

ORIGINAL

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

Containing
Additional Engineering Requirements

Monthly Operating Reports

- CMP _____
- COM _____
- CTR _____
- ECR 1
- GCL _____
- OPC _____
- RCA _____
- SCR _____
- SGA _____
- SEC _____
- OTH _____

Aqua Utilities Florida, Inc.

DOCUMENT NUMBER-DATE

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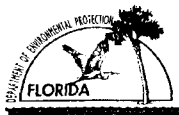
FPSC-COMMISSION CLERK

Aqua Utilities Florida, Inc. Monthly Operating Reports

Welaka/Saratoga Harbour

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Sarasota Harbor		PWS Identification Number: 2541008	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 47		Total Population Served at End of Month: 117	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
		Zip Code: 32860-9520	
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor		Plant Telephone Number: 904-329-1122	
Plant Address: Gibbs Avenue		City: Satsuma	State: Florida
		Zip Code: 32189	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251	Days 1st Shift
Other Operators:	Donald Holcomb	A	5091	Days 1st Shift

II. Certification by Lead/Chief Operator

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

	Paul Thompson	A-7251
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 2541008 Plant Name: Sarasota Harbor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1	X	24.0	8,700		2.5										0.9	
2	X	24.0	15,200		3.0										1.0	
3		24.0	11,400													
4		24.0	11,400													
5	X	24.0	11,400		2.7										1.0	
6	X	24.0	8,800		2.5										0.9	
7	X	24.0	8,100		2.5										1.0	
8	X	24.0	9,700		2.5										0.9	
9	X	24.0	17,900		2.4										1.0	
10		24.0	11,467													
11		24.0	11,467													
12	X	24.0	11,467		3.1										1.3	
13	X	24.0	9,100		2.6										1.7	
14	X	24.0	2,500		2.3										1.2	
15	X	24.0	11,100		2.5										0.9	
16	X	24.0	8,900		2.4										1.0	
17		24.0	11,800													
18		24.0	11,800													
19	X	24.0	11,800		2.5										0.8	
20	X	24.0	8,400		2.5										0.9	
21	X	24.0	7,900		2.6										0.8	
22		24.0	17,200		3.1										1.3	
23	X	24.0	8,500		3.3										1.4	
24		24.0	11,733													
25		24.0	11,733													
26	X	24.0	11,733		3.1										1.1	
27	X	24.0	8,700		3.1										1.4	
28	X	24.0	8,500		3.0										1.2	
29	X	24.0	7,700		2.8										1.1	
30	X	24.0	8,600		2.7										1.1	
31		24.0														

Total	314,700
Average	10,152
Maximum	17,900

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Welaka Mobile Home Park		PWS Identification Number: 2541242	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 96		Total Population Served at End of Month: 237	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida Zip Code: 32860-9520
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: 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 Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
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)/Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251 Days 1st Shift
Other Operators:	Donald Holcomb	A	5091 Days 1st Shift

II. Certification by Lead/Chief Operator

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

Signature and Date

Paul Thompson

Printed or Typed Name

A-7251

License Number

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

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*									Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²		
1	X	24.0	8,570		3.0								1.6	
2	X	24.0	12,510		2.6								1.2	
3		24.0	10,317											
4		24.0	10,317											
5	X	24.0	10,317		2.7								1.0	
6	X	24.0	7,620		2.6								1.0	
7	X	24.0	7,890		2.8								1.1	
8	X	24.0	10,670		2.8								1.0	
9	X	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								1.3	
14	X	24.0	11,420		2.8								1.0	
15	X	24.0	3,380		2.6								1.1	
16	X	24.0	9,900		2.8								1.0	
17		24.0	12,637											
18		24.0	12,637											
19	X	24.0	12,637		3.0								1.1	
20	X	24.0	11,260		3.0								1.3	
21	X	24.0	8,310		2.7								1.0	
22	X	24.0	9,970		3.0								1.4	
23	X	24.0	9,960		2.6								1.2	
24		24.0	11,430											
25		24.0	11,430											
26	X	24.0	11,430		3.0								1.2	
27	X	24.0	7,010		3.0								1.0	
28	X	24.0	9,500		3.0								1.1	
29	X	24.0	13,680		2.8								1.0	
30	X	24.0	8,060		3.1								1.0	
31		24.0												
Total			302,980											
Average			9,774											
Maximum			13,680											

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Sarasota Harbor		PWS Identification Number: 2541008	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 47		Total Population Served at End of Month: 117	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
Contact Person's Telephone Number: (407) 598-4199		Zip Code: 32860-9520	
Contact Person's E-Mail Address: craiga@florida-water.com		Contact Person's Fax Number: (407) 598-4217	

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor		Plant Telephone Number: 904-329-1122	
Plant Address: Gibbs Avenue		City: Satsuma	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32189	
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 (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Paul Thompson	A	7251
Other Operators:	Donald Holcomb	A	5091

II. Certification by Lead/Chief Operator

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

Signature and Date	Paul Thompson Printed or Typed Name	A-7251 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541008 Plant Name: Sarasota Harbor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1		24.0	17,150												
2	X	24.0	17,150		3.1									1.4	
3	X	24.0	9,100		2.8									1.2	
4	X	24.0	1,700		2.4									1.0	
5	X	24.0	7,900		2.6									1.2	
6	X	24.0	16,300		2.6									1.0	
7		24.0	8,767												
8		24.0	8,767												
9	X	24.0	8,767		2.6									1.1	
10	X	24.0	8,000		2.6									1.0	
11	X	24.0	8,400		2.6									1.1	
12	X	24.0	8,700		2.5									1.0	
13	X	24.0	8,400		2.6									1.0	
14		24.0	9,067												
15		24.0	9,067												
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									1.0	
19	X	24.0	8,700		3.0									1.2	
20	X	24.0	8,400		2.9									1.2	
21		24.0	8,467												
22		24.0	8,467												
23	X	24.0	8,467		2.9									1.0	
24	X	24.0	8,000		2.5									0.8	
25	X	24.0	8,600		2.6									1.0	
26	X	24.0	8,100		1.8									0.7	
27	X	24.0	7,900		2.5									1.0	
28		24.0													
29		24.0													
Total			246,300												
Average			8,493												
Maximum			17,150												

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

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: _____

A. Public Water System (PWS) Information

PWS Name: Welaka Mobile Home Park		PWS Identification Number: 2541242	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 96		Total Population Served at End of Month: 237	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Welaka Mobile Home Park		Plant Telephone Number: 904-329-1122		
Plant Address: Hamilton Road		City: Satsuma	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 108,000		Plant Class (per subsection 62-699.310(4), F.A.C.): D		
Plant Category (per subsection 62-699.310(4), F.A.C.): V				
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251	Days 1st Shift
Other Operators:	Donald Holcomb	A	5091	Days 1st Shift

II. Certification by Lead/Chief Operator

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

_____ Signature and Date	Paul Thompson Printed or Typed Name	A-7251 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park

III. Daily Data for the Month/Year of:

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²			
1		24.0	15,365												
2	X	24.0	15,365		2.6									0.9	
3	X	24.0	12,900		3.0									1.2	
4	X	24.0	7,070		2.8									1.2	
5	X	24.0	10,360		3.0									1.3	
6	X	24.0	10,350		2.8									1.3	
7		24.0	10,940												
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									1.0	
13	X	24.0	12,400		3.2									1.1	
14		24.0	10,383												
15		24.0	10,383												
16	X	24.0	10,383		2.8									1.0	
17	X	24.0	10,980		2.8									0.8	
18	X	24.0	10,740		3.0									1.1	
19	X	24.0	12,800		2.8									1.0	
20	X	24.0	11,980		3.1									1.0	
21		24.0	13,086												
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	
25	X	24.0	11,920		3.0									1.4	
26	X	24.0	9,950		3.0									1.3	
27	X	24.0	12,670		2.8									1.0	
28		24.0													
29		24.0													
Total			314,569												
Average			10,847												
Maximum			15,365												

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Sarasota Harbor		PWS Identification Number: 2541008	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 47		Total Population Served at End of Month: 117	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
Contact Person's Telephone Number: (407) 598-4199		Zip Code: 32860-9520	
Contact Person's E-Mail Address: craiga@florida-water.com		Contact Person's Fax Number: (407) 598-4217	

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor		Plant Telephone Number: 904-329-1122	
Plant Address: Gibbs Avenue		City: Satsuma	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32189	
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 (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Paul Thompson	A	7251
Other Operators:	Donald Holcomb	A	5091

II. Certification by Lead/Chief Operator

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

Signature and Date	Donald Holcomb Printed or Typed Name	A-5091 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541008 Plant Name: Sarasota Harbor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	25,700		2.8										1.1
2	X	24.0	8,500		2.8										1.0
3	X	24.0	12,900		2.8										1.1
4	X	24.0	3,900		2.7										1.0
5	X	24.0	17,500		3.1										1.1
6		24.0	12,100												
7		24.0	12,100												
8	X	24.0	12,100		3.1										1.4
9	X	24.0	8,300		2.7										0.9
10	X	24.0	9,600		2.9										1.0
11	X	24.0	8,300		2.9										0.9
12	X	24.0	4,300		1.7										0.6
13		24.0	11,567												
14		24.0	11,567												
15	X	24.0	11,567		2.1										0.8
16	X	24.0	8,600		2.1										0.9
17	X	24.0	8,400		2.1										1.0
18	X	24.0	8,300		2.2										0.8
19	X	24.0	9,700		2.1										0.9
20		24.0	10,633												
21		24.0	10,633												
22	X	24.0	10,633		2.0										1.1
23	X	24.0	8,800		2.0										1.0
24	X	24.0	8,300		1.9										1.0
25	X	24.0	8,000		2.0										0.9
26	X	24.0	8,400		1.8										1.0
27		24.0	11,200												
28		24.0	11,200												
29	X	24.0	11,200		2.0										0.8
30	X	24.0	8,400		1.8										0.7
31	X	24.0	8,700		1.9										0.9
Total			321,100												
Average			10,358												
Maximum			25,700												

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

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: _____

A. Public Water System (PWS) Information

PWS Name:	Welaka Mobile Home Park			PWS Identification Number:	2541242
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	96			Total Population Served at End of Month:	237
PWS Owner:	Florida Water Services				
Contact Person:	Craig Anderson			Contact Person's Title:	VP Environmental Services
Contact Person's Mailing Address:	P.O. Box 609520		City:	Orlando	State: Florida Zip Code: 32860-9520
Contact Person's Telephone Number:	(407) 598-4199			Contact Person's Fax Number:	(407) 598-4217
Contact Person's E-Mail Address:	craig@florida-water.com				

B. Water Treatment Plant Information

Plant Name:	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 Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water				
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) / Shift(s) Worked		
Lead/Chief Operator:	Paul Thompson	A	7251	Days 1st Shift		
Other Operators:	Donald Holcomb	A	5091	Days 1st Shift		

II. Certification by Lead/Chief Operator

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

Signature and Date

Donald Holcomb

Printed or Typed Name

A-5091

License Number

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

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park

III. Daily Data for the Month/year of:

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	43,420		3.0									1.2	
2	X	24.0	9,660		3.2									1.0	
3	X	24.0	11,060		3.0									1.0	
4	X	24.0	12,620		2.8									1.1	
5	X	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									1.1	
9	X	24.0	15,440		3.0									1.0	
10	X	24.0	11,850		2.6									1.1	
11	X	24.0	10,790		2.8									1.0	
12	X	24.0	15,320		3.0									1.1	
13		24.0	23,043												
14		24.0	23,043												
15	X	24.0	23,043		2.7									0.9	
16	X	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												
21		24.0	51,743												
22	X	24.0	51,743		3.2									1.2	
23	X	24.0	65,020		3.0									1.0	
24	X	24.0	64,810		2.8									1.1	
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												
28		24.0	12,863												
29	X	24.0	12,863		2.8									1.0	
30	X	24.0	15,410		3.0									1.2	
31	X	24.0	14,360		3.0									1.0	
Total			777,410												
Average			25,078												
Maximum			65,020												

