CLASS A and B WATER AND/OR WASTEWATER UTILITIES

## FINANCIAL, RATE AND ENGINEERING MINIMUM FILING REQUIREMENTS

OF

Lake Utility Services, Inc. Exact Legal Name of Utility

# VOLUME III (a)



## FOR THE

Test Year Ended: 6/30/2007

VOLUME III (a) -

DOCUMENT AL MARY CATE 0 | 2 4 4 FED 18 8 FPSC-COMMISSION CLERK LAKE UTILITY SERVICES, INC.

DOCKET NO.: 070693-WS

# ADDITIONAL ENGINEERING INFORMATION

Lake Utility Services, Inc. Docket No.: 070693-WS

Lake County

25.30.440 (1) DETAILED MAP

Test Year Ended June 30, 2007

# DETAILED MAP SUBMITTED TO STAFF SEPARATELY

Lake Utility Services, Inc.

Docket No.: 070693-WS

Lake County

25.30.440 (2) CHEMICALS USED

Test Year Ended June 30, 2007

	A	В	C 0	Р	Q	R	S
1	Lake Utilities Services Inc.						1
2	Schedule of Chemicals						
	Test Year Ended June 30, 2007						
4	July 2006- June 30, 2007				1		
5	LUSI- List of Chemicals						
6		Sodium H	ypochlorite	Wasp & F	lornet Killer	Meter Mis	t Blue Sky
7		10% s	olution				
8	Date of Invoice	1 Gal	Unit Price Price	1 Dozen	Unit Price	1 PKG	Unit Price
9	Sub 628 6181010						
10	6/16/2006	110	0.9				
11	6/7/2006	75	0.9				
12	6/21/2006	80	0.9				
13	7/5/2006	25	0.9				
14	7/19/2006	55	0.9				
15	8/2/2006	35	0.9		1		
16	8/2/2006	55	0.9				
17	8/16/2006	20	0.9				
18	8/16/2006	70	0.9				:
19	8/29/2006	55	0.9				
20	9/13/2006	75	0.9				
21	9/27/2006	65	0.9		+		
22	10/11/2006	40	0.9		· · · · · · · · · · · · · · · · · · ·		
23	10/11/2006	85	0.9				
24	10/25/2006	70	0.9			···	
25	10/25/2006	40	0.9				
26	11/8/2006	30	0.9			· · · · · · · · · · · · · · · · · · ·	
27	12/6/2006	55	0.9				
28							
	Sub 631 6181010			· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·
30	6/7/2006	250	0.9(				
31	6/21/2006	215	0.9!				
32	7/5/2006	100	0.9!				:
33	9/27/2006	100	0.9				
34	0				·····		
	Sub 632 6181010	75	0.9				
36 37	5/24/2006 6/7/2006	75	0.9				
37 38	6/21/2006	75	0.9	·	1		<u> </u>
38 39	6/30/2006	30	0.9(	······································			· · · · ·
		75	0.9(	·····			
40 41	7/19/2006	75	0.9!				<u> </u>
+; 42	8/2/2000	75	0.9		+		
+ <u>2</u> 43	8/29/2006	110	0.9				
+3 44	9/27/2006	100	0.9				
+4 15	10/11/2006	150	0.9		· · · · · · · · · · · · · · · · · · ·		
+5 16	10/11/2000	135	0.9				
+0 17	11/8/2006	70	1.2		+		i
18	11/21/2006	125	0.9				
19	12/6/2006	150	0.9				
50							
	Sub 633 6181010						
52	7/21/2006	90	0.9				
3	6/7/2006	70	0.9				
4	7/5/2006	45	0.9				
5	7/19/2006	45	0.9				
6	8/2/2006	85	0.9				
7	8/16/2006	100	0.9				
8	8/29/2006	70	0.9				
9	9/13/2006	60	0.9!				
50	9/27/2006	90	0.95				
51	10/11/2006	165	0.9				
32	10/25/2006	100	0.9				
	12/6/2006	150	0.95				

-,-	Т	U	V	W	AI	AJ	AK	AL	AM
1 2						·		· <u> </u>	
23					<b>_</b>				
4									
5							· · · ·	· · · · · · · · · · · · · · · · · · ·	
6	70 & Sov P	unch Promo	45	NC	ιp	Dump	ster Fair		
7								TOTAL AMOUNTS	· · ·
8	1 Dozen	Unit Price	1 Dozen	Unit Price	5 nit Price	25 LB	Unit Price	TOTAL ANODITO	Company
9	1 002611	Onicifice	- Dozen		<u> </u>				Company
10								104.50	
11				· · · · · · · · · · · · · · · · · · ·			+	71.25	
12						· · · · · · · · · · · ·		76.00	
13								23.75	
14		1					1	52.25	
15								33.25	
16								52.25	
17								19.00	
18								66.50	
19							<u> </u>	52.25	
20						<u> </u>	<u> </u>	71.25	
21								61.75	<u> </u>
22		<u> </u>					+	38.00	
23								80.75	
4						··· <u>····</u> ·····	+	66.50	
25								38.00 28.50	
26 27						····		28.50	
28							+		
29									
30							+	237.50	
31								207.30	
32								95.00	
33								95.00	
34							†	0.00	
5									
6								71.25	
17								71.25	
8								71.25	
9							 	28.50	
0								71.25 71.25	
1								71.25	
2								71.25	
3								104.50	·
4								95.00 142.50	
5							L	142.50	
6								128.25	
7								07.50	
8 9								118.75 142.50	
0								142.50	
1								·····	
2								85.50	
3								66.50	
3 4 5 6 7								42.75	
51								42.75	
š –						~		80.75	
7								95.00	
31								66.50	
5								57.00	
8 9 0							_	85.50	
1						i		85.50 156.75	
2								95.00	
51	Exhibit H							142.50	

<u> </u>	A	В	<u> </u>	Р	Q	R	S
1	Lake Utilities Services Inc.						
	Schedule of Chemicals				1		
	Test Year Ended June 30, 2007						
	July 2006- June 30, 2007						
5	LUSI- List of Chemicals		r			· · · · · · · · · · · · · · · · ·	
6		Sodium H	ypochlorite o	Wasp & H	ornet Killer	Meter Mis	t Blue Sky
7			olution	<b>!</b>			
8	Date of Invoice	1 Gal	Unit Price t Price	1 Dozen	Unit Price	1 PKG	Unit Price
· · · · ·	Date of invoice	i Gai	Unit Flice trifice	T Dozen	Unitine		Unit Phile
64			i=				
	Sub 633 6181090						
66	7/24/2006						
67	9/13/2006		······				+
68	11/6/2006						
69							
	Sub 634 6181010						
71	6/7/2006	125	0.9				
72	6/21/2006	125	0.9				-
73	7/5/2006	55	0.9				
74	8/2/2006	100	0.9				
75	8/16/2006	100	0.9				
76	8/29/2006	110	0.9				
77	9/27/2006	155	0.9				
78	10/11/2006	100	0.9				
79	10/25/2006	150	0.9				
80	11/8/2006	45	0.9!				
81							
	Sub 636 6181010						
83	6/21/2006	800	0.9!				1
84	6/7/2006	1,000	0.9				
85	7/6/2006	800	0.9(				
86	7/19/2006	700	0.9(				
87	8/2/2006	850	0.9		· · · · · · · · · · · · · · · · · · ·		
88	8/15/2006	850	0.9				
89	8/30/2006	850	0.9	,	· · · · · · · · · · · · · · · · · · ·		
90	9/13/2006	900	0.9				<u> </u>
91	9/13/2000	900	0.9		·····		
92	10/10/2006	950	0.9				
93	10/25/2006	1,050	0.9				
93	11/8/2006	1,000	0.9		-		
94	11/21/2006	875	0.9				
95	12/6/2006	950	1.1				
90	12/0/2000	900	1.15				
	Sub 636 6181000						
	Sub 636 6181090 7/17/2006						
99	//1//2006					······································	
100	Sub 661 6191010						
	Sub 661 6181010	225	0.9				
102	6/3/2006	235					
103	6/7/2006	80	0.9				
104	6/15/2006	145	0.9				
105	6/21/2006	125	0.95				
106	9/27/2006	75	0.95				
107	10/25/2006	130	0.95		· · · · · ·		
108	11/8/2006	55	0.9				
109							
	Sub 662 6181010						
111	6/21/2006	35	0.95				
112	6/30/2006	45	0.95				
113	7/19/2006	75	0.95				
114	8/2/2006	75	0.95				
115	8/16/2006	100	0.95	1			
116	8/29/2006	100	0.95				
117	9/27/2006	200	0.95		· · · ·		
	Exhibit H 10/9/2006	135	0.95		· · · ·		

	T	U	V	W	Al	AJ	AK	AL	AM
1									
2									
4						······································			
5									
6	70 & Soy Pt	unch Promo	45	NC	Ip	Dumps	ster Fair		
7								TOTAL AMOUNTS	
8	1 Dozen	Unit Price	1 Dozen	Unit Price	5 nit Price	25 LB	Unit Price		Compan
64 65		· · · · · · · · · · · · · · · · · · ·							
66								375.00	
67								375.00	
68								375.00	
69									
70								118.75	
71 72								118.75	
73								52.25	
74								95.00 95.00	
75								95.00	
76								104.50	
77								147.25	
78 79					i			95.00 142.50	
80								42.75	
81									
82									
83								760.00	
84 85								950.00 760.00	
86								665.00	
87							· · · · · · · · · · · · · · · · · · ·	807.50	
88								807.50	
89								807.50	
90								855.00 855.00	· ····
91 92								902.50	
93								997.50	
94								950.00	
95								831.25	
96 97						- · · · · · · · · · · · · · · · · · · ·		1,092.50	
97 98									
99								4,780.66	· · · · · ·
100									
101									·
102								223.25	
103								76.00 137.75	,
04 105				· · · · · · · · · · · · · · · · · · ·				118.75	
106								71.25	
07	· · · · · · · · · · · · · · · · · · ·							123.50	
08								52.25	
09									
10								33.25	
11 12								42.75	
12								72.75	
14								71.25	
15								95.00	
16								95.00	
17								190.00	
18	Exhibit H							128.25	

	A	B	C O	P	Q	R	l s
	Lake Utilities Services Inc.						······
1 ·	Schedule of Chemicals		······				-
	Test Year Ended June 30, 2007						
4	July 2006- June 30, 2007				-		
5	LUSI- List of Chemicals						
6		Sodium H	ypochlorite >	Masn & H	ornet Killer	Meter Mi	st Blue Sky
				vidop di li			
7			olution	1.5	Linit Dring	4 8140	
8	Date of Invoice	1 Gal	Unit Pricet Price	1 Dozen	Unit Price	1 PKG	Unit Price
119	10/23/2006	225	0.9				
120	11/8/2006	90	0.9		ļ		
121	11/21/2006	175	0.9				
122	12/6/2006	125 )	0.9		-		
123							
124	Sub 663 6181010						
125	7/19/2006	75	0.9				
126	8/29/2006	25	0.9		1		
127	10/25/2006	40	0.9				
128	12/6/2006	39	0.9		i		
129							
130	Sub 664 6181010						
131	6/6/2006	50	0.9				
132	7/19/2006	45	0.9				
133	8/29/2006	25	0.9				
134	9/27/2006	35	0.9		!		
135	10/25/2006	25	0.9				
136	11/21/2006	25	0.9				
137					-		
	Sub 665 6181010						
139	6/7/2006	110	0.9				
140	6/21/2006	165	0.9				
141	7/19/2006	100	0.9				
142	8/2/2006	50	0.9				
143	8/29/2006	145	0.9				
144	9/27/2006	200	0.9				
145	10/11/2006	200	0.9		-		<u>.</u>
146	10/23/2006	150	0.9				
140	11/8/2006	95	0.9				
148	11/21/2006	175	0.9		-		
149	12/6/2006	125	0.9				
150	12/0/2000	125	0.9				
	Sub 675 6191010						
	Sub 675 6181010 6/15/2006	1,185	0.5		<b>⊢</b>		<u> </u>
152 153	6/15/2006	1,185	0.5			· · · · · · · · · · · · · · · · · · ·	
153	6/22/2006	1,100	0.0			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · · ·
154	6/7/2006	55	0.9				
155	6/7/2006	920	0.5				
156	7/6/2006	1,110	0.5				
157	7/13/2006	875	0.5				
158	7/13/2006	1,230	0.5				· <u> </u>
160	7/20/2006	1,106	0.5			· · · -	· · · · ·
		1,106	0.5	· · ·			
161	8/3/2006						
162	8/10/2006	1,210	0.5				
163	8/17/2006	1,155	0.5				
164	8/24/2006	1,080	0.5				
165	8/31/2006	936	0.5				
166	9/7/2006	1,140	0.5				
167	9/20/2006						<u> </u>
168	9/14/2006	875	0.5	<u>.</u>		· · · · · · · · · · · ·	
169	9/21/2006	1,140	0.5				
170	9/28/2006	606	0.5				
171	10/5/2006	1,160	0.5	i			ļ
172	10/21/2006	1,265	0.5				
173	Exhibit H 10/17/2006	1,196	0.5		1		1

	Т	U	V	W	AI	AJ	AK	AL	AM
2	· · · · ·								
4									
5									
6	70 & Soy P	unch Promo	45	NC	ρ	Dumps	ter Fair		
7							<b>T</b>	TOTAL AMOUNTS	
8	1 Dozen	Unit Price	1 Dozen	Unit Price	5 (it Price	25 LB	Unit Price		Company
119								213.75	
120 121							-	85.50 166.25	
122								118.75	
123	······								
124									
125								71.25 23.75	
126 127							[ [	38.00	
128								37.05	<b>_</b>
129								0.00	
130								0.00	
131	, <u>, , , , , , , , , , , , , , , , </u>							47.50 42.75	
132 133	· · · · ·							23.75	
134								33.25	
135								23.75	
136								23.75	
137									
138 139								104.50	
140								156.75	
141								95.00	
142								47.50	
143								137.75 190.00	
144 145					·			190.00	
146								142.50	·
147								90.25	
148								166.25	
149								118.75	
150 151							· · · ·		
152								651.75	
153								635.25	
154					+			536.00 52.25	
155 156							· · · · · · · · · · · · · · · · · · ·	52.25	
157								610.50	
158								481.25	
159								676.50	
160								608.30 586.85	
161 162								665.50	
162								635.25	
164								594.00	
165								514.80	
166								627.00	
167 168					·			296.00 481.25	
169								627.00	
170								333.30	
171								638.00	
172							<u></u>	695.75	
173	Exhibit H					-		657.80	

