so the PWS owner can
retain them, together with copies of this report, at a convenient location for at least ten	years.		
Paul Thompson			A7251

PWS I	dentificatio	n Number:		2541242		Plant Name:	Welaka Mol	bile Home	Park					
	aily Data	for the N	lonth/Year	of:		August, 2005						·		
			g Virus Inacti											
	traviolet R			r (Describe):		norne [	Chlorine Di	oxide	Ozone	[ Comb	ined Chlorii	ne (Chloran	nines)	
⊢														
Type o	t Disinfe	ctant Resid	dual Maintai			✓ Free Chle				(Chloramine		Chlorine I	Dioxide	
l				C	CT Calculations, or	UV Dose, to	Demostate]	Four-Log	Virus Inac	tivation, if	Applicable*			
1	l						ulations				UVI			
							Prince to a		METAL STATE	<b>4</b> 9.55				
			Turation in the con-				Lowest CT							
	Days Plant				Lowest Residual	Disinfectant	Provided							
1	Staffed or	1	Net Quantity		Disinfectant	Contact Time (T) at C	Before or at First					Minimum	Lowest Residual Disinfectant	선택하는 사람들은 경우를 가장하는 것이다. 10. 전략으로 19. 기계를 가장하는 것이다.
	Visited by		of Finished		Concentration (C)	Measurement	Customer	1.00			Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of		Hours plant		ŀ	Before or at First	Point During	During Peak			Minimum CT	Operating	Required,	Remote Point in	Conditions: Repair or Maintenance Work that
the	(Place	in	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water.	Required, mg		mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
1	Х	24.0	11,275		1.4								0,8	
2	X	24.0	9,540		1.4				1				0.9	
3	X	24.0	8,600		1.2								0.8	
4	X	24.0	6,970		1.3					İ			0.8	
5	Х	24.0			1.3								0.8	
6		24.0	8,177											
7		24.0	8,177											
8	X	24.0	8,177		1.1								0.8	
9	X	24.0	8,280		1.1		<u> </u>	<u> </u>					0.8	
10	X	24.0	7,640		1,1								0.8	
11	X	24.0	7,870		1.2								0.8	
12	X	24.0	9,820		1.1		ļ						0.8	
14		24.0 24.0	9,640				<b>{</b>	ļ	<b>{</b>					
15	X	24.0	9,640 9,640		ļ			<b></b>						
16	X	24.0	6,820		1.1		<del> </del>		<del> </del> -		·		0.8	
17	X	24.0	7,650		1.1		<del>                                     </del>			<b> </b>			0.8	
18	X	24.0	10,970		1.1								0.8	
19	X	24.0	10,290		1.1		<u> </u>	<b>}</b>	<del> </del>	·		ļ	0.9	
20		24.0	11,540				<del> </del>		<b>†</b>				0.0	
21		24.0	11,540						1					
22	X	24.0	11,540		1.2		<del>                                     </del>						1.0	
23	Х	24.0	11,360		1.2				<b>,</b>				1.0	
24	X	24.0	9,260		1.1								0.9	
25	X	24.0	12,540		1.0								0.9	
26	X	24.0	8,960		0.6								0.4	
27		24.0	10,497											
28		24.0	10,497											
29	Х	24.0	10,497		1.5								1.3	
30	X	24.0	10,250		1.2								1.2	
31	X	24.0	9,360		1.2		<u> </u>	L	L				1.1	
Total	A STATE OF THE STA		297,255											
Avgerag	3		9,589											

12,540

Maximum

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



See Pages 4 for Instr	uctions.							
I. General Information	for the Month/	Year of: Septembe	er, 2005					
A. Public Water System	(PWS) Informa	ation						
PWS Name:	Saratoga Harbor				·	PWS Identification Number:	2541008	
PWS Type:	✓ Community	Non-Transient Non-Comm	unity	ansient Non-Comr		Consecutive		
Number of Service Connec	tions at End of Month			· · · · · · · · · · · · · · · · · · ·		opulation Served at End of Mo	nth: 175	
PWS Owner:	Aqua Utilities Floric							
Contact Person:	Brian Heath			***	Contac	t Person's Title: Are	ea Manager	
Contact Person's Mailing A	ddress:	PO Box 490310	<del></del>		City: Leesburg	State: Florida	Zip Code:	34749
Contact Person's Telephone	Number	(352) 787-0980			Contac	t Person's Fax Number: (35	52) 787-6333	
Contact Person's E-Mail Ac	ddress:	beheath@aquaamerica.co	om					
B. Water Treatment Pla	ant Information							
Plant Name:	Sarasota Harbor					Plant Telephone Number:	(352) 787-0	980
Plant Address:	Gibbs Avenue				City: Satsuma	State: Florida	Zip Code:	32189
Type of Water Treatment b	y Plant:	✓ Raw Ground Water	Purchased Fini	shed Water				
Permitted Maximum Day C	Operating Capacity of	Plant, gallons per day:		200,000				
Plant Category (per subsect	ion 62-699.310(4), F.	A.C.): IV			Plant Cl	ass (per subsection 62-699.310		
Licensed Operators		Name		License Class	License Number	Day(s)	/ Shift(s) Worked	
	Paul Thompson			A	7251	Days 1st Shift		
Other Operators:	Larry White			С	7082	Days 1st Shift		
The second second second	David Haring			С	14091	Days 1st Shift	···	
							· · · · · · · · · · · · · · · · · · ·	
14 m								·
I Certification by Lead	d/Chief Operato	*						
		operator licensed in Florida,	am the lead/ship	f an anoton of the	v.oto= teootee out n	lant identified in nort I of	this report Logitify	that the
		ue and accurate to the best of						
NSF International Star	ndard 60 or other	applicable standards reference	ced in subsection	62-555.320(3),	F.A.C. I also certi	ty that the following addi	itional operations rec	ords for this
		ensed operator staffed or visit						
		treatment process performan				ditional operations recor	ds to the PWS owne	r so the PWS
owner can retain them	, together with co	pies of this report, at a conve	enient location for	at least ten year	rs.			
			Paul Thompso	on			A7251	
Signature and Date			Printed or Typ				License Nu	mber