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

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of:	April, 2004
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A. Public Water System (PWS) Information

PWS Name: Sarasota Harbor		PWS Identification Number: 2541008	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 47		Total Population Served at End of Month: 117	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
		Zip Code: 32860-9520	
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor		Plant Telephone Number: 904-329-1122		
Plant Address: Gibbs Avenue		City: Satsuma	State: Florida	
		Zip Code: 32189		
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251	Days 1st Shift
Other Operators:	Donald Holcomb	A	5091	Days 1st Shift

II. Certification by Lead/Chief Operator

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

Signature and Date

Paul Thompson
Printed or Typed Name

A-7251
License Number

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

PWS Identification Number: 2541008 Plant Name: Sarasota Harbor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1	X	24.0	17,700		2.9										1.3	
2	X	24.0	3,200		2.6										1.2	
3		24.0	12,467													
4		24.0	12,467													
5	X	24.0	12,467		2.7										1.0	
6	X	24.0	9,700		2.5										1.3	
7	X	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										0.5	
10		24.0	11,533													
11		24.0	11,533													
12	X	24.0	11,533		1.2										0.4	
13	X	24.0	9,000		1.2										0.5	
14	X	24.0	8,400		1.2										0.5	
15	X	24.0	8,100		1.2										0.5	
16	X	24.0	16,300		1.6										0.7	
17		24.0	9,100													
18		24.0	9,100													
19	X	24.0	9,100		2.4										0.9	
20	X	24.0	8,300		2.3										1.0	
21	X	24.0	17,100		2.5										1.0	
22	X	24.0	17,500		2.1										0.9	
23	X	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										0.8	
28	X	24.0	7,700		1.7										1.0	
29	X	24.0	9,100		1.8										0.9	
30	X	24.0	17,100		2.2										1.0	
Total			327,400													
Average			10,913													
Maximum			17,700													

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

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: _____

A. Public Water System (PWS) Information

PWS Name: Welaka Mobile Home Park		PWS Identification Number: 2541242	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 96		Total Population Served at End of Month: 237	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Welaka Mobile Home Park		Plant Telephone Number: 904-329-1122	
Plant Address: Hamilton Road		City: Satsuma	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 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
Lead/Chief Operator:	Paul Thompson	A	7251
Other Operators:	Donald Holcomb	A	5091

II. Certification by Lead/Chief Operator

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

Signature and Date	Paul Thompson Printed or Typed Name	A-7251 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park

III. Daily Data for the Month/Year of:

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	9,330		3.0										1.1	
2	X	24.0	7,160		2.8										1.2	
3		24.0	10,600													
4		24.0	10,600													
5	X	24.0	10,600		3.2										1.2	
6	X	24.0	13,130		3.4										1.4	
7	X	24.0	8,650		3.0										1.0	
8	X	24.0	10,350		3.2										1.1	
9	X	24.0	9,480		3.5										1.3	
10		24.0	11,233													
11		24.0	11,233													
12	X	24.0	11,233		1.0										0.4	
13	X	24.0	10,080		2.8										1.1	
14	X	24.0	9,190		2.6										0.8	
15	X	24.0	10,760		3.0										1.0	
16	X	24.0	11,230		3.0										1.1	
17		24.0	11,830													
18		24.0	11,830													
19	X	24.0	11,830		3.0										1.2	
20	X	24.0	11,520		3.0										1.0	
21	X	24.0	9,440		2.8										1.1	
22	X	24.0	14,010		3.0										1.2	
23	X	24.0	12,580		2.9										1.0	
24		24.0	10,693													
25		24.0	10,693													
26	X	24.0	10,693		2.4										0.8	
27	X	24.0	12,080		2.6										1.0	
28	X	24.0	9,830		3.0										1.0	
29	X	24.0	11,890		3.2										1.1	
30	X	24.0	16,400		3.0										1.2	
Total			330,180													
Average			11,006													
Maximum			16,400													

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Sarasota Harbor		PWS Identification Number: 2541008	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 47		Total Population Served at End of Month: 117	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
		Zip Code: 32860-9520	
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor		Plant Telephone Number: 904-329-1122		
Plant Address: Gibbs Avenue		City: Satsuma	State: Florida	
		Zip Code: 32189		
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Plant Category (per subsection 62-699.310(4), F.A.C.): IV				
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251	Days 1st Shift
Other Operators:	Donald Holcomb	A	5091	Days 1st Shift

II. Certification by Lead/Chief Operator

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

Signature and Date

Paul Thompson
Printed or Typed Name

A-7251
License Number

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

PWS Identification Number: 2541008 Plant Name: Sarasota Harbor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²			
1		24.0	8,633												
2		24.0	8,633												
3	X	24.0	8,633		2.2									0.9	
4	X	24.0	8,000		2.0									0.8	
5	X	24.0	8,400		2.3									1.0	
6	X	24.0	8,600		2.0									0.8	
7	X	24.0	8,600		2.0									1.0	
8		24.0	11,833												
9		24.0	11,833												
10	X	24.0	11,833		2.1									1.0	
11	X	24.0	8,200		2.0									0.7	
12	X	24.0	9,200		2.3									0.9	
13	X	24.0	8,500		1.9									0.8	
14	X	24.0	8,600		2.1									0.9	
15		24.0	11,500												
16		24.0	11,500												
17	X	24.0	11,500		2.3									1.0	
18	X	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									0.8	
21	X	24.0	8,900		2.1									1.0	
22		24.0	11,833												
23		24.0	11,833												
24	X	24.0	11,833		2.4									1.1	
25	X	24.0	9,100		2.2									1.0	
26	X	24.0	8,200		1.9									0.9	
27	X	24.0	8,800		1.8									0.7	
28	X	24.0	8,200		2.0									1.0	
29		24.0	14,933												
30		24.0	14,933												
31	X	24.0	14,933		2.0									1.0	
Total			313,400												
Average			10,110												
Maximum			14,933												

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: <u>Welaka Mobile Home Park</u>		PWS Identification Number: <u>2541242</u>	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: <u>96</u>		Total Population Served at End of Month: <u>237</u>	
PWS Owner: <u>Florida Water Services</u>			
Contact Person: <u>Craig Anderson</u>		Contact Person's Title: <u>VP Environmental Services</u>	
Contact Person's Mailing Address: <u>P.O. Box 609520</u>		City: <u>Orlando</u>	State: <u>Florida</u> Zip Code: <u>32860-9520</u>
Contact Person's Telephone Number: <u>(407) 598-4199</u>		Contact Person's Fax Number: <u>(407) 598-4217</u>	
Contact Person's E-Mail Address: <u>craiga@florida-water.com</u>			

B. Water Treatment Plant Information

Plant Name: <u>Welaka Mobile Home Park</u>		Plant Telephone Number: <u>904-329-1122</u>	
Plant Address: <u>Hamilton Road</u>		City: <u>Satsuma</u>	State: <u>Florida</u> Zip Code: <u>32189</u>
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>108,000</u>			
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>V</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>D</u>	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	<u>Paul Thompson</u>	<u>A</u>	<u>7251</u>
Other Operators:	<u>Donald Holcomb</u>	<u>A</u>	<u>5091</u>
			<u>Days 1st Shift</u>
			<u>Days 1st Shift</u>

II Certification by Lead/Chief Operator

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

Signature and Date

Paul Thompson
Printed or Typed Name

A-7251
License Number

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

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1		24.0	10,183												
2		24.0	10,183												
3	X	24.0	10,183		2.6									1.0	
4	X	24.0	8,390		2.5									0.8	
5	X	24.0	10,330		3.0									1.0	
6	X	24.0	7,950		2.5									0.8	
7	X	24.0	9,960		2.8									0.9	
8		24.0	12,680												
9		24.0	12,680												
10	X	24.0	12,680		3.0									1.0	
11	X	24.0	17,750		2.5									0.7	
12	X	24.0	14,440		3.0									1.1	
13	X	24.0	10,060		2.9									1.0	
14	X	24.0	7,630		3.1									0.9	
15		24.0	12,187												
16		24.0	12,187												
17	X	24.0	12,187		2.8									1.0	
18	X	24.0	8,670		2.6									0.7	
19	X	24.0	7,850		2.4									0.8	
20	X	24.0	11,200		2.5									0.8	
21	X	24.0	8,810		3.0									1.0	
22		24.0	12,747												
23		24.0	12,747												
24	X	24.0	12,747		2.8									1.0	
25	X	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	X	24.0	13,370		2.8									0.9	
29		24.0	11,390												
30		24.0	11,390												
31	X	24.0	11,390		0.8									0.4	
Total			348,280												
Average			11,235												
Maximum			17,750												

* 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.

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Saratoga Harbor		PWS Identification Number: 2541008	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 47		Total Population Served at End of Month: 117	
PWS Owner: Aqua Utilities Florida			
Contact Person: Mike Fitzgerald		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
		Zip Code: 34470	
Contact Person's Telephone Number: (352) 732-6027		Contact Person's Fax Number: (352) 732-3213	
Contact Person's E-Mail Address: mvfitzgerald@aquaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor		Plant Telephone Number: 904-329-1122	
Plant Address: Gibbs Avenue		City: Satsuma	State: Florida
		Zip Code: 32189	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Mark March	C	8287
Other Operators:	Paul Thompson	A	7251

II. Certification by Lead/Chief Operator

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

	Mark March	C-8287
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 2541008 Plant Name: Sarasota Harbor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Saratoga Harbor	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	8,500		2.2										0.7	
2	X	24.0	8,900		2.7										1.0	
3		24.0	11,800													
4		24.0	11,800													
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										1.2	
10		24.0	11,233													
11		24.0	11,233													
12	X	24.0	11,233		2.2										1.2	
13	X	24.0	9,100		2.0										1.1	
14	X	24.0	9,000		1.9										1.1	
15	X	24.0	8,400		1.8										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										1.0	
20	X	24.0	8,600		2.0										1.0	
21	X	24.0	8,800		2.0										1.1	
22	X	24.0	8,800		2.0										1.0	
23	X	24.0	4,700		2.6										1.0	
24		24.0	14,900													
25		24.0	14,900													
26	X	24.0	14,900		2.8										1.0	
27	X	24.0	12,100		2.8										0.9	
28	X	24.0	8,100		2.3										1.0	
29	X	24.0	8,500		2.4										1.2	
30	X	24.0	10,900		2.2										1.2	
31		24.0	7,800													

Total	315,400
Average	10,174
Maximum	17,200

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Welaka Mobile Home Park		PWS Identification Number: 2541242	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 96		Total Population Served at End of Month: 237	
PWS Owner: Aqua Utilities Florida			
Contact Person: Mike Fitzgerald		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
		Zip Code: 34472	
Contact Person's Telephone Number: (352) 732-6027		Contact Person's Fax Number: (352) 732-3213	
Contact Person's E-Mail Address: mvfitzgerald@aquaamerica.com			

B. Water Treatment Plant 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 Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
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
Lead/Chief Operator:	Mark March	C	8287
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 to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date

