

ORIGINAL

1

**Chuluota**

Docket No. 060368-WS

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

Florida

**VOLUME 6**

**Book 8**

**Set 3 of 24**

Containing  
Additional Engineering Requirements

Discharge Monitoring Report

**Aqua Utilities Florida, Inc.**

DOCUMENT NUMBER-DATE

00969 JAN 30 8

FPSC-COMMISSION CLERK

# Aqua Utilities Florida, Inc. Discharge Monitoring Reports

## Chuluota

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## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Florida Water Services Corporation  
 MAILING ADDRESS: P.O. Box 609520  
 Orlando, FL 32860-9520

PERMIT NUMBER: FLA011076

LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 01/01/2004 To: 01/31/2004

Parameter	Quantity of Loading	Units	Quality or Concentration	Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	0.031	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon.Site No. FLW-1	0.1 (An.Avg.)	mgd				Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	0.039	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon.Site No. FLW-1	Report (Mo.Avg.)	mgd				Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C			3		0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon.Site No. EFA-1			20.0 (An. Avg.)			Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C			3.3	3.7	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon.Site No. EFA-1			Report (Mo.Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC
Solids, Total Suspended			4		0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon.Site No. EFA-1			20.0 (An. Avg.)			Every Two Weeks	8-hour FPC
Solids, Total Suspended			4.6	7.0	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon.Site No. EFA-1			Report (Mo.Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Charles A Richmond / Chief Plant Operator		407-671-2430	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

## DISCHARGE MONITORING REPORT - PART A (Continued)

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

WAFR SITE No.: 6977

Parameter		Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				6.9	7.7		S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1U			#/100mL	1	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement				200 (An.Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement				Report (MoGeoMean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.1			mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				10.0			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement				12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				240			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				240			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				37.7%			PERCENT	0	Monthly	Calculated
	Permit Measurement				Report (Mo.Total)			PERCENT		Monthly	Calculated
	Sample Measurement										
	Permit Measurement										

**DAILY SAMPLE RESULTS - PART B**

Facility Name: Chuluota WWTF PermitNumber: FLA011076 Discharge Point Number: R-001  
 County: Seminole  
 Monitoring Period From: 1/1/04 To: 1/31/04

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	74055	00620	00400	00530	50060	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01
1				7		7.5	0.037		
2				7		8.2	0.049		
3				7		13.7			
4							0.078		
5				7		12.6	0.043		
6				7		10.3	0.031		
7				7		5.7	0.030		
8	3.7	1U	9	7	2.1	22	0.038	280	240
9				8		22	0.041		
10				8		18.5			
11							0.073		
12				7		5.8	0.032		
13				8		17.9	0.022		
14				8		20.3	0.042		
15				7		17.7	0.046		
16				7		18.7	0.034		
17				7		9.2			
18							0.083		
19				7		14.1	0.060		
20				7		4.09	0.037		
21				7		5.7	0.007		
22	2.9	1U	10	7	7	3	0.051	200	240
23				7		1.68	0.034		
24				8		1.13			
25							0.085		
26				7		2.1	0.047		
27				7		3.74	0.039		
28				7		9.5	0.037		
29				7		19.2	0.032		
30				7		16.4	0.050		
31				7		1.2	0.052		

**PLANT STAFFING:**

Day Shift Operator Class: C Certification No.: 9558 Charles Harris  
 Day Shift Operator Class:     Certification No.:                                                
 Day Shift Operator Class:     Certification No.:                                                
 Day Shift Operator Class:     Certification No.:                                                
 Lead Operator Class: B Certification No.: 9287 Charles A. Richmond

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield  
 Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge           

\* Attach additional sheets if necessary to list all certified operators.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Florida Water Services Corporation  
 MAILING ADDRESS: P.O. Box 609520  
 Orlando, FL 32860-9520

PERMIT NUMBER: FLA011076

LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 02/01/2004 To: 02/28/2004

Parameter	Sample Measurement	Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.033		mgd				0		Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Measurement	0.1 (An.Avg.)		mgd						Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.040		mgd				0		Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Measurement	Report (Mo.Avg.)		mgd						Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement				3			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An. Avg.)			mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement				2.4	2.5		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Avg.)	60.0 (Max)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				3			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An. Avg.)			mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				5.6	8.9		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Avg.)	60.0 (Max)		mg/L		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Charles A Richmond / Chief Plant Operator		407-671-2430	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

## DISCHARGE MONITORING REPORT - PART A (Continued)

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

WAFR SITE No.: 6977

Parameter		Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				6.9	7.5		S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1U			#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement				200 (An.Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement				Report (MoGeoMean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.3			mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				12.0			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement				12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				134			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				174			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				38.3%			PERCENT	0	Monthly	Calculated
	Permit Measurement				Report (Mo.Total)			PERCENT		Monthly	Calculated
	Sample Measurement										
	Permit Measurement										

**DAILY SAMPLE RESULTS - PART B**

Facility Name: Chuluota WWTF

PermitNumber: FLA011076

Discharge Point Number: R-001

County: Seminole

Monitoring Period

From: 2/1/04

To: 2/28/04

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	74055	00620	00400	00530	50060	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01
1							0.054		
2				7		1.97	0.040		
3				7		10.3	0.043		
4				7		13.1	0.037		
5	2.5	1U	12	8	2.3	21.6	0.055	27	38
6				7		15.7	0.039		
7				7		7.9			
8							0.087		
9				7		8.3	0.049		
10				7		13.4	0.045		
11				7		3.88	0.036		
12				7		4.25	0.036		
13				7		18.9	0.047		
14				7		12.4			
15							0.098		
16				7		8.8	0.034		
17				7		11.1	0.043		
18				7		1.27	0.034		
19	2.2	1U	10	7	8.9	9.1	0.039	240	310
20				7		12.2	0.039		
21				7		6.5			
22							0.090		
23				7		3.74	0.041		
24				7		3.22			
25				7		6.4			
26				7		7.1			
27				7		13.2	0.048		
28				7		1.9			
29							0.121		
30									
31									

**PLANT STAFFING:**

Day Shift Operator Class: C Certification No.: 12239 Ernestoe Holmes  
 Day Shift Operator Class:      Certification No.:            
 Day Shift Operator Class:      Certification No.:            
 Day Shift Operator Class:      Certification No.:            
 Lead Operator Class: B Certification No.: 9287 Charles A. Richmond

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield  
 Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge     

\* Attach additional sheets if necessary to list all certified operators.



## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Florida Water Services Corporation  
 MAILING ADDRESS: P.O. Box 609520  
 Orlando, FL 32860-9520

PERMIT NUMBER: FLA011076

LIMIT: Final  
 CLASS SIZE: N/A  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, Including Influent  
 NO DISCHARGE FROM SITE: [ ]

REPORT: Monthly  
 GROUP: Domestic

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 03/01/2004 To: 03/31/2004

Parameter	Sample Measurement	Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.034		mgd					0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Measurement	0.1 (An.Avg.)		mgd						Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.048		mgd					0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Measurement	Report (Mo.Avg.)		mgd						Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement				2			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An. Avg.)			mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement				2U	2U		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Avg.)	60.0 (Max)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				2			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An. Avg.)			mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				1.1	1.1		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Avg.)	60.0 (Max)		mg/L		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Charles A Richmond / Chief Plant Operator		407-339-5424	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

## DISCHARGE MONITORING REPORT - PART A (Continued)

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

WAFR SITE No.: 6977

Parameter		Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				6.9	7.4		S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1U			#/100mL	1	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement				200 (An.Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement				Report (MoGeoMean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				0.8			mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				4.5			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement				12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				165			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				138			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				42.4%			PERCENT	0	Monthly	Calculated
	Permit Measurement				Report (Mo.Total)			PERCENT		Monthly	Calculated
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF PermitNumber: FLA011076 Discharge Point Number: R-001  
 County: Seminole  
 Monitoring Period From: 3/1/04 To: 3/31/04

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	74055	00620	00400	00530	50060	50050	80082	00530
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01
1				7.0		8	0.047		
2				7.0		10.5	0.049		
3				7.1		7.7	0.043		
4	2U	1U	4.5	6.9	1.1	7.8	0.069	170	230
5				7.0		8.2	0.047		
6				7.2		7.3			
7							0.107		
8				7.0		1.71	0.040		
9				7.3		13	0.044		
10				7.4		21	0.050		
11				7.3		11.3	0.044		
12				7.0		7.1	0.044		
13				7.4		8.9			
14							0.108		
15				7.2		7.3	0.037		
16				6.9		7.9	0.056		
17				7.0		8.3	0.043		
18	2U	1U	3.9	7.1	1U	13.1	0.055	160	46
19				7.1		1.4	0.045		
20				7.0		9.4			
21							0.094		
22				7.1		8.6	0.048		
23				7.2		8.8	0.049		
24				7.2		10	0.047		
25				7.1		11.4	0.046		
26				7.1		12.4	0.050		
27				7.1		10.7			
28							0.104		
29				7.0		2.78	0.046		
30				7.1		0.77	0.045		
31				7.1		4.98	0.029		

PLANT STAFFING:

Day Shift Operator Class: C Certification No.: 9558 Charles harris  
 Day Shift Operator Class:      Certification No.:             
 Day Shift Operator Class:      Certification No.:             
 Day Shift Operator Class:      Certification No.:             
 Lead Operator Class: B Certification No.: 9287 Charles A. Richmond

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield  
 Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge           

\* Attach additional sheets if necessary to list all certified operators.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Florida Water Services Corporation  
 MAILING ADDRESS: P.O. Box 609520  
 Orlando, FL 32860-9520

PERMIT NUMBER: FLA011076

LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 04/01/2004 To: 05/01/2004

Parameter	Sample Measurement	Quantity of Loading	Units	Quality or Concentration	Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.036	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Measurement	0.1 (An. Avg.)	mgd				Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.050	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Measurement	Report (Mo. Avg.)	mgd				Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			2		0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)			Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			2.5	3.2	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			2		0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)			Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			1.4	2.1	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Charles A Richmond / Chief Plant Operator		407-671-2430	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