PWS I	lentification	n Number:		2541008		Plant Name:	Saratoga Ha	rbor						
III. D	aily Data	for the N	lonth/Year	of:		September, 200	)5							
$\overline{}$			g Virus Inactiv		val: ▼ Free (									
	traviolet R			er (Describe):		THOTHE	Chlorine Di	oxide	Ozone	☐ Comb	ined Chlori	ne (Chlorar	ni <b>ne</b> s)	
<b>-</b>														
Type	of Disinfe	ctant Resid	dual Maintai		ibution System:	▼ Free Chlo				(Chloramine		Chlorine I	Dioxide	
1 .			ļ		T Calculations, or	UV Dose, to	Demostate 1	Four-Log	Virus Inac	tivation, if	Applicable			
		1	] :			TCalc						Dose	Marie Harris	
1						<b>沙斯</b> 泰斯尔	Lowest CT	. 1 66 . 7	4	1.48		E-CTO		
		4.1												
	Days Plant		1	1	Lowest Residual	Disinfectant Contact Time	Provided Before or at		t .		100 100 100 100 100 100	100	T	
	Staffed or	[	Net Quantity	1	Disinfectant	(T) at C	First		<b>.</b>			Minimum	Lowest Residual Disinfectant	
	Visited by		of Finished		Concentration (C)	Measurement	Customer	Maria di	1	[77] B. B. B.	Lowest	UV Dose	Concentration at	Emergency or Abnormal Operating
Day of	Operator	}	Water	1	Before or at First	Point During	During Peak			Minimum CT	Operating	Required,	Remote Point in	
the	(Place	Saratoga	Producted,	Peak Flow	Customer During	Peak Flow,	Flow, mg-	Temp of	pH of Water.	Required, mg		-mW-	Distribution	Involves Taking Water System Components
Month	"X")	Harbor	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable		mW-sec/cm2	sec/cm <sup>2</sup>	System, mg/L	Out of Operation
1 .	X	24.0	5,000		1.4		-					,	0.8	
2	X	24.0	5,200		2.6								2.0	
3		24.0	8,833						T					
4		24.0	8,833											
5	X	24.0	8,833		1.0								0.5	
6	X	24.0	10,500		1.1								0.6	
7	X	24.0	5,600		1.2								0.6	
8:	X	24.0	10,300		0.8								0.4	
9	X	24.0	5,100		0.8								0.4	
10		24.0	10,700	ļ										
11		24.0	10,700											
12	X	24.0	10,700		0.6		ļ						0.4	
14	X	24.0 24.0	5,100		0.4								0.3	
15	X	24.0	10,500		1.8		ļ	ļ	ļ			<b> </b>	0.6	
16	X	24.0	8,300		0.6	<b></b>	ļ						0.4	<u> </u>
17.		24.0	12,733		0.0		<del></del>	<del> </del>	<del></del>				0.4	
18		24.0	12,733		<del></del>		<del> </del>			<del> </del>			<del> </del>	
19	Х	24.0	12,733		1.2			-		<del> </del>		<del> </del>	0.5	
20	X	24.0	12,753		1.2				-	-			0.9	
21	Х	24.0	10,900		1.0					<u> </u>	··		0.5	1
22	X	24.0	16,400		0.6							<b></b>	0.4	
23	X	24.0	10,500		0.6								0.4	
24		24.0	10,767											
25		24.0	10,767											
26	X	24.0	10,767		1.5								1.0	
27	X	24.0	10,200		1.0								0.6	
28	X	24.0	5,200		1.3								1.0	
29	X	24.0	10,300		1.5								0.8	
30	Х	24.0	10,600		1.6							<u> </u>	1.2	
31 Total		24.0	260.000			<u> </u>	l		L	1		L	<u> </u>	<u></u>
	<u> </u>	- 15 A 24 A	268,800											
Avgerag	B ,	er and the second	8,671											

16,400

Maximum

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



See Pages 4 for Instr								
I. General Information	for the Month/	Year of: Septembe	r, 2005					
A. Public Water System	(PWS) Informa	tion						
PWS Name:	Welaka Mobile Hom				. =	PWS Identification Number:	2541242	
PWS Type:	✓ Community	Non-Transient Non-Commu	unity T	ransient Non-Com	munity	Consecutive		
Number of Service Connec	tions at End of Month					Population Served at End of Month:	324	
PWS Owner:	Aqua Utilities Florid	· · · · · · · · · · · · · · · · · · ·						
Contact Person:	Brian Heath				Cont	act Person's Title: Area M	anager	
Contact Person's Mailing A	ddress	PO Box 490310			City: Leesburg	State: Florida	Zip Code: 34749	
Contact Person's Telephone	Number:	(352) 787-0980			Cont	act Person's Fax Number: (352) 7	87-6333	
Contact Person's E-Mail Ac	ldress:	beheath@aquaamerica.co	om_	011021				
B. Water Treatment Pla	ant Information	_						
Plant Name:	Welaka Mobile Hom	e Park				Plant Telephone Number:	(352) 787-0980	
Plant Address:	Hamilton Road				City: Satsuma	State: Florida	Zip Code: 32189	
Type of Water Treatment by		✓ Raw Ground Water	Purchased Fine	ished Water				
Permitted Maximum Day O				108,000				
Plant Category (per subsect	ion 62-699.310(4), F.	A.C.): V			Plant (	Class (per subsection 62-699.310(4), l	F.A.C.): D	
Licensed Operators	*	Name		License Class	License Number	Day(s)/S	hift(s) Worked	and the
Lead/Chief Operator:				A	7251	Days 1st Shift		
Other Operators:	Larry White			С	7082	Days 1st Shift		
v.	David Haring			С	14091	Days 1st Shift		
		<del></del>						
							<u> </u>	
				ļ				
II. Certification by Lead	/Chief Operator	•						
			am the lead/chie	of operator of the	water treatment	plant identified in part I of this	report I certify that the	<u></u>
						g water treatment chemicals u		to NSF
						at the following additional op		
						rds of amounts of chemicals u		
					these additional	operations records to the PWS	owner so the PWS owner	r can
retain them, together w	ith copies of this	report, at a convenient location	on for at least ter	n years.				
6.			Paul Thompso				A7251	
Signature and Date			Printed or Typ	oed Name			License Number	

