

ORIGINAL

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RECEIVED- FPSC
07 MAY 18 AM 10:50

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REPLY TO CENTRAL FLORIDA OFFICE

MARTIN S. FRIEDMAN, P.A.
VALERIE L. LORD
BRIAN J. STREET

May 18, 2007

HAND DELIVERY

Ann Cole, Commission Clerk
Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, FL 32399

RE: Docket No. 070041-SU; Key Haven Utility Corporation's Application for Limited Proceeding
Wastewater Rate Increase in Monroe County, Florida
Our File No. 26043.13

Dear Ms. Cole:

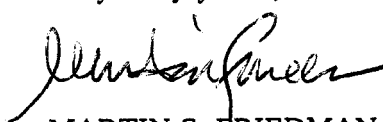
Enclosed for filing in the above-referenced docket is Key Haven Utility Corporation's
Second Supplemental Response to Staff's Second Data Request dated April 12, 2007.

C. Provide supporting documentation for the \$14,211 in hurricane costs included on line 23
of Schedule No. 5 of the Special Report.

SUPPLEMENTAL RESPONSE: Supporting documentation which was inadvertently not attached
to the Utility's Response to this Data Request is attached hereto.

Should you have any questions regarding this response, please do not hesitate to give me
a call.

Very truly yours,



MARTIN S. FRIEDMAN
For the Firm

MSF/mp
Enclosures

cc: Mr. Rick Wright, Division of Economic Regulation (w/enclosures - by hand delivery)
Wayne Lujan, President (w/o enclosures)
Robert C. Nixon, CPA (w/o enclosures)

DOCUMENT NUMBER-DATE
04074 MAY 18 2007
FPSC-COMMISSION CLERK

ORIGINAL

PAYE FROM 1/1/07 TO 1/1/08
 CREDIT (SOUTH) FROM 1/1/07 TO 1/1/08
 SOUTH FROM 1/1/07 TO 1/1/08

0.0

1,685. +

780. +

828.2 +

195. +

260. +

195. +

1,545.85 +

1,901.7 +

495. +

1,626.8 +

1,107.6 +

1,491.25 +

780. +

520. +

625.5 +

1,296.6 +

1,441.25 +

1,121.5 +

2,148.95 +

889.75 +

1,204.8 +

834.6 +

443.3 +

34.94 +

26.25 +

382. +

195. +

153.7 +

028

24209.540

DOCUMENT NUMBER-DATE

028 24209.54* 04074 MAY 18 5

FPSC-COMMISSION CLERK

Customer Name & Address:

KEY HAVEN WWTP

Storm damage

INSTALL SPARE LIFT PUMP AT MAIN LIFT STATION

Phone:

Mechanic: CURT/MIKE/PAUL

Helper:

Job Invoice: 22311



SYNAGRO

A Residuals Management Company

Customer #: KEY 100	Invoice #: 22208	Circle Method of Payment:	Check <input type="checkbox"/> On Account <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/>	Area: UK MK LK	Date Ordered: 11-1-05						
Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount
R04		Parts & Material				R04	✓	PIPE/FITTINGS	MISC		26 20
R12		Miscellaneous Supplies				R04	✓	LOCK IKA			22 00
C01		Chlorine Slow Dissolve Tabs									
C02		Chlorine Liquid _____gals.									
C03		Chlorine Liquid 55 gals.									
C05		Lime _____lbs.									
C08		Potassium Permanganate _____lbs.									
C09		Ferri Flocc _____lbs.									
C10		Sodium Bicarb _____lbs.									
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01	✓	Labor-mechanical & electrical	12.0	65 ⁰⁰	780 00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ft.				R19		Bid Job			
R07		Jet Rodder _____hrs.				S10		Plant Operator Labor			
R18		Shipping/Freight									
S11		L/S Calibration as required by DEP									
T01		Total Nitrogen & Phosphorus						I hereby acknowledge the satisfactory completion of the above described work.		Total Materials	48 20
T03		Fecal Coliform Testing						Operator/Employee Signature:		Total Labor	
T04		Total Coliform Testing						<i>[Signature]</i>			
T08		Enterococcus Testing						Date Completed: 11/1/05		Tax	
T12		Miscellaneous Supplies/Lab						Customer Signature:			
T13		Lab Labor								TOTAL	828 20

ORIGINAL

Customer Name & Address:

Key Haven
 Trouble Shoot: main L/S
 Storm damage

Phone:

Mechanic:

Curtis

Helper:

Job Invoice: 22312



SYNAGRO

A Residuals Management Company

Customer #: Key 100	Invoice #: 22208	Circle Method of Payment:	Check <input type="checkbox"/> Credit Card	<input checked="" type="checkbox"/> On Account	Area: UK MK <input checked="" type="checkbox"/> LK	Date Ordered:
---------------------	------------------	---------------------------	--	--	--	---------------

Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount
R04		Parts & Material									
R12		Miscellaneous Supplies									
C01		Chlorine Slow Dissolve Tabs									
C02		Chlorine Liquid _____ gals.									
C03		Chlorine Liquid 55 gals.									
C05		Lime _____ lbs.									
C08		Potassium Permanganate _____ lbs.									
C09		Ferri Flocc _____ lbs.									
C10		Sodium Bicarb _____ lbs.									
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01	✓	Labor-mechanical & electrical	3	65	195.00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ ft.				R19		Bid Job			
R07		Jet Rodder _____ hrs.				S10		Plant Operator Labor			
R18		Shipping/Freight									
S11		I/S Calibration as required by DEP									
T01		Total Nitrogen & Phosphorus									
T03		Fecal Coliform Testing									
T04		Total Coliform Testing									
T08		Enterococcus Testing									
T12		Miscellaneous Supplies/Lab									
T13		Lab Labor									
									Total Labor		
									Total Materials		
									Total Labor		
									Tax		
									TOTAL		195

I hereby acknowledge the satisfactory completion of the above described work.