Mark March
Printed or Typed Name

C-8287
License Number

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

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park

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

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

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

Day of the Month	Days Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	14,710		2.4										0.8
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		3.0										1.0
8	X	24.0	13,870		3.0										1.5
9	X	24.0	10,720		3.5										1.3
10		24.0	13,543												
11		24.0	13,543												
12	X	24.0	13,543		2.6										1.2
13	X	24.0	13,930		2.4										0.8
14	X	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												
18		24.0	11,793												
19	X	24.0	11,793		2.5										1.1
20	X	24.0	10,420		2.5										1.2
21	X	24.0	9,910		2.5										1.0
22	X	24.0	8,440		2.7										1.1
23	X	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										1.1
28	X	24.0	9,820		1.5										1.1
29	X	24.0	11,620		2.0										0.9
30	X	24.0	8,230		2.4										1.4
31		24.0	7,240												
Total			363,620												
Average			11,730												
Maximum			14,710												

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name:	Saratoga Harbor	PWS Identification Number:	2541008
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	47	Total Population Served at End of Month:	117
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Mike Fitzgerald	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	1343 NE 17th Road	City:	Ocala
		State:	Florida
		Zip Code:	34470
Contact Person's Telephone Number:	(352) 732-6027	Contact Person's Fax Number:	(352) 732-3213
Contact Person's E-Mail Address:	mvfitzgerald@aquaamerica.com		

B. Water Treatment Plant Information

Plant Name:	Sarasota Harbor	Plant Telephone Number:	904-329-1122
Plant Address:	Gibbs Avenue	City:	Satsuma
		State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	200,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	
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 to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	<u>Mark March</u>	C-8287
	Printed or Typed Name	License Number

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

PWS Identification Number: 2541008 Plant Name: Sarasota Harbor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Saratoga Harbor	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1		24.0	20,400												
2	X	24.0	20,400		1.8									0.8	
3	X	24.0	8,400		2.0									0.9	
4	X	24.0	8,400		2.6									1.1	
5	X	24.0	8,200		2.8									1.2	
6	X	24.0	8,400		2.3									1.2	
7		24.0	11,100												
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		24.0	8,700												
15		24.0	8,700												
16	X	24.0	8,700		2.4									1.2	
17	X	24.0	7,800		1.6									1.0	
18	X	24.0	7,900		2.0									1.0	
19	X	24.0	7,900		2.1									0.9	
20	X	24.0	8,700		1.5									0.8	
21		24.0	11,067												
22		24.0	11,067												
23	X	24.0	11,067		1.5									0.8	
24	X	24.0			1.4									0.6	
25	X	24.0	8,000		1.5									0.6	
26	X	24.0	8,100		1.9									0.8	
27	X	24.0	7,900		2.6									1.2	
28		24.0	10,933												
29		24.0	10,933												
30	X	24.0	10,933		2.6									1.2	
31	X	24.0	8,200		2.2									1.0	

Total	296,000
Average	9,548
Maximum	20,400

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Welaka Mobile Home Park		PWS Identification Number: 2541242	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 96		Total Population Served at End of Month: 237	
PWS Owner: Aqua Utilities Florida			
Contact Person: Mike Fitzgerald		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
Contact Person's Telephone Number: (352) 732-6027		Contact Person's Fax Number: (352) 732-3213	
Contact Person's E-Mail Address: mvfitzgerald@aquaamerica.com			

B. Water Treatment Plant Information

Plant Name: Welaka Mobile Home Park		Plant Telephone Number: 904-329-1122	
Plant Address: Hamilton Road		City: Satsuma	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 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
Lead/Chief Operator:	Mark March	C	8287
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 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
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 2541242 Plant Name: Wetaka Mobile Home Park

III. Daily Data for the Month A car of

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

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

Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Measurement (T) at C	Disinfectant Contact Time	Lowest CT Provided	First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	UV Dose, mW-sec/cm ²	Lowest UV Dose Required, mW-sec/cm ²	Concentration at Remote Point in Distribution System, mg/L	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*		
														UV Dose	UV Dose	
1		24.0	19,045													
2	X	24.0	19,045			2.6										
3	X	24.0	12,900			2.0										
4	X	24.0	10,380			2.4										
5	X	24.0	12,260			2.5										
6	X	24.0	9,060			2.4										
7		24.0	10,323													
8	X	24.0	10,323			2.5										
9	X	24.0	10,323			2.5										
10	X	24.0	13,140			2.5										
11	X	24.0	8,920			2.3										
12	X	24.0	11,600			2.0										
13	X	24.0	6,790			2.2										
14		24.0	9,893													
15		24.0	9,893													
16	X	24.0	9,893			1.9										
17	X	24.0	8,490			2.0										
18	X	24.0	7,680			0.8										
19	X	24.0	9,920			1.2										
20	X	24.0	7,760			0.8										
21		24.0	8,897													
22		24.0	8,897													
23	X	24.0	8,897			2.4										
24	X	24.0	7,600			1.8										
25	X	24.0	8,700			2.3										
26	X	24.0	9,100			2.0										
27	X	24.0	9,290			2.3										
28		24.0	10,020													
29		24.0	10,020													
30	X	24.0	10,020			2.6										
31	X	24.0	8,270			1.9										
Total			317,350													
Average			10,237													
Maximum			19,045													

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name:	Saratoga Harbor			PWS Identification Number:	2541008
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	47			Total Population Served at End of Month:	117
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Mike Fitzgerald			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	1343 NE 17th Road	City:	Ocala	State:	Florida
Contact Person's Telephone Number:	(352) 732-6027	Contact Person's Fax Number:	(352) 732-3213		
Contact Person's E-Mail Address:	mvfitzgerald@aquaaamerica.com				

B. Water Treatment Plant Information

Plant Name:	Sarasota Harbor			Plant Telephone Number:	904-329-1122	
Plant Address:	Gibbs Avenue			City:	Satsuma	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water			<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	200,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators:	Name	License Class	License Number	Day(s)/Shift(s) Worked		
Lead/Chief Operator:	Mark March	C	8287			
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 to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	<u>Mark March</u> Printed or Typed Name	<u>C-8287</u> License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541008 Plant Name: Sarasota Harbor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Saratoga Harbor	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	8,000		2.5								1.2	
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	X	24.0	11,700		2.4								1.2	
7	X	24.0												
8	X	24.0	2,200		2.8								1.0	
9	X	24.0	11,800		2.0								0.8	
10	X	24.0	7,500		2.6								1.2	
11		24.0	8,767											
12		24.0	8,767											
13	X	24.0	8,767		2.5								1.2	
14	X	24.0			2.0								1.4	
15	X	24.0	10,200		2.4								1.7	
16	X	24.0	7,000		2.5								2.0	
17	X	24.0	1,600		2.4								1.6	
18		24.0	8,533											
19		24.0	8,533											
20	X	24.0	8,533		2.7								1.6	
21	X	24.0	8,300		2.4								1.6	
22	X	24.0			2.5								1.6	
23	X	24.0	8,800		2.0								0.7	
24	X	24.0			2.2								1.0	
25		24.0	8,000											
26		24.0	8,000											
27	X	24.0	8,000		2.4								1.2	
28	X	24.0	1,500		1.8								0.4	
29	X	24.0	8,500		2.3								1.4	
30	X	24.0	8,500		2.5								1.6	
31		24.0												
Total			211,100											
Average			6,810											
Maximum			11,800											

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Welaka Mobile Home Park		PWS Identification Number: 2541242	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 96		Total Population Served at End of Month: 237	
PWS Owner: Aqua Utilities Florida			
Contact Person: Mike Fitzgerald		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
		Zip Code: 34472	
Contact Person's Telephone Number: (352) 732-6027		Contact Person's Fax Number: (352) 732-3213	
Contact Person's E-Mail Address: mvfitzgerald@aquaaamerica.com			

B. Water Treatment Plant 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 Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
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
Lead/Chief Operator:	Mark March	C	8287
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 to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Mark March Printed or Typed Name	C-8287 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	8,620		2.8										1.2	
2	X	24.0	9,800		2.2										0.9	
3	X	24.0	7,990		2.8										1.4	
4		24.0	7,187													
5		24.0	7,187													
6	X	24.0	7,187		2.0										1.0	
7	X	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										1.2	
11		24.0	13,797													
12		24.0	13,797													
13	X	24.0	13,797		2.8										1.4	
14	X	24.0	5,930		1.9										1.4	
15	X	24.0	15,650		1.7										1.5	
16	X	24.0	6,850		2.5										1.6	
17	X	24.0	12,180		2.8										1.6	
18		24.0	10,327													
19		24.0	10,327													
20	X	24.0	10,327		2.2										1.0	
21	X	24.0	9,250		2.4										1.0	
22	X	24.0	8,330		1.5										1.4	
23	X	24.0	10,450		1.8										0.9	
24	X	24.0	9,970		2.3										1.2	
25		24.0	6,943													
26		24.0	6,943													
27	X	24.0	6,943		2.2										1.2	
28	X	24.0	10,100		1.5										0.8	
29	X	24.0	6,840		2.8										1.2	
30	X	24.0	18,750		3.0										1.5	
31		24.0														
Total			301,310													
Average			9,720													
Maximum			20,980													

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Saratoga Harbor		PWS Identification Number: 2541008	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 47		Total Population Served at End of Month: 117	
PWS Owner: Aqua Utilities Florida			
Contact Person: Mike Fitzgerald		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
		Zip Code: 34470	
Contact Person's Telephone Number: (352) 732-6027		Contact Person's Fax Number: (352) 732-3213	
Contact Person's E-Mail Address: mvfitzgerald@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor		Plant Telephone Number: 904-329-1122	
Plant Address: Gibbs Avenue		City: Satsuma	State: Florida
		Zip Code: 32189	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Mark March	C	8287
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 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
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 2541008 Plant Name: Sarasota Harbor

III. Daily Data for the Month/Year of: October, 20

Means of Disinfection: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Saratoga Harbor	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0													
2		24.0	8,600												
3		24.0	8,600												
4	X	24.0	8,600		3.5									2.0	
5	X	24.0			3.5									2.0	
6	X	24.0	8,600		3.5									2.0	
7	X	24.0	8,000		3.2									1.7	
8	X	24.0	8,300		2.8									1.7	
9		24.0	8,167												
10		24.0	8,167												
11	X	24.0	8,167		2.5									1.2	
12	X	24.0	8,200		2.5									2.0	
13	X	24.0	10,400		2.6									1.6	
14	X	24.0	8,200		2.7									1.6	
15	X	24.0	7,800		2.4									1.6	
16		24.0	11,167												
17		24.0	11,167												
18	X	24.0	11,167		2.2									1.0	
19	X	24.0	7,800		2.4									1.0	
20	X	24.0	7,600		2.1									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												
24		24.0	10,967												
25	X	24.0	10,967		2.3									1.0	
26	X	24.0	8,500		3.0									2.0	
27	X	24.0	7,900		2.6									1.6	
28	X	24.0	8,700		2.1									1.2	
29	X	24.0	16,000		1.8									1.0	
30		24.0	11,033												
31		24.0	11,033												
Total			272,466												
Average			8,789												
Maximum			16,000												

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Welaka Mobile Home Park		PWS Identification Number: 2541242	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 96		Total Population Served at End of Month: 237	
PWS Owner: Aqua Utilities Florida			
Contact Person: Mike Fitzgerald		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
Contact Person's Telephone Number: (352) 732-6027		Zip Code: 34472	
Contact Person's E-Mail Address: mvfitzgerald@aquamerica.com		Contact Person's Fax Number: (352) 732-3213	