PWS Id	VS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park													
III. D	aily Data	for the N	onth/Year	of:		September, 200	15							
Means	of Achievii	ng Four-Log	g Virus Inactiv	vation/Remov	al: <b>▽</b> Free C	hlorine [	Chlorine Di	oxide	Czone	Comb	ined Chlorir	ne (Chloran	nines)	
1	traviolet R	_	-	r (Describe):	• • • • • • • • • • • • • • • • • • • •	•	emorate Di	ordae	Ozone	1 Como	inca cinora	ic (c.norar	,	
Type o	of Disinfed	rtant Resid			ibution System:	▼ Free Chlo	rine [	Combin	ed Chlorine	(Chloramine	s) [	Chlorine I	Dioxide	
Турс	I Distinct	I Resid	luar (viarrica)		T Calculations, or									
					1 Calculations, of	CT Calc			v ii us iiiac		UV I			
						CI Caic	ulations				UVI	JUSC		
					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Lowest CT							
	}					Disinfectant	Provided :		*	30 m 1930 10 10 10 10 10 10 10 10 10 10 10 10 10 1				'노크보다는 이번 그래즘 살이 가면 어린 아름일을 먹었다.
	Days Plant				Lowest Residual	Contact Time	Before or at						Lowest Residual	
	Staffed or		Net Quantity	la a	Disinfectant	(T) at C	First		er Artem		Lowest	Minimum UV Dose	Disinfectant Concentration at	Emergency or Abnormal Operating
Dou of	Visited by	TT	of Finished		Concentration (C)	Measurement	Customer		3.5.75 3.5.75	Minimum CT		Required,		Conditions, Repair or Maintenance Work that
Day of the	Operator (Place	Hours plant in	Water Producted,	Peak Flow	Before or at First Customer During	Point During Peak Flow,	During Peak Flow, mg-			Required, mg		mW-	Distribution	Involves Taking Water System Components
Month	"X")	Operation	gal,	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water, OC	if Applicable	min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Out of Operation *
1	X	24.0	12,680	rane, gpu	1.2	111111111111111111111111111111111111111			AFA 18 8 18 18 18 18 18 18 18 18 18 18 18 1				1.0	
2	Х	24.0	11,460	-	0.7							~~	0.5	
3		24.0	11,843											
4		24.0	11,843											
5	Х	24.0	11,843		1.4								1.2	
6	X	24.0	7,730		1.4								1.3	
7	X	24.0	12,340		1.5			ļ					1.3	
8	X	24.0	10,500		1.3					ļ	<u></u>		1.0	
10	Х	24.0 24.0	8,360 10,267	ļ	1.2								1.0	
11		24.0	10,267		· · · · · · · · · · · · · · · · · · ·									
12	Х	24.0	10,267		1.0								0.8	
13	X	24.0	9,530		1.0								8.0	
14	Х	24.0	18,520		1.0								0.6	
15	X	24.0	15,180		1.0								0.8	
16	X	24.0	20,360		0.7								0.7	
17		24.0	31,980						ļ					
18		24.0	31,980		1.4				<b> </b>				0.5	
19	X	24.0 24.0	31,980 45,900		1.4				<u> </u>		<u> </u>	<del></del>	0.3	
21	X	24.0	27,690		0.8								0.8	
22	X	24.0	28,820		0.8			····					0.6	
23	X	24.0	22,600		0.8								0.6	
24		24.0	18,277											
25		24.0	18,277											
26	X	24.0	18,277		0.6								0.6	
27	Х	24.0	11,130		1.0			ļ	<u></u>				0.7	
28	X	24.0	8,760		1.1		ļ		ļ	ļ	ļ	-	1.0	
29 30	X	24.0	10,700		1.0			-		-	-		0.8	
31	X	24.0 24.0	31,300		0.9		-	<del>                                     </del>				-	-0.7	
Total	ani ani	24.0	530,660				<u></u>	L	L	<u>l</u>	<u> </u>	<u> </u>	<u>.                                    </u>	I
A	235	1 (1995年) (1995年) 1 (1995年) (1995年)	330,000											

45,900

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



See Pages 4 for Instr								
I. General Information	for the Month/	Year of: October, 2	2005					
A. Public Water System	(PWS) Informa	tion						,
	Saratoga Harbor		<del>-</del>			PWS Identification Number:	2541008	
PWS Type:	✓ Community	Non-Transient Non-Comm	nunity Tr	ansient Non-Com	munity	Consecutive	2011000	
Number of Service Connect	tions at End of Month					Population Served at End of Month:	175	
	Aqua Utilities Florid				1.0	openion out to de pile of incide.		
Contact Person:	Brian Heath				Conta	ct Person's Title: Area Mana	арег	
Contact Person's Mailing A	ddress:	PO Box 490310			City: Leesburg	State: Florida	· · · · · · · · · · · · · · · · · · ·	34749
Contact Person's Telephone	Number:	(352) 787-0980			<u> </u>	ct Person's Fax Number: (352) 787-		
Contact Person's E-Mail Ad	ldress:	beheath@aquaamerica.co	om					
B. Water Treatment Pla	nt Information			·				
Plant Name:	Sarasota Harbor					Plant Telephone Number:	(352) 787-09	80
Plant Address:	Gibbs Avenue				City: Satsuma	State: Florida	Zip Code:	32189
Type of Water Treatment by		✓ Raw Ground Water	Purchased Finis	shed Water				
Permitted Maximum Day O	perating Capacity of	Plant, gallons per day:		200,000				<del>-</del>
Plant Category (per subsecti	ion 62-699.310(4), F.	A.C.): IV			Plant C	lass (per subsection 62-699.310(4), F.A	.C.): C	
Licensed Operators		Name		License Class	License Number	Day(s) / Shif	t(s) Worked	
Lead/Chief Operator:				A	7251	Days 1st Shift		
Other Operators:	Larry White			C	7082	Days 1st Shift		
	David Haring			C	14091	Days 1st Shift		
4 44								
1 3 3 4 4								
II. Certification by Lead	Chief Operator	•						
				C		1 .:1 .:6 1:	. T	1 44
						lant identified in part I of this re		
						g water treatment chemicals use		
						ify that the following additional		
						records of amounts of chemical		
rates; and (2) if application	ıble, appropriate	treatment process performand	ce records. Furth	ermore, I agree	to provide these a	dditional operations records to t	he PWS owner	so the PWS
owner can retain them,	together with co	pies of this report, at a conve	nient location for	at least ten year	rs.			
			Paul Thomas				A 7251	
Signature and Date			Paul Thompson				A7251	1
Signature and Date			Printed or Type	eu name			License Num	ider

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											002,8	2.	1.44	Avgerage
											263,500	A14 5 K-	100	IstoT
	4.0								I I		006,8	24.0	X	15
											006'8	24.0		30
											006,8	0.42		67
	2.0								E.1		10,500	0.42	X	87
	8.0								8.1		10,400	0.42	X	17.
	6.0							<b> </b>	LI	<b>†</b>	000'\$	74.0	X	97
	0.1						1		0.2	<del> </del>	005'5	24.0	X	75
	1.2						1	<u> </u>	0.2		006,01	0.42	X	74
							<u> </u>				006'01	24.0	<del>  ^-</del>	23
		-							<u> </u>		006,01	24.0	<del> </del>	77
	8.I				<u></u>			-	S.E	<del>                                     </del>	000,01	24.0	X	17
	1.2				<del></del>		<del> </del>	<del> </del>	2.5	<u> </u>	008,01	24.0	<del></del>	+
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			<del></del>	<b>-</b>	<b></b>	<b></b>		ļ	L'0		16,200	24.0	X	81
	1.0		<u> </u>	<u> </u>			<b> </b>	ļ	0.1		9,033	24.0	X	Ll
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	6.1		ļ		<u> </u>				9.2		004,2	24.0	X	13
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										<del></del>	£££,7	24.0	<u> </u>	1 <del>i</del> 1
nonsiedOloinO	System, mg/L	"wɔ/ɔəs	my-sec/cm	.1\nim	əldsəilqqA li	Water, C	7/uiui	sənnutu	Peak Flow, mg/L	Rate, gpd.	gal	Нагрог	("X"	Month
Juvolvės Įaking Water System Components	Distribution	-Wm		Required, mg	pri or water,	to dula t	-gm ,wol7	Peak Flow,	Customer During	Peak Flow	Producted,	Saratoga	Place	әұз
The Mary Committee to Sunday Chomphon				TO muminiM		10 amaT	During Peak	Point During	The state of the s	moli Joed		500,5262		
Summed Sering to Constitute		Required,	And the second second		4.0	4.5			Before or at First		Water		Operator	Day of
Anthereacy Introduct to various and	Concentration at	UV Dose	Lowest		Park Co		Customer	Measurement	Concentration (C)		badzini To		Visited by	
	Disinfectant	muminiM		Parla di Ari	436.7		tzriFl	O is (T)	Disinfectant	i i i	Net Quantity		Staffed or	l i
	Lowest Residual				1 11 22		Before or at	Contact Time	Lowest Residual				Days Plant	1 1
5 11 1 2 3 600 10		Maria de la compansión de la compansión de la compansión de la compansión de la compansión de la compansión de			4872		Provided	Disinfectant					i	i !
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Fuergary of Appening Operating									T Calculations, or	3				
100mm   10												L		<u> </u>
	əbixoi	Chlorine D	(9	(Chloramines	ed Chlorine	omidmoO		№ Free Chlor	bution System:	irtziG ni bər	rietnisM Isul	tant Resid	oəfnisiG 1	o agyT
										(Descripe):	∟ Огре	noissibe	raviolet R	ונ_ מוי
	(səni	е (Срюгат	nined Chlorin	Comb	oroso ¬	əbixo	Chlorine Dic	Plorine (_			vitaent suri V g			
								October, 2005		:10	lonth/Year	/ adi 101	ete(1 vlig	UII D
						por	Saratoga Har	Plant Name:		2541008		подшим и	entification	PI SMd