Operator/Employee Signature:

Curtis Mann

Date Completed: 11/12/05

Customer Signature:

ORIGINAL

Customer Name & Address:

KEY HAVEN

Phone:

Job Invoice: 22014



SYNAGRO

A Residuals Management Company

Storm damage

STEP FEED COLLECTION SYSTEM TO WWTP TO PREVENT OVERFLOW

Mechanic:

MIKE

Helper:

Customer #:	Invoice #:	Circle Method of Payment:	Check	On Account	Area:	Date Ordered:					
KEY 100	22208		<input type="checkbox"/>	<input checked="" type="checkbox"/>	UK MK LK	11.2.05					
Item Code	Description	Qty	Price	Amount	Item Code	Description	Qty	Price	Amount		
R04	Parts & Material										
R12	Miscellaneous Supplies										
C01	Chlorine Slow Dissolve Tabs										
C02	Chlorine Liquid _____ gals.										
C03	Chlorine Liquid 55 gals.										
C05	Lime _____ lbs.										
C08	Potassium Permanganate _____ lbs.										
C09	Fern Flocc _____ lbs.										
C10	Sodium Bicarb _____ lbs.										
C14	Alum Sulfate 15 gals.										
C15	Ferric Sulfate 15 gals.										
C16	Ferric Sulfate 55 gals.										
R06	Jet Rodder _____ ft.										
R07	Jet Rodder _____ hrs.										
R18	Shipping/Freight										
S11	L/S Calibration as required by DEP										
T01	Total Nitrogen & Phosphorus										
T03	Fecal Coliform Testing										
T04	Total Coliform Testing										
T08	Enterococcus Testing										
T12	Miscellaneous Supplies/Lab										
T13	Lab Labor										
						Code	✓	Labor	Hrs	Price	Amount
						R01	✓	Labor-mechanical & electrical	4.0	65.00	260.00
						R02		Helper Labor-mech. & electrical			
						R19		Bid Job			
						S10		Plant Operator Labor			
									Total Labor		
						I hereby acknowledge the satisfactory completion of the above described work.			Total Materials		
						Operator/Employee Signature:			Total Labor		
						<i>[Signature]</i>			Tax		
						Date Completed: 11.2.05			TOTAL		260.00
						Customer Signature:					

ORIGINAL

Customer Name & Address:

KEY HAVEN 18 KEY HAVEN RD.

Storm damage

CLEAN UP SEWAGE SPILL - DISINFECT AREA - MANHOLE #120-

Phone:

Mechanic:

MIKE

Helper:

Job Invoice: 22315



SYNAGRO

A Residuals Management Company

Customer #: KEY100	Invoice #: 22208	Circle Method of Payment:	Check <input type="checkbox"/> On Account <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/>	Area: UK MK LK	Date Ordered: 11-2-05						
Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount
R04		Parts & Material									
R12		Miscellaneous Supplies									
C01		Chlorine Slow Dissolve Tabs									
C02		Chlorine Liquid _____ gals.									
C03		Chlorine Liquid 55 gals.									
C05		Lime _____ lbs.									
C08		Potassium Permanganate _____ lbs.									
C09		Ferric Flocc _____ lbs.									
C10		Sodium Bicarb _____ lbs.									
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01	✓	Labor-mechanical & electrical	3.0	65-	195.00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ ft.				R19		Bid Job			
R07		Jet Rodder _____ hrs.				S10		Plant Operator Labor			
R18		Shipping/Freight									
S11		L/S Calibration as required by DEP									
T01		Total Nitrogen & Phosphorus									
T03		Fecal Coliform Testing									
T04		Total Coliform Testing									
T08		Enterococcus Testing									
T12		Miscellaneous Supplies/Lab									
T13		Lab Labor									
								I hereby acknowledge the satisfactory completion of the above described work.		Total Labor	
								Operator/Employee Signature: <i>[Signature]</i>		Total Materials	
								Date Completed: 11/2/05		Total Labor	
								Customer Signature:		Tax	
										TOTAL 195.00	

ORIGINAL

Customer Name & Address: **WWTP KEY HAVEN MAIN LIFT STA.** Phone: _____
 REMOVE LIFT PUMP TO SHOP FOR OVERHAUL - REBUILD BEARING MECHANIC: **MIKE/CURTIS**
 PEDESTAL FOR SPARE HELPER: _____
Storm damage A Residuals Management Company



Job Invoice: 22317

Customer #: **KEY100** Invoice #: **22208** Circle Method of Payment: _____ Check On Account Credit Card _____ Area: **UK MK LK** Date Ordered: **11-3-05**

Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount
R04		Parts & Material				R04	✓	WEAR PLATE	1 EA		87 50
R12		Miscellaneous Supplies				R04	✓	SEAL ASSY	1 EA		105 00
C01		Chlorine Slow Dissolve Tabs				R04	✓	GASKET SET	1 EA		28 00
C02		Chlorine Liquid _____ gals.				R04	✓	BEARING	2 EA	52.50	105 00
C03		Chlorine Liquid 55 gals.				R04	✓	SUPPLIES	MISC		31 60
C05		Lime _____ lbs.									
C08		Potassium Permanganate _____ lbs.									
C09		Ferri Flocc _____ lbs.									
C10		Sodium Bicarb _____ lbs.									
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01	✓	Labor-mechanical & electrical	18.0	65 ⁰⁰	1170 00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ ft.				R19		Bid Job			
R07		Jet Rodder _____ hrs.				S10		Plant Operator Labor			
R18	✓	Shipping/Freight			18 75						
S11		L/S Calibration as required by DEP				I hereby acknowledge the satisfactory completion of the above described work.				Total Labor	
T01		Total Nitrogen & Phosphorus				Operator/Employee Signature: _____				Total Materials	375 85
T03		Fecal Coliform Testing				Date Completed: 11/3/05				Total Labor	
T04		Total Coliform Testing				Customer Signature: _____				Tax	
T08		Enterococcus Testing								TOTAL	1545 85
T12		Miscellaneous Supplies/Lab									
T13		Lab Labor									

ORIGINAL

Customer Name & Address:

KEY HAVEN

Storm damage

REPLACE MOTOR #3 BLOWER

ADJUST · ALIGN · TEST

Phone:

Mechanic:

MIKE/CURTIS

Helper:

Job Invoice: 22319



SYNAGRO

A Residuals Management Company

Customer #:	Invoice #:	Circle Method of Payment:	Check <input type="checkbox"/> Credit Card <input type="checkbox"/>	On Account <input checked="" type="checkbox"/>	Area:	Date Ordered:			
KEY 100	22208				UK MK LK	11-4-05			
Item Code	Description	Qty	Price	Amount	Item Code	Description	Qty	Price	Amount
R04	Parts & Material				R04	5HP MOTOR 3Ø	1EA		1225.20
R12	Miscellaneous Supplies				R04	ELECTRICAL	MISC		50.50
C01	Chlorine Slow Dissolve Tabs								
C02	Chlorine Liquid _____ gals.								
C03	Chlorine Liquid 55 gals.								
C05	Lime _____ lbs.								
C08	Potassium Permanganate _____ lbs.								
C09	Ferri Flocc _____ lbs.								
C10	Sodium bicarb _____ lbs.								
C14	Alum Sulfate 15 gals.				Code	Labor	Hrs	Price	Amount
C15	Ferric Sulfate 15 gals.				R01	Labor-mechanical & electrical	8.0	65 ⁰⁰	520.00
C16	Ferric Sulfate 55 gals.				R02	Helper Labor-mech & electrical			
R06	Jet Redder _____ ft.				R19	Blid Job			
R07	Jet Redder _____ hrs.				S10	Plant Operator Labor			
R18	Shipping/Freight			100.00					Total Labor
S11	L/S Calibration as required by DEP				I hereby acknowledge the satisfactory completion of the above described work.			Total Materials	1281.70
T01	Total Nitrogen & Phosphorus				Operator/Employee Signature:			Total Labor	
T03	Fecal Coliform Testing				<i>[Signature]</i>			Tax	
T04	Total Coliform Testing				Date Completed: 11/4/05			TOTAL	1901.70
T08	Enterococcus Testing				Customer Signature:				
T12	Miscellaneous Supplies/Lab								
T13	Lab Labor								

ORIGINAL

Customer Name & Address:
KEY HAVEN "C" STATION
 INSTALL MOTOR #2 LIFT PUMP
 ALIGN - TEST

Phone:
 Mechanic:
MIKE
 Helper:

Job Invoice: 22288



A Residuals Management Company

Customer #: **KEY 100** Invoice #: **21769** Circle Method of Payment: Check On Account Credit Card Area: **UK MK LK** Date Ordered: **10-25-05**

Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount
R04		Parts & Material				R04	✓	SHP 1/2 MOTOR - RECON	1 EA		300.00
R12		Miscellaneous Supplies									
C01		Chlorine Slow Dissolve Tabs									
C02		Chlorine Liquid _____ gals.									
C03		Chlorine Liquid 55 gals.									
C05		Lime _____ lbs.									
C08		Potassium Permanganate _____ lbs.									
C09		Ferri Flocc _____ lbs.									
C10		Sodium Bicarb _____ lbs.									
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01	✓	Labor-mechanical & electrical	3.0	65.00	195.00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ ft.				R19		Bid Job			
R07		Jet Rodder _____ hrs.				S10		Plant Operator Labor			
R18		Shipping/Freight									
S11		L/S Calibration as required by DEP									
T01		Total Nitrogen & Phosphorus				I hereby acknowledge the satisfactory completion of the above described work.					
T03		Fecal Coliform Testing				Operator/Employee Signature:					
T04		Total Coliform Testing				<i>[Signature]</i>					
T08		Enterococcus Testing				Date Completed: 10-26-05					
T12		Miscellaneous Supplies/Lab				Customer Signature:					
T13		Lab Labor									
									TOTAL		495.00

ORIGINAL

Customer Name & Address:

KEY HAVEN

Phone:

Job Invoice: 22303



SYNAGRO

A Residuals Management Company

REPAIR HURRICANE DAMAGE
- ALL STATIONS -

Mechanic:

MIKE/PAUL/CURTIS

Helper:

Customer #: KEY 100	Invoice #: 21769	Circle Method of Payment:	Check <input type="checkbox"/> On Account <input checked="" type="checkbox"/> Credit Card	Area: UK MK <u>LK</u>	Date Ordered: 10-27-05
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Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount	
R04		Parts & Material				R04	✓	150 220 BLOWER OIL	6 QTS	21.85	131.10	
R12		Miscellaneous Supplies				R04	✓	CRC	2 EA	7.55	15.10	
C01		Chlorine Slow Dissolve Tabs				R04	✓	ELECT. CLEANER	4 EA	12.20	48.80	
C02		Chlorine Liquid _____ gals.				R04	✓	BELT BKGG	2 EA	50.75	101.50	
C03		Chlorine Liquid 55 gals.				R04	✓	SUPPLIES	MISC		30.30	
C05		Lime _____ lbs.										
C08		Potassium Permanganate _____ lbs.										
C09		Ferri Flocc _____ lbs.										
C10		Sodium Bicarb _____ lbs.										
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount	
C15		Ferric Sulfate 15 gals.				R01	✓	Labor-mechanical & electrical	20.0		1300.00	
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical				
R06		Jet Rodder _____ ft.				R19		Bid Job				
R07		Jet Rodder _____ hrs.				S10		Plant Operator Labor				
R18		Shipping/Freight									Total Labor	
S11		L/S Calibration as required by DEP						I hereby acknowledge the satisfactory completion of the above described work.			Total Materials	326.80
T01		Total Nitrogen & Phosphorus						Operator/Employee Signature:			Total Labor	
T03		Fecal Coliform Testing						<i>[Signature]</i>				
T04		Total Coliform Testing						Date Completed: 10/27/05			Tax	
T08		Enterococcus Testing						Customer Signature:				
T12		Miscellaneous Supplies/Lab									TOTAL	1626.80
T13		Lab Labor										

ORIGINAL

Customer Name & Address:

KEY HAVEN WWTP

Phone:

Job Invoice: 22302



SYNAGRO

A Residuals Management Company

Mechanic:

MIKE/CURTIS

Helper:

INSTALL NEW SURGE PUMP

Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount
R04		Parts & Material				R04	✓	1/2 HP 3# SEWAGE PUMP	1 EA		847.60
R12		Miscellaneous Supplies									
C01		Chlorine Slow Dissolve Tabs									
C02		Chlorine Liquid _____ gals.									
C03		Chlorine Liquid 55 gals.									
C05		Lime _____ lbs.									
C08		Potassium Permanganate _____ lbs.									
C09		Ferri Flocc _____ lbs.									
C10		Sodium Bicarb _____ lbs.									
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01	✓	Labor-mechanical & electrical	4.0	65 ⁰⁰	262.00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ ft.				R19		Bid Job			
R07		Jet Rodder _____ hrs.				S10		Plant Operator Labor			
R18		Shipping/Freight									
S11		L/S Calibration as required by DEP									
T01		Total Nitrogen & Phosphorus									
T03		Fecal Coliform Testing									
T04		Total Coliform Testing									
T08		Enterococcus Testing									
T12		Miscellaneous Supplies/Lab									
T13		Lab Labor									
									Total Labor		
									Total Materials		
									Total Labor		
									Tax		
									TOTAL		1107.60

I hereby acknowledge the satisfactory completion of the above described work.