B. Water Treatment Plant Information

Plant Name: Welaka Mobile Home Park		Plant Telephone Number: 904-329-1122		
Plant Address: Hamilton Road		City: Satsuma	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 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) / Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	
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 to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Mark March Printed or Typed Name	C-8287 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	8,170		2.6										1.5	
2		24.0	11,110													
3		24.0	11,110													
4	X	24.0	11,110		2.6										1.5	
5	X	24.0	17,770		2.5										1.5	
6	X	24.0	20,780		2.8										1.6	
7	X	24.0	7,660		2.5										1.4	
8	X	24.0	15,690		2.8										1.4	
9		24.0	10,043													
10		24.0	10,043													
11	X	24.0	10,043		2.4										1.4	
12	X	24.0	11,870		2.6										1.6	
13	X	24.0	11,820		2.8										1.4	
14	X	24.0	7,400		2.5										1.4	
15	X	24.0	13,860		2.4										1.4	
16		24.0	11,180													
17		24.0	11,180													
18	X	24.0	11,180		2.4										1.0	
19	X	24.0	11,480		2.5										1.0	
20	X	24.0	7,310		2.7										1.2	
21	X	24.0	12,850		2.0										1.0	
22	X	24.0	13,850		2.5										1.2	
23		24.0	11,657													
24		24.0	11,657													
25	X	24.0	11,657		2.6										1.2	
26	X	24.0	9,660		1.9										1.6	
27	X	24.0	13,890		2.6										1.2	
28	X	24.0	9,860		2.5										1.2	
29	X	24.0	13,480		2.5										1.2	
30		24.0	13,183													
31		24.0	13,183													
Total			365,736													
Average			11,798													
Maximum			20,780													

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name:	Saratoga Harbor	PWS Identification Number:	2541008
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	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	City:	Ocala
		State:	Florida
		Zip Code:	34470
Contact Person's Telephone Number:	(352) 732-6027	Contact Person's Fax Number:	(352) 732-3213
Contact Person's E-Mail Address:	beheath@aquaamerica.com		

B. Water Treatment Plant Information

Plant Name:	Sarasota Harbor	Plant Telephone Number:	904-329-1122
Plant Address:	Gibbs Avenue	City:	Satsuma
		State:	Florida
		Zip Code:	32189
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	200,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	IV	Plant Class (per subsection 62-699.310(4), F.A.C.):	C
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Mark March	C	8287
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 to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date

Mark March

Printed or Typed Name

C-8287

License Number

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

PWS Identification Number: 2541008 Plant Name: Sarasota Harbor

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

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Staffed or Visited by Operator (Place "X")	Saratoga Harbor	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time Provided Before or at First Measurement Point During Peak Flow, minutes	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT	UV Dose, mW-sec/cm	Lowest UV Dose, mW-sec/cm	UV Dose, mW-sec/cm	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*			UV Dose			
													Lowest CT	Lowest UV Dose, mW-sec/cm	UV Dose, mW-sec/cm	Minimum UV Dose, mW-sec/cm	UV Dose, mW-sec/cm	UV Dose, mW-sec/cm	
1	X	24.0	33,100	0.8									0.6						
2	X	24.0	7,900	1.7									0.5						
3	X	24.0	9,500	2.2									1.0						
4	X	24.0	8,200	1.9									1.0						
5	X	24.0	8,500	1.8									1.0						
6		24.0	5,400																
7		24.0	5,400																
8	X	24.0	5,400	2.5									1.0						
9	X	24.0	18,000	2.3									1.4						
10	X	24.0	8,400	2.0									1.2						
11	X	24.0	8,700	2.0									0.8						
12	X	24.0	8,600	1.9									0.6						
13		24.0	5,600																
14		24.0	5,600																
15	X	24.0	5,600	2.3									0.6						
16	X	24.0	9,100	1.9									0.5						
17	X	24.0	7,700	2.0									0.6						
18	X	24.0	8,300	2.0									0.7						
19	X	24.0	7,800	2.2									0.7						
20		24.0	8,150																
21	X	24.0	8,150	2.2									0.6						
22	X	24.0	8,200	2.2									0.6						
23	X	24.0	8,000	2.0									0.5						
24	X	24.0	8,000	2.0									0.5						
25		24.0	8,250																
26	X	24.0	8,250	1.7									0.5						
27		24.0	8,133																
28		24.0	8,133																
29	X	24.0	8,133	2.1									0.5						
30	X	24.0	8,500	2.0									0.6						
31		24.0																	
		Total	266,700																
		Average	8,603																
		Maximum	33,100																

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Welaka Mobile Home Park		PWS Identification Number: 2541242	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 96		Total Population Served at End of Month: 237	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
Contact Person's Telephone Number: (352) 732-6027		Contact Person's Fax Number: (352) 732-3213	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Welaka Mobile Home Park		Plant Telephone Number: 904-329-1122	
Plant Address: Hamilton Road		City: Satsuma	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 108,000		Plant Class (per subsection 62-699.310(4), F.A.C.): D	
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
Lead/Chief Operator:	Mark March	C	8287
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 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
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log-Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	39,550		2.1										1.0	
2	X	24.0	9,900		2.5										1.5	
3	X	24.0	12,260		2.2										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													
8	X	24.0	11,067		2.1										0.8	
9	X	24.0	8,660		2.7										1.2	
10	X	24.0	9,110		2.1										0.8	
11	X	24.0	9,990		2.3										0.8	
12	X	24.0	9,140		2.2										0.6	
13		24.0	9,977													
14		24.0	9,977													
15	X	24.0	9,977		2.4										0.6	
16	X	24.0	9,190		2.7										0.6	
17	X	24.0	9,510		2.4										0.6	
18	X	24.0	11,550		2.2										0.6	
19	X	24.0	10,230		2.0										0.6	
20		24.0	12,595													
21	X	24.0	12,595		2.3										0.6	
22	X	24.0	11,840		2.3										0.5	
23	X	24.0	11,630		2.2										0.5	
24	X	24.0	10,200		1.9										0.5	
25		24.0	12,535													
26	X	24.0	12,535		2.2										0.5	
27		24.0	11,893													
28		24.0	11,893													
29	X	24.0	11,893		2.6										0.6	
30	X	24.0	8,730		2.9										1.0	
31		24.0														
Total			354,950													
Average			11,450													
Maximum			39,550													

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

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



Polymer Page 3 Due in December

See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Saratoga Harbor		PWS Identification Number: 2541008	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 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		City: Ocala	State: Florida Zip Code: 34470
Contact Person's Telephone Number: (352) 732-6027		Contact Person's Fax Number: (352) 732-3213	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor		Plant Telephone Number: 904-329-1122		
Plant Address: Gibbs Avenue		City: Satsuma	State: Florida Zip Code: 32189	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	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 to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Mark March Printed or Typed Name	C8287 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541008 Plant Name: Sarasota Harbor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Saratoga Harbor	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	8,000		1.8										0.5	
2	X	24.0	8,000		1.8										0.5	
3	X	24.0	8,000		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	X	24.0	7,200		1.9										1.2	
8	X	24.0	9,200		1.9										0.7	
9	X	24.0	7,700		1.9										0.6	
10	X	24.0	9,300		1.8										0.7	
11		24.0	8,100													
12		24.0	8,100													
13	X	24.0	8,100		1.9										0.7	
14	X	24.0			1.5										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													
20	X	24.0	8,167		2.9										0.7	
21	X	24.0	8,300		3.5										1.8	
22	X	24.0	8,200		2.3										1.0	
23	X	24.0	7,800		2.5										0.8	
24	X	24.0	8,100		2.3										0.8	
25		24.0	2,633													
26		24.0	2,633													
27	X	24.0	2,633		2.4										0.8	
28	X	24.0	8,700		2.3										0.6	
29	X	24.0			2.2										0.7	
30	X	24.0			2.3										0.7	
31	X	24.0	9,000		2.3										0.8	
Total			204,400													
Average			6,594													
Maximum			9,300													

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

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



Polymer Page 3 Due in December

See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Welaka Mobile Home Park		PWS Identification Number: 2541242	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 96		Total Population Served at End of Month: 237	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
		Zip Code: 34472	
Contact Person's Telephone Number: (352) 732-6027		Contact Person's Fax Number: (352) 732-3213	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant 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 Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
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) / Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	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 to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date

Mark March

Printed or Typed Name

C8287

License Number

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

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park
 III. Daily Data for the Month/Year of: December, 2004

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

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

Days Plant Started or Visited by Operator in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Point During Peak Flow, mg/L.	Disinfectant Contact Time Before or at First Customer Measurement During Peak Flow, mg-minutes.	Lowest CT Provided Before or at First Customer Measurement During Peak Flow, mg-min/L.	Temp of Water, °C If Applicable	pH of Water, If Applicable	Minimum CT Required, mg-min/L.	Lowest Operating UV Dose, mW-sec/cm ² .	Minimum UV Dose Required, mW-sec/cm ² .	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*	
												UV Dose	UV Dose
1	24.0	14.130	2.8	2.8	2.8							0.7	0.7
2	X	24.0	12.440	2.8	2.8							0.7	0.7
3	X	24.0	12.460	2.3	2.3							0.7	0.7
4		24.0	11.057										
5		24.0	11.057										
6	X	24.0	11.057	1.9	1.9							0.6	0.6
7	X	24.0	10.960	1.8	1.8							0.8	0.8
8	X	24.0	9.040	2.0	2.0							0.8	0.8
9	X	24.0	9.880	1.7	1.7							0.8	0.8
10	X	24.0	10.250	2.2	2.2							0.8	0.8
11		24.0	11.500										
12		24.0	11.500										
13	X	24.0	11.500	2.5	2.5							0.9	0.9
14	X	24.0	10.630	2.0	2.0							0.6	0.6
15	X	24.0	16.790	2.0	2.0							0.6	0.6
16	X	24.0	9.810	2.0	2.0							0.7	0.7
17	X	24.0	12.020	1.7	1.7							0.6	0.6
18		24.0	14.127										
19		24.0	14.127										
20	X	24.0	14.127	2.3	2.3							0.7	0.7
21	X	24.0	10.440	3.5	3.5							1.2	1.2
22	X	24.0	14.210	2.5	2.5							1.0	1.0
23	X	24.0	8.570	2.0	2.0							0.6	0.6
24	X	24.0	13.190	2.3	2.3							0.6	0.6
25		24.0	12.633										
26		24.0	12.633										
27	X	24.0	12.633	2.3	2.3							0.8	0.8
28	X	24.0	8.160	3.0	3.0							1.0	1.0
29	X	24.0	19.520	2.8	2.8							1.0	1.0
30	X	24.0	18.080	3.0	3.0							1.1	1.1
31	X	24.0	13.180	3.5	3.5							1.6	1.6
Total			381,710										
Average			12,313										
Maximum			19,520										

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

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of:	January, 2005
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A. Public Water System (PWS) Information

PWS Name: Saratoga Harbor	PWS Identification Number: 2541008		
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month: 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: PO Box 490310	City: Leesburg	State: Florida	Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980	Contact Person's Fax Number: (352) 787-6333		
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor	Plant Telephone Number: (352) 787-0980			
Plant Address: Gibbs Avenue	City: Satsuma	State: Florida	Zip Code: 32189	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV	Plant Class (per subsection 62-699.310(4), F.A.C.): C			
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251	Days 1st Shift
Other Operators:				

II. Certification by Lead/Chief Operator

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

Signature and Date	Paul Thompson Printed or Typed Name	A7251 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541008 Plant Name: Sarasota Harbor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Saratoga Harbor	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1		24.0	11,067												
2		24.0	11,067												
3	X	24.0	11,067		2.2									0.8	
4	X	24.0	8,000		2.4									1.6	
5	X	24.0			2.3									1.2	
6	X	24.0	8,300		2.2									1.0	
7	X	24.0	8,300		2.2									0.7	
8		24.0	11,333												
9		24.0	11,333												
10	X	24.0	11,333		2.0									0.7	
11	X	24.0			2.0									0.6	
12	X	24.0	8,100		2.0									0.6	
13	X	24.0	8,100		1.6									0.6	
14	X	24.0	8,200		1.5									0.6	
15		24.0	8,533												
16		24.0	8,533												
17	X	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									0.8	
20	X	24.0	7,500		1.5									0.5	
21	X	24.0	8,800		1.5									0.5	
22		24.0	4,400												
23		24.0	4,400												
24	X	24.0	4,400		1.9									0.8	
25	X	24.0	3,200		1.8									0.7	
26	X	24.0	8,000		1.8									0.7	
27	X	24.0	8,200		1.8									0.7	
28	X	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									0.7	
Total			239,300												
Average			7,719												
Maximum			11,333												