	A	В	C O I	Р	Q	R	S
1	Lake Utilities Services Inc.						
2	Schedule of Chemicals						
	Test Year Ended June 30, 2007			=			
	July 2006- June 30, 2007						
5	LUSI- List of Chemicals						 
6		Sodium H	ypochlorite	Wasp & Ho	rnet Killer	Meter Mis	t Blue Sky
7			olution				
	Data of loweled		Unit Price Price	1 Dozen	Unit Price	1 PKG	Unit Price
8	Date of Invoice	1 Gal		T Dozen		IFNG	Unit Frice
174	10/26/2006	1,123	0.55				
175	11/2/2006	920	0.55	··· <b>_</b>			
176	11/9/2006	1,022	0.55				
177	11/16/2006	1,142	0.55				
178	11/24/2006	250	0.55				
179	11/24/2006	1,010	0.55				
180	11/30/2006	849	0.55				
181	12/7/2006	1,092	0.55				
182	12/14/2006	1,043	0.55				
183	12/21/2006	861	0.55				
184							
	Sub 675 6181050						
186	7/25/2006		16.54	1	74.34	·	
187	9/22/2006			1	74.34	1	109.25
188	10/24/2006						
189	12/7/2006						
190							
	Sub 675 6181090						
192	7/17/2006						
193							
194							
195	2007						
	Sub 628 6181010						
197	1/3/2007	47	1.25				
198	1/31/2007	40	1.25				
199	2/28/2007	35	1.25				
200	4/11/2007	70	1.25		·		
201	5/9/2007	55	1.25				
202							- · · · · · · · · · · · · · · · · · · ·
	Sub 631 6181010	(22					
204	4/11/2007	425	1.25				
205	5/9/2007	200	1.25				
206							··· ,
	Sub 632 6181010	110		+			
208	12/20/2006	110	0.95				
209	12/17/2007	165	1.25				
210	2/14/2007	140	1.25				
211	3/14/2007	165	1.25				
212	4/11/2007	225	1.25				
213	4/25/2007	150	1.25				
214	5/9/2007	180	1.25				· · ·
215	N. 6 000 0404040						
	Sub 633 6181010		4.05				
217	1/31/2007	165	1.25				
218	2/28/2007	105	1.25				
219	3/14/2007	150	1.25				
220	3/28/2007	150	1.25				
221	4/9/2007	180	1.25			í	
222	4/25/2007	135	1.25				
223	5/3/2007	145	1.25				
224	5/16/2007	150	1.25				
225							
	Sub 634 6181010					· · · · · · · · · · · · · · · · · · ·	
	12/20/2006	210	0.95				
227 228	Exhibit L 1/31/2007	160	1.25			1	

	T	U	V	W	X AI	AJ	AK	AL	AM
1							1		
3									
4									<del></del>
6	70 & Soy Pu	Inch Promo	45	NC		Dumps	ster Fair		
7						Bampe		TOTAL AMOUNTS	
8	1 Dozen	Unit Price	1 Dozen	Unit Price	5 Gt Price	25 LB	Unit Price		Compan
174				·				617.65	i
175	_							506.00	
176						· · ·		562.10	
177 178							1	628.10 137.50	
179								555.50	
180								466.95	· · · · ·
181								600.60	
182 183								573.65	
184							-	473.55	
85									<u> </u>
186								70.79	
187	1	84.95	1	80.24		;		399.70	
188 189					51.08	1	51.08	73.30 86.06	
190								00.00	
91		· · · · · · · · · · · · · · · · · · ·							
92								1,013.08	
93								· · · · · · · · · · · · · · · · · · ·	
194 195							· · · · · · · · · · · · · · · · · · ·		
196									
197								58.75	
98								50.00	
99								43.75 87.50	
200 201								68.75	
02									
03									
204 205 206 207								531.25	
05								250.00	
07									
08								104.50	
09								206.25	
10								175.00	
11 12								206.25 281.25	
13						· · · ·	·	187.50	
14								225.00	
15									
16								000.05	
17 18								206.25 131.25	
19								187.50	
19 20								187.50	
21 22								225.00	
22								168.75	
23 24 25 26								181.25 187.50	
25								107.00	
26									
27 28								199.50	
28	Exhibit H							200.00	

	A	В	<u> </u>	P	Q	R	S
	Lake Utilities Services Inc.						
	Schedule of Chemicals						
3	Test Year Ended June 30, 2007						
4	July 2006- June 30, 2007						
5	LUSI- List of Chemicals						
6		Sodium H	ypochlorite	Wasp & H	ornet Killer	Meter Mis	st Blue Sky
7		10% s	solution				
8	Date of Invoice	1 Gal	Unit Price Price	1 Dozen	Unit Price	1 PKG	Unit Pric
229	2/28/2007	150	1.50				
230	4/11/2007	225	1.25				
231	5/9/2007	225	1.25				
232	0,0,2001		1,24				
	Sub 636 6181010						
234	12/20/2006	750	0.95				
235	1/3/2007	795	1.25				
236	1/17/2007	800	1.25				
237	1/31/2007	850	1.25				! 
238	2/14/2007	900	1.25				
239	2/14/2007	900	1.25	· · · · ·			·
240	3/14/2007	925 855					
41	3/14/2007	1,000	1.25				
42	4/11/2007		1.25				
43		1,000	1.25				
43	4/25/2007	800	1.25				
44	5/9/2007	1,050	1.25				
	Sub 661 6181010						
40							
48	12/20/2006	55	0.95				
	3/14/2007	75	1.25				
49	3/29/2007	110	1.25				
50	5/3/2007	140	1.25				
51							
521	Sub 662 6181010						
53	12/20/2006	110	0.95				
54	1/17/2007	135	1.25				
55	2/14/2007	145	1.25				
56	3/14/2007	75	1.25				
57	3/28/2007	150	1.25				
58	4/12/2007	165	1.25				
59	4/25/2007	125	1.25				
50	5/9/2007	170	1.25				···
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33	1/31/2007	45	1.25				
64	4/11/2007	45	1.25				
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7	1/3/2007	25	1.25				· · · · · · · · · · · · · · · · · · ·
8	2/14/2007	32	1.25				
9	3/16/2007	30	1.25				
0	4/11/2007	25	1.25				
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4	12/20/2006	120	0.95				
5	1/17/2006	135	1.25				
6	2/14/2007	145	1.25				
7	3/14/2007	180	1.25				
8	3/14/2007	200	1.25				
3	4/12/2007	200	1.25				
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	A	В	С	0	Р	Q	R	S
1	Lake Utilities Services Inc.			<i>-</i>				
2	Schedule of Chemicals			• • • • •				
3	Test Year Ended June 30, 2007			<u> </u>				
4	July 2006- June 30, 2007			•				
5	LUSI- List of Chemicals							
6		Sodium H	ypochlorite		Wasp & Ho	rnet Killer	Meter Mis	Blue Sky
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7			olution		<u></u>			
8	Date of Invoice	1 Gal	Unit Price		1 Dozen	Unit Price	1 PKG	Unit Price
284	12/28/2006	820	0.5					
285	1/4/2007	725	0.7					
286	1/12/2007	1,084	0.7	Ē				
287	1/18/2007	817	0.7	Ę				
288	1/25/2007	847	0.7			<u> </u>		
289	2/20/2007	915	0.7					
290	2/8/2007	745	0.75					
291	2/15/2007	905	0.75					
292	2/22/2007	890	0.75					
293	3/1/2007	1,035	0.75					
294	3/15/2007	1,265	0.75					
295	3/8/2007	1,102	0.75					
296	3/22/2007	959	0.75				:	
297	3/29/2007	932	0.75		+			
298	4/5/2007	1,155	0.75					
299	4/12/2007	1,041	0.75					· · · · · · ·
300	4/12/2007	1,041	0.7					
301	4/18/2007	55	1.25					
302	4/18/2007	980	0.75					
302		980	0.75					
	4/26/2007		0.75					
304	5/3/2007	1,120	0.75					
305	5/9/2007	1,405						
306	5/17/2007	1,369	0.75			_		
307	5/24/2007	1,361	0.75					
308	5/31/2007	1,252	0.75					
309	6/7/2007	1,140	0.75					
310	6/14/2007	1,215	0.75					
311	0 1 075 0101050							
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313	1/10/2007			<u></u>	1	78.06		
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	Nater, chemical feed rate, ppm		and the second		N//	<b>A</b> ter in de la constant de la constant La constant de la cons	<u> </u>	A
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337			Sectory and a construction			كالتهيم بنيها فالتصافية التهزيج وا		

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2	Schedule of Chemicals							
3	Test Year Ended June 30, 2007				1			
4	July 2006- June 30, 2007							
5	LUSI- List of Chemicals	İ						
6		Sodium Hypochlorite			Wasp & H	lornet Killer	Meter Mis	t Blue Sky
7		10%	solution					
8	Date of Invoice	1 Gal	Unit Price	Price	1 Dozen	Unit Price	1 PKG	Unit Price
	Sewer, chemical feed rate, ppm		11.5		n an a fi i n	J/A	N	I/Association
340	Volume treated, million gal.	15/25-25(2)	CAN ACTOR S					
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6	70 & Soy Pt	unch Promo	45	NC		0	Dump	ster Fair		
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342	[일부장 한 번)]		18 Maria Alta	나가 잘 생겼는?	e di C			2월 21일 - 영상 방법 (1991년) 1월 21일 - 영상 방법 (1991년)		

Lake Utility Services, Inc.

Docket No.: 070693-WS

Lake County

## 25.30.440 (3) CHEMICAL ANALYSES

Test Year Ended June 30, 2007

List of Systems Amber Hill Clermont I Clermont II Crescent Bay Crescent West Four Lakes Greater Groves Highland Point Lake Crescent Hills Lake Louisa Lake Ridge Club Lake Saunders The Oranges The Vistas

## AMBER HILL

## 25.30.440 (3) CHEMICAL ANALYSES

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#### LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440

Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 florida@utilitiesinc-usa.com

May 25, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd., Suite 232 Orlando, FL 32803-3767

RE: Annual Nitrate & Nitrite Sampling 2005 Chapter 62-550 FAC Amber Hill - PWS ID 3354648

Dear Mr. Morrison:

Please find the enclosed sample results as specified above for the 2005 monitoring period.

If you should have any questions, please call 407.869.8588, extension 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Brugu N. By

Bryan K. Gongre Assistant Operations Manager

Enclosures

Cc: Bill Coates, Area Manager, UIOF

FILE GOPY

Page 1 of 1 Operations:660:631:3: 2:2005:Annl.NO.62-550.AH.05 Florida Department of Environmental Protection RECEIVE Safe Drinking Water Program Laboratory Reporting Format MAY 2.4 7004

RECEIVED

PUBLIC WATER SYSTEM INFORMATIO	N (to be completed by sampler – Pleas	se type or prin	t legibly)	<del>2</del>	<del></del>	
System Name: <u>Amber Hi</u>	// PW	S I.D. #: 3	3 5	4	6 4	8
System Type (check one):			_		محمدها لمحمدهم	J <u>L</u>
• • • • • • • • • • • • • • • • • • • •						•
Address: <u>Lake Utility Servi</u> 200 Weathersfield	•	······································				
City: <u>A Hamonte Spring</u>		<u>сі -</u>		217	4.	
		407.86				
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E-Mail Address:			• • • • • • • • • • • • • • • • • • •			
SAMPLE INFORMATION (to be completed	hy complex)					
Sample Number: <u>AOSI642</u>	-	A (if known)!				
Sample Date: <u>5/11/65</u>					M (or	
Sample Location (be specific):						
Disinfectant Residual (Required when reporting						
		acius)		THE IC	pn	<del></del>
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	Routine Compliance (with 62-550		arterly (Whic			
Sentry Point (to Distribution)	Confirmation of MCL Exceedar		cial (not for			
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**		ation Reso		• •••••	,
Raw (at well or intake)			lacement (		ted Samr	ale)
	Other:			- /		,,,,,
	Sampling Procedure Used or Othe					
				•		
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for a	ditional requirements	See 62-550.55 attach a result			s and	
for nitrate or nitrite MCL						
Sampler's Name:ANIEL SA			010	10		
Sampler's Phone #: 32/- 355-	2593 Sampler's Fax	:#: <u>-<u>70</u>7</u>	1.069-	67	9/	
Sampler's E-Mail Address:						
CERTIFICATION (to be completed by	sampler)					
DAMES SHERING	and Lead	OPE	RATON	<		
I, <u>DANIEL SMERLU</u> (Print Name)		(	Print Title)			
do HEREBY CERTIFY that the abor complete and correct.	ve public water system and s	ample colle	ection info	ormatic	on is	
Signature: Canel de	m	(	Date:	-/26	/05	
		3				

Reporting Format 62-550.730 Effective January 1995, Revised January 2004 Page 1 of S

Florida Department of Environmental Protection Safe Drinking Water Program I	Laboratory
Reporting Format	