Operator/Employee Signature:

Mike Curtis

Date Completed: 10/28/05

Customer Signature:

ORIGINAL

Customer Name & Address:

KEY HAVEN

Phone:

Job Invoice: 22304



SYNAGRO

A Residuals Management Company

Mechanic:

MIKE/CURTIS

Helper:

REPAIR MAIN LIFT STATION #2

PUMP/MOTOR/BASE
STORM DAMAGE

Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount
R04		Parts & Material				R04	✓	MOTOR 3HP 3Ø	1EA		609.00
R12		Miscellaneous Supplies				R04	✓	HARDWARE	MISC		22.00
C01		Chlorine Slow Dissolve Tabs				R04	✓	SUPPLIES	MISC		20.25
C02		Chlorine Liquid _____gals.									
C03		Chlorine Liquid 55 gals.									
C05		Lime _____lbs.									
C08		Potassium Permanganate _____lbs.									
C09		Ferri Flocc _____lbs.									
C10		Sodium Bicarb _____lbs.									
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01	✓	Labor-mechanical & electrical	12.0	65-	780.00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ft.				R19		Bid Job			
R07		Jet Rodder _____hrs.				S10		Plant Operator Labor			
R18		Shipping/Freight									
S11		L/S Calibration as required by DEP									
T01		Total Nitrogen & Phosphorus									
T03		Fecal Coliform Testing									
T04		Total Coliform Testing									
T08		Enterococcus Testing									
T12		Miscellaneous Supplies/Lab									
T13		Lab Labor									
								Total Labor			
								Total Materials		711	25
								Total Labor			
								Tax			
								TOTAL		1491	25

I hereby acknowledge the satisfactory completion of the above described work.

Operator/Employee Signature:

[Signature]

Date Completed: 10/28/05

Customer Signature:

ORIGINAL

Customer Name & Address:

Key Haven

Trouble Shoot Blower panel

Phone:

Mechanic:

Curtis / Mike / Paul

Helper:

Job Invoice: 22295



SYNAGRO

A Residuals Management Company

Customer #: Invoice #: 21769 Circle Method of Payment: Check On Account Credit Card Area: UK MK LK Date Ordered:

Item Code	√	Description	Qty	Price	Amount	Item Code	√	Description	Qty	Price	Amount
R04		Parts & Material									
R12		Miscellaneous Supplies									
C01		Chlorine Slow Dissolve Tabs									
C02		Chlorine Liquid _____gals.									
C03		Chlorine Liquid 55 gals.									
C05		Lime _____lbs.									
C08		Potassium Permanganate _____lbs.									
C09		Ferri Flocc _____lbs.									
C10		Sodium Bicarb _____lbs.									
C14		Alum Sulfate 15 gals.				Code	√	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01	√	Labor-mechanical & electrical	12	65	780 00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ft.				R19		Bid Job			
R07		Jet Rodder _____hrs.				S10		Plant Operator Labor			
R18		Shipping/Freight									Total Labor
S11		L/S Calibration as required by DEP						I hereby acknowledge the satisfactory completion of the above described work.			Total Materials
T01		Total Nitrogen & Phosphorus						Operator/Employee Signature:			Total Labor
T03		Fecal Coliform Testing						<i>Paul Benton</i>			780 00
T04		Total Coliform Testing						Date Completed: 10/24/05			Tax
T08		Enterococcus Testing						Customer Signature:			TOTAL
T12		Miscellaneous Supplies/Lab									780 00
T13		Lab Labor									60

ORIGINAL

Customer Name & Address: **WWTP AND** Phone:

Job Invoice: **22305**

Key Haven ALL STATIONS



SYNAGRO

A Residuals Management Company

Check L/S AND MAIN PLANT

Mechanic: **Curtis/Masie**

FOR PROPER OPERATION AFTER STORM DAMAGE / REPAIR VARIOUS ELECTRIC PROBLEMS

Helper:

Customer #: **KEY100** Invoice #: **21769** Circle Method of Payment: Check On Account Credit Card Area: **UK MK LK** Date Ordered: **10/29/05**
10/30/05

Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount
R04		Parts & Material									
R12		Miscellaneous Supplies									
C01		Chlorine Slow Dissolve Tabs									
C02		Chlorine Liquid _____gals.									
C03		Chlorine Liquid 55 gals.									
C05		Lime _____lbs.									
C08		Potassium Permanganate_____lbs.									
C09		Ferri Flocc _____lbs.									
C10		Sodium Bicarb _____lbs.									
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01	✓	Labor-mechanical & electrical	8		520 00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ft.				R19		Bid Job			
R07		Jet Rodder _____hrs.				S10		Plant Operator Labor			
R18		Shipping/Freight									Total Labor
S11		L/S Calibration as required by DEP						I hereby acknowledge the satisfactory completion of the above described work.			Total Materials
T01		Total Nitrogen & Phosphorus									
T03		Fecal Coliform Testing						Operator/Employee Signature: <i>Curtis Masie</i>			Total Labor
T04		Total Coliform Testing						Date Completed: 10/30/05			
T08		Enterococcus Testing						Customer Signature:			Tax
T12		Miscellaneous Supplies/Lab									TOTAL
T13		Lab Labor									520 00

ORIGINAL

Customer Name & Address:
Key Haven Utilities
 Replace 2 Submersed Compressors
 for Surge Pumps -
 Storm damage

Phone:
 Mechanic:
Paul
 Helper:

Job Invoice: 22208



SYNAGRO
 A Residuals Management Company

Customer #: **Key 100** Invoice #: **22208** Circle Method of Payment: Check On Account Credit Card Area: **UK MK LK** Date Ordered:

Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount
R04		Parts & Material				R04	✓	3 Ake Motor	2	209.25	418 50
R12		Miscellaneous Supplies						STARTERS WITH			
C01		Chlorine Slow Dissolve Tabs						OVERLOADS			
C02		Chlorine Liquid _____ gals.									
C03		Chlorine liquid 55 gals.									
C05		Lime _____ lbs.									
C08		Potassium Permanganate _____ lbs.									
C09		Ferric Flocc _____ lbs.									
C10		Sodium Bicarb _____ lbs.									
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01	✓	Labor-mechanical & electrical	3	65	195 00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech & electrical			
R06		Jet Rodder _____ ft.				R19		Bid Job			
R07		Jet Rodder _____ hrs.				S10		Plant Operator Labor			
R18	✓	Shipping/Freight			12 00						
S11		US Calibration as required by DEP									
T01		Total Nitrogen & Phosphorus									
T03		Fecal Coliform Testing									
T04		Total Coliform Testing									
T08		Enterococcus Testing									
T12		Miscellaneous Supplies/Lab									
T13		Lab Labor									
									Total Labor		195 00
									Total Materials		
									Total Labor		195 00
									Tax		
									TOTAL		625 50

I hereby acknowledge the satisfactory completion of the above described work.