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



DEP Form 62-555 900(3)Alternate

See Pages 4 for Instr	uctions.							
I. General Information	for the Month/Y	ear of: October,	, 2005					
A. Public Water System	(PWS) Informat	tion						
PWS Name:	Welaka Mobile Home		***			PWS Identification Number	: 2541242	
PWS Type:	✓ Community	Non-Transient Non-Com	munity T	ransient Non-Com	munity	Consecutive	·	
Number of Service Connect	tions at End of Month:	108	<u> </u>			Total Population Served at End of I	Month: 324	
PWS Owner:	Aqua Utilities Florida	a						
Contact Person:	Brian Heath				10	Contact Person's Title:	Area Manager	
Contact Person's Mailing A	ddress:	PO Box 490310			City: Leesburg	g State: Florida	Zip Code:	34749
Contact Person's Telephone	Number:	(352) 787-0980			Ţ.	Contact Person's Fax Number:	(352) 787-6333	
Contact Person's E-Mail Ad	ldress:	beheath@aquaamerica.c	com					
B. Water Treatment Pla	ant Information							
Plant Name:	Welaka Mobile Home	e Park				Plant Telephone Number:	(352) 787-0	1980
Plant Address:	Hamilton Road				City: Satsuma	State: Florida	Zip Code:	32189
Type of Water Treatment by		✓ Raw Ground Water	Purchased Fin	ished Water				
Permitted Maximum Day O				108,000				
Plant Category (per subsect	ion 62-699.310(4), F.A					lant Class (per subsection 62-699.3		
Licensed Operators		Name		License Class	License Nur	nber Day	(s) / Shift(s) Worked	
Lead/Chief Operator:				A	7251	Days 1st Shift		
Other Operators:	Larry White		<del></del>	С	7082	Days 1st Shift		
	David Haring			С	14091	Days 1st Shift		
			·					
	<del></del>							
A The second of the second of								
				L	-u			
II Certification by Lead	Chief Operator					_		
			a am the lead/chie	f operator of the	water treatm	ent plant identified in part I	of this report. I certify	that the
						nking water treatment chemi		
						fy that the following addition		
						records of amounts of chemi		
					these additio	nal operations records to the	PWS owner so the P	WS owner can
retain them, together w	ith copies of this	report, at a convenient loca	tion for at least ter	n years.				
			Do. 175	_			A 770E 1	
Signature and Data			Paul Thompso	<del></del>	···		A7251	1
Signature and Date			Printed or Typ	bed Name			License Nu	mber

Page 1

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											10,705	A 37 ( )	ince 🔌	<b>Avgerage</b>
											331,870			[otal
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	L'0	1	**	1			<u> </u>		9.1		12,993	0.42	X	74
	1 - 3			<del></del>		<u> </u>	†				12,993	24.0	<del></del>	23
				† · · · · · · · · · · · · · · · · · · ·	1	<b>†</b>	<u> </u>				£66'71	0.42	<del> </del>	77
	8.0	<b></b>		· · · · · · · · · · · · · · · · · · ·		<u> </u>	†		91	<del></del>	024,82	24.0	X	17
	£.1			· · · · · · · · · · · · · · · · · · ·		<u> </u>	<del>                                     </del>		LI		10,120	24.0	X	50
	9.0			1		<del> </del>	<del>                                     </del>	····	εΊ	<del> </del>	067,7	0.42	X	61
	9.0	·		ļ · · · · · ·		<del> </del>	<del>                                     </del>	<del></del>	<b>⊅</b> ′I	<del> </del>	046,8	24.0	X	81
	4.0	<del></del>		<u> </u>	<b>-</b>	<del> </del>	<del> </del>		9'0	<del> </del> -	£65'6	24.0	$\frac{\lambda}{X}$	LI
	1.0			<u> </u>	1	<del>                                     </del>	<del> </del>	<del> </del>		1	£65,6	0.42	<del>  ^</del> -	91
				<del>                                     </del>	<del> </del>	<del> </del>	<del> </del>	· · · · · · · · · · · · · · · · · · ·		<b>.</b>	£65.6	0.42	<del>                                     </del>	SI
	8.0	<del> </del>	-	<del> </del>		<del> </del>	<del> </del>	<del> </del>	1.1		085,8	0.42	<del>  x</del>	
	2.1		1	<del> </del>	<del> </del>		<del> </del>	<del></del>	£.1	1	062,8	24.0	X	t I
	£.1	ļ	<u> </u>	<del> </del>	<del> </del>	<del> </del>	1	-	61	-	060,8			13
	9.0	<u> </u>		<del> </del>			<del> </del>		S.I	<u> </u>	10,890	0.4.0	X	15
	9.0	<del>                                     </del>	<del> </del>	<del> </del>	<del> </del>	<del> </del>	<del> </del>		5.1			0.4.0	X	II
	90		1	<del> </del>	ļ	<del> </del>	<del> </del>		51	ļ	10,483	24.0	X	01
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	9.0				ļ	ļ	<del> </del>		9.1		15,610	24.0	X	L
	0.1	<b>!</b>		ļ	ļ	<u> </u>	<del>                                     </del>		2.0	ļ	047,8	0.42	X	9
	9.0	ļ		ļ		<u> </u>	<u> </u>		2.1		096'6	24.0	X	ς
	9.0	ļ		ļ		1	ļ		0.1		012,11	24.0	X	Þ
	7.0	ļ		<b>_</b>	<b> </b>		<u> </u>		2.1	<del> </del>	£24,£1	24.0	X	ε
	<del> </del>	<b>.</b>		ļ	ļ	<u> </u>	<b> </b>			ļ	13,423	24.0		ζ
	<del> </del>	ļ	ļ	<u> </u>	ļ	<u> </u>					13,423	0.42		I
Out of Operation	Jystem, matel	zec/cm <sup>2</sup>	my-sec/cm <sup>2</sup>	J/aim	sldsoilqqA Ti	Water, OC	J\nim	səmum	Peak Flow, mg/L	Rate, gpd	Leg	Operation	("X"	throM
Involves Taking Water System Components	noitudinteid	-Wm	UV Dose,	Required, mg		Temp of	-gm ,wolfl	Peak Flow,	Customer During	Peak Flow	Producted,	uı	(Place	aht
Conditions, Repair or Maintenance Work that		Required,	gnissagO	TO muminiM			During Peak	gurnuG mio¶	Before or at First		Water	Hours plant	1	Day of
Emergency or Abnormal Operating	Concentration at	920G VU	Lowest				Customer	Measurement	(D) notigination (C)		bədzini To		Visited by	
	Disinfectant	muminiM		1000			taiiT	O is (T)	Disinfectant	to.	Net Quantity	ł	Staffed or	
	Lowest Residual						Before or at	Contact Time	Lowest Residual	-			Days Plant	
						Maria Maria Albaria Maria	Provided	Disinfectant						
		l				Popular S	Lowest CT	3			1.35			
		280	1 A D			garanes	Shoush	CT Calcu	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					l
				Transmit	200111 00 11 1	god mo	the state of the s		TO forsomername T					
	<u> 1                                   </u>			A Tr noitsvi	then! giniV	סטוג-1 אמ		-	T Calculations, or			L		
	əbixoi	Chlorine D		Chloramines	d Chlorine (	Combine	☐ əni	Ltee Chlor	bution System:	irteiG ni bə	riemisM leu	tant Resid	oolnisid 1	Type o
										(Descripe):			raviolet Ra	_
	rucs)	е (Сиютат	ned Chlorin	l Combi	Ozone	) aprx	ord ormoin	hlorine —						
											Virus Inactiv			
								October, 2005		:10	onth/Year o	1/ off the 1/	aily Data	III. D
					.sa.k	le Home	Welaka Mobi	Plant Name:	[ · · · · · · · · · · · · · · · · · · ·	2541242		Number:	entification	PLSMd
										0.01730				