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Lab Assigned Report Number or Job ID A051842       Sample Number (From page 1) A051842-01         Group(s) Analyzed Results attached for compliance with chapter 62-550, F.A.C. (check all that apply):       Inorganics       Disinfection Byproducts         All 17       All 30       All 21       Trihaicomethanes         Partial       All Except Dioxin       Partial       Halocetic Acids         Witrite       Dioxin Only       Single Sample       Chlorite         Assigned Report Number of Version Only       Single Sample       Chlorite         Assestos Only       Ottaile Organics       Single Sample         Attach DOH AnALYTE SHEET FOR EACH SUBCONTRACTED LAB       CERTIFICATION         Attach DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB       CERTIFICATION         Attach DOH Analyte bare of the analytical data are correct and unless noted meet all requirements of the Vational Environmental LaBoratory Manager				
Address:       528 S. North Lake Bivd., Suite 1016       Certification Expiration Date: 6/30/2005         Attamonte Springs, FL 32701       Telephone #: (407) 937-1594         ANALYSIS INFORMATION (to be completed by lab       Date Sample(s) Received: 5/11/2005 2:50.00         Sample Number or Job ID A051642       Sample Number (from page 1) A051642-01         Group(s) Analyzed Results attached for compliance with chapter 52:550, F.A.C. (check all that apply):       Inorganics         M117       All 30       All 71         M117       All 30       All 71         M117       All 30       All 71         Mitrate       Partial       All Except Dioxin       Partial         Mitrate       Dation Only       Single Sample       Bromate         Mitrate       Dation Only       Single Sample       Chorite         Asbestos Only       Open State       Secondaries       Secondaries         Mit yes, please provide DOH certification number E82574       Atl 14       Partial         Attached analytical data are correct and unless noted meet all requirements of the valional Environmental LaBpartory Accreditation Conference (NELAC).       Signature:       Signature:       Signature:       Signature:       Signature:       Signature:       Signature:       No       Sample Analysis Info Satisfactory:       Yes       No			npleted by lab - Please type o	or print legibly)
Attamonie Springs, FL 32701       Telephone #: (407) 937-1594         ANALYSIS INFORMATION (to be completed by lab       Date Sample(s) Received: 5/11/2005 2:50.00         PWS ID (from page 1):       Date Sample(s) Received: 5/11/2005 2:50.00         Lab Assigned Report Number or Job ID A051642       Sample Number (From page 1) A051642-01         Group(s) Analyzed Results attached for compliance with chapter 62-550, F.A.C. (check all that apply):       Inorganics       Disinfection Byproducts         All 17       All 30       All 21       Trialomethanes         Partial       All 20       Bromate       Chiorite         Witrate       Partial       Radionuclides       Chiorite         Mitrate       Datosin Only       Single Sample       Chiorite         Asbestos Only       Gitry Composite**       Secondaries         Att 14       Partial       All 14         Partial       All 14       Partial         Were any analyses subcontracted?       Yes       No         If yes, please provide DOH certification number E82574       Att 14         ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB       CERTIFICATION         Myrna Santiago       Laboratory Manager	LabName: Advanced Environmer	ital Labs - Orlando	Flori	da Certification #: E53076
ANALYSIS INFORMATION (to be completed by lab PWS ID (from page 1): Lab Assigned Report Number or Job ID AD51642 Group(s) Analyzed Results attached for compliance with chapter 62-550, F.A.C. (check all that apply): Inorganics Synthetic Organics Volatile Organics Disinfection Byproducts AII 17 AII 30 AII 21 Trihalomethanes Partial AII Except Dioxin Partial Bromate Bromate Bromate Bromate Checks Witrate Partial Block Only Bromate Checks Bromate Checks Assessed Song Check	Address: 528 S. North Lake Blv	d., Suite 1016	Certificatio	n Expiration Date: 6/30/2005
PWS ID (from page 1):	Altamonte Springs, FL	32701		Telephone #: (407) 937-1594
Lab Assigned Report Number or Job ID A051642       Sample Number (From page 1) A051642-01         Group(s) Analyzed Results attached for compliance with chapter 62-550, F.A.C. (check all that apply):       Disinfection Byproducts         Inorganics       Synthetic Organics       Disinfection Byproducts         Partial       All 21       Trihaicomethanes         Partial       All Except Dioxin       Partial       Halocetic Acids         Witrite       Dioxin Only       Single Sample       Chlorite         Assesso Only       Single Sample       Chlorite         Attach DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB       CERTIFICATION         Myrna Santiago       Laboratory Manager	ANALYSIS INFORMATION (to be	completed by lab		
Group(s) Analyzed Results attached for compliance with chapter 62-550, F.A.C. (check all that apply):       Inorganics       Synthetic Organics       Disinfection Byproducts         All 17       All 30       All 21       Trihalomethanes         Partial       All 20       Partial       Homestanes         Wittele       Partial       Bromate         Nitrate       Dioxin Only       Single Sample       Chorite         Asbestos Only       Single Sample       Secondaries         All 14       Partial       Partial         Asbestos Only       Single Sample       Secondaries         All 14       Partial       Partial         Asbestos Only       Yes       No         f yes, please provide DOH certification number       E82574         ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB       CERTIFICATION         Myrna Santiago       Laboratory Manager       (Pirit Name)         too HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the Valional Environmental Lagratory Accreditation Conference (NELAC).         Signature:       Juma Juma Juma Juma Juma Juma Juma Juma	PWS ID (from page 1):		Date Sam	ble(s) Received: 5/11/2005 2:50:00
Inorganics       Synthetic Organics       Volatile Organics       Disinfection Byproducts         All 17       All 30       All 21       Trihalomethanes         Partial       All Except Dioxin       Partial       Heloacetic Acids         Witrate       Partial       Radionucides       Bromate         Nitrate       Data       Bingle Sample       Bromate         Asbestos Only       Bingle Sample       Chorite       Secondaries         All 14       Partial       Radionucides       Chorite         Asbestos Only       Ves       No       Secondaries         If yes, please provide DOH certification number       E82574       Secondaries         ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB       CERTIFICATION         Myrna Santiago       , Laboratory Manager       .         (Print Name)       Date:       5123/05         Signature:       Juma Mark       Date:       5123/05         * Failure to provide a valid and current Florida DOH lab certification number and a current Analyte Sheet for the attached analysis result in notification of the report, possible enforcement against the public water system for failure to sample, and mary result in notification of the report, possible enforcement against the public water system for failure to sample, and mary result in notification of the report, possible enforcement against the public water system for failure	Lab Assigned Report Number or J	ob ID A051642	Sample Numbe	r (From page 1) A051642-01
All 17       All 30       ☐ All 21       ☐ Trihalomethanes         ☐ Partial       All Except Dioxin       ☐ Partial       ☐ Haloacetic Acids         ☑ Nitrate       Partial       ☐ Radionuclides       ☐ Bromate         ☑ Nitrate       Dioxin Only       ☐ Single Sample       ☐ Chlorite         ☑ Nitrate       Dioxin Only       ☐ Girls       Secondaries         ☑ Nitrate       Dioxin Only       ☐ Girls       Secondaries         ☐ All 14       Partial       Radionuclides       ☐ Chlorite         ▲ Abestos Only       Û Yes       No       Partial       ☐ All 14         Were any analyses subcontracted?       ☑ Yes       No       Partial       ☐ All 14         # Yes, please provide DOH certification number E52574       Antrack DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB       CERTIFICATION         Myrna Santiago       , Laboratory Manager       .       .       .         (Print Name)       Do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the Valional Environmental Laboratory Accreditation Conference (NELAC).       .         Signature:	Group(s) Analyzed Results attach	ed for compliance with cha	apter 62-550, F.A.C. (check a	all that apply):
□       Partial       □ All Except Dioxin       □ Partial       □ Haloacetic Acids         □       Nitrate       □ Partial       □ Bromate       □ Bromate         □       Nitrite       □ Dioxin Only       □ Single Sample       □ Chlorite         □       Asbestos Only       □ Dioxin Only       □ Single Sample       □ Chlorite         □       Asbestos Only       □ Dioxin Only       □ Dioxin Content       □ Chlorite         □       Asbestos Only       □ Dioxin Only       □ Dioxin Content       □ Chlorite         □       Asbestos Only       □ Dioxin Only       □ Dioxin Content       □ Chlorite         □       Asbestos Only       □ Dioxin Only       □ Dioxin Content       □ Dioxin Content         □       (Print Name)       □ Detestop       □ Partial       □ Partial         0       HEEBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the validiant Environmental Laberatory Accreditation Conference (NELAC).         Signature:	Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts
Image: Single Sample       Bromate         Image: Single Sample       Chlorite         Image: Single Sample       Secondaries         Image: Single Sample       All 14         Image: Single Sample       Single Sample         Image: Single Sample       Chlorite         Image: Single Sample       Single Sample         Image: Single Sample       Chlorite         Image: Single Sample Chlorite       Chlorite         Image: Single Sample Chlorite       Chlorite         Image: Single Sample Chlorite       Sample Sample Sample         Image: Single Sample Analysis Info Satisfactory:       Yes <td>All 17</td> <td>All 30</td> <td>All 21</td> <td>Trihalomethanes</td>	All 17	All 30	All 21	Trihalomethanes
Nitrite       Dioxin Only       Chlorite         Single Sample       Chlorite         Single Sample       Getry Composite**         Asbestos Only       Getry Composite**         All 14       Partial         Were any analyses subcontracted?       Yes         No       No         f yes, please provide DOH certification number       E82574         ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB       CERTIFICATION         , Myrna Santiago       , Laboratory Manager         (Print Name)       Yes         do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).         Signature:       ////////////////////////////////////		All Except Dioxin	Partial	Haloacetic Acids
Nitrite Dioxin Only   Asbestos Only     Qury Composite**     Qury Composite**     All 14   Partial      Artack DOH certification number E82574   ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB CERTIFICATION   Myrna Santiago   (Print Name)   do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Manager   (Print Name)   do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).    Signature:     Image: Provide a valid and current Florida DOH lab certification number and a current Analyte Sheet for the attached analysis results will result in rejection of the report, possible enforcement against the public water system for failure to sample, and may result in notification of the DOH Bureau of Laboratory Services.   * Please provide radiological sample dates and locations for each quarter.   COMPLIANCE DETERMINATION   (to be completed by DEP or DOH)   Sample Collection info Satisfactory   Replacement Sample(s) Requested (circle or highlight group(s) above)   Reason(s):   McL(s) Exceeded   Detection(s)   Image: Reprise Analysis Unsatisfactory   Question Confiction Unsatisfactory   Artificial Don Info Satisfactory   Reason(s):   McL(s) Exceeded   Detection(s)   Incomplete Report   Additional Monitoring	V Nitrate	Partial	Radionuclides	Bromate
▲ Asbestos Only       □ Qurly Composite**       Secondaries         □ All 14       □ Partial         Were any analyses subcontracted?       ☑ Yes       No         If yes, please provide DOH certification number       E82574         ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB       CERTIFICATION         Myma Santiago       , Laboratory Manager       .         (Print Name)       .       CERTIFICATION         do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).       Date: <u>5 /23/05</u> Signature:	Vitrite	Dioxin Only		Chlorite
☐ All 14         Partial         ☐ Yes, please provide DOH certification number         E82574         ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB         CERTIFICATION         , Myma Santiago       , Laboratory Manager         (Print Name)         do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).         Signature:	Asbestos Only			Secondaries
Were any analyses subcontracted?       Yes       No         If yes, please provide DOH certification number       E82574         ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB         CERTIFICATION         , Myrna Santiago       , Laboratory Manager         (Print Name)         do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).         Signature:				All 14
f yes, please provide DOH certification number E82574   ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB   CERTIFICATION   (Print Name) to HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC). Signature: JUMA_JUMA_D Date: S 12.3/0.5 Tellure to provide valid and current Florida DOH lab certification number and a current Analyte Sheet for the attached analysis results will result in rejection of the report, possible enforcement against the public water system for failure to sample, and may result in notification of the DOH Bureau of Laboratory Services. * Please provide radiological sample dates and locations for each quarter. COMPLIANCE DETERMINATION (to be completed by DEP or DOH) Sample Collection Info Satisfactory Yes No Sample Collection Info Satisfactory Yes No Sample Collection Info Satisfactory Yes No Sample Analysis Info Satisfactory: Yes No Sample Collection Info Satisfactory Yes No Sample Collection Info Satisfactory Yes No Sample Analysis Info Satisfactory: Output Date: Dat				
ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB CERTIFICATION , Myrna Santiago, Laboratory Manager, (Print Name) do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the Vational Environmental Laboratory Accreditation Conference (NELAC). Signature:	Were any analyses subcontracted	? 🖌 Yes 🗋 No		_
Myrna Santiago       Laboratory Manager         (Print Name)       Laboratory Manager         to HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).         Signature:	If yes, please provide DOH certific	ation number E82574		
Myrna Santiago       , Laboratory Manager         (Print Name)         do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).         Signature:	ATTACH DOH ANALYTE SHEET	FOR EACH SUBCONTRA	CTED LAB	
(Print Name)         do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).         Signature:		CERT	<b>TIFICATION</b>	
National Environmental Laboratory Accreditation Conference (NELAC).  Signature:		Laboratory Manager	'	
Failure to provide a valid and current Florida DOH lab certification number and a current Analyte Sheet for the attached analysis results will result in rejection of the report, possible enforcement against the public water system for failure to sample, and may result in notification of the DOH Bureau of Laboratory Services.     Please provide radiological sample dates and locations for each quarter.     COMPLIANCE DETERMINATION (to be completed by DEP or DOH)     Sample Collection Info Satisfactory [] Yes [] No Sample Analysis Info Satisfactory: [] Yes [] No     Replacement Sample(s) Requested (circle or highlight group(s) above)     Additional Monitoring Required (circle or highlight group(s) above)     Reason(s): [] MCL(s) Exceeded [] Detection(s) [] Incomplete Report     Missing Analyte Sheet(s) [] Location Unsatisfactory [] Analysis Unsatisfactory     Other:     Person Notified: [] Date Notified: [] [] [] [] [] [] [] [] [] [] [] [] []				all requirements of the
analysis results will result in rejection of the report, possible enforcement against the public water system for failure to sample, and may result in notification of the DOH Bureau of Laboratory Services.         * Please provide radiological sample dates and locations for each quarter.         COMPLIANCE DETERMINATION (to be completed by DEP or DOH)         Sample Collection Info Satisfactory [] Yes [] No         Sample Collection Info Satisfactory [] Yes [] No         Replacement Sample(s) Requested (circle or highlight group(s) above)         Additional Monitoring Required (circle or highlight group(s) above)         Reason(s): [] MCL(s) Exceeded       Detection(s)         [] Missing Analyte Sheet(s)       [] Location Unsatisfactory         [] Other:       Date Notified:	Signature: <u>MANA-San</u>	leaho	Date:	5/23/05
COMPLIANCE DETERMINATION       (to be completed by DEP or DOH)         Sample Collection Info Satisfactory       Yes       No         Sample Collection Info Satisfactory       Yes       No         Replacement Sample(s) Requested (circle or highlight group(s) above)       Revised Report Requested (circle or highlight group(s) above)         Additional Monitoring Required (circle or highlight group(s) above)         Reason(s):       MCL(s) Exceeded       Detection(s)         Missing Analyte Sheet(s)       Location Unsatisfactory       Analysis Unsatisfactory         Other:       Date Notified:       Date Notified:	analysis results will result in rejection	on of the report, possible e	inforcement against the publi	t Analyte Sheet for the attached ic water system for failure to sample,
Sample Collection Info Satisfactory       Yes       No         Sample Collection Info Satisfactory       Yes       No         Replacement Sample(s) Requested (circle or highlight group(s) above)       Revised Report Requested (circle or highlight group(s) above)         Additional Monitoring Required (circle or highlight group(s) above)         Reason(s):       MCL(s) Exceeded       Detection(s)       Incomplete Report         Missing Analyte Sheet(s)       Location Unsatisfactory       Analysis Unsatisfactory         Other:       Date Notified:       Date Notified:	** Please provide radiological samp	ole dates and locations for	r each quarter.	
Replacement Sample(s) Requested (circle or highlight group(s) above)       Revised Report Requested (circle or highlight group(s) above)         Additional Monitoring Required (circle or highlight group(s) above)       Incomplete Report         Reason(s):       MCL(s) Exceeded       Detection(s)       Incomplete Report         Missing Analyte Sheet(s)       Location Unsatisfactory       Analysis Unsatisfactory         Other:       Date Notified:       Date Notified:	COMPLIANCE DETERMINATION	(to be completed by DE	P or DOH)	
Additional Monitoring Required (circle or highlight group(s) above)         Reason(s):       MCL(s) Exceeded       Detection(s)       Incomplete Report         Missing Analyte Sheet(s)       Location Unsatisfactory       Analysis Unsatisfactory         Other:       Detection(s)       Date Notified:         Comments       Date Notified:       Date Notified:	Sample Collection Info Satisfactory	Yes 🗌 No	Sample Analysis Info	Satisfactory: 🔄 Yes 🗌 No
Reason(s):       MCL(s) Exceeded       Detection(s)       Incomplete Report         Missing Analyte Sheet(s)       Location Unsatisfactory       Analysis Unsatisfactory         Other:       Date Notified:       Date Notified:	Replacement Sample(s) Requested	(circle or highlight group(s) abo	ove)	quested (circle or highlight group(s) above)
Missing Analyte Sheet(s) Comments	Additional Monitoring Required	(circle or highlight group(s)	above)	
Missing Analyte Sheet(s) Comments Missi	Reason(s): SMCL(s) Exceeded	Dete	ction(s)	Incomplete Report
Comments	Missing Analyte Sh		• •	
Comments	Person Notified:		יבת יבת	le Notified:
	Comments		54	
	Date Reviewed:	DFP/DC	OH Reviewing Official:	• m, •