Operator/Employee Signature:
Paul Benton

Date Completed: **11/18/05**

Customer Signature:

ORIGINAL

Customer Name & Address: **WWTP**
KEY HAVEN MAIN LIFT STA.
MODIFY MOTOR BASE
INSTALL NEW MOTOR/REBUILT PUMP
ADJUST-ALIGN-TEST
STORM DAMAGE

Phone:
 Mechanic: **MIKE/CURTIS**
 Helper:

Job Invoice: **22328**

SYNAGRO
 A Residuals Management Company

Customer #: **KEY100** Invoice #: **22208** Circle Method of Payment: Check On Account Credit Card Area: **UK MK LK** Date Ordered: **11-10-05**

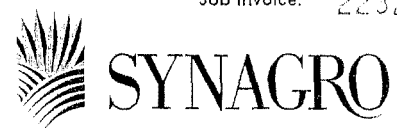
Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount
R04		Parts & Material				R04	✓	MOTOR 3HP 3Ø	1EA		609.00
R12		Miscellaneous Supplies				R04	✓	HARDWARE	MISC		52.50
C01		Chlorine Slow Dissolve Tabs				R04	✓	SUPPLIES	MISC		15.10
C02		Chlorine Liquid _____ gals.									
C03		Chlorine Liquid 55 gals.									
C05		Lime _____ lbs.									
C08		Potassium Permanganate _____ lbs.									
C09		Ferri Flocc _____ lbs.									
C10		Sodium Bicarb _____ lbs.									
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount
C15		Ferri Sulfate 15 gals.				R01	✓	Labor-mechanical & electrical	8.0	65.00	520.00
C16		Ferri Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ ft.				R19		Bid Job			
R07		Jet Rodder _____ hrs.				S10		Plant Operator Labor			
R18	✓	Shipping/Freight			100.00						
S11		L/S Calibration as required by DEP						I hereby acknowledge the satisfactory completion of the above described work.		Total Labor	
T01		Total Nitrogen & Phosphorus						Operator/Employee Signature: <i>[Signature]</i>		Total Materials	7676.60
T03		Fecal Coliform Testing						Date Completed: 11/10/05		Total Labor	
T04		Total Coliform Testing						Customer Signature: _____		Tax	
T08		Enterococcus Testing								TOTAL	12966.60
T12		Miscellaneous Supplies/Lab									
T13		Lab Labor									

ORIGINAL

Customer Name & Address: **WWTP**
***KEY HAVEN** MAIN LIFT STA.
 REMOVE #2 LIFT PUMP TO SHOP FOR
 OVERHAUL / SAVE FOR EMERGENCY
 SPARE
 REBUILD BEARING PEDESTAL
 - STORM DAMAGE -

Phone:
 Mechanic: **MIKE/CURTIS**
 Helper:

Job Invoice: 22320



A Residuals Management Company

Customer #: **KEY 100** Invoice #: **22208** Circle Method of Payment: Check On Account Credit Card Area: **UK MK LK** Date Ordered: **11-4-05**

Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount
R04		Parts & Material				R04	✓	WEAR PLATE	1EA		87 50
R12		Miscellaneous Supplies				R04	✓	GASKET SET	1EA		28 00
C01		Chlorine Slow Dissolve Tabs				R04	✓	SEAL ASSY	1EA		105 00
C02		Chlorine Liquid _____ gals.				R04	✓	SEAL LINER	1EA		21 00
C03		Chlorine Liquid 55 gals.				R04	✓	BEARING	2EA	52.50	105 00
C05		Lime _____ lbs.				R04	✓	SUPPLIES	MISC		34 75
C08		Potassium Permanganate _____ lbs.									
C09		Ferri Flocc _____ lbs.									
C10		Sodium Bicarb _____ lbs.									
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01	✓	Labor-mechanical & electrical	16.0	65.00	1040 00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ ft.				R19		Bid Job			
R07		Jet Rodder _____ hrs.				S10		Plant Operator Labor			
R18	✓	Shipping/Freight			20 00						
S11		L/S Calibration as required by DEP									
T01		Total Nitrogen & Phosphorus						I hereby acknowledge the satisfactory completion of the above described work.		Total Materials	401 25
T03		Fecal Coliform Testing						Operator/Employee Signature:		Total Labor	
T04		Total Coliform Testing						<i>[Signature]</i>			
T08		Enterococcus Testing						Date Completed: 11/11/05		Tax	
T12		Miscellaneous Supplies/Lab						Customer Signature:			
T13		Lab Labor								TOTAL	1441 25

ORIGINAL

Customer Name & Address: **KEY HAVEN "B" STATION**

Phone: _____


Job Invoice: **22034**

Mechanic: **MIKE/PAUL**

Helper: _____

INSTALL NEW MOTOR #1 LIFT PUMP

ADJUST- ALIGN- TEST - STORM DAMAGE




SYNAGRO
A Residuals Management Company

Customer # **KEY100** Invoice # **22208** Circle Method of Payment: _____ Check On Account Credit Card

Area: **UK MK LK** Date Ordered: **11-11-05**

Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount	
R04		Parts & Material				R04	✓	MOTOR 3HP 3Ø	1EA		609.00	
R12		Miscellaneous Supplies				R04	✓	HARDWARE	MISC		22.50	
C01		Chlorine Slow Dissolve Tabs										
C02		Chlorine Liquid _____ gals.										
C03		Chlorine Liquid 55 gals.										
C05		Lime _____ lbs.										
C08		Potassium Permanganate _____ lbs.										
C09		Ferri Fluc _____ lbs.										
C10		Sodium Bicarb _____ lbs.										
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount	
C15		Ferric Sulfate 15 gals				R01		Labor-mechanical & electrical	8.0		520.00	
C16		Ferric Sulfate 65 gals.				R02		Helper Labor-mech. & electrical			390.00	
R06		Jet Rodder _____ ft				R19		Bid Job			P.A.	
R07		Jet Rodder _____ hrs.				S10		Plant Operator Labor				
R18	✓	Shipping/Freight			100.00						Total Labor	
S11		L/S Calibration as required by DEP						I hereby acknowledge the satisfactory completion of the above described work.			Total Materials	731.50
T01		Total Nitrogen & Phosphorus						Operator/Employee Signature:			Total Labor	
T03		Fecal Coliform Testing						<i>[Signature]</i>			Tax	P.B.
T04		Total Coliform Testing						Date Completed: 11/11/05			TOTAL	1251.50
T08		Enterococcus Testing						Customer Signature:				
T12		Miscellaneous Supplies/Lab										
T13		Lab Labor										