Facility Name: Chuluota WWTF      Permit Number: FLA011076      Discharge Point No.: R001      WAFR SITE No.: 6977

Parameter	Sample Measurement	Quantity of Loading	Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement			6.9	7.4		S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement			6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			1U			#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement			200 (An.Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement			1U	1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement			Report (MoGeoMean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			1.1			mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement			0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement			5.6			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement			12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement			180			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement			Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement			153			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement			Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement			46.0%			PERCENT	0	Monthly	Calculated
	Permit Measurement			Report (Mo.Total)			PERCENT		Monthly	Calculated
	Sample Measurement									
	Permit Measurement									

DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF PermitNumber: FLA011076 Discharge Point Number: R-001  
 County: Seminole  
 Monitoring Period From: 4/1/04 To: 5/1/04

Code	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01
1	2	1U	5.1	7	1U	12.9	0.055	300	240
2				7		8.1	0.040		
3				7		1.29	0.049		
4							0.049		
5				7		1.2	0.043		
6				7		4.9	0.049		
7			4	7		1.2	0.043		
8				7		13.1	0.056		
9				7		1.5	0.042		
10				7		1.6	0.057		
11							0.057		
12				7		4.5	0.060		
13				7		4	0.053		
14				7		3.4	0.037		
15	3.2	1U	3	7	2.1	3.5	0.051	70	68
16				7		4.8	0.042		
17				7		8.1	0.055		
18							0.055		
19				7		6.4	0.042		
20				7		6.8	0.047		
21				7		6.6	0.053		
22				7		1.6	0.043		
23				7		1.14	0.046		
24				7		1.2	0.059		
25							0.059		
26				7		1.1	0.053		
27				7		1.7	0.049		
28				7		1.5	0.028		
29	2.3	1U	6	7	1.1	13.8	0.068	170	150
30				7		1.38	0.060		
31							0.000		

PLANT STAFFING:

Day Shift Operator Class: C Certification No.: 9558 Charles Harris  
 Day Shift Operator Class:     Certification No.:                                
 Day Shift Operator Class:     Certification No.:                                
 Day Shift Operator Class:     Certification No.:                                
 Lead Operator Class: B Certification No.: 9287 Charles A. Richmond

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield

Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge           

\* Attach additional sheets if necessary to list all certified operators.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Florida Water Services Corporation  
 MAILING ADDRESS: P.O. Box 609520  
 Orlando, FL 32860-9520

PERMIT NUMBER: **FLA011076**

LIMIT: Final REPORT: **Monthly**  
 CLASS SIZE: N/A GROUP: **Domestic**  
 MONITORING GROUP NUMBER: **R-001**  
 MONITORING GROUP DESC: **Sprayfield, including Influent**  
 NO DISCHARGE FROM SITE: **[ ]**

FACILITY: **Chuluota WWTF**  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: **05/01/2004** To: **05/31/2004**

Parameter		Quantity of Loading		Units	Quality or Concentration		Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.038		mgd				0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Measurement	0.1 (An.Avg.)		mgd					Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.054		mgd				0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Measurement	Report (Mo.Avg.)		mgd					Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement				2		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An. Avg.)		mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement				2.1	2.2	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Avg.)	60.0 (Max)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				2		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Measurement				20.0 (An. Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement				1.1	1.1	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.Avg.)	60.0 (Max)	mg/L		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YYMM/DD)
Charles A Richmond / Chief Plant Operator		407-671-2430	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

## DISCHARGE MONITORING REPORT - PART A (Continued)

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

Parameter		Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				6.7	7.6		S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1U			#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement				200 (An.Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement				Report (MoGeoMean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				0.6			mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				3.8			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement				12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				73			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				104			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				50.7%			PERCENT	0	Monthly	Calculated
PARM Code 00180 1 Mon.Site No. FLW-1	Permit Measurement				Report (Mo.Total)			PERCENT		Monthly	Calculated
	Sample Measurement										
	Permit Measurement										



DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF PermitNumber: FLA011076 Discharge Point Number: R-001  
 County: Seminole  
 Monitoring Period From: 5/1/04 To: 5/31/04

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	74055	00620	00400	00530	50060	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01
1				7		0.85	0.062		
2							0.062		
3				7		9	0.053		
4				7		6.8	0.051		
5				7		6.2	0.053		
6				7		2.9	0.046		
7				7		1.45	0.048		
8				7		0.64	0.054		
9							0.054		
10				7		8.9	0.068		
11				7		2.47	0.059		
12	2.2	1U	4	7	1.1	3.03	0.041	120	160
13				7		15.7	0.058		
14				7		1.52	0.050		
15				8		11.9	0.062		
16							0.062		
17				7		2.05	0.057		
18				7		1.91	0.056		
19				7		1.37	0.046		
20				7		1.27	0.052		
21				7		0.91	0.054		
22				7		1.14	0.054		
23							0.054		
24				7		3.26	0.059		
25				7		1.94	0.046		
26	2	1U	4	7	1U	2.05	0.053	26	48
27				7		1.16	0.051		
28				7		0.92	0.051		
29				7		6.3	0.054		
30							0.054		
31				7		4.55	0.052		

PLANT STAFFING:

Day Shift Operator Class: C Certification No.: 9558 Charles Harris  
 Day Shift Operator Class:     Certification No.:                                        
 Day Shift Operator Class:     Certification No.:                                        
 Day Shift Operator Class:     Certification No.:                                        
 Lead Operator Class: B Certification No.: 9287 Charles A. Richmond

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield  
 Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge           

\* Attach additional sheets if necessary to list all certified operators.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Florida Water Services Corporation  
 MAILING ADDRESS: P.O. Box 609520  
 Orlando, FL 32860-9520

PERMIT NUMBER: **FLA011076**

LIMIT: **Final** REPORT: **Monthly**  
 CLASS SIZE: **N/A** GROUP: **Domestic**  
 MONITORING GROUP NUMBER: **R-001**  
 MONITORING GROUP DESC: **Sprayfield, including Influent**  
 NO DISCHARGE FROM SITE: **[ ]**

FACILITY: **Chuluota WWTF**  
 LOCATION: **125 East 10th Street**  
**Chuluota, FL 32766**  
 COUNTY: **Seminole**

MONITORING PERIOD From: **06/01/2004** To: **06/30/2004**

Parameter		Quantity of Loading	Units	Quality or Concentration	Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.041	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Measurement	0.1 (An.Avg.)	mgd				Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.055	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Measurement	Report (Mo.Avg.)	mgd				Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			2.3		0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)			Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			2U	2U	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo.Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			1.6		0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)			Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			1.2	1.3	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo.Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
Charles A Richmond / Chief Plant Operator		407-671-2430	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

## DISCHARGE MONITORING REPORT - PART A (Continued)

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

Parameter		Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				7.1	7.6		S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1U			#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement				200 (An.Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement				Report (MoGeoMean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				0.7			mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				4.0			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement				12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				255			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				270			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				53.2%			PERCENT	0	Monthly	Calculated
PARM Code 00180 1 Mon.Site No. FLW-1	Permit Measurement				Report (Mo.Total)			PERCENT		Monthly	Calculated
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF PermitNumber: FLA011076 Discharge Point Number: R-001  
 County: Seminole  
 Monitoring Period From: 6/1/04 To: 6/30/04

Code	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01
1				7.2		2.78	0.057		
2				7.2		0.7	0.043		
3				7.3		10.2	0.060		
4				7.5		1.4	0.054		
5				7.4		0.84	0.058		
6							0.058		
7				7.1		3.47	0.057		
8				7.3		3.58	0.051		
9				7.3		3.72	0.057		
10	2	1U	4	7.4	1U	6	0.069	320	290
11				7.2		1.5	0.051		
12				7.4		1.65	0.065		
13							0.065		
14				7.4		3.17	0.053		
15				7.4		11.6	0.057		
16				7.3		1.2	0.053		
17				7.3		0.79	0.038		
18				7.1		15.9	0.070		
19				7.3		1.78	0.070		
20							0.070		
21				7.1		1.42	0.069		
22				7.3		2	0.049		
23				7.4		0.72	0.045		
24	2	1U	3	7.2	1.3	3.5	0.062	190	250
25				7.1		1.4	0.058		
26				7.1		1.2	0.062		
27							0.062		
28				7.5		1.3	0.055		
29				7.3		3.6	0.023		
30				7.6		2.2	0.023		
31							0.000		

PLANT STAFFING:

Day Shift Operator Class: C Certification No.: 9558 Charles Harris  
 Day Shift Operator Class: C Certification No.: 13614 Adams Micheals  
 Day Shift Operator Class:      Certification No.:             
 Day Shift Operator Class:      Certification No.:             
 Lead Operator Class: B Certification No.: 9287 Charles A. Richmond

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield  
 Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge           

\* Attach additional sheets if necessary to list all certified operators.