P. 2



6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Client:	Utilities, Inc.
Project Name:	Amber Hill
Project Number:	
PWS ID#:	
Attention:	William Coates
Phone Number:	8002721919

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

 Report No.:
 A051642

 Date Sampled:
 5/11/2005

 Date Received:
 5/11/05 14:50

 Date Reported:
 5/21/2005

#### **Project Description**

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

Project Name: Amber Hill

Approved By:

Myrna Santlago, Laboratory Manager

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.



## Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Utilities, Inc.	Report No.: A051642
Project Name: Amber Hill	Date/Time Sampled: 05/11/05 9:30
Matrix: Drinking Water	Date/Time Received: 5/11/05 14:50
PWS ID#:	
Client Sample ID: 1	Sampled By: Dan Sherwood
Site: Point of Entry	Shipping Method: AEL Courier
Sample Number: A051642-01	
Inorganic Contaminants	· · ·

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert. #
1040	Nitrate (as N)	10	mg/L	0.043	i	SM4500NO3-F	0.014	5/12/2005	16:35	E82574
1041	Nitrite (as N)	1.0	mg/L	0.044	i	SM4500NO3-F	0.013	5/12/2005	16:35	E82574

The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit. MDL Method Reporting Limit

For all Results qualified with an I, the PQL is defined to be 4 times the MDL



Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

Client: UTILITIES, INC.	(UTL-A)	Project

Project name: AMBER HILL

Date/Time Rcvd: 5/11/05 14.50 Log-in request number: A051642

Completed by: RPG

### **Cooler/Shipping Information:**

Received by: RPG

Courier: 🛛 AEL 🗖 Client 🗆 UPS 🗆 Pony Express 📮 FedEx 🗖 Other (describe): \_\_\_\_\_

Type: 🖾 Cooler 🗆 Box 🗆 Other (describe) \_\_\_\_\_

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	1				
Temp (°C)	2		[		
Temp taken from	□ Temp blank ⊠ Cooler	Temp blank Cooler	Temp blank     Cooler	Temp blank     Cooler	Cooler
Temp measured with	IR gun Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):

## Other Information:

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?			
3.	Were custody papers properly filled out (ink, signed, match labels)?	/		
4.	Did all bottles arrive in good condition (unbroken)?	/		
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?			L
6.	Did the sample labels agree with the chain of custody?	1		
7.	Were correct bottles used for the tests indicated?			
8.	Were proper sample preservation techniques indicated on the label?			
9.	Were samples received within holding times?			
10.	Were all VOA vials checked for the presence of air bubbles?			1
	Were there air bubbles present in the VOA vials?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE			
	Was the cooler temperature less than 6°C?			
14.	Were sample pHs checked and recorded by Sample control?			
1	NOTE: VOA samples are checked by laboratory analysts.			
15.	Were the sample containers provided by AEL?			
	Were samples accepted into the laboratory?			
17.	Was it necessary to split samples into other bottles?		/	

## Kit ID

<u>Comments:</u>

7.5

## Chain-of-Custody for AEL Orlando to AEL Jax

AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701

Contact Person: Myrna Santiago

Project #: A051642 CustomerName: Utilities, Inc. Collector: Dan Sherwood AEL Jax 6601 Southpoint Parkway Jacksonville, FI 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde

Check if Rush

Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles	Bottle Type (P	res.)
A051642-01	1	Nitrate (J)-DW	Drinking Water	5/11/2005	9:30	5/11/05 14:50	5/13/2005		250mL Poly	
A051642-01	1	Nitrite (J)-DW	Drinking Water	5/11/2005	9:30	5/11/05 14:50	5/13/2005		250mL Poly	

Orlando Relinquisher:		Shipping Receiver:	AEL Courier	Date/Time:	5/11/05 120	
					alialar ist	
Shipping Relinquisher:	AEL Courier	Jacksonville Receiver:	9m	Date/Time:	5/12/05 1049	,

	L Tampa: 9610 L Gainesville: 2106	<b>FÖLDTİCS, İNC.</b> Southpoint Parkway, Jacks Princess Palm Avenue, Tai NW 67th Place, Suite 7, G 5. North Lake Blvd., Suite 1	sonville, FL 32216 • (904 mpa, FL 33619 • (813) 6 Sainesville, FL 32606 • (3	) 363-9350 Fax 30-9616 Fax (8 52) 367-1500 Fa	13) 630-4327 ax (352) 367-00	50				<b>A</b> (	)51	64	2	
CLIENT NAME:			PROJECT NAM					BOTTLE SIZE						
DDDEES			AMDER					& TYPE						
200 WEN	THERSFIELD AU	rê	P.O. NUMBER /		UMBER:			AR						L
ACTAINOISTE PHONE: 407-569-	SPRINGS FC 1910 352	32714 AX: -242-0565	PROJECT LOCA	VT				NE AQ LU YI SR IE	2					A B N U M
	( COPTER				γ			SD	2					BE
TURN AROUND	D TIME:		CIAL INSTRUCTIO											R
STANDARD		012	RES 0,7						Ŕ					
LI RUSH									VC					
Most														
WW≈ wäste waier	SW=surface water	GW-ground water	DW=drinking water	OIL A	=air <b>SO</b> =9	soil <b>Sl</b>	_=sludge	Preserv	100					
SAMPLE ID	· · · · · · · · · · · · · · · · · · ·	GW=ground water	DW=drinking water Grab Composite	SAM	IPLING	- MATRIX			105					
	· · · · · · · · · · · · · · · · · · ·	-	Grab Composite	SAM DATE	IPLING TIME	MATRIX	NO.		10e X					1
	SAMPL	-	Grab	SAM	IPLING		NO.		10« X					1
	SAMPL	-	Grab Composite	SAM DATE	IPLING TIME	MATRIX	NO.		105 X					1
	SAMPL	-	Grab Composite	SAM DATE	IPLING TIME	MATRIX	NO.		10« X					1
	SAMPL	-	Grab Composite	SAM DATE	IPLING TIME	MATRIX	NO.		105 X					1
	SAMPL	-	Grab Composite	SAM DATE	IPLING TIME	MATRIX	NO.		10« X					1
	SAMPL	-	Grab Composite	SAM DATE	IPLING TIME	MATRIX	NO.		10« X					
	SAMPL	-	Grab Composite	SAM DATE	IPLING TIME	MATRIX	NO.		10« X					
	SAMPL	-	Grab Composite	SAM DATE	IPLING TIME	MATRIX	NO.		10« X					
SAMPLE ID	SAMPL P.O.E	E DESCRIPTION	Grab Composite	SAM DATE Slutos	IPLING TIME 0930		NO. CONT. )		χ 					
SAMPLE ID	SAMPL P.O.E 21) S = (H <sub>2</sub> SO <sub>4</sub> ) N	E DESCRIPTION	Grab Composite	SAM DATE Slutos	IPLING TIME		NO. CONT. )	Time	χ 	TRecei	veg by:			
SAMPLE ID	SAMPL P.O.E	E DESCRIPTION	Grab Composite	SAM DATE Slutos	IPLING TIME 0930		NO. CONT. )		χ 	TRecei	vee by:	3		



Hovanced

Environmental Laboratories, Inc.

Trip Bl.

<u></u>

### CHAIN OF CUSTODY RECORD

LAB NUMBER:

J Jacksonville: 6601 Southpoint Parkway, Jacksonville, FL 32216 • (904) 363-9350 Fax (904) 363-9354 J Tampa: 9610 Princess Palm Avenue, Tampa, FL 33619 • (813) 630-9616 Fax (813) 630-4327 J Gainesville: 2106 NW 67th Place, Suite 7, Gainesville, FL 32606 • (352) 367-1500 Fax (352) 367-0050 Page of ර Orlando: 528 S. North Lake Blvd., Suite 1016, Altamonte Springs, FL 32701 • (407) 937-1594 Fax (407) 937-1597 CLIENT NAME: PROJECT NAME: BOTTLE SIZE Hick AMDER & OTINTIES INC TYPE ADDRESS: P.O. NUMBER / PROJECT NUMBER: 200 WERTHERSFIELD AUC AR Ł ΝE PROJECT LOCATION: А PHONE: FAX: CONTACT: Conner Sampled By HERacol AQ в LU YE N SR U I E M SD в Ε R **REMARKS / SPECIAL INSTRUCTIONS:** TURN AROUND TIME: OLD RES ON 원 STANDARD N 0 LI RUSH \_\_\_\_\_ WW= waste water SW=surface water DW=drinking water OIL SO=soil GW=ground water A=air SL=sludge Preserv PC Grab SAMPLING NO. SAMPLE ID MATRIX SAMPLE DESCRIPTION Composite CONT. DATE TIME C P.O.E shiros 0930 AU 5.4 I = Ice H = (HCI)  $S = (H_2SO_4)$   $N = (HNO_3)$ T = (Sodium Thiosulfate)  $\sum d$ Received by: Time-Date Time Date Relinquished by: 1610 77 7350 Shipment SIND Method Sample Kit Cooler #\_\_\_\_\_ 1 Via: \_\_\_\_\_ RB\_\_\_ \_ D/Т\_ Out: / / 11/05 14:0 2 450 DЛ AB

3

4

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Ret: / /

Via:

Jeb Bush Governor





John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

Laboratory Scope of Accreditation

Page 3 of 27

## THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

#### EPA Lab Code: FL00949

(904) 363-9350

E82574

Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, FL 32216

State Laboratory ID: E82574

Matrix: Drinking Water			Certification	
Analyte	Method/Tech	Category	Туре	Effective Date
Endothall	EPA 548.1	Synthetic Organic Contaminants	NELAP	1/21/2005
Endrín	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Ethylbenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Ethylbenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
gamma-BHC (Lindane, gamma-Hexachlorocyclohexane)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heptachlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heptachlor epoxide	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heterotrophic plate count	SM 9215 B	Microbiology	NELAP	1/21/2005
Hexachlorobenzene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Hexachlorocyclopentadiene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
iron	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Lead	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
Lead	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Magnesium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Manganese	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Mercury	EPA 245.1	Primary Inorganic Contaminants	NELAP	4/4/2002
Aercury	SM 3112 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Methoxychlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
lickel	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
litrate	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
Vitrate-nitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
litrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
litrite as N	SM 4500-NO2 B	Primary Inorganic Contaminants	NELAP	1/21/2005
dor	SM 2150 B	Secondary Inorganic Contaminants	NELAP	2/13/2003
Orthophosphate as P	EPA 365.1	Primary Inorganic Contaminants	NELAP	2/13/2003
Orthophosphate as P	SM 4500-P E	Primary Inorganic Contaminants	NELAP	1/21/2005
)xamyl	EPA 531.1	Synthetic Organic Contaminants	NELAP	4/19/2005
CBs	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
entachiorophenol	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
н	EPA 150.1	Primary Inorganic Contaminants,Secondary Inorganic Contaminants	NELAP	4/4/2002
icloram	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
otassium	EPA 200.7	Secondary Inorganic Contaminants	NELAP	1/21/2005
esidue-filterable (TDS)	EPA 160.1	Secondary Inorganic Contaminants	NELAP	4/4/2002
	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/17/2002
elenium	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards. NON-TRANSFERABLE 04/24/2005-E82574

P.\$

LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440 Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 florida@utilitiesinc-usa.com

September 23, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd., Suite 232 Orlando, FL 32803-3767

RE: Total Trihalomethane / Haloacetic Acids Annual Monitoring Amber Hill - PWS ID 3354648

Dear Mr. Morrison:

Please find the enclosed sample results as specified above for the 2005 monitoring period.