ORIGINAL


Customer Name & Address: KEY HAVEN WWTP				Phone:		Job Invoice: 22335					
INSTALL NEW #1 BLOWER MOTOR ADJUST - ALIGN - TEST STORM DAMAGE				Mechanic: MIKE/CURTIS		 SYNAGRO A Residuals Management Company					
				Helper:							
Customer # KEY100	Invoice #: 22208	Circle Method of Payment:	Check <input type="checkbox"/> Credit <input type="checkbox"/> <u>On Account</u>	Area: UK MK LK	Date Ordered: 11-14-05						
Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount
R01		Parts & Material						MOTOR 15HP 3Ø	1 EA		1267.50
R12		Miscellaneous Supplies						BELT BX 6Ø	4 EA	46.30	185.20
C01		Chlorine Slow Dissolve Tabs						SUPPLIES/HARDWARE	MISC		26.25
C02		Chlorine Liquid _____ gals.									
C03		Chlorine Liquid 55 gals.									
C05		Lime _____ lbs.									
C08		Potassium Permanganate _____ lbs.									
C09		Ferric Five _____ lbs.									
C10		Sodium Bicarb _____ lbs.									
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01		Labor-mechanical & electrical	8.0	65.00	520.00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ ft				R19		Blid Job			
R07		Jet Rodder _____ hrs.				S10		Plant Operator Labor			
R18	✓	Shipping/Freight			150.00						
S11		L/S Calibration as required by DEP						I hereby acknowledge the satisfactory completion of the above described work.		Total Labor	
T01		Total Nitrogen & Phosphorus						Total Materials			1478.95
T03		Fecal Coliform Testing						Operator/Employee Signature:		Total Labor	
T04		Total Coliform Testing						<i>[Signature]</i>			
T08		Enterococcus Testing						Date Completed: 11/14/05		Tax	
T12		Miscellaneous Supplies/Lab						Customer Signature:		TOTAL	2148.95
T13		Lab Labor									

ORIGINAL

FROM: SYNAGRO

FAX NO.: 256-9393

Nov. 22 2005 03:42PM P18


Customer Name & Address: KEY HAVEN MAIN LIFT STATION STORM DAMAGE				Phone:		Job Invoice: 22336					
TROUBLESHOOT/REPAIR #2 LIFT PUMP ADJUST- ALIGN-TEST				Mechanic: MIKE/CURTIS		 SYNAGRO A Residuals Management Company					
				Helper:							
Customer #: KEY 100	Invoice #: 22208	Circle Method of Payment:	Check	On Account	Area: UK MK LK	Date Ordered: 11.15.05					
Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount
R04		Parts & Material						BELT- BX 38	250	31.50	6.3 00
R12		Miscellaneous Supplies						HARDWARE- S.S.	Misc-		4.6 75
C01		Chlorine Slow Dissolve Tabs									
C02		Chlorine Liquid _____ gals.									
C03		Chlorine Liquid 55 gals.									
C05		Lime _____ lbs.									
C08		Potassium Permanganate _____ lbs.									
C09		Ferri Flocc _____ lbs.									
C10		Sodium Bicarb _____ lbs.									
C14		Akum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01		Labor-mechanical & electrical	12.0		780.00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech & electrical			
R06		Jet Rodder _____ ft.				R19		Bid Job			
R07		Jet Rodder _____ hrs				S10		Plant Operator Labor			
R18		Shipping/Freight									
S11		US Calibration as required by DEP						I hereby acknowledge the satisfactory completion of the above described work.		Total Materials	109 75
T01		Total Nitrogen & Phosphorus						Operator/Employee Signature: <i>[Signature]</i>		Total Labor	
T03		Fecal Coliform Testing						Date Completed: 11/16/05		Tax	
T04		Total Coliform Testing						Customer Signature:		TOTAL	889 75
T08		Enterococcus Testing									
T12		Miscellaneous Supplies/Lab									
T13		Lab Labor									

ORIGINAL

FORM : SYNAGRO

FAX NO. : 206-893-9393

NOV. 22 2005 09:39AM F7

Customer Name & Address: KEY HAVEN STORM DAMAGE				Phone:		Job Invoice: 22340					
MOUNT SPARE PUMP TO BASE - INSTALL NEW MOTOR - ALIGN (FOR "B" STATION)				Mechanic: MIKE		 SYNAGRO A Residuals Management Company					
				Helper:							
Customer #:	Invoice #: 22208	Circle Method of Payment:	Check Credit Card	On Account	Area: UK MK LK	Date Ordered: 11-18-05					
Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount
R04		Parts & Material						MOTOR 3HP 3Ø	1EA		609.00
R12		Miscellaneous Supplies						HARDWARE SS	MISC		40.80
C01		Chlorine Slow Dissolve Tabs									
C02		Chlorine Liquid _____ gals.									
C03		Chlorine Liquid 55 gals.									
C05		Lime _____ lbs.									
C08		Potassium Permanganate _____ lbs.									
C09		Fertil Floc _____ lbs.									
C10		Sodium Bicarb _____ lbs.									
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount
C15		Ferrous Sulfate 15 gals.				R01		Labor-mechanical & electrical	7.0	65.00	455.00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ ft.				R19		Bid Job			
R07		Jet Rodder _____ hrs.				S10		Plant Operator Labor			
R18	✓	Shipping/Freight			100.00						
S11		I/S Calibration as required by DEP				I hereby acknowledge the satisfactory completion of the above described work.				Total Labor	
T01		Total Nitrogen & Phosphorus								Total Materials	704.80
T03		Fecal Coliform Testing				Operator/Employee Signature: <i>[Signature]</i>				Total Labor	
T04		Total Coliform Testing				Date Completed: 1/1				Tax	
T08		Enterococcus Testing				Customer Signature:				TOTAL	1104.80
T12		Miscellaneous Supplies/Lab									
T13		Lab Labor									

ORIGINAL

FORM: SYNAGRO


FAX NO.: 202529298

NOV 22 2005 09:37AM ES

Customer Name & Address:
KEY HAVEN MAIN LIFT STA.
STORM DAMAGE
REPAIR LIFT PUMP DRIVE SYSTEM ON
BOTH PUMPS - ADJUST / ALIGN