**Docket No. 060368-WS**

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

**In**

**Florida**

**Report Missing:**

**Discharge Monitoring Report**

**Chuluota**

**July 2004**

**Aqua Utilities Florida, Inc.**

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Aqua Utilities Florida  
 MAILING ADDRESS: 140 Hope Street  
 Longwood FL, 32750

PERMIT NUMBER: FLA011076


LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 08/01/2004 To: 08/31/2004

Parameter		Quantity of Loading	Units	Quality or Concentration	Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.046	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon. Site No. FLW-1	Permit Measurement	0.1 (An. Avg.)	mgd				Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.071	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon. Site No. FLW-1	Permit Measurement	Report (Mo. Avg.)	mgd				Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			2.6		0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon. Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)			Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			4.3	6.3	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon. Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			1.8		0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon. Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)			Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			4.5	7.8	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon. Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
William Trendel/Senior Operator		1-407-339-5424	09/14/04

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

Facility Name:

Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

Parameter		Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				6.8	7.7		S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1U			#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement				200 (An.Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement				Report (MoGeoMean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				0.6			mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				7.0			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement				12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				139			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				270			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				60.5%			PERCENT	0	Monthly	Calculated
PARM Code 00180 I Mon.Site No. FLW-1	Permit Measurement				Report (Mo.Total)			PERCENT		Monthly	Calculated
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF PermitNumber: FLA011076 Discharge Point Number: R-001  
 County: Seminole  
 Monitoring Period From: 8/1/04 To: 8/31/04

Code Mon.Site	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
	80082	74055	00620	00400	00530	50060	50050	80082	00530
	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01
1							0.076		
2				7.5		2.2	0.077		
3				7.5		2.2	0.056		
4				7.7		2.2	0.067		
5	2.3	1U	2	7.5	1.1	2.3	0.055	200	390
6				7.2		2.1	0.067		
7				7.0		1.4	0.050		
8							0.086		
9				7.4		1.9	0.086		
10				7.3		2.5	0.082		
11				7.3		2.2	0.062		
12				7.4		2	0.069		
13				7.4		2.1	0.082		
14				7.1		2.2	0.000		
15				6.9		2.2	0.000		
16				6.9		2.2	0.000		
17				6.8		2.2	0.039		
18				7.2		2.2	0.095		
19	6.3	1U	7	7.4	7.8	2.2	0.102	77	150
20				7.4		1.8	0.078		
21				7.4		1.3	0.067		
22				7.4		1.4	0.082		
23				6.8		1.5	0.125		
24				6.9		0.7	0.055		
25				7.0		0.6	0.074		
26				6.9		0.8	0.084		
27				7.0		1.3	0.137		
28							0.085		
29				7.0		0.6	0.107		
30				7.1		1.2	0.077		
31				7.0		2.2	0.068		

PLANT STAFFING:

Day Shift Operator Class: C Certification No.: 9558 Charles Harris  
 Day Shift Operator Class:     Certification No.:                                        
 Day Shift Operator Class:     Certification No.:                                        
 Day Shift Operator Class: A Certification No.: 9184 William Trendel  
 Lead Operator Class: B Certification No.: 7113 Will Fontain

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield

Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge

\* Attach additional sheets if necessary to list all certified operators.



## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Aqua Utilities, Florida Inc.  
 MAILING ADDRESS: 140 Hope St.  
 Longwood, FL 32750

PERMIT NUMBER: FLA011076

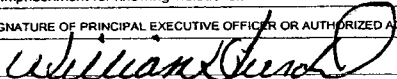
LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic

FACILITY: ~~Chuluota WWTP~~ MONITORING GROUP NUMBER: ~~R-001~~  
 LOCATION: 125 East 10th Street MONITORING GROUP DESC: Sprayfield, including Influent  
 Chuluota, FL 32766 NO DISCHARGE FROM SITE: [ ]  
 COUNTY: Seminole

MONITORING PERIOD From: 09/01/2004 To: 09/30/2004

Parameter		Quantity of Loading	Units	Quality or Concentration	Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.053	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon. Site No. FLW-1	Permit Measurement	0.1 (An. Avg.)	mgd				Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.109	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon. Site No. FLW-1	Permit Measurement	Report (Mo. Avg.)	mgd				Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			3	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon. Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)	mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			4.8	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon. Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			3	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon. Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			12.4	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon. Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
William Trendel/Senior Facilities Operator		407-509-8398	04/10/14

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

## DISCHARGE MONITORING REPORT - PART A (Continued)

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

WAFR SITE No.: 6977

Parameter	Quantity of Loading	Units	Quality or Concentration		Units	No. of Ex.	Frequency of Analysis	Sample Type
	Sample Measurement		6.0	7.6	S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement		6.0 (Min)	8.5 (Max)	S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement		1		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement		200 (Ar.Avg.)		#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement		1	3	#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement		Report (MoGeoMean)	800 (Max)	#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement		0.6		mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement		0.5 (Min)		mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement		16.0		mg/L	1	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement		12 (Max)		mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement		81		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement		Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement		73		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement		Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement		79.0%		PERCENT	0	Monthly	Calculated
	Permit Measurement		Report (Mo.Total)		PERCENT		Monthly	Calculated
	Sample Measurement							
	Permit Measurement							

DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF Permit Number: FLA011076 Discharge Point Number: R-001  
 County: Seminole  
 Monitoring Period From: 9/1/04 To: 9/30/04

Code Mon.Site	CBOD5 (mg/L)	Fecal Colliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
80082 EFA-1	74055 EFA-1	00620 EFA-1	00400 EFA-1	00530 EFA-1	50060 EFA-1	50050 FLW-01	80082 INF-01	00530 INF-01	
1			7			1.5	0.081		
2	6.9	1U	16	6	15	2.2	0.117	130 94	
3				6		2.2	0.107		
4				6		2.2	0.117		
5							0.045		
6				6		1	0.045		
7				6		0.8	0.134		
8				6		2.2	0.209		
9				6		2.2	0.107		
10				7		6.6	0.153		
11				7		0.9	0.116		
12							0.103		
13				8		2.2	0.103		
14				8		1.1	0.147		
15	5.2	1U	10	8	13	1	0.117	53 50	
16				8		2.2	0.066		
17				7		1.3	0.141		
18				7		2.2	0.082		
19							0.112		
20				7		0.9	0.112		
21				7		2.2	0.101		
22				7		2.2	0.144		
23				8		2.2	0.096		
24				7		1.3	0.123		
25				7		0.6	0.103		
26				7		0.7	0.063		
27				7		1.4	0.063		
28				7		2	0.063		
29				7		2.2	0.141		
30	2.3	3	4	7	9.1	2.2	0.162	61 76	
31							0.000		

PLANT STAFFING:

Day Shift Operator Class: C Certification No.: 9558 Charles Harris  
 Day Shift Operator Class: C Certification No.: 11993 Al Gerardo  
 Day Shift Operator Class:      Certification No.:            
 Day Shift Operator Class:      Certification No.:            
 Lead Operator Class: A Certification No.: 9184 William Trendel

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield

Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge

\* Attach additional sheets if necessary to list all certified operators.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Aqua Utilities Florida  
 MAILING ADDRESS: 140 Hope Street  
 Longwood FL, 32750

PERMIT NUMBER: FLA011076

LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 10/01/2004 To: 10/31/2004

Parameter		Quantity of Loading	Units	Quality or Concentration	Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.058	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon. Site No. FLW-1	Permit Measurement	0.1 (An. Avg.)	mgd				Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.102	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon. Site No. FLW-1	Permit Measurement	Report (Mo. Avg.)	mgd				Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			3.0	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon. Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)	mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			2.3	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon. Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			1.6	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon. Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			1.2	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon. Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
William Trendel/Senior Operator	<i>William Trendel</i>	1-407-339-5424	Nov 10, 2004

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

## DISCHARGE MONITORING REPORT - PART A (Continued)

Facility Name:

Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

Parameter		Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				6.8	7.8		S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon. Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1U			#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon. Site No. EFA-1	Permit Measurement				200 (An. Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon. Site No. EFA-1	Permit Measurement				Report (Mo. Geo. Mean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.0			mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon. Site No. EFA-1	Permit Measurement				0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				5.1			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon. Site No. EFA-1	Permit Measurement				12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				45			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon. Site No. INF-1	Permit Measurement				Report (Mo. Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				70			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon. Site No. INF-1	Permit Measurement				Report (Mo. Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				71.0%			PERCENT	0	Monthly	Calculated
PARM Code 00180 1 Mon. Site No. FLW-1	Permit Measurement				Report (Mo. Total)			PERCENT		Monthly	Calculated
	Sample Measurement										
	Permit Measurement										

**DAILY SAMPLE RESULTS - PART B**

Facility Name: Chuluota WWTF PermitNumber: FLA011076 Discharge Point Number: R-001  
 County: Seminole  
 Monitoring Period From: 10/1/04 To: 10/31/04

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	74055	00620	00400	00530	50060	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01
1				7.4		2.2	0.137		
2				6.8		1	0.117		
3							0.122		
4				7.2		1.7	0.122		
5				7.1		1.5	0.129		
6				7.7		3.5	0.109		
7				7.8		3.5	0.151		
8				7.8		3.5	0.065		
9							0.106		
10				7.7		3.5	0.106		
11				7.4		3.5	0.141		
12				7.6		3.5	0.072		
13				7.6		3.5	0.149		
14	2	1U	5	7.3	1U	3.5	0.062	43	85
15				7.3		1.6	0.112		
16				7.1		2.9	0.077		
17				7.0		3.2	0.086		
18				7.1		3.8	0.103		
19				7.3		3	0.064		
20				7.4		3.5	0.139		
21				7.4		3.5	0.092		
22				6.9		5.3	0.092		
23				7.1		2.1	0.083		
24							0.103		
25				7.3		1.6	0.103		
26				7.3		3.5	0.055		
27				7.3		3.5	0.100		
28	2.5	1U	1	7.5	1.4	3.5	0.072	47	55
29				7.1		2.2	0.104		
30				7.2		8	0.084		
31							0.000		

**PLANT STAFFING:**

Day Shift Operator Class: C Certification No.: 9558 Charles Harris  
 Day Shift Operator Class:     Certification No.:                                
 Day Shift Operator Class:     Certification No.:                                
 Day Shift Operator Class: A Certification No.: 9184 William Trendel  
 Lead Operator Class: B Certification No.: 7113 Will Fontain

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield

Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge

\* Attach additional sheets if necessary to list all certified operators.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Aqua Utilities, Florida Inc.  
 MAILING ADDRESS: 140 Hope St.  
 Longwood, FL 32750