If you should have any questions, please call 407.869.8588, extension 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Buyen X. Donge

Bryan K. Gongre Assistant Operations Manager

Enclosures

cc: Bill Coates, A. M., UIOF

# Safe Drinking Water Program Laboratory Reporting Format

System Name:Amber_ +	1:11	PWS1.I	* 3 3	546	48
· · ·		· · ·			المستعالية
System Type (check one): 🗹 Commun	·	ansient Noncommunit	y <b>Trans</b>	ient Noncomn	nunity
Address: <u>Cake Utility</u>	·				. •
200 weatherst	·······			· · · · ·	
Dity: Altamente Sprin	0	State: FL			
Phone #:47.869.1919		Fax #:4	HOT. 869.696	21	
5-Mail Address:		,	·····		•.
•		••	•		
AMPLE INFORMATION (to be complete	d by sampler)		li she shartê Enî	<u></u>	
Sample Number: <u>A05285</u>	7-01	Location Code (If k		-	<u></u>
Sample Date: <u>8]9/05</u>		Sample Time:		am 🛃	· (Circle Or
ample Location (be specific):	Valencia Drive	., Clermant, F	<del>.</del>		
isinfectant Residual (Required when reportin	g results for trihalometh	anes and haloacetic acids)	: <u>/.0_</u> mg/L	Fleid pH	l:
				• •	
ample Type (Check Only One)		Reason(s) for Sa	ample (Check all the	it apply)	
Distribution		pliance (with 62-550)	Quarterly (W	hich Quarter?	
Entry Point (to Distribution)		of MCL Exceedance*	Special (not fo		th 62-550)
Plant Tap (not for compliance with 62-550)	Composite of	•	☐Violation Res		
Raw (at well or intake)		•		t (of Invalidated (	Sample)
Max Residence Time				·····	
Ave Residence Time	Sampling Proces	lure Used or Other Co	omments:		<u></u>
]Near First Customer	· · · · · · · · · · · · · · · · · · ·	. <u> </u>			
*See 62-550.500(6) for required NOTE: See 62-550.512(3) for a for nitrate or nitrite MCL	additional requiremen	s. **See 6 Is attacl	2-550.550(4) for re a results page for		d.
ampier's Name: <u>Charles Sch</u>	wades				· ·
ampler's Phone #: 4-07.869.191		Sampler's Fax #:	407.869.6	961	•
ampler's E-Mall Address:					• •
			•		
ERTIFICATION (to be completed by	v sampler)	,			
(Print Name)		, <u></u> Ope	(Print Title)	· · · · · ·	
HEREBY CERTIFY that the abo	we public water	system and same			e
property of the second		System and bamp			~
	111			~ / /	1
ignature: <u>Junkur e</u>	horder		Date:	4/19/0	15.
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	· · ·			4	
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Effective January 1995, Revised January 2004

FIU	rida Department	of Environm		ction Safe Drinking ng Form <mark>at</mark>	Water Program Laboratory
	TORY CERTIFICATIO		N (to be compl	eted by lab - Please type	or print legibly)
LabName	: Advanced Environn	nental Labs - Orla	indo	Flor	ida Certification #: E53076
-	528 S. North Lake I		· · · · · · · · · · · · · · · · · · ·		on Expiration Date: 6/30/2006
	Altamonte Springs,				Telephone #: (407) 937-1594
ANALYSIS	S INFORMATION (to	be completed by	iab		
PWS ID (fi	from page 1):		_	Date Sam	ple(s) Received: 8/11/2005 1:10:00
Lab Assigr	ned Report Number o	r Job ID A052857	7	Sample Numbe	er (From page 1) A052857-01
Group(s) A	Analyzed Results atta	ched for complia	nce with chapte	er 62-550, F.A.C. (check	all that apply):
1	Inorganics	Synthetic Org	anics	Volatile Organics	Disinfection Byproducts
- Г	All 17	All 30		All 21	
L L	] Partial	All Except	Dioxin	Partial	✓ Haioacetic Acids
L L	Nitrate	Partial		Radionuclides	Bromate
ŕ	Nitrite	Dioxin Oni	y		
Ē	Asbestos Only		-	Single Sample	Secondaries
	- ,			Qtrly Composite**	
					All 14
Vere anv a	analyses subcontracte	ed? 🔽 Yes			Partial
•	-				
•	se provide DOH certi	-			
ATTACH D	OH ANALYTE SHEE	T FOR EACH SU	BCONTRACT	ED LAB	
			CERTIF	ICATION	
, <u>Myrna Sa</u> (F	antiago Print Name)	, Laboratory Ma	nager	·	
	Y CERTIFY that all at wironmental Laborato			ct and unless noted meet ELAC).	all requirements of the
ilgnature:	huma ta	utago		Date:	9/2/05
nalysis res	provide a valid and c sults will result in reject sult in notification of t	ction of the report	, possible enfor	cement against the publ	t Analyte Sheet for the attached ic water system for failure to sample,
Please pr	rovide radiological sa	mple dates and lo	ocations for eac	ch quarter.	
OMPLIAN		N (to be comp	leted by DEP o	r DOH)	
ample Coli	lection info Satisfacto	orv 🖬 Yes 📓	No	Sample Analysis Info	Satisfactory: 🔳 Yes 🔳 No
	ent Sample(s) Requeste				quested (circle or highlight group(s) above
	al Monitoring Require				anna (anais ar màruithir Arabha) annai
	MCL(s) Exceeded	i	Detection	n(s)	Incomplete Report
				Unsatisfactory	Analysis Unsatisfactory
eason(s):	Missing Analyte S				
eason(s):	Other:				
eason(s):	Other:				te Notified:
eason(s);	Other:				te Notified:

.

R<sup>î</sup>



**Client:** 

PWS ID#:

Attention:

Address:

Project Name:

**Project Number:** 

Phone Number: 8002721919

6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

13:10

R

Utilities, Inc.	Report No.:	A052857
Amber Hill	Date Sampled:	8/9/2005
	Date Received:	8/11/05 13:1
	Date Reported:	9/2/2005
William Coates		
0000704040		

Altamonte Springs, FL 32714

200 Weathersfield Ave.

#### **Project Description**

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

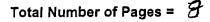
> Project Name: Amber Hill

Approved By: There was a set of the

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.



## Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Utilities, Inc.

Project Name: Amber Hill

Matrix: Drinking Water

PWS ID#:

#### Client Sample ID: 7

Site: 12647 Valencia

Sample Number: A052857-01

#### **Disinfection Byproducts**

 Report No.:
 A052857

 Date/Time Sampled:
 08/09/05
 12:10

 Date/Time Received:
 8/11/05 13:10

R

Sampled By: Client Shipping Method: AEL Courier

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysia Time	DOH Lab
2450	Chloroacetic Acid		սց/Լ	0.81	U	E552.2	0.81	8/18/2005	17:16	E82574
2451	Dichloroscetic Acid		ug/L	23		E552.2	0.56	8/18/2005	17:16	E82574
2452	Trichloroacetic Acid		ug/L	21		E552.2	0.60	8/18/2005	17:16	E82574
2453	Bromoacetic Acid		ug/L	1.9		E552.2	0.34	8/18/2005	17:16	E82574
2454	Dibromoscetic Acid		ug/L	3.2		E552.2	0.45	8/18/2005	17:16	E82574
2941	Chloroform		ug/L	43		E502.2	1.6	8/15/2005	14:26	E82574
2942	Bromoform		ug/L	0.36	U	E502.2	0.36	8/15/2005	14:28	E82574
2943	Bromodichioromethane		սց/Լ	12		E502.2	0.38	8/15/2005	14:26	E82574
2944	Dibromochloromethane	2	ug/L	2.7		E502.2	0.28	8/15/2005	14:26	E82574

U The compound was analyzed for but not detected.

MDL Method Reporting Limit

For all Results gualified with an I, the PQL is defined to be 4 times the MDL



Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

R.5

Client: UTILITIES, INC. (UTL-A)	Project name: AMBER HILL
---------------------------------	--------------------------

Date/Time Rcvd: 8/11/05

13.10 Log-In request number: A052857

Received by: RPG

Completed by: RPG

### **Cooler/Shipping Information:**

Courier: 🛛 AEL 🗆 Client 🗖 UPS 🗆 Pony Express 🗆 FedEx 🗆 Other (describe):

Type: 🖾 Cooler 🗆 Box 🗖 Other (describe) \_\_\_

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	1				
Temp (°C)	2		_		
Temp taken from	Temp blank     Cooler	Temp blank     Cooler	Temp blank Cooler	Temp blank     Cooler	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>
Temp measured with	IR gun Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):			

#### Other Information:

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?	. /		
3.	Were custody papers properly filled out (ink, signed, match labels)?			
4.	Did all bottles arrive in good condition (unbroken)?			
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?			
6.	Did the sample labels agree with the chain of custody?	1		
7.	Were correct bottles used for the tests indicated?			
8.	Were proper sample preservation techniques indicated on the label?	1		
9.	Were samples received within holding times?			
10.	Were all VOA vials checked for the presence of air bubbles?			1
11.	Were there air bubbles present in the VOA vials?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE			
	Was the cooler temperature less than 6°C?			
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.			<b>~</b>
15.	Were the sample containers provided by AEL?			
16.	Were samples accepted into the laboratory?			
	Was it necessary to split samples into other bottles?		1	

Kit ID

#### Comments:

.

Chain-of-Custody for AEL Orlando to AEL Jax

AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701

Contact Person: Myrna Santiago

Project #: A052857 CustomerName: Utilities, Inc. Collector: Client

نۍ

AEL Jax 6601 Southpoint Parkway Jacksonville, Fl 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde



Check if Rush

Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	<b>Receive Date</b>	Due Date	# Bottles	Bottle Type (Pres.)
A052857-01	7	550 Haloacetic Acids (J)-55	Drinking Water	8/9/2005	12:10	8/11/05 13:10	8/23/2005		40mL Vial Amber
A052857-01	7	THMs (DW)	Drinking Water	8/9/2005	12:10	8/11/05 13:10	8/23/2005		40mL VOC vial

Orlando Relinguisher: N Shipping Relinquisher: AEL Courier

Shipping Receiver: APC Courie

Jacksonville Receiver:

Date/Time: G Date/Time:

Page 1 of 1

Advanced Environme	ental Laboratories, Inc.	Cł	IAIN OF CUS	TODY RE	CORD			LAE	3 NUN	IBER:					
Lacksor Lacksor	ville: 6601 Southpoint Parkway, Jack 5810-D Breckenridge Parkway, rille: 2106 NW 67th Place, Suite 7, 0	Tampa, FL 33610	• (813) 630-9616 Fax (8	813) 630-4327	60						Pa	ige	1	of	2
CLIENT NAME:		PROJECT					BOTTLE SIZE						[		Т
UTILITIES IN	C						& TYPE								
ADDRESS: 200 WEATHERS FI	as AUE	P.O. NUMB	ER / PROJECT N	JMBER:		•	AR								_
•		PROJECT	LOCATION:	×.			N E A Q	TT	TH	Mís	1+	HI	A.	۲,۶	
ALTA MONTE SI PHONE: 407-569-1919	FAX:						LU YI SR								
CONTACT:		SAMPLED	BY:			<u> </u>	I E S D								
TURN AROUND TIME:			ICTIONS: GER	SUFS - Ch	2-										
	ORANGES -	CA	CR.C	VEST- C	12										
X STANDARD	CR. BAY - C	19,	LK.R	IDGE - C	12					1					
D RUSH	LIC CR NINS-	C/2		Hill . C	12 /	0								Į	
	CR.WEST - C	1/2						SRI	10	ES .	br	ł /	66		
WW= waste water SW=surfac	ce water GW≃ground water	DW=drinking wa	ter OIL A=	air SO=s	oil SL	_=sludge	Preserv	Х	Х	X	X	X	$\lambda$	X	1
SAMPLE ID	SAMPLE DESCRIPTION		Grab SAM	PLING TIME	MATRIX	NO. CONT.			·			· · · ·			1
A052850 [635	US 27- (7-11	) (	G 8/10/05	1405	D.W	6		Х							1
	ES-10001 CRENSAR		C 8/9/05	1110		1		$\Delta$	X		<u> </u>				+
flom					DW	6			$\Lambda$						+
A		-De l	6 9/9/us		<u>DW</u>	6	н 1. т								-
	- Row in 222 March	120 11		1160	$\mathbf{D}(\mathbf{u})$	6	2				X				$\downarrow$
	BAY - 10332 MONRA		011	1250	<u>_0.0</u>	PO-				1			1		- 1
AU52854 4K. CR.	Hills - 10351 Thomps	ON LN. E	3 8/9/05	1415	D.W	6				. 		X			_
A052854 4K. CR. A052955 CR. WE.		ON LN. E	S 8/9/05 S 8/9/05			1				. 		X	Х		
A052854 4K. CR. A052855 CR. WE.	Hills - 10351 Thomps	ie rd (	S 8/9/05 S 8/9/05	1415	DW DW	6						X	Х	X	
A052854 4K. CR. A052855 CR. WE. A052856 LIS. RIDE	H, 16 - 1035 1 Thomps ST - 10731 PRIEB SF CWB - 12134 ONTCOM	WE RD (	6 8/9/05 6 8/9/05 6 8/1405	1415 1340	D.W D.W D.W	66						X	X	X	
A052854 4C. CR. WE. A052854 CR. WE. A052856 CR. WE. A052856 4IS. R. R. A052856 AMB 4 I = ICO H = (HCI) S = (H21)	4,16-10351 Thomps ST - 10731 PRIEB	WE RD (	C) 8/9/05 C) 8/1/05 C) 8/1405 C) 8/1405	1415 1340 1525	<u>Α</u> ω <u>Α</u> ω <u>Α</u> ω		Time			Receiv	ed by:		p	X	
A052854 4K. CR. A052855 CR. WE. A052856 LIS. RIDE	H, 16 - 1035 1 Thomps ST - 10731 PRIEB SF CWB - 12134 ONTCOM	WE RD (	$ \begin{array}{c}                                     $	1415 1340 1525 1210	7.00 7.00 7.00 7.00		093			Receiv	ed by:		D S/I	145	C
A052854 4C. CR. WE. A052854 CR. WE. A052856 CR. WE. A052856 4IS. R. R. A052856 AMB 4 I = ICO H = (HCI) S = (H21)	H, 16 - 1035 1 Thomps ST - 10731 PRIEB SF CWB - 12134 ONTCOM	WE RD (	C) 8/9/05 C) 8/1/05 C) 8/1405 C) 8/1405	1415 1340 1525 1210	7.00 7.00 7.00 7.00		093			Receiv	ed by:		D S/I	145	-

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Jeb Bush Governor

Turbidity

Vinyl chloride

Vinyl chloride

Xylene (total)

Xylene (total)

Zinc



John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

Page 4 of 27

#### Laboratory Scope of Accreditation

#### THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

	ASSOCIATED WITH	A VALID CERTIFICATE									
State Laboratory ID: E82574	EPA Lab Co	de: FL00949	(904) 363	-9350							
E82574 Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, FL 32216											
Matrix: Drinking Water			Certification								
Analyte	Method/Tech	Category	Туре	Effective Date							
Silice as SiO2	EPA 200.7	Primary Inorganic Contaminants	NELAP	1/21/2005							
Silver	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002							
Silvex (2,4,5-TP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005							
Simazine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/24/2005							
Sodium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002							
Styrene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002							
Styrene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005							
Sulfate	EPA 375.4	Secondary Inorganic Contaminants	NELAP	2/13/2003							
Surfactants - MBAS	EPA 425.1	Secondary Inorganic Contaminants	NELAP	1/21/2005							
Tetrachloroethylene (Perchloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002							
Tetrachloroethylene (Perchloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005							
Thallium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002							
Toluene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002							
Toluene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005							
Total coliforms	SM 9222 B	Microbiology	NELAP	4/4/2002							
Total coliforms & E. coli	SM 9223 B	Microbiology	NELAP	9/5/2002							
Total haloacetic acids	EPA 552.2	Synthetic Organic Contaminants	NELAP	1/21/2005							
Total trihalomethanes	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002							
Total trihalomethanes	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005							
Toxaphene (Chlorinated camphene)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005							
trans-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002							
trans-1,2-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005							
Trichloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005							
Trichloroethene (Trichloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002							
Trichloroethene (Trichloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005							

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.