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



/S Name: /S Type:	Saratoga Harbor							
						PWS Identification Number:	2541008	
	✓ Community	Non-Transient Non-Co	ommunity 3	Fransient Non-Comr		Consecutive		
mber of Service Connect	tions at End of Montl	n: 50			Total F	opulation Served at End of Month:	175	
/S Owner:	Aqua Utilities Florio	la						
ntact Person:	Brian Heath				Contac	t Person's Title: Area M	1anager	
ntact Person's Mailing A		PO Box 490310				State: Florida	Zip Code:	34749
ntact Person's Telephone	Number:	(352) 787-0980			Contac	t Person's Fax Number: (352) 7	787-6333	
ntact Person's E-Mail Ac		beheath@aquaameric	a.com					
ater Treatment Pla	ant Information							
nt Name:	Sarasota Harbor					Plant Telephone Number:	(352) 787-0	
nt Address:	Gibbs Avenue				City: Satsuma	State: Florida	Zip Code:	32189
e of Water Treatment by	y Plant:	✓ Raw Ground Water	Purchased Fir	nished Water				
mitted Maximum Day O	perating Capacity of	Plant, gallons per day:		200,000				
nt Category (per subsect	ion 62-699.310(4), F.	.A.C.):	IV			ass (per subsection 62-699.310(4),		
icensed Operators		Name		License Class	License Number	Day(s) / S	hift(s) Worked	STATE OF THE STATE
ad/Chief Operator:	Paul Thompson			A	7251	Days 1st Shift		
ner Operators:	Larry White			С	7082	Days 1st Shift		
•	David Haring			С	14091	Days 1st Shift		

Page 1

DEP Form 62-555..900(3)Alternate

**Ѕатаю**ва Нагрог

Plant Name:

2541008

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	T.0					-		<u> </u>	7.1	-	005,21	0.42	X	57
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	9.0		ļ					ļ	8.1	-	5,200	0.42	X	77
	2.0				ļ				8.1	<b></b>	10,433	0.4.0	X	71
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	\$.0								5.1	<b> </b>	001,8	0.42	X	81
	€.0	<u> </u>		ļ		<u> </u>			<b>b</b> ,1	<b>!</b>	005,01	0.4.0	X	71
	0.1				<u> </u>				0°E	<b>.</b>	004,2	0.4.0	X	91
	2.0				<del>                                     </del>		<b>L</b> -		7.1		009,2	0.42	X	SI
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	€.0		<del> </del>	<u> </u>					2.1		006.2	24.0	X	6
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			<del> </del>					<b></b>	9.1	-	008,8	24.0	X	7
	9 <sup>0</sup>		<u> </u>					-	2.1	<u> </u>	005,01	24.0	X	1
Out of Operation	System, mg/L	sec/cm <sup>2</sup>	"My-sec/cm	J/mm	sldsoilqqA li	O TOTRA	J/nim	sənnim	Peak Flow, mg/L	Rate, gpd.	gal.	Harbor	("X"	Month
Involves Taking Water System Components	nottudruzid		1	Required, mg	TO MARCIA	O TeleW	-8m, wold	Peak Flow,	Customer During	Peak Flow	Producted,	Saratoga	9) (Place	the
Conditions; Repair or Maintenance Work that		Required, mW-	Operating UV Dose,	Minimum CT		lo amaT	During Peak	Point During	Before or at First	1	Water	3	Operator	Day of
	Concentration at	UV Dose	Lowest	μ.)		- A	Customer	Measurement	Concentration (C)		of Finished		Visited by	30 7.00
- 10年の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の	Instableicid	mmminiM esoft VIII	130/110 1	langer in		<b>持有關</b>	First	Ons(T)	Disinfectant		Net Quantity	80 B	Staffed or	ł
	Lowest Residual						Before or at	Contact Time	Lowest Residual				Days Plant	
							Provided	Disinfectant				1.00		
							Lowest CT							ļ
		50		April 193		道。表现一	eriens.	(美国的大型工作)		1. 1.1		P 27	10 m	
			$\mathbf{\Omega}\mathbf{\Lambda}\mathbf{E}$	1387 94		1	* snoitsh	Control of the Contro				. 10		
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The second secon	apryot	Chlorine D		Chloramines				► Free Chlor	bution System:		nai Maintain	uant Kesid	ooluisia i	ı Abe o
	~kiroi.	G190			, -:110 P		<u> </u>							_
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							(	November, 2005		:10	onth/Year c	TOP THE IN	EDECT SHE	a un

PWS Identification Number:

DEP Fom 62-555 900(3)Alternate

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



See Pages 4 for Instr											
I. General Information	for the Month/Y	rear of: November, 200	05								
A. Public Water System	(PWS) Informa	tion									
PWS Name:	Welaka Mobile Hom					PWS Identification Number:	2541242				
PWS Type:	✓ Community	Non-Transient Non-Community	/ Tr	ansient Non-Com	munity	Consecutive					
Number of Service Connect	tions at End of Month	: 108			Tota	al Population Served at End of Month:	324				
PWS Owner:	Aqua Utilities Florida	a				-					
Contact Person:	Brian Heath				Con	tact Person's Title: Area Ma	anager				
Contact Person's Mailing A	ddress:	PO Box 490310			City: Leesburg	State: Florida	Zip Code:	34749			
Contact Person's Telephone	Number:	(352) 787-0980			Con	tact Person's Fax Number: (352) 78	87-6333				
Contact Person's E-Mail Ad		beheath@aquaamerica.com									
B. Water Treatment Pla	ant Information										
Plant Name:	Welaka Mobile Hom	e Park				Plant Telephone Number:	(352) 787-0	980			
Plant Address:	Hamilton Road				City: Satsuma	State: Florida	Zip Code:	32189			
Type of Water Treatment by			Purchased Finis	shed Water							
Permitted Maximum Day O	perating Capacity of I	Plant, gallons per day:		108,000							
Plant Category (per subsecti	ion 62-699.310(4), F.					Class (per subsection 62-699.310(4), F					
Licensed Operators		Name		License Class	License Number	er Day(s) / S	hift(s) Worked				
Lead/Chief Operator:	Paul Thompson			A	7251	Days 1st Shift					
Other Operators:	Larry White			С	7082	Days 1st Shift					
	David Haring C 14091 Days 1st Shift										
-											
						·					
I Certification by Lead	I/Chief Operator										
			4h = 1 = 1/-1-1-	C		plant identified in next I of this	ranget I south	that the			
	•	operator licensed in Florida, am		-		-					
		ue and accurate to the best of my									
		cable standards referenced in sub									
		operator staffed or visited this pla									
		process performance records. Fur			these additional	operations records to the PWS	owner so the PV	WS owner can			
retain them, together w	vith copies of this	report, at a convenient location f	for at least ten	years.							
			Paul Thompso	n			A7251				
Signature and Date			Printed or Typ				License Nu	mber			
organiture and Date			i inica oi 1yp	ca Name			License Nu				

Public   P	
Means of Achieving Four-Log Virus Inactivation/Removal   Free Chlorine   Chlorine Dioxide   Combined Chlorine (Chloramines)   Chlorine Dioxide	
Means of Achieving Four-Log Virus Inactivation/Removal   Free Chlorine   Chlorine Dioxide   Combined Chlorine (Chloramines)   Chlorine Dioxide	
Type of Disinfectant Residual Maintained in Distribution System:   Free Chlorine   Combined Chloramines   Combin	
Type of Disinfectant Residual Maintained in Distribution System:	
Days Plant   Staffed or Visited by Operator the Month   TX"   Operation   Gal.   Month   TX"   Operation   Gal.   Staffed or X   Average   Avera	
Days Plant   Staffed or Visited by Operator   Hours plant the Houth   Producted, Month	
Days Plant Staffed or Visited by Operator the Month 7X") Operator 1 X 24.0 9.470	
Days Plant   Staffed or Visited by   Operator the Producted, Month   Producted, Month   Producted, Month   Producted, Peak Flow, Month   Producted, Month   Minimum CT   Operating   Required, Month   Minimum CT   Operating   Required, Month   Minimum CT   Operating   Required, Month   Minimum CT   Operating   Required, Month   Minimum CT   Operating   Not on the Producted, Month   Minimum CT   Operating   Not on the Producted, Month   Minimum CT   Operating   Not on the Producted, Month   Minimum CT   Operating   Not on the Producted, Month   Minimum CT   Operating   Not on the Producted, Month   Minimum CT   Operating   Not on the Producted, Month   Minimum C	
Days Plant   Staffed or Visited by   Operator the Producted, Month   Producted, Month   Producted, Month   Producted, Peak Flow, Month   Producted, Month   Minimum CT   Operating   Required, Month   Minimum CT   Operating   Required, Month   Minimum CT   Operating   Required, Month   Minimum CT   Operating   Required, Month   Minimum CT   Operating   Not on the Producted, Month   Minimum CT   Operating   Not on the Producted, Month   Minimum CT   Operating   Not on the Producted, Month   Minimum CT   Operating   Not on the Producted, Month   Minimum CT   Operating   Not on the Producted, Month   Minimum CT   Operating   Not on the Producted, Month   Minimum C	
Day Plant Staffed or Visited by Visited by Visited by Visited by Operator the (Place Month)   Part Producted, Pask Flow, mg/L   Pask Flo	
Staffed or Visited by	
Visited by Operator the Operator the Operator the Operator the Amount of Producted, Peak Flow Month (Place X X) 24.0 (10,330) (20	
Day of the the the the the the the the the the	rating
Producted   Peak Flow   Peak Flow   Peak Flow   Peak Flow   Rate, gpd.   Peak Flow   Pea	
1       X       24.0       9,470       1.1       0.4         2       X       24.0       8,130       1.5       0.5         3       X       24.0       10,230       1.6       0.5         4       X       24.0       10,450       1.5       0.5         5       24.0       10,370       0.5       0.5         6       24.0       10,370       1.4       0.5         7       X       24.0       10,370       1.4       0.5         8       X       24.0       5,610       1.5       0.5	mponents
2       X       24.0       8,130       1.5       0.5         3       X       24.0       10,230       1.6       0.5         4       X       24.0       10,450       1.5       0.5         5       24.0       10,370       0.5       0.5         6       24.0       10,370       0.5       0.5         7       X       24.0       10,370       1.4       0.5         8       X       24.0       5,610       1.5       0.5	
3       X       24.0       10,230       1.6       0.5         4       X       24.0       10,450       1.5       0.5         5       24.0       10,370       0.5       0.5         6       24.0       10,370       0.5       0.5         7       X       24.0       10,370       1.4       0.5         8       X       24.0       5,610       1.5       0.5	
4       X       24.0       10,450       1.5       3.5         5       24.0       10,370       3.0 <td< td=""><td></td></td<>	
5     24.0     10,370  <	
6 24.0 10,370	
7         X         24.0         10,370         1.4         0.5 <td></td>	
8 X 24.0 5,610 1.5 5.610 5.5 5.5 5.5 5.5 5.5 5.5 5.5 5.5 5.5 5.	
	<del></del>
9 X 24.0 12,100 1.5 0.5	
10 X 24.0 8,930 1.5 0.5	
11 X 24.0 9,730 1.7 0.5	
12 24.0 9,307	
13 24.0 9,307	
14 X 24.0 9,307 1.6 0.5	
15 X 24.0 8,710 1.5 0.5	
16 X 24.0 8,480 1.5 0.6 17 X 24.0 8,790 1.7 0.6	
18 X 24.0 8,840 1.5 0.5	
20 24.0 8,807	
21 X 24.0 8,807 2.6 1.8	
22 X 24.0 10,880 1.8 0.8	
23 X 24.0 11,950 1.7 0,8	
24 X 24.0 9,510 1.7 0.8	
25 X 24.0 6,980 1.5 0.6	
26 24.0 9,100	
27 24.0 9,100	
28 X 24.0 9,100 1.5 0.6	
29 X 24.0 6,460 1.6 0.5 30 X 24.0 9,490 1.5	
30 X 24.0 9,490 1.5 0.7 31 24.0	
Total 277,490	
Avgerage 8,951	
Maximum 12,100	