PERMIT NUMBER: FLA011076

LIMIT: Final  
 CLASS SIZE: N/A  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 11/01/2004 To: 11/30/2004

Parameter		Quantity of Loading	Units	Quality or Concentration		Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.063	mgd				0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon. Site No. FLW-1	Permit Measurement	0.1 (An. Avg.)	mgd					Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.097	mgd				0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon. Site No. FLW-1	Permit Measurement	Report (Mo. Avg.)	mgd					Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			3		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon. Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)		mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			3.4	3.8	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon. Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			2		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon. Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			8.4	11.0	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon. Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)	mg/L		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
William Trendel/Senior Facilities Operator	<i>William Trendel</i>	407-509-8398	12/7/04

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

## DISCHARGE MONITORING REPORT - PART A (Continued)

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

WAFR SITE No.: 6977

Parameter		Quantity of Loading		Units	Quality or Concentration		Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				7.2	7.6	S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon. Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)	S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon. Site No. EFA-1	Permit Measurement				200 (Ar. Avg.)		#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U	#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon. Site No. EFA-1	Permit Measurement				Report (Mo. Geo. Mean)	800 (Max)	#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.5		mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon. Site No. EFA-1	Permit Measurement				0.5 (Min)		mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				2.6		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon. Site No. EFA-1	Permit Measurement				12 (Max)		mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				175		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon. Site No. INF-1	Permit Measurement				Report (Mo. Avg.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				140		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon. Site No. INF-1	Permit Measurement				Report (Mo. Avg.)		mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				102.7%		PERCENT	1	Monthly	Calculated
	Permit Measurement				Report (Mo. Total)		PERCENT		Monthly	Calculated
	Sample Measurement									
	Permit Measurement									



**DAILY SAMPLE RESULTS - PART B**

Facility Name: Chuluota WWTF

PermitNumber: FLA011076

Discharge Point Number: R-001

County: Seminole

Monitoring Period From: 11/1/04

To: 11/30/04

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	74055	00620	00400	00530	50060	50050	80082	00530
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01
1				8		5	0.187		
2				7		3.8	0.086		
3				8		3.4	0.075		
4				8		4.1	0.080		
5				7		1.6	0.089		
6				8		1.5	0.066		
7							0.000		
8				7		2.1	0.138		
9				7		3.9	0.088		
10				7		3.6	0.057		
11	3	1U	2	7	5.7	3.2	0.075	170	160
12				7		5.6	0.093		
13				7		2.1	0.079		
14							0.000		
15				7		2.4	0.171		
16				7		3.7	0.075		
17				7		3.2	0.095		
18				7		4.1	0.080		
19				8		3.4	0.058		
20				8		3.5	0.105		
21							0.000		
22				7		3.8	0.157		
23	3.8	1U	3	7	11	4.2	0.087	180	120
24				7		4.5	0.092		
25				7		5	0.091		
26				7		2.2	0.162		
27				7		2.2	0.000		
28				7		2.2	0.110		
29				7		2.2	0.054		
30				7		2.2	0.078		
31							0.000		

**PLANT STAFFING:**

Day Shift Operator	Class: <u>C</u>	Certification No.: <u>9558</u>	<u>Charles Harris</u>
Day Shift Operator	Class: <u>C</u>	Certification No.: <u>11993</u>	<u>Al Gerardo</u>
Day Shift Operator	Class: <u>   </u>	Certification No.: <u>   </u>	<u>   </u>
Day Shift Operator	Class: <u>   </u>	Certification No.: <u>   </u>	<u>   </u>
Lead Operator	Class: <u>A</u>	Certification No.: <u>9184</u>	<u>William Trendel</u>

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield

Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge \_\_\_\_\_

\* Attach additional sheets if necessary to list all certified operators.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Aqua Utilities Florida  
 MAILING ADDRESS: 140 Hope Street  
 Longwood Fl, 32750

PERMIT NUMBER: FLA011076

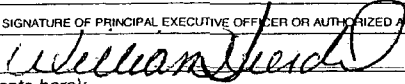
LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 12/01/2004 To: 12/31/2004

Parameter		Quantity of Loading	Units	Quality or Concentration	Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.066	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Measurement	0:1 (An.Avg.)	mgd				Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.079	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Measurement	Report (Mo.Avg.)	mgd				Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			3.5		0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)			Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			10.2	11.0	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo.Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			3.0		0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)			Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			10.5	11.0	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo.Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
William Trendel/Senior Operator		1-407-339-5424	05/01/18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

Parameter		Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				7.1	7.8		S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1U			#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement				200 (An.Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement				Report (MoGeoMean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				0.6			mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				6.6			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement				12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				175			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				120			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				63.2%			PERCENT	0	Monthly	Calculated
PARM Code 00180 I Mon.Site No. FLW-1	Permit Measurement				Report (Mo.Total)			PERCENT		Monthly	Calculated
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF  
 County: Seminole  
 Monitoring Period

PermitNumber: FLA011076  
 From: 12/1/04 To: 12/31/04

Discharge Point Number: R-001

Code	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Mon. Site	80082	74055	00620	00400	00530	50060	50050	80082	00530
	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01
1				7.3		2.2	0.089		
2				7.2		2.2	0.104		
3				7.2		2.2	0.061		
4				7.5		5.5	0.073		
5							0.073		
6				7.4		2.2	0.079		
7				7.5		2.2	0.079		
8				7.5		2.2	0.084		
9	9.3	1U	0.38U	7.3	11	2.2	0.113	160	49
10				7.6		0.8	0.073		
11				7.3		0.9	0.075		
12							0.075		
13				7.3		0.6	0.076		
14				7.8		1.6	0.072		
15				7.3		0.7	0.078		
16				7.1		1.8	0.071		
17				7.2		2.2	0.092		
18				7.5		2.2	0.067		
19							0.067		
20				7.2		2.2	0.071		
21	11	1U	7	7.1	10	2.2	0.053	190	190
22				7.2		2.2	0.101		
23				7.3		2.2	0.079		
24				7.1		0.7	0.080		
25				7.4		2.2	0.081		
26							0.090		
27				7.4		2.2	0.061		
28				7.3		2.2	0.087		
29				7.4		2.2	0.065		
30				7.4		2.2	0.084		
31				7.4		2.2	0.087		

PLANT STAFFING:

Day Shift Operator Class: C Certification No.: 9558 Charles Harris  
 Day Shift Operator Class: C Certification No.: 11993 Al Gerardo  
 Day Shift Operator Class:     Certification No.:             
 Day Shift Operator Class: A Certification No.: 9184 William Trendel  
 Lead Operator Certification No.:           

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield

Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge

\* Attach additional sheets if necessary to list all certified operators.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Aqua Utilities Florida  
 MAILING ADDRESS: 140 Hope Street  
 Longwood FL, 32750

PERMIT NUMBER: FLA011076

LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 01/01/2005 To: 01/31/2005

Parameter		Quantity of Loading	Units	Quality or Concentration	Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.071	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon Site No. FLW-1	Permit Measurement	0.1 (An. Avg.)	mgd				Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.090	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon Site No. FLW-1	Permit Measurement	Report (Mo. Avg.)	mgd				Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			4.0	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)	mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			9.0	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			3.8	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			10.8	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
William Trendel/Senior Operator	<i>William Trendel</i>	1-407-339-5424	05/02/16

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

## DISCHARGE MONITORING REPORT - PART A (Continued)

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

Parameter		Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				7.2	7.8		S.U.	0	5 Days/Week	Grab
PARM Code 00400-1 Mon. Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1U			#/100mL	0	Every Two Weeks	Grab
PARM Code 74055-Y Mon. Site No. EFA-1	Permit Measurement				200 (An. Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055-1 Mon. Site No. EFA-1	Permit Measurement				Report (Mo. Geo. Mean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				0.7			mg/L	0	5 Days/Week	Grab
PARM Code 50060-A Mon. Site No. EFA-1	Permit Measurement				0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				6.4			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620-1 Mon. Site No. EFA-1	Permit Measurement				12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				180			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082-G Mon. Site No. INF-1	Permit Measurement				Report (Mo. Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				115			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530-G Mon. Site No. INF-1	Permit Measurement				Report (Mo. Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				88.7%			PERCENT	0	Monthly	Calculated
PARM Code 00180-I Mon. Site No. FLW-1	Permit Measurement				Report (Mo. Total)			PERCENT		Monthly	Calculated
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF PermitNumber: FLA011076 Discharge Point Number: R-001  
 County: Seminole  
 Monitoring Period From: 1/1/05 To: 1/31/05

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)	
Code	80082	74055	00620	00400	00530	50060	50050	80082	00530	
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01	
1				7.4		2.2	0.093			
2				7.4		2.2	0.093			
3				7.4		2.2	0.079			
4				7.3		2.2	0.077			
5				7.2		2.2	0.098			
6	4	1U	1	7.3	8.5	2.2	0.082	190	130	
7				7.2		2.2	0.083			
8				7.2		2.2	0.083			
9							0.083			
10				7.2		2.2	0.102			
11				7.3		2.2	0.065			
12				7.3		2.2	0.103			
13				7.4		2.2	0.105			
14				7.2		1.4	0.098			
15				7.6		2.2	0.085			
16							0.085			
17				7.3		2.2	0.064			
18				7.2		2.2	0.103			
19				7.3		2.2	0.093			
20	14	1U	6	7.4	13	2.2	0.129	170	100	
21				7.3		2.2	0.089			
22				7.8		2.2	0.095			
23							0.095			
24				7.5		2	0.089			
25				7.4		2.2	0.093			
26				7.3		2.2	0.098			
27				7.3		2.2	0.082			
28				7.3		2.2	0.094			
29				7.4		2.2	0.086			
30							0.086			
31				7.3		0.7	0.082			

PLANT STAFFING:

Day Shift Operator Class: C Certification No.: 9558 Charles Harris  
 Day Shift Operator Class: C Certification No.: 11993 Al Gerardo  
 Day Shift Operator Class:     Certification No.:                                
 Day Shift Operator Class: A Certification No.: 9184 William Trendel  
 Lead Operator Certification No.:                              

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield

Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge \_\_\_\_\_

\* Attach additional sheets if necessary to list all certified operators.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Aqua Utilities, Fl.  
 MAILING ADDRESS: 140 Hope Street  
 Longwood, Fl. 32750

PERMIT NUMBER: FLA011076

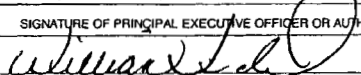
LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 02/01/2005 To: 02/28/2005

Parameter		Quantity of Loading	Units	Quality or Concentration	Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.074	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon. Site No. FLW-1	Permit Measurement	0.1 (An. Avg.)	mgd				Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.086	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon. Site No. FLW-1	Permit Measurement	Report (Mo. Avg.)	mgd				Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			5		0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon. Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)			Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			9.4	9.6	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon. Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			7		0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon. Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)			Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			39.0	48.0	1	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon. Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
William Trendel/Senior Facilities Operator		407-339-5424	05/03/13

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):



**DISCHARGE MONITORING REPORT - PART A (Continued)**

Facility Name:

Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

WAFR SITE No.: 6977

Parameter		Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				7.1	7.7		S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site.No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1			#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site.No. EFA-1	Permit Measurement				200 (An.Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1	1		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site.No. EFA-1	Permit Measurement				Report (MoGeoMean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.1			mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site.No. EFA-1	Permit Measurement				0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				16.0			mg/L	1	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site.No. EFA-1	Permit Measurement				12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				137.5			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site.No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				120.0			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site.No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				85.0%			PERCENT	0	Monthly	Calculated
	Permit Measurement				Report (Mo.Total)			PERCENT		Monthly	Calculated
	Sample Measurement										
	Permit Measurement										

**DAILY SAMPLE RESULTS - PART B**

Facility Name: Chuluota WWTF

PermitNumber: FLA011076

Discharge Point Number: R-001

County: Seminole

Monitoring Period

From: 2/1/05

To: 2/28/05

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	74055	00620	00400	00530	50060	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01
1				7		1.1	0.057		
2				7		1.8	0.098		
3	9.6	1	16	8	48	2.2	0.116	85	120
4				8		2.2	0.092		
5				8		2.2	0.084		
6							0.084		
7				7		2.2	0.090		
8				8		2.2	0.089		
9				7		2.2	0.082		
10				7		2.2	0.103		
11				7		2.2	0.067		
12				7		2.2	0.085		
13				7		2.2	0.044		
14				7		2	0.095		
15				8		2.2	0.123		
16				8		2.2	0.082		
17	9.1	1	4	8	30	2.2	0.082	190	120
18				7		2.2	0.071		
19				8		2.2	0.085		
20							0.085		
21				7		2.2	0.100		
22				7		2.2	0.056		
23				7		2.2	0.086		
24				7		2.2	0.082		
25				7		2.2	0.089		
26				7		2.2	0.091		
27							0.091		
28				7		1.2	0.101		
29									
30									
31									

**PLANT STAFFING:**

Day Shift Operator		Certification No.:	_____	_____
Day Shift Operator	Class: _____	Certification No.:	_____	_____
Day Shift Operator	Class: <u>C</u>	Certification No.:	<u>9558</u>	<u>Charles Harris</u>
Day Shift Operator	Class: <u>C</u>	Certification No.:	<u>11993</u>	<u>Al Gerardo</u>
Lead Operator	Class: <u>A</u>	Certification No.:	<u>9184</u>	<u>William Trendel</u>

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield

Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge \_\_\_\_\_

\* Attach additional sheets if necessary to list all certified operators.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Aqua Utilities Florida  
 MAILING ADDRESS: 140 Hope Street  
 Longwood Fl, 32750

PERMIT NUMBER: FLA011076

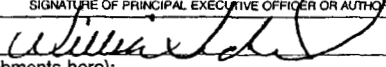
LIMIT: Final  
 CLASS SIZE: N/A  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 03/01/2005 To: 03/31/2005

Parameter	Sample Measurement	Quantity of Loading	Units	Quality or Concentration	Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.078	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Measurement	0.1 (An.Avg.)	mgd				Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.087	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Measurement	Report (Mo.Avg.)	mgd				Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			5.2	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)	mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			8.7	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo.Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			8.4	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			17.3	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo.Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
William Trendel/Senior Operator		1-407-339-5424	05/04/13

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

## DISCHARGE MONITORING REPORT - PART A (Continued)

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

Parameter		Quantity of Loading		Units	Quality or Concentration		Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				7.1	7.9	S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)	S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement				200 (Ar.Avg.)		#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U	#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement				Report (Mo.GeoMean)	800 (Max)	#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.2		mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min)		mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				7.6		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement				12 (Max)		mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				117		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				92		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				87.7%		PERCENT	0	Monthly	Calculated
PARM Code 00180 1 Mon.Site No. FLW-1	Permit Measurement				Report (Mo.Total)		PERCENT		Monthly	Calculated
	Sample Measurement									
	Permit Measurement									

DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF  
 County: Seminole  
 Monitoring Period From: 3/1/05

PermitNumber: FLA011076  
 To: 3/31/05

Discharge Point Number: R-001

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	74055	00620	00400	00530	50060	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01
1				7.4		1.4	0.082		
2				7.4		1.2	0.076		
3	10	1U	2	7.4	13	2.2	0.086	61	54
4				7.2		1.5	0.103		
5				7.5		1.3	0.085		
6							0.070		
7				7.1		2.2	0.100		
8				7.2		1.6	0.089		
9				7.2		1.4	0.081		
10				7.9		2.2	0.073		
11				7.7		2.2	0.080		
12				7.5		1.2	0.076		
13							0.089		
14				7.3		2.2	0.082		
15				7.1		2.2	0.082		
16				7.2		2.2	0.081		
17	11	1U	1	7.2	19	2.1	0.089	170	160
18				7.4		2.1	0.102		
19				7.5		2.1	0.079		
20				7.4		2.2	0.064		
21				7.5		2.2	0.077		
22				7.2		2.2	0.087		
23				7.4		2.2	0.120		
24				7.4		2.2	0.082		
25				7.5		2.2	0.090		
26				7.4		2.2	0.087		
27							0.143		
28				7.4		2.2	0.067		
29				7.4		2.2	0.087		
30				7.5		2.2	0.091		
31	5	1U	8	7.5	20	2.2	0.096	120	62

PLANT STAFFING:

Day Shift Operator	Class: <u>C</u>	Certification No.: <u>9558</u>	<u>Charles Harris</u>
Day Shift Operator	Class: <u>C</u>	Certification No.: <u>11993</u>	<u>Al Gerardo</u>
Day Shift Operator	Class: <u>   </u>	Certification No.: <u>          </u>	<u>                  </u>
Day Shift Operator	Class: <u>A</u>	Certification No.: <u>9184</u>	<u>William Trendel</u>
Lead Operator		Certification No.: <u>          </u>	<u>                  </u>

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield

Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge           

\* Attach additional sheets if necessary to list all certified operators.

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Aqua Utilities, Florida Inc.  
 MAILING ADDRESS: 140 Hope St.  
 Longwood, FL 32750

PERMIT NUMBER: FLA011076

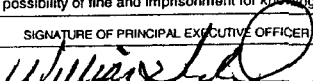
LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 04/01/2005 To: 04/30/2005

Parameter		Quantity of Loading	Units	Quality or Concentration		Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.080	mgd				0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon. Site No. FLW-1	Permit Measurement	0.1 (An. Avg.)	mgd					Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.083	mgd				0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon. Site No. FLW-1	Permit Measurement	Report (Mo. Avg.)	mgd					Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			5		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon. Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)		mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			6.1	8.5	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon. Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			10		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon. Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			12.9	22.0	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon. Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)	mg/L		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
William Trendel/Senior Facilities Operator		407-509-8398	05/05/08

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

WAFR SITE No.: 6977

Parameter		Quantity of Loading		Units	Quality or Concentration		Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				7.0	7.7	S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)	S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement				200 (Ar.Avg.)		#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U	#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement				Report (MoGeoMean)	800 (Max)	#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				0.9		mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min)		mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				9.7		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement				12 (Max)		mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				138		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				64		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				85.3%		PERCENT	0	Monthly	Calculated
	Permit Measurement				Report (Mo.Total)		PERCENT		Monthly	Calculated
	Sample Measurement									
	Permit Measurement									

DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point Number: R-001

County: Seminole

Monitoring Period From: 4/1/05 To: 4/30/05

Code	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Mon. Site	80082 EFA-1	74055 EFA-1	00620 EFA-1	00400 EFA-1	00530 EFA-1	50060 EFA-1	50050 FLW-01	80082 INF-01	00530 INF-01
1				8		1.9	0.097		
2				7		1.2	0.052		
3				7		1.7	0.090		
4				7		2	0.082		
5				7		2.2	0.081		
6				7		2.2	0.083		
7							0.085		
8				7		1.4	0.100		
9				7		2.2	0.069		
10							0.093		
11				7		2.2	0.082		
12				8		2.2	0.083		
13				7		2.2	0.078		
14	8.5	1U	10	7	22	2.2	0.080	86	52
15				7		2.2	0.106		
16							0.056		
17							0.089		
18				7		2.2	0.079		
19				7		2.2	0.077		
20				7		2.2	0.080		
21				7		2.2	0.082		
22				7		2.2	0.107		
23				7		1.6	0.076		
24							0.076		
25				7		0.9	0.077		
26							0.080		
27							0.080		
28	3.6	1U	7	8	3.8	2.2	0.084	190	76
29				7		2.2	0.107		
30				7		2.2	0.073		
31							0.000		

PLANT STAFFING:

Day Shift Operator	Class: <u>C</u>	Certification No.: <u>9558</u>	<u>Charles Harris</u>
Day Shift Operator	Class: <u>C</u>	Certification No.: <u>11993</u>	<u>Al Gerardo</u>
Day Shift Operator	Class: <u>   </u>	Certification No.: <u>   </u>	<u>   </u>
Day Shift Operator	Class: <u>   </u>	Certification No.: <u>   </u>	<u>   </u>
Night Operator	Class: <u>A</u>	Certification No.: <u>9184</u>	<u>William Trendel</u>

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield

Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge:    

Attach additional sheets if necessary to list all certified operators.



## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Aqua Utilities Florida  
 MAILING ADDRESS: 140 Hope Street  
 Longwood FL, 32750

PERMIT NUMBER: FLA011076


LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 05/01/2005 To: 05/31/2005

Parameter		Quantity of Loading	Units	Quality or Concentration	Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.083	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon. Site No. FLW-1	Permit Measurement	0.1 (An. Avg.)	mgd				Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.085	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon. Site No. FLW-1	Permit Measurement	Report (Mo. Avg.)	mgd				Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			5.7	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon. Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)	mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			5.9	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon. Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)	mg/L	Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			10.5	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon. Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			6.8	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon. Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)	mg/L	Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
William Trendel/Senior Operator		1-407-339-5424	05/06/13

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

## DISCHARGE MONITORING REPORT - PART A (Continued)

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

Parameter		Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				7.2	7.7		S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1			#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement				200 (An.Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement				Report (MoGeoMean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.4			mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				10.0			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement				12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				62			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				42			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				85.9%			PERCENT	0	Monthly	Calculated
PARM Code 00180 1 Mon.Site No. FLW-1	Permit Measurement				Report (Mo.Total)			PERCENT		Monthly	Calculated
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF  
 County: Seminole  
 Monitoring Period From: 5/1/05 To: 5/31/05

PermitNumber: FLA011076

Discharge Point Number: R-001

Code Mon.Site	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
80082 EFA-1	74055 EFA-1	00620 EFA-1	00400 EFA-1	00530 EFA-1	50060 EFA-1	50050 FLW-01	80082 INF-01	00530 INF-01	
1				7.2		2.2	0.087		
2				7.3		2.2	0.088		
3				7.3		2.2	0.083		
4				7.5		2.2	0.082		
5				7.4		2.2	0.104		
6				7.5		2.2	0.094		
7				7.5		2.2	0.068		
8							0.091		
9				7.4		2.2	0.083		
10				7.4		2.2	0.076		
11				7.5		1.4	0.078		
12	6.8	1U	4	7.3	10	2.2	0.083	44	50
13				7.4		2.2	0.127		
14				7.4		2.2	0.074		
15				7.5		2.2	0.056		
16				7.3		2.2	0.076		
17				7.7		1.9	0.082		
18				7.3		2.2	0.082		
19				7.3		2.2	0.074		
20				7.2		2.2	0.109		
21				7.2			0.080		
22						2.2	0.080		
23				7.3		2.2	0.079		
24				7.3		2.2	0.091		
25				7.4		2.2	0.072		
26	5	1U	10	7.2	3.5	2.2	0.111	80	34
27				7.4		2.2	0.099		
28				7.2		1.4	0.071		
29				7.3		2.2	0.081		
30							0.082		
31				7.3		1.8	0.085		

LANT STAFFING:

Day Shift Operator Class: C Certification No.: 9558 Charles Harris  
 Day Shift Operator Class: C Certification No.: 11993 Al Gerardo  
 Day Shift Operator Class:     Certification No.:      
 Day Shift Operator Class: A Certification No.: 9184 William Trendel  
 Lead Operator Certification No.:    

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield

Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge    

Attach additional sheets if necessary to list all certified operators.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Aqua Utilities, Florida Inc.  
 MAILING ADDRESS: 140 Hope St.  
 Longwood, FL 32750

PERMIT NUMBER: FLA011076

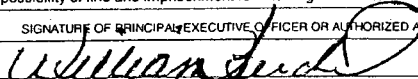
LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 06/01/2005 To: 06/30/2005

Parameter		Quantity of Loading	Units	Quality or Concentration	Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.088	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Measurement	0.1 (An.Avg.)	mgd				Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.101	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Measurement	Report (Mo.Avg.)	mgd				Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			6	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)	mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			5.0	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo.Avg.)	60.0 (Max)	mg/L	Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			11	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			11.8	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo.Avg.)	60.0 (Max)	mg/L	Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
William Trendel/Senior Facilities Operator		407-509-8398	05/07/11

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

WAFR SITE No.: 6977

Parameter		Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				6.7	7.9		S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1			#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement				200 (An.Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement				Report (MoGeoMean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				0.5			mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				8.8			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement				12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				102			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				56			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				90.8%			PERCENT	0	Monthly	Calculated
	Permit Measurement				Report (Mo.Total)			PERCENT		Monthly	Calculated
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF Permit Number: FLA011076 Discharge Point Number: R-001  
 County: Seminole  
 Monitoring Period From: 6/1/05 To: 6/30/05

Code	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Mon. Site	80082 EFA-1	74055 EFA-1	00620 EFA-1	00400 EFA-1	00530 EFA-1	50060 EFA-1	50050 FLW-01	80082 INF-01	00530 INF-01
1				8		1.6	0.084		
2				8		1.8	0.084		
3				8		1.5	0.093		
4				8		2.2	0.080		
5							0.074		
6				7		2.2	0.090		
7				7		1.5	0.087		
8				7		1.9	0.089		
9	7.1	1U	0.22U	7	14	2	0.095	130	35
10				8		2.2	0.108		
11				8		2.2	0.074		
12				8		2.2	0.100		
13				7		2	0.095		
14				8		2.2	0.107		
15				8		2.2	0.106		
16				8		2.2	0.104		
17				7		2.2	0.131		
18				7		2.2	0.086		
19							0.090		
20				7		2.2	0.100		
21				8		2.2	0.103		
22				8		2.2	0.095		
23	2.9	1U	9	8	9.6	0.5	0.106	74	76
24				7		2.2	0.178		
25				8		0.6	0.086		
26				7			0.106		
27				8		0.6	0.112		
28				7		2.2	0.110		
29				7		2.2	0.113		
30				8		2.2	0.152		
31							0.000		

PLANT STAFFING:

Jay Shift Operator Class: C Certification No.: 9558 Charles Harris  
 Jay Shift Operator Class: C Certification No.: 11993 Al Gerardo  
 Jay Shift Operator Class:      Certification No.:                                
 Jay Shift Operator Class:      Certification No.:                                
 Lead Operator Class: A Certification No.: 9184 William Trendel

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield

Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge           

Attach additional sheets if necessary to list all certified operators.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Aqua Utilities Florida  
 MAILING ADDRESS: 140 Hope Street  
 Longwood FL, 32750

PERMIT NUMBER: FLA011076


LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 07/01/2005 To: 07/31/2005

Parameter		Quantity of Loading	Units	Quality or Concentration	Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.091	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon. Site No. FLW-1	Permit Measurement	0.1 (An. Avg.)	mgd				Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.099	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon. Site No. FLW-1	Permit Measurement	Report (Mo. Avg.)	mgd				Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			6.1	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon. Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)	mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			4.2	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon. Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			11.6	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon. Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			3.8	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon. Site No. EFA-1	Permit Measurement			Report (Mo. Avg.)	60.0 (Max)		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
William Trendel/Senior Operator		1-407-339-5424	05/18/11

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

Parameter		Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				6.5	8.7		S.U.	1	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1			#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement				200 (An.Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1	2		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement				Report (MoGeoMean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.0			mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				11.0			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement				12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				68			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				48			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				90.8%			PERCENT	0	Monthly	Calculated
PARM Code 00180 I Mon.Site No. FLW-1	Permit Measurement				Report (Mo.Total)			PERCENT		Monthly	Calculated
	Sample Measurement										
	Permit Measurement										



DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF PermitNumber: FLA011076 Discharge Point Number: R-001  
 County: Seminole  
 Monitoring Period From: 7/1/05 To: 7/31/05

Code	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Mon. Site	80082 EFA-1	74055 EFA-1	00620 EFA-1	00400 EFA-1	00530 EFA-1	50060 EFA-1	50050 FLW-01	80082 INF-01	00530 INF-01
1				7.2		2.2	0.093		
2							0.093		
3				7.1		2.2	0.126		
4				7.2		2.2	0.102		
5				7.5		2.2	0.104		
6				7.4		2.2	0.096		
7	4.2	1U	6	7.4	2.3	2.2	0.090	100	61
8				7.0		2.2	0.119		
9				7.2		2.2	0.126		
10				7.3		2.2	0.073		
11				6.8		2.2	0.096		
12				6.5		2.2	0.097		
13				8.7		2.2	0.095		
14				7.7		2.2	0.097		
15				7.1		2.2	0.130		
16				7.2		2.2	0.087		
17							0.088		
18				7.9		2.2	0.097		
19				8.4		2.2	0.103		
20				7.8		2.2	0.093		
21	4.2	2	11	7.9	5.3	2.2	0.093	35	34
22				7.3			0.114		
23				7.9		1	0.079		
24				7.7		2.2	0.092		
25				7.9		2.2	0.092		
26				7.5		2.2	0.093		
27				7.6		2.2	0.091		
28				7.7		2.2	0.096		
29							0.121		
30				7.7		2.2	0.087		
31							0.118		

PLANT STAFFING:

Day Shift Operator Class: C Certification No.: 9558 Charles Harris  
 Day Shift Operator Class: C Certification No.: 11993 Al Gerardo  
 Day Shift Operator Class:     Certification No.:             
 Day Shift Operator Class: A Certification No.: 9184 William Trendel  
 Head Operator Certification No.:           