EPA 180.1

EPA 502.2

EPA 524.2

EPA 502.2

EPA 524.2

EPA 200.7

NON-TRANSFERABLE 04/24/2005-E82574

7/17/2002

4/4/2002

1/21/2005

4/4/2002

1/21/2005

4/4/2002

NELAP

NELAP

NELAP

NELAP

NELAP

NELAP

Secondary Inorganic Contaminants

Other Regulated Contaminants

Other Regulated Contaminants

Other Regulated Contaminants

Other Regulated Contaminants

Secondary Inorganic Contaminants

TTHMHAA5 REPORTING COMPLIANCE SUMMARY FOR PWSs	MONITORN	IG ANNUALLY	
TTHM COMPLIANCE SUMMARY	· · · · · ·	HAAS COMPLIANCE SUMMARY	
Provide the number of TTHM samples taken during the last year*	1	Provide the number of HAA5 samples taken during the last year*	1
Calculate the arithmetic average of all TTHM samples taken over the last year	57.7	Calculate the arithmetic average all HAA5s samples taken over the last , year	49.1
Does the arithmetic average of the TTHM samples exceed the Maximum Contaminant Level of 0.080 mg/L for TTHMs? (YES/NO)**	NO	Does the arithmetic average of the HAA5 samples exceed the Maximum Contaminant Level of 0.060 mg/L for HAA5e? (YESAS)**	NO

\*Also, for each sample taken during the last year, provide the information requested in the tables on pages 3 and 4 of this format.

\*\*If the TTHM or HAA5 sample (or average of the samples, if more than one sample is taken) exceeds the Maximum Contaminant Level, the system must increase monitoring to one TTHM and one HAA5 sample per treatment plant per quarter, taken at a point in the distribution system reflecting the maximum residence time, until the system meets the criteria in 40 CFR 131.132(b)(1)(iv). Please see 40 CFR 141.132 (b)(1) for complete details.

TOTAL TRIHALOMETHAN								
Semple Lôcation	Sample Location In the Distribution System (Average or Maximum Residence Time)	Date of Sample Collection (mo/da/yr)	Residual (mg/L) at Time of Sample Collection	Name of Person Collecting Sample	Date of Analysis (ma/da/yr)	Analytical Method	Laboritory Name & Certification Number	TTHM Analysis Result (ug/L)
12647 Valencia Drive		8/9/05	1.0	C.Schwades	8/15/05	E502.2	AEL 53076	57.7
				<b>_</b>		<b>_</b>		+
			<u> </u>	<b>_</b>		┨	·	+
		<b> </b>	+			+		<u> </u>
	+		+	+	+			+
	+				+	1		1
		+		1				
		1						
						ļ		
						+		
							+	
L					-			

: · · · · · · · · · · · · · · · · · · ·	Semple Location		Disinfectant					
Semple Location	Sample Location In the Distribution System (Average or Maximum Residence Time)	Date of Sample Collection (mo/da/yr)	Residual (mg/L) at Time of Sample Collection	Name of Person Collecting Sample	Date of Analysis (mo/da/yr)	Analytical Method	Laboratory Name & Certification Number	HAA5 Analysis Result (ug/L)
2647 Valencia Drive	MRT	8/9/05	1.0	C.Schwackes	\$/18/05	E552.2	AEL 53076	49.1
	<u> </u>		<u> </u>	+				
			+	+	<b>_</b>			
					+	+	·	<u> </u>
<u></u>		1						
		<b></b>	+					
		+						
			+					
							+	+
			-+			1		

Page 4 of 5

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- 1

Effective January 2004

# CLERMONT I

25.30.440 (3) CHEMICAL ANALYSES

#### LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440

Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 E-Mail: uif@jag.net

September 15, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. Orlando, FL 32803

Re: 3rd Quarter Nitrate Monitoring Requirements Chapter 62-550 FAC Clermont I PWS ID# 3351582

Dear Mr. Morrison:

Enclosed please find the results of samples taken for the above referenced analysis and system.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, ext. 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

ByX.B

Bryan K. Gongre Assistant Operations Manager

Enclosures

Cc: Bill Coates, Area Manager, UIOF

Page 1 of 1 \`100.0.4.10'operations'660'628-I'3\ 2'2005'3rdQtr No3.Cler.1.2005.doc

# Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATION	N (to be completed by sampler – Please type or print legibly)	
System Name: <u>Clemont</u>	# 1 PWSID. #: 33515	582
System Type (check one):	Nontransient Noncommunity	nmunity
Address: Lake utility Ser	vices, Inc.	
200 Weathersfie	ld Avenue	
City:AHamonte Spring:	State: FL ZIP Code: 327/4	نا
Phone #: 4-07. 869. 1919	Fax #: 40.869.6961	
E-Mail Address:		
•		
SAMPLE INFORMATION (to be completed b	y sampler)	
Sample Number: <u>A053170 - 01</u>	Location Code (If known):	
Sample Date: 8/30/05		· (Circle One)
Sample Location (be specific):	trato distributive system	
	esults for trihalomethanes and haloacetic acids): mg/L Field p	
Sample Type (Check Only One)	Reason(s) for Sample (Check all that apply)	
	Routine Compliance (with 62-550)	380
	Confirmation of MCL Exceedance* Special (not for compliance)	with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites** UViolation Resolution	
Raw (at well or intake)	Clearance (permitting)	d Sample)
Max Residence Time	Other:	
Ave Residence Time	Sampling Procedure Used or Other Comments:	<u></u>
Near First Customer		
*See 62-550.500(6) for requireme NOTE: See 62-550.512(3) for add for nitrate or nitrite MCL e	ditional requirements attach a results page for each site.	and
Sampler's Name: Charles Schwa	de3	
Sampler's Phone #: 407.869.1919	Sampler's Fax #: 407.869.6961	·
Sampler's E-Mail Address:		· · ·
<b>CERTIFICATION</b> (to be completed by s	ampler)	
1. Charles on Schue (Print Name)	incles OPerator	
		le.
	e public water system and sample collection information	15
complete and correct.	1 /11	
Signature:	Date: 9/12/05	

Reporting Format 62-550.730 Effective January 1995, Revised January 2004

Florida Department of Environmental Protection Safe Drinking Water Program Lab	oratory
Reporting Format	-

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	ORY CERTIFICATION		(to be complet	ed by lab - Please ty	vpe or print legibly)			
LabName:	Advanced Environmer	ntal Labs - Orland	do	1	Florida Certification #: E53076			
Address:	528 S. North Lake Blv	d., Suite 1016			ation Expiration Date: 6/30/2006			
-	Altamonte Springs, FL	. 32701			Telephone #: (407) 937-1594			
	INFORMATION (to be	completed by la	<u> </u>		<u></u>			
		bompiotod by id		Data S	ample/a) Bassived: 8/20/2005 2:10:00			
•	rom page 1): ned Report Number or J	oh ID 4053170		Date Sample(s) Received: <u>8/30/2005 3:10:00</u> Sample Number (From page 1) A053170-01				
Group(s) Analyzed Results attached for compliance with cha								
	•							
		Synthetic Organ			Disinfection Byproducts			
L	All 17 Partial	All 30	lovin	All 21	Trihalomethanes Haloacetic Acids			
L	Nitrate				Bromate			
				Radionuclides				
ſ	Asbestos Only			Single Sample	Concentration .			
-				Qtrly Composite				
Were any a	analyses subcontracted	? 🔽 Yes 📋	No					
lf yes, plea	se provide DOH certific	ation number E	82574					
	OH ANALYTE SHEET	FOR EACH SUE	SCONTRACTE	DLAB				
			CERTIFI	CATION				
do HEREB	Print Name)	Laboratory Man	lata are correc	t and uniess noted r LAC).	neet all requirements of the			
Signature:		Wago		Date				
anaivsis rea	provide a valid and cur sults will result in rejection sult in notification of the	on of the report,	possible enfor	cement against the	rrent Analyte Sheet for the attached public water system for failure to sample,			
** Please p	rovide radiological sam	ble dates and lo	cations for eac	h quarter.				
COMPLIAN	CE DETERMINATION	(to be comple	eted by DEP of	DOH)				
Sample Co	llection Info Satisfactory	Yes 🗷	No	Sample Analysis	Info Satisfactory; 🖼 Yes 📓 No			
B Replacer	nent Sample(s) Requested	(circle or highlight g	roup(s) above)	T Revised Repo	rt Requested (circle or highlight group(s) above)			
Addition	al Monitoring Required	(circle or highligh	nt group(s) abo	ove)				
Reason(s):	MCL(s) Exceeded		3 Detection	(s)	incomplete Report			
	Missing Analyte Sh Monther:	eet(s)	Location	Unsatisfactory	Analysis Unsatisfactory			
Person Not	ified:				Date Notified:			
Comments								

07



6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Client:	Utilities, Inc.
Project Name:	Clemont #1
Project Number:	
PWS ID#:	
Attention:	William Coates
Phone Number:	8002721919

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

Report No.:	A053170
Date Sampled:	8/30/2005
Date Received:	8/30/05 15:10
Date Reported:	9/8/2005

#### **Project Description**

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

Project Name: Clemont #1

Approved By:

Myrna Santiago, Laboratory Manager,

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages =

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# Advanced Environmental Laboratories, Inc.

Analytical Report

Inorganic Conta	minants			
Sample Number:	A053170-01	omponing method.		
Site:	POE	Shipping Method:		
Client Sample ID:	1	Sampled Bv:	Chuck Schwades	
PWS ID#:				
Matrix:	Drinking Water	Date/Time Received:	8/30/05 15:10	
Project Name:	Clemont #1	Date/Time Sampled:	08/30/05 8:00	
Client:	Utilities, Inc.	Report No.:	A053170	

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert. #
1040	Nitrate (as N)	10	mg/L	3.1		SM4500NO3-F	0.070	8/31/2005	12:38	E82574
1041	Nitrite (as N)	1.0	mg/L	0.064	U	SM4500NO3-F	0.064	8/31/2005	12:38	E82574

U The compound was analyzed for but not detected. MDL Method Reporting Limit For all Results qualified with an I, the PQL is defined to be 4 times the MDL



Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

Client: UTILITIES, INC. (UTL-A)
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Project name: CLEMONT #1

Date/Time Rcvd: 8/30/05 15.10 Log-in request number: A053170

Received by: RPG

#### Completed by: RPG

## **Cooler/Shipping Information:**

Courier: 🖾 AEL 🗆 Client 🗆 UPS 🗆 Pony Express 🗇 FedEx 🗇 Other (describe):

Type: 🔀 Cooler 🗆 Box 🗆 Other (describe) \_\_\_\_\_

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	1				
Temp (°C)	2				
Temp taken from	Temp blank Cooler	Cooler	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	Temp blank Cooler
Temp measured with	IR gun Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):

### Other Information:

Any discrepancies should be explained in the "Comments" section below.

<u></u>	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?			
3.	Were custody papers properly filled out (ink, signed, match labels)?			
4.	Did all bottles arrive in good condition (unbroken)?			
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?			
6.	Did the sample labels agree with the chain of custody?	1		
7.	Were correct bottles used for the tests indicated?	1		
8.	Were proper sample preservation techniques indicated on the label?	1		
9.	Were samples received within holding times?	1		
10.	Were all VOA vials checked for the presence of air bubbles?			1
11.	Were there air bubbles present in the VOA vials?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE	1		
13.	Was the cooler temperature less than 6°C?	1		
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.			
15.	Were the sample containers provided by AEL?	1		
16.	Were samples accepted into the laboratory?	1		
17.	Was it necessary to split samples into other bottles?		1	

## <u>Kit ID</u>

Comments:

p5

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Chain-of-Custody for AEL Orlando to AEL Jax

AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701

Contact Person: Myrna Santiago

Project #: A053170

CustomerName: Utilities, Inc.