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Welaka Mobile Home Park		PWS Identification Number: 2541242	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 96		Total Population Served at End of Month: 237	
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: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
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
Lead/Chief Operator:	Paul Thompson	A	7251
Other Operators:			

II. Certification by Lead/Chief Operator

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

Signature and Date	Paul Thompson Printed or Typed Name	A7251 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1		24.0	13,070										
2		24.0	13,070										
3	X	24.0	13,070		1.5							0.7	
4	X	24.0	11,360		2.4							1.2	
5	X	24.0	11,030		2.0							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							0.8	
11	X	24.0	8,970		2.3							0.7	
12	X	24.0	12,750		2.2							0.6	
13	X	24.0	8,410		1.5							0.5	
14	X	24.0	15,680		1.2							0.6	
15		24.0	9,800										
16		24.0	9,800										
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							0.7	
21	X	24.0	10,870		1.7							0.7	
22		24.0	10,753										
23		24.0	10,753										
24	X	24.0	10,753		1.8							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							0.8	
28	X	24.0	8,580		1.8							0.7	
29		24.0	10,280										
30		24.0	10,280										
31	X	24.0	10,280		1.8							0.8	
Total			344,420										
Average			11,110										
Maximum			24,050										

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Saratoga Harbor		PWS Identification Number: 2541008	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 50		Total Population Served at End of Month: 175	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor		Plant Telephone Number: (352) 787-0980	
Plant Address: Gibbs Avenue		City: Satsuma	State: Florida Zip Code: 32189
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number / Day(s) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251 / Days 1st Shift
Other Operators:			

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge 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
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 2541008 Plant Name: Sarasota Harbor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Saratoga Harbor	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	
1	X	24.0			1.7									0.8
2	X	24.0	8,500		1.8									0.7
3	X	24.0	7,900		2.0									0.8
4	X	24.0	8,200		2.0									0.8
5		24.0	8,433											
6		24.0	8,433											
7	X	24.0	8,433		1.8									0.6
8	X	24.0	7,800		2.0									1.2
9	X	24.0	8,000		1.8									1.0
10	X	24.0			2.0									1.1
11	X	24.0	16,000		1.8									1.0
12		24.0	8,400											
13		24.0	8,400											
14	X	24.0	8,400		1.8									0.8
15	X	24.0	8,100		2.0									1.1
16	X	24.0			1.8									0.8
17	X	24.0	8,300		1.8									1.0
18	X	24.0	8,300		1.8									0.7
19		24.0	8,267											
20		24.0	8,267											
21	X	24.0	8,267		1.8									0.8
22	X	24.0	8,600		1.8									0.7
23	X	24.0	7,900		1.8									0.7
24	X	24.0	8,600		2.0									0.9
25	X	24.0	8,300		2.2									0.9
26		24.0	5,633											
27		24.0	5,633											
28	X	24.0	5,633		2.1									0.9
29		24.0												
30		24.0												
31		24.0												
Total			206,700											
Average			6,668											
Maximum			16,000											

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name:	Welaka Mobile Home Park			PWS Identification Number:	2541242
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	108			Total Population Served at End of Month:	324
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaamerica.com				

B. Water Treatment Plant Information

Plant Name:	Welaka Mobile Home Park			Plant Telephone Number:	(352) 787-0980	
Plant Address:	Hamilton Road		City:	Satsuma	State: Florida	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	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) / Shift(s) Worked		
Lead/Chief Operator:	Paul Thompson	A	7251	Days 1st Shift		
Other Operators:						

II Certification by Lead/Chief Operator

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

Signature and Date	Paul Thompson Printed or Typed Name	A7251 License Number
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MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541242 | Plant Name: Welaka Mobile Home Park

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

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

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

Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C	Lowest CT Provided	Before or at First Customer During Peak Flow, min	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg·min/L	Operating UV Dose, mW-sec/cm ²	Lowest UV Dose Required, mW-sec/cm ²	Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable*		UV Dose	
															CT Calculations	UV Dose	CT Calculations	UV Dose
1	X	24.0	6,310	1.5											1.5			
2	X	24.0	11,570	1.8											1.8			
3	X	24.0	6,600	2.0											2.0			
4	X	24.0	11,370	2.0											2.0			
5		24.0	9,897															
6		24.0	9,897															
7	X	24.0	9,897	1.8											1.8			
8	X	24.0	11,570	1.8											1.8			
9	X	24.0	11,040	1.8											1.8			
10	X	24.0	7,470	2.0											2.0			
11	X	24.0	12,770	1.8											1.8			
12		24.0	10,703															
13		24.0	10,703															
14	X	24.0	10,703	1.7											1.7			
15	X	24.0	9,410	2.1											2.1			
16	X	24.0	11,240	1.8											1.8			
17	X	24.0	7,010	2.0											2.0			
18	X	24.0	13,580	1.7											1.7			
19		24.0	11,037															
20		24.0	11,037															
21	X	24.0	11,037	1.8											1.8			
22	X	24.0	15,370	1.8											1.8			
23	X	24.0	7,120	2.0											2.0			
24	X	24.0	12,340	1.8											1.8			
25	X	24.0	10,050	1.8											1.8			
26		24.0	10,303															
27		24.0	10,303															
28	X	24.0	10,303	2.0											2.0			
29		24.0																
30		24.0																
31		24.0																
Total		290,640																
Average		9,375																
Maximum		15,370																

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Saratoga Harbor		PWS Identification Number: 2541008	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 50		Total Population Served at End of Month: 175	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor		Plant Telephone Number: (352) 787-0980	
Plant Address: Gibbs Avenue		City: Satsuma	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Paul Thompson	A	7251
Other Operators:			

II. Certification by Lead/Chief Operator

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

Signature and Date	Paul Thompson Printed or Typed Name	A7251 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541008 Plant Name: Sarasota Harbor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Saratoga Harbor	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose								
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²					
1	X	24.0	8,500		1.9										0.7		
2	X	24.0	7,800		2.1										0.7		
3	X	24.0			2.0										0.9		
4	X	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										0.7		
8	X	24.0	8,000		1.9										1.4		
9	X	24.0	8,700		1.8										0.8		
10	X	24.0			1.8										0.8		
11	X	24.0	8,000		1.8										0.8		
12		24.0	11,333														
13		24.0	11,333														
14	X	24.0	11,333		1.6										0.8		
15	X	24.0	8,400		1.8										0.7		
16	X	24.0	8,200		1.8										0.8		
17	X	24.0			1.7										0.6		
18	X	24.0	8,200		1.7										0.8		
19		24.0	8,500														
20		24.0	8,500														
21	X	24.0	8,500		1.7										0.7		
22	X	24.0	7,800		1.6										0.5		
23	X	24.0	4,300		1.7										0.7		
24	X	24.0	4,000		2.0										0.8		
25	X	24.0	7,700		1.7										0.6		
26		24.0	8,100														
27		24.0	8,100														
28	X	24.0	8,100		1.7										0.9		
29	X	24.0	8,200		1.8										1.0		
30	X	24.0	8,000		1.5										0.7		
31	X	24.0	8,300		1.5										0.8		
Total			240,500														
Average			7,758														
Maximum			11,400														

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Welaka Mobile Home Park		PWS Identification Number: 2541242	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 108		Total Population Served at End of Month: 324	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: 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: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 108,000		Plant Class (per subsection 62-699.310(4), F.A.C.): D	
Plant Category (per subsection 62-699.310(4), F.A.C.): V			
Licensed Operators	Name	License Class	License Number Day(s) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251 Days 1st Shift
Other Operators:			

II. Certification by Lead/Chief Operator

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

Signature and Date	Paul Thompson Printed or Typed Name	A7251 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park

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

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

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

Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C	Lowest CT Before or at Customer During Peak Flow, mg-minutes	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*	
												UV Dose	UV Dose
1	X	24.0	12,010	2.0									
2	X	24.0	9,470	1.9									
3	X	24.0	7,230	1.6									
4	X	24.0	6,360	1.8									
5		24.0	13,963										
6		24.0	13,963										
7	X	24.0	13,963	1.9									
8	X	24.0	9,170	2.0									
9	X	24.0	9,270	1.7									
10	X	24.0	12,630	3.0									
11	X	24.0	17,880	1.7									
12		24.0	9,280										
13		24.0	9,280										
14	X	24.0	9,280	2.5									
15	X	24.0	7,640	1.5									
16	X	24.0	8,150	1.6									
17	X	24.0	8,910	1.8									
18	X	24.0	8,560	1.6									
19		24.0	10,130										
20		24.0	10,130										
21	X	24.0	10,130	1.3									
22	X	24.0	10,320	1.5									
23	X	24.0	9,160	1.6									
24	X	24.0	7,820	1.3									
25	X	24.0	9,000	1.6									
26		24.0	9,150										
27		24.0	9,150										
28	X	24.0	9,150	1.6									
29	X	24.0	8,300	1.3									
30	X	24.0	8,310	1.5									
31	X	24.0	9,450	1.6									
Total		307,210											
Average		9,910											
Maximum		17,880											

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: <u>Saratoga Harbor</u>		PWS Identification Number: <u>2541008</u>	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: <u>50</u>		Total Population Served at End of Month: <u>175</u>	
PWS Owner: <u>Aqua Utilities Florida</u>			
Contact Person: <u>Brian Heath</u>		Contact Person's Title: <u>Area Manager</u>	
Contact Person's Mailing Address: <u>PO Box 490310</u>		City: <u>Leesburg</u>	State: <u>Florida</u> Zip Code: <u>34749</u>
Contact Person's Telephone Number: <u>(352) 787-0980</u>		Contact Person's Fax Number: <u>(352) 787-6333</u>	
Contact Person's E-Mail Address: <u>beheath@aquaaamerica.com</u>			

B. Water Treatment Plant Information

Plant Name: <u>Sarasota Harbor</u>		Plant Telephone Number: <u>(352) 787-0980</u>		
Plant Address: <u>Gibbs Avenue</u>		City: <u>Satsuma</u>	State: <u>Florida</u> Zip Code: <u>32189</u>	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>200,000</u>				
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>IV</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	<u>Larry White</u>	<u>C</u>	<u>7082</u>	<u>Days 1st Shift</u>
Other Operators:	<u>Paul Thompson</u>	<u>A</u>	<u>7251</u>	<u>Days 1st Shift</u>

II. Certification by Lead/Chief Operator

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

Signature and Date	<u>Larry White</u> Printed or Typed Name	<u>C7082</u> License Number
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MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541008 Plant Name: Saratoga Harbor

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

Other (if applicable):