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield

Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge

Attach additional sheets if necessary to list all certified operators.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Aqua Utilities Florida  
 MAILING ADDRESS: 140 Hope Street  
 Longwood FL, 32750

PERMIT NUMBER: FLA011076

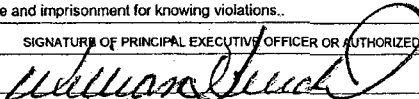
LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 08/01/2005 To: 08/31/2005

Parameter		Quantity of Loading	Units	Quality or Concentration		Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.094	mgd				0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Measurement	0.1 (An.Avg.)	mgd					Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.103	mgd				0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Measurement	Report (Mo.Avg.)	mgd					Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			6.2		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)		mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			5.1	10.0	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo.Avg.)	60.0 (Max)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			11.5		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			2.5	3.6	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo.Avg.)	60.0 (Max)	mg/L		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
William Trendel/Senior Operator		1-407-339-5424	05/09/22

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

## DISCHARGE MONITORING REPORT - PART A (Continued)

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

Parameter		Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				6.8	7.6		S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1			#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement				200 (An.Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement				Report (MoGeoMean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				0.7			mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				16.0			mg/L	1	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement				12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				63			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				61			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				102.4%			PERCENT	1	Monthly	Calculated
PARM Code 00180 1 Mon.Site No. FLW-1	Permit Measurement				Report (Mo.Total)			PERCENT		Monthly	Calculated
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF Permit Number: FLA011076 Discharge Point Number: R-001  
 County: Seminole  
 Monitoring Period From: 8/1/05 To: 8/31/05

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	74055	00620	00400	00530	50060	50050	80082	00530
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01
1				7.4		2.2	0.076		
2				7.4		2.2	0.101		
3				7.0		2.2	0.109		
4	10	1U	11	7.0	3.6	2.2	0.099	86	110
5				7.1		1.4	0.113		
6				7.5		2.2	0.107		
7				7.4		2.2	0.078		
8				7.4		2.2	0.103		
9				7.4		2.2	0.101		
10				7.4		2.2	0.102		
11	2.9	1U	16	7.2	2	2.2	0.146	56	24
12				7.5		2.2	0.091		
13				7.6		1.6	0.100		
14							0.094		
15				7.5		2.2	0.106		
16				7.6		2.2	0.106		
17				7.0		2.2	0.094		
18				7.0		2.2	0.123		
19				7.1		0.7	0.103		
20				7.0		2.2	0.090		
21				7.2		2.2	0.109		
22				7.1		2.2	0.101		
23				7.1		2.2	0.102		
24				7.0		2.2	0.101		
25	2.5	1U	1	7.0	1.9	2	0.104	48	49
26				7.0		2.2	0.133		
27				7.1		2.2	0.100		
28							0.100		
29				7.1		2.2	0.104		
30				7.0		2.2	0.103		
31				6.8		2.2	0.100		

PLANT STAFFING:

Day Shift Operator Class: C Certification No.: 9558 Charles Harris  
 Day Shift Operator Class: C Certification No.: 11993 Al Gerardo  
 Day Shift Operator Class:     Certification No.:                                
 Day Shift Operator Class: A Certification No.: 9184 William Trendel  
 Lead Operator Certification No.:                              

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield

Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge           

\* Attach additional sheets if necessary to list all certified operators.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Aqua Utilities, Florida Inc.  
 MAILING ADDRESS: 140 Hope St.  
 Longwood, FL 32750

PERMIT NUMBER: FLA011076

LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 09/01/2005 To: 09/30/2005

Parameter		Quantity of Loading	Units	Quality or Concentration		Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.093	mgd				0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Measurement	0.1 (An.Avg.)	mgd					Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.102	mgd				0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Measurement	Report (Mo.Avg.)	mgd					Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			6		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)		mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			3.9	4.0	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo.Avg.)	60.0 (Max)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			11		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			7.3	8.7	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo.Avg.)	60.0 (Max)	mg/L		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
William Trendel/Senior Facilities Operator	<i>William Trendel</i>	407-509-8398	05/10/09

COMMENT;S AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

WAFR SITE No.: 6977

Parameter		Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				6.9	7.9		S.U.	0	5 Days/Week	Grab
PARM Code 00400- 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1			#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement				200 (Ar.Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement				Report (MoGeoMean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				1.2			mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				0.4			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement				12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				78			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				90			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				102.6%			PERCENT	1	Monthly	Calculated
	Permit Measurement				Report (Mo.Total)			PERCENT		Monthly	Calculated
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF PermitNumber: FLA011076 Discharge Point Number: R-001  
 County: Seminole  
 Monitoring Period From: 9/1/05 To: 9/30/05

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	74055	00620	00400	00530	50060	50050	80082	00530
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01
1				8		2.2	0.117		
2				7		2.2	0.132		
3				7		2.2	0.102		
4				7		2.2	0.105		
5				7		2.2	0.114		
6				8		2.2	0.086		
7				8		2.2	0.106		
8	4	1U	0	8	8.7	2.2	0.105	80	100
9				8		2.2	0.131		
10				8		2.2	0.088		
11				8		2.2	0.116		
12				8		2.2	0.102		
13				8		2.2	0.089		
14				7		2.2	0.096		
15				8		2.2	0.102		
16				8		2.2	0.121		
17				8		1.6	0.108		
18				8		1.3	0.090		
19				8		1.6	0.100		
20				8		1.2	0.103		
21				7		1.2	0.107		
22	3.7	1U	0.1U	7	5.9	1.2	0.114	75	79
23				8		2.2	0.112		
24				7		2.2	0.102		
25							0.102		
26				7		2.2	0.110		
27				7		2.2	0.010		
28				7		2.2	0.106		
29				7		2.2	0.085		
30				7		2.2	0.091		
31							0.000		

PLANT STAFFING:

Day Shift Operator Class: C Certification No.: 9558 Charles Harris  
 Day Shift Operator Class: C Certification No.: 11993 Al Gerardo  
 Day Shift Operator Class:      Certification No.:       
 Day Shift Operator Class:      Certification No.:       
 Lead Operator Class: A Certification No.: 9184 William Trendel

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield

Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge     

\* Attach additional sheets if necessary to list all certified operators.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Aqua Utilities Florida  
 MAILING ADDRESS: 140 Hope Street  
 Longwood FL, 32750

PERMIT NUMBER: FLA011076

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

MONITORING PERIOD From: 10/01/2005 To: 10/31/2005

Parameter		Quantity of Loading	Units	Quality or Concentration		Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.094	mgd				0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Measurement	0.1 (An.Avg.)	mgd					Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.115	mgd				0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Measurement	Report (Mo.Avg.)	mgd					Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			6.2		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)		mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			3.3	4.2	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo.Avg.)	60.0 (Max)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			11.4		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			5.5	9.2	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo.Avg.)	60.0 (Max)	mg/L		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
William Trendel/Senior Operator	<i>William Trendel</i>	1-407-339-5424	05/11/16

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):



**DISCHARGE MONITORING REPORT - PART A (Continued)**

Facility Name:

Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

Parameter	Sample Measurement	Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				7.2	8.4		S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1			#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement				200 (An.Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement				Report (MoGeoMean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				2.2			mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				6.1			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement				12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				69			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				82			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				106.6%			PERCENT	1	Monthly	Calculated
PARM Code 00180 I Mon.Site No. FLW-1	Permit Measurement				Report (Mo.Total)			PERCENT		Monthly	Calculated
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF

PermitNumber: FLA011076

Discharge Point Number: R-001

County: Seminole

Monitoring Period

From: 10/1/05

To: 10/31/05

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	74055	00620	00400	00530	50060	50050	80082	00530
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01
1				7.5		2.2	0.096		
2				7.3		2.2	0.029		
3				7.3		2.2	0.091		
4				7.3		2.2	0.094		
5				7.2		2.2	0.094		
6	2.4	1U	6	7.3	1.8	2.2	0.160	51	110
7				7.2		2.2	0.085		
8				7.3		2.2	0.126		
9							0.133		
10				7.3		2.2	0.122		
11				7.4		2.2	0.116		
12				7.3		2.2	0.116		
13				7.4		2.2	0.122		
14				7.8		2.2	0.110		
15				7.8		2.2	0.118		
16							0.116		
17				7.6		2.2	0.107		
18				8.3		2.2	0.102		
19				8.4		2.2	0.107		
20	4.2	1U	5	7.8	9.2	2.2	0.118	87	54
21				7.9		2.2	0.141		
22				7.2		2.2	0.083		
23							0.143		
24				7.2		2.2	0.178		
25				7.2		2.2	0.132		
26				7.9		2.2	0.124		
27				7.9		2.2	0.116		
28				7.5		2.2	0.117		
29							0.117		
30				7.6		2.2	0.118		
31				7.6		2.2	0.129		

PLANT STAFFING:

Day Shift Operator Class: C Certification No.: 9558 Charles Harris  
 Day Shift Operator Class: C Certification No.: 11993 Al Gerardo  
 Day Shift Operator Class:     Certification No.:                        
 Day Shift Operator Class: A Certification No.: 9184 William Trendel  
 Lead Operator Certification No.:                      

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield  
 Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge           

\* Attach additional sheets if necessary to list all certified operators.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Aqua Utilities, Florida Inc.  
 MAILING ADDRESS: 140 Hope St.  
 Longwood, FL 32750

PERMIT NUMBER: FLA011076

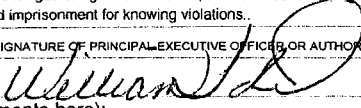
LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including Influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 11/01/2005 To: 11/30/2005