Collector: Chuck Schwades

AEL Jax 6601 Southpoint Parkway Jacksonville, Fl 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde

Check if Rush

Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles	Bottle Type (Pres.)	
A053170-01	1	Nitrate (J)-DW	Drinking Water	8/30/2005	8:00	8/30/05 15:10	9/1/2005		250mL Poły	_
A053170-01	1	Nitrite (J)-DW	Drinking Water	8/30/2005	8:00	8/30/05 15:10	9/1/2005		250mL Poly	

Orlando Relinquisher:

Shipping Receiver: AEL Courier

05 m Date/Time: 8/30

Shipping Relinquisher: AEL Oourier

06

Jacksonville Receiver:

Date/Time:

Page 1 of 1

Li Tampa: 5810-D Breck Li Gainesville: 2106 NW 67th CLIENT NAME:	enridge Parkway, Tampa, FL Place, Suite 7, Gainesville, PBO I	FL 32606 • (352	30-9616 Fax (813 !) 367-1500 Fax (	3) 630-4327 352) 367-0050				A	.05	31	/U	
Utilitic The OF F		Karment	_ <del>7</del> #/			BOTT SIZ	E					•
Utilitics INC. OF FI ADDRESS: 200 WEAtherField	P.O. N	<u>אי<i>צואן א</i> \$2</u> IUMBER / PF	OJECT NUN	IBER:		TYP						ļ
Altamento Spinza El 2	Ave PROJ	ECT LOCATI				A F						L A
ALtamente Springe FL 3, HONE: 407-869-1919 52-	<u> </u>					A C L U Y I	) [					В
CONTACT: BILL COATES	292-03(5 SAMP	PLED BY: Ch	1 - 6	7 /		I E						N U M
	ARKS / SPECIAL INS			Chuple,	_ ر	S D	202					BER
TANDARD			э.									
<b>R</b> IANDARD												
I RUSH							107		-			
								1 1		1		
	round water DW=drinki			SO=soil	SL=si	ludge Prese						
SAMPLE ID SAMPLE DESC		ing water O Grab Composite	SAMPLI			NO. ONT.						
SAMPLE ID SAMPLE DESC		Grab	SAMPLI DATE	NG TIME		NO.	" J" Z					
SAMPLE ID SAMPLE DESC		Grab Composite	SAMPLI DATE	NG M		NO. ONT. 7						
SAMPLE ID SAMPLE DESC		Grab Composite	SAMPLI DATE	NG M		NO. ONT. 7	X					
SAMPLE ID SAMPLE DESC		Grab Composite	SAMPLI DATE	NG M		NO. ONT. 7	X					
SAMPLE ID SAMPLE DESC		Grab Composite	SAMPLI DATE	NG M		NO. ONT. 7	X					
SAMPLE ID SAMPLE DESC		Grab Composite	SAMPLI DATE	NG M		NO. ONT. 7	×					
SAMPLE ID SAMPLE DESC		Grab Composite	SAMPLI DATE	NG M			X					
SAMPLE ID SAMPLE DESC		Grab Composite	SAMPLI DATE	NG M		NO. ONT. 7	X					
SAMPLE ID SAMPLE DESC $W^{\#}3$ $Poc$	CRIPTION	Grab Composite GTHS G	SAMPLI DATE	NG M TIME M			X					
SAMPLE ID SAMPLE ID SAMPLE DESC $\mathcal{W}$ $\mathcal{F}_3$ $\mathcal{P}_0$ $\mathcal{V}$ $\mathcal{F}_3$ $\mathcal{P}_0$ $\mathcal{V}$ $\mathcal{F}_3$ $\mathcal{P}_0$ $\mathcal{V}$ $\mathcal{F}_3$ $\mathcal{P}_0$ $\mathcal{V}$ $\mathcal{F}_3$ $\mathcal{P}_0$ $\mathcal{V}$	CRIPTION	Grab Composite Grad Grad Grad Grad Grad Grad Grad Grad	SAMPLI DATE	NG M TIME M		NO. ONT. 7			ceived by			Time

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Jeb Bush Governor





John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

Laboratory Scope of Accreditation

Page 3 of 27

# THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

#### State Laboratory ID: E82574

EPA Lab Code: FL00949

(904) 363-9350

E82574 Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, FL 32216

Matrix: Drinking Water	Method/Tech	Category	Certification	Effective Date
Analyte			Type NELAP	1/21/2005
Endothall	EPA 548.1	Synthetic Organic Contaminants		
Endrin	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Ethylbenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Ethylbenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
gamma-BHC (Lindane, gamma-Hexachlorocyclohexane)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
leptachlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
leptachlor epoxide	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
leterotrophic plate count	SM 9215 B	Microbiology	NELAP	1/21/2005
lexachlorobenzene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
lexachlorocyclopentadiene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
ron	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
lead	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
Lead	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Magnesium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Aanganese	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
fercury	EPA 245.1	Primary Inorganic Contaminants	NELAP	4/4/2002
Легсигу	SM 3112 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Aethoxychlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
lickel	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
litrate	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
Vitrate-nitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
Vitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
Nitrite as N	SM 4500-NO2 B	Primary Inorganic Contaminants	NELAP	1/21/2005
Ddor	SM 2150 B	Secondary Inorganic Contaminants	NELAP	2/13/2003
Orthophosphate as P	EPA 365.1	Primary Inorganic Contaminants	NELAP	2/13/2003
Orthophosphate as P	SM 4500-P E	Primary Inorganic Contaminants	NELAP	1/21/2005
Dxamyl	EPA 531.1	Synthetic Organic Contaminants	NELAP	4/19/2005
°CBs	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Pentachlorophenol	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
ЪН	EPA 150.1	Primary Inorganic Contaminants,Secondary Inorganic Contaminants	NELAP	4/4/200 <b>2</b>
Picloram	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
otassium	EPA 200.7	Secondary Inorganic Contaminants	NELAP	1/21/2005
Residue-filterable (TDS)	EPA 160.1	Secondary Inorganic Contaminants	NELAP	4/4/2002
Selenium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/17/2002
Selenium	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards. NON-TRANSFERABLE 04/24/2005-E82574

#### LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440

Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 florida@utilitiesinc-usa.com

September 23, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd., Suite 232 Orlando, FL 32803-3767

RE: Total Trihalomethane / Haloacetic Acids Annual Monitoring Clermont #1 - PWS ID 3351582

Dear Mr. Morrison:

Please find the enclosed sample results as specified above for the 2005 monitoring period.

If you should have any questions, please call 407.869.8588, extension 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Bryand. Donge

Bryan K. Gongre Assistant Operations Manager

Enclosure

cc: Bill Coates, UIOF

# Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIC	<b>IN</b> (to be completed by sampler – Please type or print legibly)
System Name: <u>Clermont</u>	#1 PWSID.# 3351582
System Type (check one):	
Address: Lake Utility 5	
200 Weathersfi	
City: <u>Altanaste Spriv</u>	
Phone # 407.669.1919	Fax #:47.869.6961
E-Mail Address:	
SAMPLE INFORMATION (to be completed	
Sample Number. <u>A05285</u>	
Sample Date: <u>R[9[05</u>	Sample Time: 12:20 AM (PM) (Circle One)
	Warren Road, Clermont, FL
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic acids): <u>1.4</u> mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for Sample (Check all that apply)
	Routine Compliance (with 62-550)
	Confirmation of MCL Exceedance* Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**
Raw (at well or intake)	Clearance (permitting)
Max Residence Time	Other:
	Sampling Procedure Used or Other Comments:
Near First Customer	
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for ac for nitrate or nitrite MCL (	iditional requirements attach a results page for each site.
Sampler's Name: Charles Schu	sades
Sampler's Phone #: 4-01.969.1914	3 Sampler's Fax # 407.864.6961
Sampler's E-Mail Address:	
· · · · · · · · · · · · · · · · · · ·	
CERTIFICATION (to be completed by	sampler)
1, <u>Charles Schwades</u>	Operator
(Print Name)	(Print Title)
do HEREBY CERTIFY that the above complete and correct.	ve public water system and sample collection information is
Signature:	bundu Date: <u>9/19/05</u>
Reporting Format 62-550.730	

Effective Ionuani 1005 - Davided Ionuani 2004

Page 1 of 🖁

Florida Department of Environmental Protection Safe Drinking Water Program Labo	ratory
Reporting Format	•

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LABORATORY CERTIFICATION INFORMATION (to be cont ATTACH CURRENT DOH ANALYTE SHEET*	npleted by lab - Please type or	print legibly)
LabName: Advanced Environmental Labs - Orlando	Florida	Certification #: E53076
Address: 528 S. North Lake Blvd., Suite 1016		Expiration Date: 6/30/2006
Altamonte Springs, FL 32701		Telephone #: (407) 937-1594
ANALYSIS INFORMATION (to be completed by lab		
PWS ID (from page 1):	Date Sample	(s) Received: 8/11/2005 1:10:00
Lab Assigned Report Number or Job ID A052852	Sample Number (I	From page 1) A052852-01
Group(s) Analyzed Results attached for compliance with cha	pter 62-550, F.A.C. (check all f	hat apply);
Inorganics Synthetic Organics	Volatile Organics	Disinfection Byproducts
🗌 All 17 🗌 All 30	All 21	Trihalomethanes
Partial All Except Dioxin	Partial	Haloacetic Acids
🗌 Nitrate 🔄 Partial	Radionuclides	Bromate
🗋 Nitrite 🚺 Dioxin Only	Single Sample	Chlorite
Asbestos Only	Qtrly Composite**	Secondaries
	La any composito	
Were any analyses subcontracted? 🛛 Yes 📋 No		
If yes, please provide DOH certification number E82574		
ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRA	CTED LAB	
CERT	TIFICATION	
I, Myrna Santiago , Laboratory Manager	,	
(Print Name)		
do HEREBY CERTIFY that all attached analytical data are co National Environmental Laboratory Accreditation Conference	rrect and unless noted meet al (NELAC).	I requirements of the
Signature:	Date:	9/2/05
* Failure to provide a valid and current Florida DOH lab certifi analysis results will result in rejection of the report, possible er and may result in notification of the DOH Bureau of Laboratom	nforcement against the public v	nalyte Sheet for the attached water system for failure to sample,
** Please provide radiological sample dates and locations for	each quarter.	
COMPLIANCE DETERMINATION (to be completed by DE	P or DOH)	
Sample Collection Info Satisfactory 🔳 Yes 🗐 No	Sample Analysis Info Sa	atisfactory: 🔳 Yes 🔳 No
Replacement Sample(s) Requested (circle or highlight group(s) abortion in the second secon	ve) 🗿 Revised Report Reque	ested (circle or highlight group(s) above)
Additional Monitoring Required (circle or highlight group(s)	above)	
	ction(s)	Incomplete Report
	tion Unsatisfactory	Analysis Unsatisfactory
		Analysis Unsatisfactory
Missing Analyte Sheet(s)     Deter:	tion Unsatisfactory	Analysis Unsatisfactory  Notified:
Missing Analyte Sheet(s)     Dther: Person Notified: Comments	tion Unsatisfactory	



6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Client: Utilities, Inc. Project Name: Clemont #1 Project Number: PWS ID#:

Attention:William CoatesPhone Number:8002721919

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

 Report No.:
 A052852

 Date Sampled:
 8/9/2005

 Date Received:
 8/11/05 13:10

 Date Reported:
 9/2/2005

#### **Project Description**

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

Project Name: Clemont #1

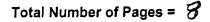
Approved By:

#### 

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.



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## Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Utilities, Inc. Project Name: Clemont #1

Matrix: Drinking Water

#### PWS ID#:

#### Client Sample ID: 3

Site: 12231 Warren Dr

Sample Number: A052852-01

Report No.: A052852 Date/Time Sampled: 08/09/05 12:20 Date/Time Received: 8/11/05 13:10

Sampled By: Client Shipping Method: AEL Courier

#### **Disinfection Byproducts**

Contam ID	Contam Name	MCL	Units	Analysia Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab
2450	Chieroscetic Acid		ug/L	0.81	U	E552.2	0.81	8/18/2005	17:18	E82574
2451	Dichloroacetic Acid		սց/Լ	15		E552.2	0.56	8/18/2005	17:16	E82574
2452	Trichloroacetic Acid		ug/L	17		E552.2	0.60	8/18/2005	17:16	E82574
2453	Bromoacetic Acid		ug/L	1.6		E552.2	0.34	8/18/2005	17:16	E82574
2454	Dibromoacetic Acid		ug/L	3.7		E552.2	0.45	8/18/2005	17:16	E82574
2941	Chloroform		ug/L	26		E502.2	0.31	8/15/2005	14:26	E82574
2942	Bromoform		ug/L	0.36	U	E502.2	0.36	8/15/2005	14:26	E82574
2943	Bromodichioromethane		ug/L	B.0		E502.2	0.38	8/15/2005	14:26	E82574
2944	Dibromochloromethane		ug/L	2.1		E502.2	0.28	8/15/2005	14:26	E82574

U The compound was analyzed for but not detected.

MDL Method Reporting Limit For all Results qualified with an I, the PQL is defined to be 4 times the MDL.



Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

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Client:	UTILITIES, INC	C. (UTL-A)	Project name: CLEMONT #1
Date/Time Rcvd:	8/11/05	13.10	Log-In request number: A052852
Received by:	RPG		Completed by: RPG

Cooler/Shipping Information:

Courier: 🛛 AEL 🗆 Client 🗖 UPS 🗇 Pony Express 🗇 FedEx 🗇 Other (describe): \_\_\_\_\_

Type: ☑ Cooler □ Box □ Other (describe) \_\_\_

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	1				
Temp (°C)	2				
Temp taken from	Temp blank     Cooler	Temp blank Cooler	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	Temp blank Cooler	Temp blank Cooler
Temp measured with	IR gun Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	IR gun     Thermometer (enter     ID):

#### Other Information:

Any discrepancies should be explained in the "Comments" section below.

·	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?	1		1
2.	Were custody papers properly included with samples?	1		
3.	Were custody papers properly filled out (ink, signed, match labels)?	1		· · ·
4.	Did all bottles arrive in good condition (unbroken)?	1		
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?	1		
6.	Did the sample labels agree with the chain of custody?	1		
7.	Were correct bottles used for the tests indicated?	1		
8.	Were proper sample preservation techniques indicated on the label?			
9.	Were samples received within holding times?	1		
10.	Were all VOA vials checked for the presence of air bubbles?			1
11.	Were there air bubbles present in the VOA vials?			1.
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE	1		
13.	Was the cooler temperature less than 6°C?	1		
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.			
15.	Were the sample containers provided by AEL?	1		
16.	Were samples accepted into the laboratory?			
17.	Was it necessary to split samples into other bottles?		1	

#### <u>Kit ID</u>

Comments:

Chain-of-Custody for AEL Orlando to AEL Jax

AEL Jax 6601 Southpoint Parkway Jacksonville, FI 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde

**Check if Rush** 

AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701

Contact Person: Myrna Santiago

Project #: A052852 CustomerName: Utilities, Inc. Collector: Client

Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles	Bottle Type (Pres.)
A052852-01	3	550 Haloacetic Acids (J)-55	Drinking Water	8/9/2005	12:50	8/11/05 13:10	8/23/2005	·	40mL Vial Amber
A052852-01	3	THMs (DW)	Drinking Water	8/9/2005	12:50	8/11/05 13:10	8/23/2005		40mL VOC vial

Orlando Relinguisher Shipping Relinquisher: AEL Courier

Jacksonville Receiver:

Shipping Receiver: AEL\_Courier Date/Time:

Date/Time: SIL 60

Page 1 of 1

Advanced Environmental Laboratories, Inc.	CHAIN OF CUSTODY RECORD		LABN	UMBER	1: A0 <sup>5</sup>	5285	D		
Tampa: 5810-D Breckenridge	way, Jacksonville, FL 32216 • (904) 363-9350 Fax (904) 363-9354 Parkway, Tampa, FL 33610 • (813) 630-9616 Fax (813) 630-4327 Suite 7, Gainesville, FL 32606 • (352) 367-1500 Fax (352) 367-0050				Pa	age	2	_ of	2
CLIENT NAME:	PROJECT NAME:	BOTTLE							
UTILITIES INC		& TYPE							
ADDRESS: 200 WEATHERS FIELD AVI	P.O. NUMBER / PROJECT NUMBER:	AR							
ALTAMONTE SPRINGS AL 32714 PHONE: FAX:	PROJECT LOCATION:	N E A Q L U Y I	TT	HM.	5+	H A,	hs,	/	B
407-569-1919 407-569-696	)	SR			1				U M
CONTACT: B.C. CONTES	SAMPLED BY:	SD							B
TURN AROUND TIME: REMARK Standard RUSH Vi'Sta	s/special instructions: #/ CL2 1.4 <del>e/Kes-C12</del> •S		SAM	PLES	an	IC.			R
WW= waste water SW=surface water GW=ground	vater DW=drinking water OIL A=air SO=soil SL=sludge	Preserv	$X \rangle$						
SAMPLE ID SAMPLE DESCRIPT	ION Grab Composite DATE TIME MATRIX CONT.								
AD52852 CLERA#1 -122.31 4			X.			1	<b>-</b>		
Four LAKES -16040				r		1			
		-				1	•	1	2
8052858 VISTAS - 1402 LAN	C PIIST LN; (- 710/05 1730 DW G			-			<u> </u>		
						<b></b>			
				_	_				
						1		-	
I = Ice H = (HCI) S = (H <sub>2</sub> SO <sub>4</sub> ) N = (HNO <sub>3</sub> )	T = (Sodium Thiosulfate) Relinquished by: Date	Time		Herein	ved by:		 г	) Date	Time
		0940	A			)	<b>N</b>	_	740
Out: / / Via: RB//T.	2 DA Inos	1510	P	1	$\rightarrow$		1	1/05	
Snipment     Method     Sample Kit     Coo       Out:     /     Via:     RB     D/T.       AB     D/T.     AB     D/T.       Ret:     /     Via:     Trip Bl.	3		Ý						

Jeb Bush Governor



John O. Agwunobl, M.D., M.B.A., M.P.H.