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



#### Polymer Page 3 Due in December

See Pages 4 for Instr					· · · · · · · · · · · · · · · · · · ·			
I. General Information	for the Month/	Year of: December,	2005					
A. Public Water System	(PWS) Informa	tion						
PWS Name:	Saratoga Harbor					PWS Identification Number:	2541008	
PWS Type:	✓ Community	Non-Transient Non-Commur	nity 🔲 Tr	ansient Non-Com	munity	Consecutive		
Number of Service Connect	tions at End of Month	i: 50			T	otal Population Served at End of M	Ionth: 175	
PWS Owner:	Aqua Utilities Florid	a						
Contact Person:	Brian Heath				C	Contact Person's Title: A	rea Manager	
Contact Person's Mailing A	ddress:	PO Box 490310			City: Lecsburg	State: Florida	Zip Code: 34749	
Contact Person's Telephone		(352) 787-0980			C	ontact Person's Fax Number: (2	352) 787-6333	
Contact Person's E-Mail Ad		beheath@aquaamerica.cor	<u>n</u>					
B. Water Treatment Pla	<del></del>							
Plant Name:	Sarasota Harbor					Plant Telephone Number:	(352) 787-0980	
Plant Address:	Gibbs Avenue				City: Satsuma	State: Florida	Zip Code: 32189	
Type of Water Treatment by	<u> </u>	✓ Raw Ground Water	Purchased Fini	<del> </del>				
Permitted Maximum Day O				200,000				
Plant Category (per subsecti	ion 62-699.310(4), F.					ant Class (per subsection 62-699.31		
Licensed Operators		Name		License Class	License Nun		s) / Shift(s) Worked	, a.
Lead/Chief Operator:				A	7251	Days 1st Shift		
Other Operators:	Larry White			С	7082	Days 1st Shift		
	David Haring			C	14091	Days 1st Shift		
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I Certification by Lead	/Chief Operator	•						
	<u></u>	operator licensed in Florida, a	m the lead/chie	f operator of the	e water treatme	ent plant identified in part Lo	of this report. I certify that the	
_	•	•		-		•	cals used at this plant conform t	o
	-				•	_	ditional operations records for t	
		• •					hemicals used and chemical fee	
						se additional operations reco	ords to the PWS owner so the P	ws
owner can retain them,	, together with co	pies of this report, at a conveni	ent location for	at least ten yea	rs.			
			Paul Thompso	n			A7251	_
Signature and Date			Printed or Typ	ed Name			License Number	

PWS I	lentification	n Number:		2541008		Plant Name:	Saratoga Ha	rbor						
III. D	aily Data	for the N	lonth/Year	of:		December, 200	5							
			g Virus Inactiv		ral: <b>▼</b> Free C	hlorine I	Chlorine Di	ovide	C Ozone	厂 Comb	ined Chlorii	ne (Chlorar	nines)	
1	traviolet R			r (Describe):			Chiornic Di	OAdc	Ozone	1 Como	inca Cinora	ie (Cinoriii		
<b>⊢</b>					ibution System:	▼ Free Chlo	ring [	Combin	ned Chlorine	(Chloramine	م ر	Chlorine I	Dioxide	
Type	Distinct	tani Kesi	raman		-								Francis Santania	e water a later of the second
1.		-			T Calculations, or			rour-Log	y virus mac	uvation, if 7				
1		1	i				ulations	1	<u> </u>		3.00 UV 1	Dose		
]	1						Lowest CT					i tauri		[발송사 ] - 그 - 그 - 그 - 그 - 그 - 그 - 그
1						Disinfectant	Provided					1.1.2	* F. O. O. S. R.	
	Days Plant				Lowest Residual	Contact Time	Before or at		1			1 - Light - Li	Lowest Residual	
1	Staffed or		Net Quantity		Disinfectant	(T) at C	First				eritati ba	Minimum	Disinfectant	
	Visited by		of Finished		Concentration (C)	Measurement	Customer			Minimum CT	Lowest Operating	UV Dose Required,	Concentration at	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that
Day of the	Operator (Place	Saratoga	Water Producted,	Peak Flow	Before or at First Customer During	Point During Peak Flow,	During Peak Flow, mg-		nH of Water	Required, mg		mW-	Distribution	Involves Taking Water System Components
Month	"X")	Harbor	gal.	Rate, gpd.	Peak Flow, mg/L	minutes	min/L	Water O	if Applicable	min/L	mW-sec/cm <sup>2</sup>		System, mg/L	Out of Operation
1	X	24.0	5,250	rate, gpa.	1.5	· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , , ,	, , , , ,	1		300,000	00000	0.6	
2	Х	24.0	5,000		1.5		<del></del>		<del>                                     </del>	<del> </del>			0.8	
3		24.0	12,233											
4		24.0	12,233											
5.	X	24.0	12,233		1.7					ļ <u>.</u>			0.6	
6	X	24.0	10,800		1.7					ļ			1.0	
7	X	24.0	21,400		1.5		<u> </u>		<b>_</b>	ļ <u>-</u>			1.0	
8	X	24.0	10,200		1.6				-	ļ	ļ	<u> </u>	0.6	
10	^	24.0 24.0	10,400 10,900	<b> </b>	1.5				<del> </del>	<del> </del>			0.4	
11		24.0	10,900					<del> </del>	<del>                                     </del>	<del>                                     </del>		<del>                                     </del>	<u> </u>	
12	Х	24.0	10,900		1.7			<del> </del>		<u> </u>	<del></del>		0.4	
13	Х	24.0	10,500		1.3				<del> </del>	<del>                                     </del>			0.4	
14	Х	24.0	5,700		1.3			1	T				0.3	
15	Х	24.0	10,500		1.4								0.3	
16	Х	24.0	9,900		1.5								0.3	
17.	ļ	24.0	5,133					<u> </u>			ļ			
18		24.0	5,133					<u> </u>	<b></b>	<u> </u>				
19	X	24.0	5,133 5,000		1.4			ļ		<u> </u>	ļ		0.3	
21	X	24.0	5,500		1.3			ļ	<u> </u>			<del> </del>	0.3	
22	X	24.0	10,500		1.5	····		<del> </del>	<del> </del>	<del> </del>		f	0.3	
23	X	24.0	5,200		1.5		<b>-</b>	<del> </del> -	<del> </del> -		-		0.3	
24		24.0	7,167						T	Ť			-	
25		24.0	7,167											
26.	X	24.0	7,167		1.8								0.5	
27	X	24.0	10,100		1.7			ļ		<u> </u>	<u> </u>		0.4	
28	X	24.0	10,700		1.6			<u> </u>	ļ	<del></del>		ļ	0.3	
29 30	X	24.0	7,200		1.8			ļ	<del> </del>	ļ <u>.</u>		ļ <u></u>	0.4	
31	^	24.0 24.0	8,700 8,833		1.6		<del></del>	<del> </del>	<del> </del>	<del> </del>		ļ	0.3	
Total	1	24.0	277,683			<u> </u>		J	1	1	L	L	<u> </u>	1
Avgerag	e		8,958											

21,400

Maximum

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



See Pages 4 for Instructions.