Parameter	Quantity of Loading	Units	Quality or Concentration	Units	No. of Ex.	Frequency of Analysis	Sample Type		
Flow, Total Through Plant	Sample Measurement	0.095		mgd		0	Continuous	Flow-meter/ Totalizer	
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Measurement	0.1 (An.Avg.)		mgd			Continuous	Flow-meter/ Totalizer	
Flow, Total Through Plant	Sample Measurement	0.101		mgd		0	Continuous	Flow-meter/ Totalizer	
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Measurement	Report (Mo.Avg.)		mgd			Continuous	Flow-meter/ Totalizer	
BOD, Carbonaceous 5 day, 20°C	Sample Measurement		6		mg/L	0	Every Two Weeks	8-hour FPC	
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Measurement		20.0 (An. Avg.)		mg/L		Every Two Weeks	8-hour FPC	
BOD, Carbonaceous 5 day, 20°C	Sample Measurement		5.1	5.7		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Measurement		Report (Mo.Avg.)	60.0 (Max)		mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement		11			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Measurement		20.0 (An. Avg.)			mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement		7.3	8.7		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon.Site No. EFA-1	Permit Measurement		Report (Mo.Avg.)	60.0 (Max)		mg/L		Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
William Trendel/Senior Facilities Operator		407-509-8398	05/12/12

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

WAFR SITE No.: 6977

Parameter	Quantity of Loading	Units	Quality or Concentration		Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement		6.9	8.0	S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement		6.0 (Min)	8.5 (Max)	S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement		1		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement		200 (An.Avg.)		#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement		1U	1U	#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement		Report (MoGeoMean)	800 (Max)	#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement		2.0		mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement		0.5 (Min)		mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement		5.0		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement		12 (Max)		mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement		130		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement		Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement		130		mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement		Report (Mo.Avg.)		mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement		106.0%		PERCENT	1	Monthly	Calculated
	Permit Measurement		Report (Mo.Total)		PERCENT		Monthly	Calculated
	Sample Measurement							
	Permit Measurement							

DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF

Permit Number: FLA011076

Discharge Point Number: R-001

County: Seminole

Monitoring Period From: 11/1/05 To: 11/30/05

Code	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01
1				8		2	0.097		
2				8		2.2	0.111		
3	4.4	1U	1.2U	7	2.8	2.2	0.106	89	130
4				8		2.2	0.103		
5				8		2.2	0.110		
6							0.110		
7				7		2.2	0.105		
8				8		2.2	0.095		
9				7		2.2	0.096		
10				8		2.2	0.104		
11				7		2.2	0.100		
12				8		2.2	0.109		
13							0.101		
14				8		2.2	0.140		
15				8		2.2	0.062		
16				8		2.2	0.097		
17	5.7	1U	5	8	3.4	2.2	0.091	170	130
18				8		2.2	0.113		
19				7		2.2	0.106		
20							0.106		
21				8		2.2	0.088		
22				7		2.2	0.092		
23				8		2.2	0.089		
24				8		2.2	0.114		
25				8		2.2	0.114		
26				8		2.2	0.103		
27							0.094		
28				8		2.2	0.094		
29				8		2.2	0.099		
30				8		2.2	0.082		
31							0.000		

PLANT STAFFING:

Day Shift Operator Class: C Certification No.: 9558 Charles Harris  
 Day Shift Operator Class: C Certification No.: 11993 Al Gerardo  
 Day Shift Operator Class:     Certification No.:             
 Day Shift Operator Class:     Certification No.:             
 Lead Operator Class: A Certification No.: 9184 William Trendel

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield  
 Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge           

\* Attach additional sheets if necessary to list all certified operators.

## DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When completed mail this report to: Dept. of Environmental Protection, Central District, 3319 Maguire Boulevard Suite 232, Orlando, Florida 32803-3767

PERMITTEE NAME: Aqua Utilities Florida  
 MAILING ADDRESS: 140 Hope Street  
 Longwood Fl, 32750

PERMIT NUMBER: FLA011076

LIMIT: Final REPORT: Monthly  
 CLASS SIZE: N/A GROUP: Domestic  
 MONITORING GROUP NUMBER: R-001  
 MONITORING GROUP DESC: Sprayfield, including influent  
 NO DISCHARGE FROM SITE: [ ]

FACILITY: Chuluota WWTF  
 LOCATION: 125 East 10th Street  
 Chuluota, FL 32766  
 COUNTY: Seminole

MONITORING PERIOD From: 12/01/2005 To: 12/31/2005

Parameter		Quantity of Loading	Units	Quality or Concentration	Units	No. of Ex.	Frequency of Analysis	Sample Type
Flow, Total Through Plant	Sample Measurement	0.096	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 Y Mon.Site No. FLW-1	Permit Measurement	0.1 (An.Avg.)	mgd				Continuous	Flow-meter/ Totalizer
Flow, Total Through Plant	Sample Measurement	0.090	mgd			0	Continuous	Flow-meter/ Totalizer
PARM Code 50050 1 Mon.Site No. FLW-1	Permit Measurement	Report (Mo.Avg.)	mgd				Continuous	Flow-meter/ Totalizer
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			6.2	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)	mg/L		Every Two Weeks	8-hour FPC
BOD, Carbonaceous 5 day, 20°C	Sample Measurement			10.9	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo.Avg.)	60.0 (Max)	mg/L	Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			10.6	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 Y Mon.Site No. EFA-1	Permit Measurement			20.0 (An. Avg.)	mg/L		Every Two Weeks	8-hour FPC
Solids, Total Suspended	Sample Measurement			6.8	mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 1 Mon.Site No. EFA-1	Permit Measurement			Report (Mo.Avg.)	60.0 (Max)	mg/L	Every Two Weeks	8-hour FPC

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE (YY/MM/DD)
William Trendel/Senior Operator	<i>William Trendel</i>	1-407-339-5424	06/01/12

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**DISCHARGE MONITORING REPORT - PART A (Continued)**

Facility Name:

Chuluota WWTF

Permit Number: FLA011076

Discharge Point No.: R001

Parameter		Quantity of Loading		Units	Quality or Concentration			Units	No. of Ex.	Frequency of Analysis	Sample Type
pH	Sample Measurement				7.4	8.0		S.U.	0	5 Days/Week	Grab
PARM Code 00400 1 Mon.Site No. EFA-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1			#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 Y Mon.Site No. EFA-1	Permit Measurement				200 (An.Avg.)			#/100mL		Every Two Weeks	Grab
Coliform, Fecal	Sample Measurement				1U	1U		#/100mL	0	Every Two Weeks	Grab
PARM Code 74055 1 Mon.Site No. EFA-1	Permit Measurement				Report (MoGeoMean)	800 (Max)		#/100mL		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				2.2			mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon.Site No. EFA-1	Permit Measurement				0.5 (Min)			mg/L		5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				8.7			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00620 1 Mon.Site No. EFA-1	Permit Measurement				12 (Max)			mg/L		Every Two Weeks	8-hour FPC
CBOD5	Sample Measurement				207			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 80082 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
TSS	Sample Measurement				200			mg/L	0	Every Two Weeks	8-hour FPC
PARM Code 00530 G Mon.Site No. INF-1	Permit Measurement				Report (Mo.Avg.)			mg/L		Every Two Weeks	8-hour FPC
Percent Capacity, (TMADF/Permitted Capacity) X 100	Sample Measurement				102.0%			PERCENT	1	Monthly	Calculated
PARM Code 00180 1 Mon.Site No. FLW-1	Permit Measurement				Report (Mo.Total)			PERCENT		Monthly	Calculated
	Sample Measurement										
	Permit Measurement										

DAILY SAMPLE RESULTS - PART B

Facility Name: Chuluota WWTF PermitNumber: FLA011076 Discharge Point Number: R-001  
 County: Seminole  
 Monitoring Period From: 12/1/05 To: 12/31/05

	CBOD5 (mg/L)	Fecal Coliform Bacteria (#/100ml)	Nitrogen, Nitrate, Total (as N) (mg/L)	pH (S.U.)	TSS (mg/L)	TRC (For Disinfect.) (mg/L)	Flow (MGD)	CBOD5 (mg/L)	TSS (mg/L)
Code	80082	74055	00620	00400	00530	50060	50050	80082	00530
Mon.Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-01	INF-01	INF-01
1	4.9	1U	8.6	7.6	9.4	2.2	0.079	190	190
2				8.0		2.2	0.108		
3				7.9		2.2	0.072		
4							0.108		
5				7.9		2.2	0.095		
6				7.8		2.2	0.083		
7				7.9		2.2	0.098		
8				7.8		2.2	0.104		
9				7.9		2.2	0.097		
10				8.0		2.2	0.098		
11							0.093		
12				7.9		2.2	0.087		
13				7.9		2.2	0.085		
14				8.0		2.2	0.087		
15	22	1U	9	7.9	1.1	2.2	0.113	210	210
16				7.7		2.2	0.076		
17				8.0		2.2	0.089		
18							0.089		
19				7.8		2.2	0.079		
20				7.9		2.2	0.081		
21				7.7		2.2	0.078		
22				7.7		2.2	0.087		
23				7.8		2.2	0.094		
24				7.8		2.2	0.088		
25							0.085		
26				7.9		2.2	0.110		
27				7.8		2.2	0.061		
28				7.8		2.2	0.084		
29	5.8	1U	1.6U	7.7	10	2.2	0.105	220	200
30				7.4		2.2	0.085		
31							0.091		

PLANT STAFFING:

Day Shift Operator Class: C Certification No.: 9558 Charles Harris  
 Day Shift Operator Class: C Certification No.: 11993 Al Gerardo  
 Day Shift Operator Class:      Certification No.:       
 Day Shift Operator Class: A Certification No.: 9184 William Trendel  
 Lead Operator Certification No.:     

Type of Effluent Disposal or Reclaimed Water Reuse: Sprayfield  
 Limited Wet Weather Discharge Activated: Yes:  No:  Not Applicable:  If yes, cumulative days of wet weather discharge     

\* Attach additional sheets if necessary to list all certified operators.