Phone:
 Mechanic:
MIKE
 Helper:

Job Invoice: **22048**



SYNAGRO
 A Residuals Management Company

Customer #: **KEY 100** Invoice #: **22208** Circle Method of Payment: Check On Account Credit Card Area: **UK MK LK** Date Ordered: **11-21-05**

Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount
R04		Parts & Material				R04	✓	SHEAVE	2EA	75.05	150.10
R12		Miscellaneous Supplies				R04	✓	BUSHING	2EA	19.25	38.50
C01		Chlorine Slow Dissolve Tabs				R04	✓	BELT BX 38	4EA	31.50	126.00
C02		Chlorine Liquid _____ gals.									
C03		Chlorine Liquid 55 gals.									
C05		Lime _____ lbs.									
C08		Potassium Permanganate _____ lbs.									
C09		Ferri Flocc _____ lbs.									
C10		Sodium Bicarb _____ lbs.									
C14		Alum Sulfate 15 gals				Code	✓	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01	✓	Labor-mechanical & electrical	8.0	65.00	520.00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ ft.				R19		Bid Job			
R07		Jet Rodder _____ hrs.				S10		Plant Operator Labor			
R18		Shipping/Freight									
S11		L/S Calibration as required by DEP									
T01		Total Nitrogen & Phosphorus				I hereby acknowledge the satisfactory completion of the above described work.			Total Labor		
T03		Fecal Coliform Testing				Operator/Employee Signature: <i>[Signature]</i>			Total Materials	314.60	
T04		Total Coliform Testing				Date Completed: 11/22/05			Total Labor		
T08		Enterococcus Testing				Customer Signature:			Tax		
T12		Miscellaneous Supplies/Lab							TOTAL	834.60	
T13		Lab Labor									

ORIGINAL

Customer Name & Address:

KEY HAVEN "B" STATION

Phone:

Job Invoice: 22357



SYNAGRO

A Residuals Management Company

- Storm Damage -

Mechanic:

MIKE

Helper:

REMOVE #2 LIFT PUMP TO SHOP
INSTALL SPARE PUMP/MOTOR - PIPE TO
EXISTING - TEST

Customer #:	Invoice #:	Circle Method of Payment:	Check	On Account Credit Card	Area:	Date Ordered:					
	22208				UK MK LK	11-29-05					
Item Code	√	Description	Qty	Price	Amount	Item Code	√	Description	Qty	Price	Amount
R04		Parts & Material				R04	✓	FITTINGS	MISC		32 30
R12		Miscellaneous Supplies				R04	✓	ELECTRICAL	MISC		21 00
C01		Chlorine Slow Dissolve Tabs									
C02		Chlorine Liquid _____ gals.									
C03		Chlorine Liquid 55 gals.									
C05		Lime _____ lbs.									
C08		Potassium Permanganate _____ lbs.									
C09		Ferri Flocc _____ lbs.									
C10		Sodium Bicarb _____ lbs.									
C14		Alum Sulfate 15 gals.				Code	√	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01	✓	Labor-mechanical & electrical	6.0	65=-	390 00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ ft.				R19		Bid Job			
R07		Jet Rodder _____ hrs.				S10		Plant Operator Labor			
R18		Shipping/Freight									Total Labor
S11		L/S Calibration as required by DEP						I hereby acknowledge the satisfactory completion of the above described work.			Total Materials
T01		Total Nitrogen & Phosphorus									53 30
T03		Fecal Coliform Testing						Operator/Employee Signature:			Total Labor
T04		Total Coliform Testing						<i>[Signature]</i>			
T08		Enterococcus Testing						Date Completed:	11/30/05		Tax
T12		Miscellaneous Supplies/Lab						Customer Signature:			TOTAL
T13		Lab Labor									443 30

ORIGINAL

Customer Name & Address:

KEY HAVEN

Phone:

Mechanic:

DXO

Helper:

Job Invoice: 22332



SYNAGRO

A Residuals Management Company

Customer #: KEY100	Invoice #: 22207	Circle Method of Payment:	Check Credit Card	On Account	Area: UK MK LK	Date Ordered: 10-31-05						
Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount	
R04		Parts & Material										
R12		Miscellaneous Supplies										
C01		Chlorine Slow Dissolve Tabs										
C02		Chlorine Liquid _____gals.										
C03		Chlorine Liquid 55 gals.										
C05		Lime _____lbs.										
C08		Potassium Permanganate _____ lbs.										
C09		Ferri Flocc _____ lbs.										
C10		Sodium Bicarb _____ lbs.										
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount	
C15		Ferric Sulfate 15 gals.				R01		Labor-mechanical & electrical				
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical				
R06		Jet Rodder _____ft.				R19		Bld Job				
R07		Jet Rodder _____hrs.				S10	✓	Plant Operator Labor	1/2	65.00	32.50	
R18		Shipping/Freight										
											Total Labor 32.50	
S11		L/S Calibration as required by DEP				I hereby acknowledge the satisfactory completion of the above described work.						Total Materials
T01		Total Nitrogen & Phosphorus				Operator/Employee Signature: <i>David...</i>						Total Labor 32.50
T03		Fecal Coliform Testing				Date Completed: 10/31/05						Tax 2.44
T04		Total Coliform Testing				Customer Signature:						TOTAL 34.94
T08		Enterococcus Testing										
T12		Miscellaneous Supplies/Lab										
T13		Lab Labor										

CLEAN MULTI-CLOGGED PITS + 1/2 HR

ORIGINAL

Customer Name & Address:

REY HAVEN

Phone:

Job Invoice: 22321



SYNAGRO

A Residuals Management Company

Mechanic:

MIKE

Helper:

Customer #: KEY 1012	Invoice #: 22207	Circle Method of Payment:	Check <input type="checkbox"/> Credit Card <input type="checkbox"/> <u>On Account</u>	Area: UK MK <u>LK</u>	Date Ordered: 11-8-05						
Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount
R04		Parts & Material				R04	✓	ROLL CHART	10 EA	36.70	367.00
R12		Miscellaneous Supplies									
C01		Chlorine Slow Dissolve Tabs									
C02		Chlorine Liquid _____gals.									
C03		Chlorine Liquid 55 gals.									
C05		Lime _____lbs.									
C08		Potassium Permanganate _____lbs.									
C09		Ferri Flocc _____lbs.									
C10		Sodium Bicarb _____lbs.									
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01		Labor-mechanical & electrical			
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ft.				R19		Bid Job			
R07		Jet Rodder _____hrs.				S10		Plant Operator Labor			
R18	✓	Shipping/Freight			15.00						
S11		L/S Calibration as required by DEP				I hereby acknowledge the satisfactory completion of the above described work.			Total Labor		
T01		Total Nitrogen & Phosphorus							Total Materials		
T03		Fecal Coliform Testing				Operator/Employee Signature:			Total Labor		
T04		Total Coliform Testing				<i>[Signature]</i>					
T08		Enterococcus Testing				Date Completed: 11/8/05			Tax		
T12		Miscellaneous Supplies/Lab				Customer Signature:			TOTAL		382.00
T13		Lab Labor									

ORIGINAL

Customer Name & Address:

KEY HAVEN WWTP

Phone:

Job Invoice: 22347



SYNAGRO

A Residuals Management Company

Mechanic:

MIKE

Helper:

REMOVE #2 SUCTION PIPING - CLEAR OBSTRUCTION - REINSTALL

Customer #: KEY 100	Invoice #: 22207	Circle Method of Payment:	Check <input type="checkbox"/> On Account <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/>	Area: UK MK LK	Date Ordered: 11-23-05						
Item Code	√	Description	Qty	Price	Amount	Item Code	√	Description	Qty	Price	Amount
R04		Parts & Material									
R12		Miscellaneous Supplies									
C01		Chlorine Slow Dissolve Tabs									
C02		Chlorine Liquid _____gals.									
C03		Chlorine Liquid 55 gals.									
C05		Lime _____lbs.									
C08		Potassium Permanganate _____lbs.									
C09		Ferri Flocc _____lbs.									
C10		Sodium Bicarb _____lbs.									
C14		Alum Sulfate 15 gals.				Code	√	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01	✓	Labor-mechanical & electrical	3.0	65-	195 00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ft.				R19		Bid Job			
R07		Jet Rodder _____hrs.				S10		Plant Operator Labor			
R18		Shipping/Freight									
S11		L/S Calibration as required by DEP									
T01		Total Nitrogen & Phosphorus									
T03		Fecal Coliform Testing									
T04		Total Coliform Testing									
T08		Enterococcus Testing									
T12		Miscellaneous Supplies/Lab									
T13		Lab Labor									
									Total Labor		
									Total Materials		
									Total Labor		
									Tax		
									TOTAL		195 00

I hereby acknowledge the satisfactory completion of the above described work.

Operator/Employee Signature:

[Signature]

Date Completed: 11/23/05

Customer Signature:

ORIGINAL

Customer Name & Address:

KEY HAVEN WWTP

Phone:

Job Invoice: 22348



SYNAGRO

A Residuals Management Company

Mechanic:

MIKE

Helper:

REPAIR AIR PIPING # 2 CLARIFIER

Customer #: KEY 100 Invoice #: 22207 Circle Method of Payment: Check On Account Credit Card Area: UK MK LK Date Ordered: 11-23-05

Item Code	✓	Description	Qty	Price	Amount	Item Code	✓	Description	Qty	Price	Amount
R04		Parts & Material				R04	✓	FITTINGS	MISC		23 70
R12		Miscellaneous Supplies									
C01		Chlorine Slow Dissolve Tabs									
C02		Chlorine Liquid _____ gals.									
C03		Chlorine Liquid 55 gals.									
C05		Lime _____ lbs.									
C08		Potassium Permanganate _____ lbs.									
C09		Ferri Flocc _____ lbs.									
C10		Sodium Bicarb _____ lbs.									
C14		Alum Sulfate 15 gals.				Code	✓	Labor	Hrs	Price	Amount
C15		Ferric Sulfate 15 gals.				R01	✓	Labor-mechanical & electrical	2.0	65 ⁰⁰	130 00
C16		Ferric Sulfate 55 gals.				R02		Helper Labor-mech. & electrical			
R06		Jet Rodder _____ ft.				R19		Bid Job			
R07		Jet Rodder _____ hrs.				S10		Plant Operator Labor			
R18		Shipping/Freight									
S11		L/S Calibration as required by DEP									
T01		Total Nitrogen & Phosphorus				I hereby acknowledge the satisfactory completion of the above described work.			Total Materials		23 70
T03		Fecal Coliform Testing				Operator/Employee Signature:			Total Labor		
T04		Total Coliform Testing				<i>[Signature]</i>			Tax		
T08		Enterococcus Testing				Date Completed: 11/23/05					
T12		Miscellaneous Supplies/Lab				Customer Signature:			TOTAL		153 70
T13		Lab Labor									

ORIGINAL

Synagro South
 1800 BERING DRIVE, SUITE 1000
 HOUSTON TX 77057
 (713) 369-1700

Invoice

Invoice Number:
 22207

Invoice Date:
 11/30/2005

Page:
 1

Bill To:
 Key Haven Utilities
 C/O Southernmost Insurance
 1104 Truman Ave
 Key West FL 33040

Customer ID	Customer PO	Payment Terms	Due Date
KEY100	STORM	Net 30	12/30/2005

Date of Service	Description	Quantity	Unit Price	Extended
10/31/2005	Plant Operator Labor	0.50	65.00	\$32.50
10/31/2005	J1-22332	1.000		
11/1/2005	Tubing kit	1.00	26.25	\$26.25
11/1/2005	J1-22307	1.000		
11/8/2005	Roll chart	10.00	36.70	\$367.00
11/8/2005	Shipping	1.00	15.00	\$15.00
11/8/2005	J1-22321	1.000		
11/23/2005	Labor (hours)-mechanical or electrical	3.00	65.00	\$195.00
11/23/2005	J1-22347	1.000		
11/23/2005	Fittings	1.00	23.70	\$23.70
11/23/2005	Labor (hours)-mechanical or electrical	2.00	65.00	\$130.00
11/23/2005	J1-22348	1.000		

Please Remit To: Synagro South
 c/o Synagro Technologies, Inc.
 012631 Collections Center Drive
 Chicago, IL 60693

PLEASE NOTE CUSTOMER ID & INVOICE NUMBER ON CHECK

Subtotal	\$789.45
Tax	\$31.28
Freight	\$0.00
Total	\$820.73

For questions regarding this invoice, please call
 Laura Pflughaupt at 832-467-1212 ext. 105 or
 e-mail at lpflughaupt@synagro.com



White - Customer Copy (Return With Payment) Pink - File Copy Goldenrod - Corporate Copy