Day of the Month	Days Plant Started or Visited by Operator (Place "X")	Saratoga Harbor	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Measurement	Disinfectant Contact Time (T) at C	Customer Provided Lowest CT	Disinfectant Before or at Customer Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm ²	Lowest UV Dose Required, mW-sec/cm ²	Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X		28,500	24.0	1.3										
2			1,433	24.0	1,433										
3			1,433	24.0	1,433										
4	X		1,433	24.0	1,433										
5	X		8,100	24.0	1.7										
6	X		8,200	24.0	1.7										
7	X		8,200	24.0	1.9										
8	X		8,000	24.0	2.0										
9			8,100	24.0	8,100										
10			8,100	24.0	8,100										
11	X		8,100	24.0	1.6										
12	X		7,900	24.0	1.5										
13	X		8,000	24.0	1.5										
14	X		7,800	24.0	1.7										
15	X		8,000	24.0	1.6										
16			11,267	24.0	11,267										
17			11,267	24.0	11,267										
18	X		11,267	24.0	1.4										
19	X		24.0	24.0	2.1										
20	X		8,500	24.0	1.9										
21	X		9,800	24.0	1.8										
22	X		8,500	24.0	1.7										
23			8,833	24.0	8,833										
24			8,833	24.0	8,833										
25	X		8,833	24.0	1.3										
26	X		8,000	24.0	1.2										
27	X		8,400	24.0	1.3										
28	X		8,100	24.0	1.3										
29	X		8,000	24.0	1.5										
30			11,233	24.0	11,233										
31			24.0	24.0	24.0										
Total			243,933												
Average			7,869												
Maximum			28,500												

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Welaka Mobile Home Park		PWS Identification Number: 2541242	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 108		Total Population Served at End of Month: 324	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquamerica.com			

B. Water Treatment Plant Information

Plant Name: 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: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
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
Lead/Chief Operator:	Larry White	C	7082
Other Operators:	Paul Thompson	A	7251

II. Certification by Lead/Chief Operator

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

Signature and Date	Larry White Printed or Typed Name	C7082 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541242 Plant Name: Webber Mobile Home Park

Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Other (describe):

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV-Dose, to Demstrate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV-Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	X	24.0	9,680		1.5							1.0	
2		24.0	8,767										
3		24.0	8,767										
4	X	24.0	8,767		1.8							1.2	
5	X	24.0	9,920		1.6							1.1	
6	X	24.0	8,250		1.6							1.1	
7	X	24.0	9,810		1.7							1.0	
8	X	24.0	7,880		1.6							1.1	
9		24.0	9,467										
10		24.0	9,467										
11	X	24.0	9,467		1.5							0.9	
12	X	24.0	8,830		3.5							2.1	
13	X	24.0	9,690		1.4							1.2	
14	X	24.0	8,280		1.6							1.0	
15	X	24.0	8,470		1.6							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							1.0	
22	X	24.0	11,330		1.3							0.9	
23		24.0	13,973										
24		24.0	13,973										
25	X	24.0	13,973		1.5							0.9	
26	X	24.0	11,390		1.5							1.0	
27	X	24.0	15,190		1.7							1.2	
28	X	24.0	14,520		1.3							0.9	
29	X	24.0	13,510		1.5							1.1	
30		24.0	14,519										
31		24.0											

Total	316,429
Average	10,207
Maximum	15,190

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Saratoga Harbor		PWS Identification Number: 2541008	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 50		Total Population Served at End of Month: 175	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor		Plant Telephone Number: (352) 787-0980	
Plant Address: Gibbs Avenue		City: Satsuma	State: Florida Zip Code: 32189
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number / Day(s) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251 / Days 1st Shift
Other Operators:			

II. Certification by Lead/Chief Operator

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

_____ Signature and Date	Paul Thompson Printed or Typed Name	A7251 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541008 Plant Name: Saratoga Harbor

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

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Saratoga Harbor	Net Quantity of Finished Water Producted, gal.	CT Calculations							UV Dose		Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²		
1		24.0	16,850											
2	X	24.0	16,850		2.1								1.0	
3	X	24.0			2.2								1.0	
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											
8		24.0	5,633											
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											
15		24.0	11,500											
16	X	24.0	11,500		1.4								0.9	
17	X	24.0	800		1.2								0.8	
18	X	24.0	400		1.1								0.7	
19	X	24.0			0.8								0.6	
20	X	24.0			0.9								0.5	
21		24.0	1,933											
22		24.0	1,933											
23	X	24.0	1,933		0.9								0.4	
24	X	24.0	2,200		1.4								0.7	
25	X	24.0	800		1.2								0.9	
26	X	24.0	14,500		1.0								0.5	
27	X	24.0	9,300		1.1								0.4	
28		24.0	11,500											
29		24.0	11,500											
30	X	24.0	11,500		1.0								0.5	
31	X	24.0	18,500		1.1								0.6	
Total			231,000											
Average			7,452											
Maximum			18,500											

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Welaka Mobile Home Park		PWS Identification Number: 2541242	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 108		Total Population Served at End of Month: 324	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Welaka Mobile Home Park		Plant Telephone Number: (352) 787-0980	
Plant Address: Hamilton Road		City: Satsuma	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 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) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251 / Days 1st Shift
Other Operators:			

II. Certification by Lead/Chief Operator

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

Signature and Date	Paul Thompson Printed or Typed Name	A7251 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1		24.0	21,780												
2	X	24.0	21,780		1.8										1.3
3	X	24.0	9,500		1.7										1.4
4	X	24.0	8,950		1.8										1.2
5	X	24.0	8,710		1.5										1.3
6	X	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
11	X	24.0	10,230		1.6										1.4
12	X	24.0	8,520		1.8										1.5
13	X	24.0	11,830		1.6										1.0
14		24.0	10,483												
15		24.0	10,483												
16	X	24.0	10,483		1.2										0.7
17	X	24.0	7,290		1.5										1.0
18	X	24.0	25,940		2.1										1.0
19	X	24.0	20,090		2.4										1.9
20	X	24.0	28,700		1.8										1.3
21		24.0	26,173												
22		24.0	26,173												
23	X	24.0	26,173		2.0										1.4
24	X	24.0	13,290		1.7										1.3
25	X	24.0	10,660		1.6										1.1
26	X	24.0	8,250		1.9										1.3
27	X	24.0	10,100		1.6										1.0
28		24.0	13,960												
29		24.0	13,960												
30	X	24.0	13,960		1.8										1.2
31	X	24.0	12,800		1.8										1.2
Total			444,100												
Average			14,326												
Maximum			28,700												

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Saratoga Harbor		PWS Identification Number: 2541008	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 50		Total Population Served at End of Month: 175	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aquaamerica.com		Contact Person's Fax Number: (352) 787-6333	

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor		Plant Telephone Number: (352) 787-0980	
Plant Address: Gibbs Avenue		City: Satsuma	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32189	
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 (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Larry White	C	7082
Other Operators:	Paul Thompson	A	7251

II. Certification by Lead/Chief Operator

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

Signature and Date	Larry White Printed or Typed Name	C7082 License Number
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MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541008 Plant Name: Saratoga Harbor June, 2005

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

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

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

Days Plant Staffed or Visited by Operator (Place "X")	Saratoga Harbor	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant (T) at C Contact Time Before or at First Customer During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm ²	Required UV Dose, mW-sec/cm ²	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*		CT Calculations	
													UV Dose	UV Dose	UV Dose	UV Dose
1	X	24.0				1.0							0.4			
2	X	24.0	9,300			1.1							0.4			
3	X	24.0	7,900			1.2							0.6			
4		24.0	11,333													
5		24.0	11,333													
6	X	24.0	11,333			0.9							0.4			
7	X	24.0	8,900			1.3							0.6			
8	X	24.0	8,500			1.2							0.5			
9	X	24.0	8,200			1.0							0.4			
10	X	24.0	7,900			1.3							0.4			
11		24.0	11,333													
12		24.0	11,333													
13	X	24.0	11,333			1.4							1.1			
14	X	24.0	8,300			1.3							0.8			
15	X	24.0	8,000			2.3							1.8			
16	X	24.0	8,500			1.2							1.0			
17	X	24.0	8,600			1.8							1.3			
18		24.0	11,300													
19		24.0	11,300													
20	X	24.0	11,300			1.5							1.1			
21	X	24.0	8,500			2.1							1.2			
22	X	24.0	8,000			1.9							1.0			
23	X	24.0	8,400			2.0							1.5			
24	X	24.0	8,700			2.1							1.7			
25		24.0	8,333													
26		24.0	8,333													
27	X	24.0	8,333			2.4							1.9			
28	X	24.0	7,800			1.5							1.2			
29	X	24.0	8,400			2.0							1.6			
30	X	24.0	8,400			2.0							1.5			
31		24.0														
Total:		269,800														
Average		8,703														
Maximum		11,533														

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

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of:	June, 2005
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A. Public Water System (PWS) Information

PWS Name: Welaka Mobile Home Park		PWS Identification Number: 2541242	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 108		Total Population Served at End of Month: 324	
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: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 108,000		Plant Class (per subsection 62-699.310(4), F.A.C.): D	
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) / 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 to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Larry White Printed or Typed Name	C7082 License Number
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MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park June, 2005

III. Daily Data for the Month/Year of:

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

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

Month	Day of the Month	Days Plant Started or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C	Lowest CT Provided Before or at First Customer During Peak Flow, min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	UV Dose		System, mg/L
												Operating UV Dose, mW-sec/cm ²	Lowest UV Dose Required, mW-sec/cm ²	
1	X			6,350	24.0	1.6								
2	X			11,330	24.0	1.6								
3	X			300	24.0	1.7								1.0
4				15,060	24.0									
5				15,060	24.0									
6	X			15,060	24.0	1.6								
7	X			10,400	24.0	1.5								1.2
8	X			7,210	24.0	1.3								1.0
9	X			11,390	24.0	1.4								1.0
10	X			8,920	24.0	1.5								1.1
11				10,570	24.0									
12				10,570	24.0									
13	X			10,570	24.0	1.6								1.1
14	X			9,530	24.0	1.4								1.0
15	X			10,190	24.0	1.5								1.2
16	X			14,010	24.0	1.6								1.2
17	X			8,230	24.0	1.5								1.1
18				9,637	24.0									
19				9,637	24.0									
20	X			9,637	24.0	1.4								1.0
21	X			9,970	24.0	1.4								1.1
22	X			7,710	24.0	1.7								1.3
23	X			9,260	24.0	1.0								0.8
24	X			10,350	24.0	2.0								1.4
25				12,223	24.0									
26				12,223	24.0									
27	X			12,223	24.0	2.4								1.8
28	X			8,550	24.0	2.0								1.6
29	X			8,530	24.0	2.3								1.7
30	X			9,520	24.0	2.4								1.9
31					24.0									
Total				304,220										
Average				9,814										
Maximum				15,060										

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

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of:	July, 2005
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A. Public Water System (PWS) Information

PWS Name: Saratoga Harbor		PWS Identification Number: 2541008	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 50		Total Population Served at End of Month: 175	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor		Plant Telephone Number: (352) 787-0980	
Plant Address: Gibbs Avenue		City: Satsuma	State: Florida
		Zip Code: 32189	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251	Days 1st Shift
Other Operators:	Larry White	C	7082	Days 1st Shift
	David Haring	C	14091	Days 1st Shift

II. Certification by Lead/Chief Operator

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

Signature and Date

Paul Thompson

Printed or Typed Name

A7251

License Number

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

PWS Identification Number: 2541008 Plant Name: Saratoga Harbor July, 2005

III. Daily Data for the Month/Year of:

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Staffed or Visited by Operator (Place "X")	Saratoga Harbor	Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Measurement (T) at C	Disinfectant Contact Time Before or at First	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm ²	Required UV Dose, mW-sec/cm ²	System, mg/L	CT Calculations* if Applicable		Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
												UV Dose	CT Calculations	
1	X	24.0	9,000	1.7										
2		24.0	11,467											
3		24.0	11,467											
4	X	24.0	11,467	1.9										
5	X	24.0	8,400	1.8										
6	X	24.0	8,600	2.0										
7	X	24.0	8,600	1.7										
8	X	24.0	8,600	1.8										
9		24.0	8,333											
10		24.0	8,333											
11	X	24.0	8,333	1.7										
12	X	24.0	9,000	2.0										
13	X	24.0	8,400	2.0										
14	X	24.0	8,500	2.0										
15	X	24.0		1.6										
16		24.0	11,133											
17		24.0	11,133											
18	X	24.0	11,133	1.4										
19	X	24.0	800	1.5										
20	X	24.0	300	1.5										
21	X	24.0	12,700	1.0										
22	X	24.0	5,500	1.2										
23		24.0	11,467											
24		24.0	11,467											
25	X	24.0	11,467	2.5										
26	X	24.0	5,300	2.5										
27	X	24.0	12,600	2.2										
28	X	24.0	5,600	2.6										
29	X	24.0	10,900	2.6										
30		24.0	9,400											
31		24.0	9,400											
Total		268,800												
Average		8,671												
Maximum		12,700												