Polymer Page 3 Due in December

I. General Information	for the Month/	Year of:	December, 2005											
A. Public Water System	n (PWS) Informa	ation												
PWS Name:	Welaka Mobile Hon							PV	VS Iden	tification l	Number:		2541242	
PWS Type:	✓ Community	Non-Transient I	Non-Community	Transie	ent Non-Comr	munity		Cor	nsecutiv	/e				
Number of Service Connec	tions at End of Montl	h:	108				1	Total Pop	ulation	Served at l	End of M	onth:	324	
PWS Owner:	Aqua Utilities Florid	da					-							
Contact Person:	Brian Heath						I	Contact P	erson's	Title:	Α	rea Manag	ger	
Contact Person's Mailing A	Address:	PO Box 490310			,	City: J	Leesburg	St	ate: F	lorida			Zip Code:	34749
Contact Person's Telephone	e Number:	(352) 787-0980					(	Contact P	erson's	Fax Numb	er: (3	352) 787-6.	333	
Contact Person's E-Mail Ac	ddress:	beheath@aquaar	merica.com											
B. Water Treatment Plant	ant Information													
Plant Name:	Welaka Mobile Hon	ne Park						Pl	ant Tele	phone Nu	mber:		(352) 787-	0980
Plant Address:	Hamilton Road					City: 5	Satsuma	St	ate: F	lorida			Zip Code:	32189
Type of Water Treatment b	y Plant:	✓ Raw Ground Wa	ter Purch	ased Finished	Water								·	
Permitted Maximum Day C	Operating Capacity of	Plant, gallons per day:		108,	000									
Plant Category (per subsect	tion 62-699.310(4), F	.A.C.):	V						<b>(1</b>			0(4), F.A.(		
Licensed Operators		Name		Lic	ense Class	Licen	se Nun	nber		4/	Day(	s) / Shift	(s) Worked	
Lead/Chief Operator:	Paul Thompson			Α			7251	D	ays 1st S	Shift				
Other Operators:	Larry White			C			7082	D	ays 1st S	Shift				
	David Haring			C			14091	D	ays 1st S	Shift				
								1						
1						1								

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

were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chem (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the	
retain them, together with copies of this report, at a convenient location for at least ten years.	
Paul Thompson	A7251

Page 1

Printed or Typed Name

DEP Form 62-555..900(3)Alternate

Signature and Date

License Number

Welaka Mobile Home Park

Plant Name:

7241747

PWS Identification Number:

											018,810		u	wmixsM
											<b>7</b> 69'8			Avgerage
											661,692		Α	IntoT
				<u> </u>			<u> </u>				655°L	0.42		31
	<b>t</b> .0			<u> </u>				<u> </u>	<b>†</b> 'l		13,800	24.0	Х	30
	<b>7</b> 0			L			<u> </u>		ÞΊ		12,500	24.0	X	. 67
	<b>p</b> .0			L					5.1		018, £1	0.42	X	87
	<b>p</b> 0						L.		5.1		079,01	0.4.0	Х	7.7
	₱'0			<u></u>					6.0		£15,7	0.4.0	X	97
	İ	<u> </u>									EIS'L	24.0		57
		<u> </u>									EIS,7	0.4.0		74
	<b>†</b> 0								þ'l		055,7	24.0	Х	23
	₱'0								£.1		094'6	0.42	Х	77
	4.0								£.1		026,7	24.0	Х	17
	₱.0								٤.1		084,7	24.0	Х	OΖ
	<b>†</b> 0								£.1		07ε,8	24.0	Х	61
											07ε,8	0.42		81
											07ε,8	0.42	T	LI
	4.0								13		09£,11	0.4.0	X	. 91
	€.0	İ	<u> </u>		L				<b>†</b> I		054,8	0.42	X	12
	€.0			<u> </u>					£.1		000,8	74.0	X	₽Ī
	€.0								1.2		021,8	0.42	X	ΕI
	2.0						1		S.I		L91'8	24.0	X	71
											L91'8	0.4.0		.11
				<u> </u>							791,8	0.4.0		10
	S.0								<b>7</b> 1		048'9	0.42	X	-6
	8.0			<u> </u>	i			<u> </u>	Þ'l		094,8	0.42	X	8
	8.0		<u> </u>				<u> </u>		<b>7</b> I		0£9'8	0.4.0	Х	L
	0.1		t				<u> </u>		91		071,8	24.0	Х	9
	<b>č.</b> 0		ļ					L	S'I		052,8	24.0	X	ς
	<u> </u>										8,230	24.0		Þ
											0£2,8	0.4.0		ε
	8.0			<u></u>	· · · · · · · · · · · · · · · · · · ·				S.I		067'8	24.0	X	7
	L'0			<u> </u>					S'I		7,180	24.0	Х	I
monstago to tuo	System; mg/L	== mɔ/ɔəs	mW-sec/cm <sup>2</sup>	J\nim	sidsəilqqA li	Water, OC	Naim	sənnuu	Peak Flow, mg/L	Rate, gpd.	[eg	Орегацоп	("X"	Month
Involves Taking Water System Components	nonudinisiQ.	-Wm	UV Dose,	Required, mg	pH of Water,	Temp of	-gm,woFf	Peak Flow,	Customer During	Peak Flow	Producted,	uı	(Place	aht
Conditions; Repair or Maintenance Work that	Remote Point in	Reduired,	gningnagO	TO muminiM	1.1 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0		During Peak	garrad mio9	Before or at First		Water	Hours plant	Operator	Day of
Emergency or Abnormal Operating	Disinfectant Concentration at	UV Dose	Lowest				Customer	Measurement	Concentration (C)		bədəini To		Visited by	
		muminiM					ızıiT .	O1s (T)	Disinfectant		Vet Quantity		Staffed or	- 1
	Lowest Residual						Before or at	Contact Time	Lowest Residual				Days Plant	`
						<b>77.</b>	Provided	Disinfectant					1	
	'						TO resweat				1.0			
		2000	IΛΩ		v Salit	Marketin u	snonsh	C1 CSICI						1
					3.5		100		10 Sentingunounce -					İ
	第二字章 李章 ·			A li noitevi	penl siniV	on I-mo			T Calculations, or					
	obixoide	Chlorine D	(s	(Chloramine:	ed Chlorine	Combin	Tine arin	Free Chlo	ibution System:	ned in Distr	iistnisM Isul	ctant Resic	of Disinfe	Type o
	<del></del>									r (Describe):			traviolet R	- 4
	(sənir	е (Срюгап	ined Chlorin	👢 Сошр	euozo !	əpixo	Chlorine Dio	погле Г			virus Inactiv			
							<u> </u>	December, 2005			tonth/Year	1 for the N	sily Data	a illi

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