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name:	Welaka Mobile Home Park			PWS Identification Number:	2541242
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	108			Total Population Served at End of Month:	324
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333		
Contact Person's E-Mail Address:	beheath@aquaamerica.com				

B. Water Treatment Plant Information

Plant Name:	Welaka Mobile Home Park			Plant Telephone Number:	(352) 787-0980
Plant Address:	Hamilton Road	City:	Satsuma	State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	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) / Shift(s) Worked	
Lead/Chief Operator:	Paul Thompson	A	7251	Days 1st Shift	
Other Operators:	Larry White	C	7082	Days 1st Shift	
	David Haring	C	14091	Days 1st Shift	

II. Certification by Lead/Chief Operator

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

	Paul Thompson	A7251
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	6,670		2.1								1.0	
2		24.0	8,257											
3		24.0	8,257											
4	X	24.0	8,257		2.0								1.6	
5	X	24.0	26,050		1.8								1.5	
6	X	24.0	8,930		1.9								1.6	
7	X	24.0	8,480		2.0								1.4	
8	X	24.0	8,510		1.9								1.7	
9		24.0	8,260											
10		24.0	8,260											
11	X	24.0	8,260		1.8								1.5	
12	X	24.0	6,050		1.0								0.7	
13	X	24.0	11,300		2.1								1.6	
14	X	24.0	12,090		1.8								1.4	
15	X	24.0	8,510		1.7								1.4	
16		24.0	11,210											
17		24.0	11,210											
18	X	24.0	11,210		1.6								1.3	
19	X	24.0	10,010		1.6								1.3	
20	X	24.0	7,850		1.6								1.2	
21	X	24.0	6,860		1.6								1.2	
22	X	24.0	5,020		1.7								1.2	
23		24.0	12,093											
24		24.0	12,093											
25	X	24.0	12,093		1.8								1.2	
26	X	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								1.1	
29	X	24.0	7,900		2.0								1.5	
30		24.0	7,516											
31		24.0	7,516											
Total			295,422											
Average			9,530											
Maximum			26,050											

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Saratoga Harbor		PWS Identification Number: 2541008	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 50		Total Population Served at End of Month: 175	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquamerica.com			

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor		Plant Telephone Number: (352) 787-0980	
Plant Address: Gibbs Avenue		City: Satsuma	State: Florida Zip Code: 32189
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number Day(s) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251 Days 1st Shift
Other Operators:	Larry White	C	7082 Days 1st Shift
	David Haring	C	14091 Days 1st Shift

II. Certification by Lead/Chief Operator

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

Signature and Date	Paul Thompson Printed or Typed Name	A7251 License Number
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MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541008 Plant Name: Saratoga Harbor

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

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

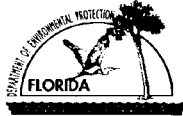
Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Started or Visited by Operator (Place "X")	Saratoga Harbor	Net Quantity of Finished Water Produced, gal.	Peak Flow, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C	Lowest CT Provided	Lowest Residual Disinfectant Concentration (C) at C	Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm ²	Lowest UV Dose Required, mW-sec/cm ²	Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*	UV Dose	CT Calculations			
																		Peak Flow, mg/L	minutes		
1	X	24.0	14,100	2.6		2.6															
2	X	24.0	10,000	2.6		2.6															
3	X	24.0	6,400	2.6		2.6															
4	X	24.0	4,600	2.5		2.5															
5	X	24.0	11,100	1.5		1.5															
6		24.0	9,300																		
7		24.0	9,300																		
8	X	24.0	9,300	1.8		1.8															
9	X	24.0	5,800	1.1		1.1															
10	X	24.0	12,400	1.1		1.1															
11	X	24.0	11,800	1.0		1.0															
12	X	24.0	10,700	1.0		1.0															
13		24.0	13,133																		
14		24.0	13,133																		
15	X	24.0	13,133	1.1		1.1															
16	X	24.0	15,200	1.2		1.2															
17	X	24.0	12,500	1.2		1.2															
18	X	24.0	10,600	1.1		1.1															
19	X	24.0	10,700	0.8		0.8															
20		24.0	22,300																		
21		24.0	22,300																		
22	X	24.0	22,300	1.0		1.0															
23	X	24.0	15,300	1.0		1.0															
24	X	24.0	5,500	1.0		1.0															
25	X	24.0	58,800	1.2		1.2															
26	X	24.0	51,100	0.6		0.6															
27		24.0	54,100																		
28		24.0	54,100																		
29	X	24.0	54,100	0.7		0.7															
30	X	24.0	56,600																		
31	X	24.0	11,000	1.5		1.5															
Total			630,700																		
Average			20,345																		
Maximum			58,800																		

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

DEF Form 62-555 900(3)Alternate

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name:	Welaka Mobile Home Park			PWS Identification Number:	2541242
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	108			Total Population Served at End of Month:	324
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Lecsburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com				

B. Water Treatment Plant Information

Plant Name:	Welaka Mobile Home Park			Plant Telephone Number:	(352) 787-0980
Plant Address:	Hamilton Road	City:	Satsuma	State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	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) / Shift(s) Worked	
Lead/Chief Operator:	Paul Thompson	A	7251	Days 1st Shift	
Other Operators:	Larry White	C	7082	Days 1st Shift	
	David Haring	C	14091	Days 1st Shift	

II. Certification by Lead/Chief Operator

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

Signature and Date	Paul Thompson	A7251
	Printed or Typed Name	License Number

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

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Temp of Water, °C if Applicable		
1	X	24.0	11,275		1.4							0.8	
2	X	24.0	9,540		1.4							0.9	
3	X	24.0	8,600		1.2							0.8	
4	X	24.0	6,970		1.3							0.8	
5	X	24.0	10,240		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							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							0.8	
13		24.0	9,640										
14		24.0	9,640										
15	X	24.0	9,640		1.1							0.8	
16	X	24.0	6,820		1.1							0.8	
17	X	24.0	7,650		1.2							0.8	
18	X	24.0	10,970		1.1							0.9	
19	X	24.0	10,290		1.1							0.8	
20		24.0	11,540										
21		24.0	11,540										
22	X	24.0	11,540		1.2							1.0	
23	X	24.0	11,360		1.2							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	X	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							1.1	
Total			297,255										
Average			9,589										
Maximum			12,540										

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Saratoga Harbor		PWS Identification Number: 2541008	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 50		Total Population Served at End of Month: 175	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor		Plant Telephone Number: (352) 787-0980		
Plant Address: Gibbs Avenue		City: Satsuma	State: Florida	
		Zip Code: 32189		
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251	Days 1st Shift
Other Operators:	Larry White	C	7082	Days 1st Shift
	David Haring	C	14091	Days 1st Shift

II. Certification by Lead/Chief Operator

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

Signature and Date

Paul Thompson
Printed or Typed Name

A7251
License Number

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

PWS Identification Number: 2541008 Plant Name: Saratoga Harbor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Saratoga Harbor	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	5,000		1.4								0.8	
2	X	24.0	5,200		2.6								2.0	
3		24.0	8,833											
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											
11		24.0	10,700											
12	X	24.0	10,700		0.6								0.4	
13	X	24.0	5,100		0.4								0.3	
14	X	24.0			1.8								0.6	
15	X	24.0	10,500		1.4								0.4	
16	X	24.0	8,300		0.6								0.4	
17		24.0	12,733											
18		24.0	12,733											
19	X	24.0	12,733		1.2								0.5	
20	X	24.0			1.2								0.9	
21	X	24.0	10,900		1.0								0.5	
22	X	24.0	16,400		0.6								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	X	24.0	10,600		1.6								1.2	
31		24.0												
Total			268,800											
Average			8,671											
Maximum			16,400											

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name:	Welaka Mobile Home Park			PWS Identification Number:	2541242
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	108			Total Population Served at End of Month:	324
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaamerica.com				

B. Water Treatment Plant Information

Plant Name:	Welaka Mobile Home Park			Plant Telephone Number:	(352) 787-0980
Plant Address:	Hamilton Road			City:	Satsuma
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	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) / Shift(s) Worked	
Lead/Chief Operator:	Paul Thompson	A	7251	Days 1st Shift	
Other Operators:	Larry White	C	7082	Days 1st Shift	
	David Haring	C	14091	Days 1st Shift	

II. Certification by Lead/Chief Operator

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

Signature and Date

Paul Thompson

Printed or Typed Name

A7251

License Number

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

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	12,680			1.2							1.0	
2	X	24.0	11,460			0.7							0.5	
3		24.0	11,843											
4		24.0	11,843											
5	X	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							1.3	
8	X	24.0	10,500			1.3							1.0	
9	X	24.0	8,360			1.2							1.0	
10		24.0	10,267											
11		24.0	10,267											
12	X	24.0	10,267			1.0							0.8	
13	X	24.0	9,530			1.0							8.0	
14	X	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											
18		24.0	31,980											
19	X	24.0	31,980			1.4							0.5	
20	X	24.0	45,900			1.6							0.9	
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	X	24.0	11,130			1.0							0.7	
28	X	24.0	8,760			1.1							1.0	
29	X	24.0	10,700			1.0							0.8	
30	X	24.0	31,300			0.9							0.7	
31		24.0												
Total			530,660											
Average			17,118											
Maximum			45,900											

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: <u>Saratoga Harbor</u>		PWS Identification Number: <u>2541008</u>	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: <u>50</u>		Total Population Served at End of Month: <u>175</u>	
PWS Owner: <u>Aqua Utilities Florida</u>			
Contact Person: <u>Brian Heath</u>		Contact Person's Title: <u>Area Manager</u>	
Contact Person's Mailing Address: <u>PO Box 490310</u>		City: <u>Leesburg</u>	State: <u>Florida</u> Zip Code: <u>34749</u>
Contact Person's Telephone Number: <u>(352) 787-0980</u>		Contact Person's Fax Number: <u>(352) 787-6333</u>	
Contact Person's E-Mail Address: <u>beheath@aquaaamerica.com</u>			

B. Water Treatment Plant Information

Plant Name: <u>Sarasota Harbor</u>		Plant Telephone Number: <u>(352) 787-0980</u>		
Plant Address: <u>Gibbs Avenue</u>		City: <u>Satsuma</u>	State: <u>Florida</u> Zip Code: <u>32189</u>	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>200,000</u>				
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>IV</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	<u>Paul Thompson</u>	<u>A</u>	<u>7251</u>	<u>Days 1st Shift</u>
Other Operators:	<u>Larry White</u>	<u>C</u>	<u>7082</u>	<u>Days 1st Shift</u>
	<u>David Haring</u>	<u>C</u>	<u>14091</u>	<u>Days 1st Shift</u>

II. Certification by Lead/Chief Operator

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

Signature and Date	Paul Thompson Printed or Typed Name	A7251 License Number
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MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541008 Plant Name: Saratoga Harbor

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

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

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

Days Plant Started or Visited by Operator (Place "X")	Saratoga Harbor	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Measurement Point During Peak Flow	Disinfectant Contact Time (T) at C	Lowest CT Provided Before or at Customer First Measurement Point During Peak Flow	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg·min/L	Lowest UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*		Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
												UV Dose	UV Dose	
1		7,333	24.0											
2		7,333	24.0											
3	X	7,333	24.0	11,000	0.9	1.2								
4	X	7,000	24.0	7,000	0.9	0.6								
9		7,000	24.0											
8		7,000	24.0											
7	X	10,400	24.0	8.0										
8		7,000	24.0											
5	X	5,600	24.0	5,600	0.9	0.6								
6	X	5,000	24.0	5,000	0.9	0.6								
7	X	10,400	24.0	8.0										
8		7,000	24.0											
9		7,000	24.0											
10	X	7,000	24.0	7,000	0.6	0.6								
11	X	10,800	24.0	10,800	0.9	1.5								
12	X	5,300	24.0	5,300	1.2	1.2								
13	X	5,400	24.0	5,400	2.6	1.9								
14	X	9,800	24.0	9,800	1.7	0.8								
15		9,033	24.0											
16		9,033	24.0											
17	X	9,033	24.0	16,200	1.0	0.4								
18	X	16,200	24.0	16,200	0.7	0.4								
19	X	7,100	24.0	7,100	1.5	0.5								
20	X	10,800	24.0	10,800	2.5	1.2								
21	X	5,200	24.0	5,200	3.5	1.8								
22		10,900	24.0											
23		10,900	24.0											
24	X	10,900	24.0	10,900	2.0	1.2								
25	X	5,500	24.0	5,500	2.0	1.0								
26	X	5,000	24.0	5,000	1.7	0.9								
27	X	10,400	24.0	10,400	1.8	0.8								
28	X	10,500	24.0	10,500	1.3	0.5								
29		8,900	24.0											
30		8,900	24.0											
31	X	8,900	24.0	8,900	1.1	0.4								
Total		263,500												
Average		8,500												
Maximum		16,200												

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Welaka Mobile Home Park		PWS Identification Number: 2541242	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 108		Total Population Served at End of Month: 324	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaamerica.com			

B. Water Treatment Plant Information

Plant Name: Welaka Mobile Home Park		Plant Telephone Number: (352) 787-0980	
Plant Address: Hamilton Road		City: Satsuma	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 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
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Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251	Days 1st Shift
Other Operators:	Larry White	C	7082	Days 1st Shift
	David Haring	C	14091	Days 1st Shift

II. Certification by Lead/Chief Operator

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

Signature and Date	Paul Thompson Printed or Typed Name	A7251 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park

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

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

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

Days Plant Stated or Visited by Operator (Place "X")	Hours in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Measurement (T) at C	Disinfectant Contact Time Before or at Lowest CT	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg·min/L	Lowest UV Dose, mW-sec/cm ²	Remote Point in Distribution System, mg/L	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*	
											UV Dose	UV Dose
1		13,423	24.0									
2	X	13,423	24.0									
3	X	13,423	24.0	1.2								
4	X	11,210	24.0	1.0								0.7
5	X	9,960	24.0	1.2								0.6
6	X	8,740	24.0	2.0								1.0
7	X	12,610	24.0	1.6								0.6
8		10,483	24.0									
9		10,483	24.0									
10	X	10,483	24.0	1.5								0.6
11	X	10,890	24.0	1.5								0.6
12	X	8,030	24.0	1.9								1.3
13	X	8,290	24.0	1.3								1.2
14	X	8,580	24.0	1.1								0.8
15		9,593	24.0									
16		9,593	24.0									
17	X	9,593	24.0	0.6								0.4
18	X	8,940	24.0	1.4								0.6
19	X	7,790	24.0	1.3								0.6
20	X	10,120	24.0	1.7								1.3
21	X	28,420	24.0	1.6								0.8
22		12,993	24.0									
23		12,993	24.0									
24	X	12,993	24.0	1.6								0.7
25	X	3,240	24.0	1.2								0.4
26	X	9,150	24.0	1.4								0.4
27	X	8,740	24.0	1.5								0.4
28	X	11,210	24.0	1.4								0.4
29		8,823	24.0									
30		8,823	24.0									
31	X	8,823	24.0	1.1								0.4
Total		331,870										
Average		10,705										
Maximum		28,420										

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Saratoga Harbor		PWS Identification Number: 2541008	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 50		Total Population Served at End of Month: 175	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor		Plant Telephone Number: (352) 787-0980	
Plant Address: Gibbs Avenue		City: Satsuma	State: Florida Zip Code: 32189
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number Day(s) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251 Days 1st Shift
Other Operators:	Larry White	C	7082 Days 1st Shift
	David Haring	C	14091 Days 1st Shift

II. Certification by Lead/Chief Operator

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

Signature and Date	Paul Thompson Printed or Typed Name	A7251 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541008 Plant Name: Saratoga Harbor

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

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Started or Visited by Operator (Place "X")	Saratoga Harbor	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Measurement (T) at C	Disinfectant Contact Time Before or at First Customer Measurement (T) During Peak Flow, minutes	Lowest CT Before or at First Customer Measurement (T) During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Minimum UV Dose, mW-sec/cm ²	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*			CT Calculations			Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	0.4				
													UV Dose	UV Dose	UV Dose	UV Dose	UV Dose	UV Dose			UV Dose			
1	X	24.0	10,200	1.5																				
2	X	24.0	5,300	1.6																				
3	X	24.0	10,600	1.6																				
4	X	24.0	10,400	1.6																				
5		24.0	6,933																					
6		24.0	6,933																					
7	X	24.0	6,933	1.2																				
8	X	24.0	10,600	1.2																				
9	X	24.0	5,300	1.3																				
10	X	24.0	10,300	1.4																				
11	X	24.0	5,300	1.3																				
12		24.0	11,133																					
13		24.0	11,133																					
14	X	24.0	11,133	1.5																				
15	X	24.0	5,600	1.2																				
16	X	24.0	5,400	3.0																				
17	X	24.0	10,500	1.4																				
18	X	24.0	5,100	1.5																				
19		24.0	10,433																					
20		24.0	10,433																					
21	X	24.0	10,433	1.8																				
22	X	24.0	5,200	1.8																				
23	X	24.0	10,300	1.6																				
24	X	24.0	15,500	1.7																				
25	X	24.0	5,200	1.7																				
26		24.0	13,233																					
27		24.0	13,233																					
28	X	24.0	13,233	1.8																				
29	X	24.0	8,700	1.7																				
30	X	24.0	10,300	1.4																				
31		24.0																						
Total			275,000																					
Average			8,871																					
Maximum			15,500																					

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

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



See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Welaka Mobile Home Park		PWS Identification Number: 2541242	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 108		Total Population Served at End of Month: 324	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: 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: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
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) / Shift(s) Worked
Lead/Chief Operator:	Paul Thompson	A	7251	Days 1st Shift
Other Operators:	Larry White	C	7082	Days 1st Shift
	David Haring	C	14091	Days 1st Shift

II. Certification by Lead/Chief Operator

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

Signature and Date

Paul Thompson

Printed or Typed Name

A7251

License Number

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

PWS Identification Number: 2541242 Plant Name: Welaka Mobile Home Park

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostatate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	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												
6		24.0	10,370												
7	X	24.0	10,370		1.4									0.5	
8	X	24.0	5,610		1.5									0.5	
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	
19		24.0	8,807												
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									0.7	
31		24.0													
Total			277,490												
Average			8,951												
Maximum			12,100												

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

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



Polymer Page 3 Due in December

See Pages 4 for Instructions.

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

A. Public Water System (PWS) Information

PWS Name: Saratoga Harbor		PWS Identification Number: 2541008	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 50		Total Population Served at End of Month: 175	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aquaaamerica.com		Contact Person's Fax Number: (352) 787-6333	

B. Water Treatment Plant Information

Plant Name: Sarasota Harbor		Plant Telephone Number: (352) 787-0980	
Plant Address: Gibbs Avenue		City: Satsuma	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32189	
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 (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Paul Thompson	A	7251
Other Operators:	Larry White	C	7082
	David Haring	C	14091

II. Certification by Lead/Chief Operator

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

Signature and Date	Paul Thompson Printed or Typed Name	A7251 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 2541008 Plant Name: Saratoga Harbor

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

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Saratoga Harbor	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	5,250		1.5								0.6	
2	X	24.0	5,000		1.5								0.8	
3		24.0	12,233											
4		24.0	12,233											
5	X	24.0	12,233		1.7								0.6	
6	X	24.0	10,800		1.7								1.0	
7	X	24.0	21,400		1.5								1.0	
8	X	24.0	10,200		1.6								0.6	
9	X	24.0	10,400		1.5								0.4	
10		24.0	10,900											
11		24.0	10,900											
12	X	24.0	10,900		1.7								0.4	
13	X	24.0	10,500		1.3								0.4	
14	X	24.0	5,700		1.3								0.3	
15	X	24.0	10,500		1.4								0.3	
16	X	24.0	9,900		1.5								0.3	
17		24.0	5,133											
18		24.0	5,133											
19	X	24.0	5,133		1.4								0.3	
20	X	24.0	5,000		1.5								0.3	
21	X	24.0	5,500		1.6								0.3	
22	X	24.0	10,500		1.5								0.3	
23	X	24.0	5,200		1.5								0.3	
24		24.0	7,167											
25		24.0	7,167											
26	X	24.0	7,167		1.8								0.5	
27	X	24.0	10,100		1.7								0.4	
28	X	24.0	10,700		1.6								0.3	
29	X	24.0	7,200		1.8								0.4	
30	X	24.0	8,700		1.6								0.3	
31		24.0	8,833											
Total			277,683											
Average			8,958											
Maximum			21,400											

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

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

PWS Identification Number: 2541242 Plant Name: Wetaka Mobile Home Park
 Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

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

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

Day of the Month	Operator ("X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Provided	Disinfectant Contact Time (T) at C	Measurement Point During Peak Flow	Customer Before or at First Disinfectant Concentration (C) Before or at First Customer Peak Flow, mg/L	Customer During Peak Flow, mg-minutes	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	UV Dose, mW-sec/cm	Lowest UV Dose Required, mW-sec/cm	Minimum Disinfectant Concentration at Remote Point in Distribution System, mg/L
1	X		7,180	24.0	1.5										0.7
2	X		8,290	24.0	1.5										0.8
3			8,230	24.0											
4			8,230	24.0											
5	X		8,230	24.0	1.5										0.5
6	X		8,170	24.0	1.6										1.0
7	X		8,630	24.0	1.4										0.8
8	X		8,760	24.0	1.4										0.8
9	X		6,840	24.0	1.4										0.5
10			8,167	24.0											
11			8,167	24.0											
12	X		8,167	24.0	1.5										0.5
13	X		8,150	24.0	1.2										0.3
14	X		8,000	24.0	1.3										0.3
15	X		6,450	24.0	1.4										0.3
16	X		11,360	24.0	1.3										0.4
17			8,370	24.0											
18			8,370	24.0											
19	X		8,370	24.0	1.3										0.4
20	X		7,480	24.0	1.3										0.4
21	X		7,920	24.0	1.3										0.4
22	X		9,460	24.0	1.3										0.4
23	X		7,330	24.0	1.4										0.4
24			7,513	24.0											
25			7,513	24.0											
26	X		7,513	24.0	0.9										0.4
27	X		10,970	24.0	1.5										0.4
28	X		13,810	24.0	1.5										0.4
29	X		12,500	24.0	1.4										0.4
30	X		13,800	24.0	1.4										0.4
31			7,559	24.0											
Total			269,499												
Average			8,694												
Maximum			13,810												

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