Secretary

Laboratory Scope of Accreditation

Page 4 of 27

# THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code: FL00949

(904) 363-9350

E82574

Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, FL 32216

Matrix: Drinking Water Analyte	Method/Tech	Category	Certification Type	Effective Date
Silica as SiO2	EPA 200.7	Primary Inorganic Contaminants	NELAP	1/21/2005
Silver	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Silvex (2,4,5-TP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Simazine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/24/2005
Sodium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Styrene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Styrene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Sulfate	EPA 375.4	Secondary Inorganic Contaminants	NELAP	2/13/2003
Surfactants - MBAS	EPA 425.1	Secondary Inorganic Contaminants	NELAP	1/21/2005
Tetrachloroethylene (Perchloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Tetrachloroethylene (Perchloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Thallium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
Toluene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Foluene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Total coliforms	SM 9222 B	Microbiology	NELAP	4/4/2002
Total coliforms & E. coli	SM 9223 B	Microbiology	NELAP	9/5/2002
Fotal haloacetic acids	EPA 552.2	Synthetic Organic Contaminants	NELAP	1/21/2005
Total trihalomethanes	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Fotal trihalomethanes	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Toxaphene (Chlorinated camphene)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
trans-1,2-Dichloroethylene	EPA 502.2-	Other Regulated Contaminants	NELAP	4/4/2002
rans-1,2-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Frichloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
Trichloroethene (Trichloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Trichloroethene (Trichloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Furbidity	EPA 180.1	Secondary Inorganic Contaminants	NELAP	7/17/2002
vinyl chloride	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Vinyl chloride	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Xylene (total)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Xylene (total)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Zinc	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards. NON-TRANSFERABLE 04/24/2005-E82574

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TTHMHAA5 REPORTING COMPLIANCE SUMMARY FOR PWSs	MONITORIN	IG ANNUALLY	
TTHM COMPLIANCE SUMMARY		HAAS COMPLIANCE SUMMARY	ان کر مشتخص
Provide the number of TTHM samples taken during the last year*	1	Provide the number of HAA5 samples taken during the last year*	1
Calculate the arithmetic average of all TTHM samples taken over the last	1 36.1	Calculate the arithmetic average all HAA5s samples taken over the last year	37.3
year Does the arithmetic average of the TTHM samples exceed the Maximum Contaminant Level of 0.080 mg/L for TTHMs? (YES/SD)**	NO	Does the arithmetic average of the HAA5 samples exceed the Maximum Contaminant Level of 0.060 mg/L for HAA5e? (YESALO)**	NO

\*Also, for each sample taken during the last year, provide the information requested in the tables on pages 3 and 4 of this format. \*\*If the TTHM or HAA5 sample (or average of the samples, if more than one sample is taken) exceeds the Maximum Contaminant Level, the system must increase monitoring to one TTHM and one HAA5 sample per treatment plant per quarter, taken at a point in the distribution system reflecting the maximum residence time, until the system meets the criteria in 40 CFR 131.132(b)(1)(iv). Please see 40 CFR 141.132 (b)(1) for complete details.

TOTAL TRIHALOMETHAN	A AND A AND	No						
Sample Löcation	Sample Location in the Distribution System (Average or Maximum Residence Time)	Date of Sample Gollection (ma/da/yr)	Disinfectant Residual (mg/L) at Time of Sample Collection	Name of Person Collecting Sample	Date of Analysis (ma/de/yr)	Analytical Method	Laboritory Hidnie & Certification Number	TTHM Analysis Result (ug/L)
12231 warren Road	MRT	8/9/05	1.4	C. Schundes	8/15/05	E502.2	AEL ES3076	36.1
					<b>}</b>			
				+		+	·	
		1	+	1		1		
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ALOACETIC ACIDS 5 (HAA5) ANALYSIS RESULTS FOR REPORTING PERIOD											
Sample Location	Semple Location in the Distribution System (Average or Maximum Residence Time)	Date of Sample Collection (mo/de/yr)	Residual (mg/L) at Time of Semple Collection	Name of Person Collecting Sample	Date of Analysis (mo/de/yr)	Analytical Method	Laboratory Name & Certification Number	HAA5 Analysis Result (ug/L)			
231 Warren Road	MRT	8/9/05	1.4	C. Schwacks	8/18/05	E552.1	AEL E53076	37.3			
							•••••				
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				-+							
								+			

Page 4 of 5

Effective January 2004

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#### LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES, INC.

200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440

Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 E-Mail: uif@iag.net

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December 7, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. Orlando, FL 32803

Re: 4th Quarter Nitrate Monitoring Requirements Chapter 62-550 FAC Clermont I PWS ID# 3351582

Dear Mr. Morrison:

Enclosed please find the results of samples taken for the above referenced analysis and system.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, ext. 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Brign N. Dig

Bryan K. Gongre Assistant Operations Manager

Enclosures

625 L .3. (2003)

Cc: Bill Coates, Area Manager, UIOF

Page 1 of 1 \*100.0.4.10%perations%660%628-P3%2%2005%4thQtr.No3.CTer.L2005.doc

# Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIO	N (to be completed by sampler - Please typ	e or print legibly)
System Name: <u>Clermont</u> *	•   PWS I.D	#3351582
System Type (check one): 🛛 🕅 Community	Nontransient Noncommunity	Transient Noncommunity
Address: Lake Utility Services	•	- •
	venue	
City: Altamante Springs		
Phone #: 4-01.869.1919		
E-Mail Address: <u>b.K.gongre@u</u>		
SAMPLE INFORMATION (to be completed	by sampler)	
Sample Number: <u>A054716-0</u>		lown):
Sample Date:	Sample Time:	9 30 AM PM (Circle One)
Sample Location (be specific): Entry Point		
Disinfectant Residual (Required when reporting		
Sample Type (Check Only One)	Reason(s) for Sa	mple (Check all that apply)
	Routine Compliance (with 62-550)	Quarterly (Which Quarter? 4+
	Confirmation of MCL Exceedance*	Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**	☐ Violation Resolution
Raw (at well or intake)	Clearance (permitting)	Replacement (of Invalidated Sample)
 Max Residence Time	Other:	
Ave Residence Time	Sampling Procedure Used or Other Co	mments:
Near First Customer		
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for ac for nitrate or nitrite MCL	Iditional requirements attach	2-550.550(4) for requirements and a results page for each site.
Sampler's Name:	des	
Sampler's Phone #:869.1919	Sampler's Fax #:	407.869.6961
Sampler's E-Mail Address:		
CERTIFICATION (to be completed by a	sampler)	
Maria Columna	le a t	1 Corrado -
1, Charles G. Schurdes (Print Name)	, <u>LC.</u> , (	(Print Title)
do HEREBY CERTIFY that the above complete and correct?	e public water system and samp	le collection information is
Signature:	Columber	Date: <u>/2/6/05<sup>-</sup></u>
		· · /

Reporting Format 62-550.730 Effective January 1995, Revised January 2004

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	nt of Environmental Pro Repo	orting Format	
LABORATORY CERTIFICA ATTACH CURRENT DOH A		mpleted by lab - Please type or	print legibly)
LabName: Advanced Enviro	onmental Labs - Orlando	Florida	Certification #: E53076
Address: 528 S. North Lak	e Blvd., Suite 1016	Certification I	Expiration Date: 6/30/2006
Altamonte Spring	gs, FL 32701		Telephone #: (407) 937-1594
ANALYSIS INFORMATION	to be completed by lab		
PWS ID (from page 1):		Date Sample	(s) Received: 11/15/2005 4:40:00
Lab Assigned Report Numbe	er or Job ID A054716	Sample Number (	From page 1) A054716-01
	•	napter 62-550, F.A.C. (check all	that apply):
Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts
All 17	All 30	All 21	Trihalomethanes
Partial	All Except Dioxin	Partial	Haloacetic Acids
Vitrate	Partial	Radionuclides	Bromate
Nitrite	Dioxin Only	Single Sample	Chlorite
<ul> <li>Asbestos Only</li> </ul>		Qtrly Composite**	Secondaries
			- All 14
Vere any analyses subcontra	acted? ✔ Yes No		Partial
• • • •	ertification number E84589 IEET FOR EACH SUBCONTR		
• • •	EET FOR EACH SUBCONTR	ACTED LAB	
ATTACH DOH ANALYTE SH , Myrna Santiago (Print Name)	IEET FOR EACH SUBCONTR CEF , Laboratory Manager	RTIFICATION	
ATTACH DOH ANALYTE SH , Myrna Santiago (Print Name) to HEREBY CERTIFY that a	IEET FOR EACH SUBCONTR CEF , Laboratory Manager	RTIFICATION correct and unless noted meet al e (NELAC).	
ATTACH DOH ANALYTE SH Myrna Santiago (Print Name) to HEREBY CERTIFY that a National Environmental Labor Signature:	IEET FOR EACH SUBCONTR CEF , Laboratory Manager Il attached analytical data are of ratory Accreditation Conference www.cefut	RTIFICATION correct and unless noted meet al e (NELAC). Date:	11-28-05
ATTACH DOH ANALYTE SH Myrna Santiago (Print Name) to HEREBY CERTIFY that a National Environmental Labor Signature:	IEET FOR EACH SUBCONTR CEF , Laboratory Manager Il attached analytical data are of ratory Accreditation Conference Accreditation Conference Manufacture Florida DOH lab cert	RTIFICATION correct and unless noted meet al e (NELAC). Date: ification number and a current A enforcement against the public v	1/- 28-05
ATTACH DOH ANALYTE SH Myrna Santiago (Print Name) to HEREBY CERTIFY that a National Environmental Labor Signature: Failure to provide a valid ar inalysis results will result in ro ind may result in notification	IEET FOR EACH SUBCONTR CEF , Laboratory Manager Il attached analytical data are of ratory Accreditation Conference Accreditation Conference Manufacture and current Florida DOH lab cert ejection of the report, possible	RTIFICATION correct and unless noted meet al e (NELAC). Date: ification number and a current A enforcement against the public to by Services.	//- 28-05 inalyte Sheet for the attached water system for failure to sample,
ATTACH DOH ANALYTE SH Myrna Santiago (Print Name) Io HEREBY CERTIFY that a National Environmental Labor Signature: Failure to provide a valid ar nalysis results will result in ro nd may result in notification * Please provide radiological	IEET FOR EACH SUBCONTR CEF , Laboratory Manager II attached analytical data are of ratory Accreditation Conference www.current d current Florida DOH lab cert ejection of the report, possible of the DOH Bureau of Laborato sample dates and locations for	RTIFICATION correct and unless noted meet all e (NELAC). Date: ification number and a current A enforcement against the public to ory Services. or each quarter.	1/- 28-05 Inalyte Sheet for the attached water system for failure to sample
ATTACH DOH ANALYTE SH Myrna Santiago (Print Name) Io HEREBY CERTIFY that a National Environmental Labor Signature: Failure to provide a valid ar nalysis results will result in ro nd may result in notification * Please provide radiological COMPLIANCE DETERMINAT	IEET FOR EACH SUBCONTR CEF , Laboratory Manager Il attached analytical data are of ratory Accreditation Conference atory Acc	RTIFICATION correct and unless noted meet all e (NELAC). Date: ification number and a current A enforcement against the public to ory Services. or each quarter.	1/- 28-05 Inalyte Sheet for the attached water system for failure to sample
ATTACH DOH ANALYTE SH Myrna Santiago (Print Name) Io HEREBY CERTIFY that a lational Environmental Labor Signature: Failure to provide a valid ar nalysis results will result in re nd may result in notification Please provide radiological COMPLIANCE DETERMINAT ample Collection info Satisfa	IEET FOR EACH SUBCONTR CEF , Laboratory Manager Il attached analytical data are of ratory Accreditation Conference atory Acc	RTIFICATION correct and unless noted meet al e (NELAC). Date: ification number and a current A enforcement against the public to ory Services. or each quarter. EP or DOH) Sample Analysis Info Sa	1/-28-05 Inalyte Sheet for the attached water system for failure to sample attisfactory: Yes No
ATTACH DOH ANALYTE SH Myrna Santiago (Print Name) Io HEREBY CERTIFY that a National Environmental Labor Signature: Failure to provide a valid ar nalysis results will result in ro nd may result in notification Please provide radiological COMPLIANCE DETERMINAT ample Collection Info Satisfa Replacement Sample(s) Require	IEET FOR EACH SUBCONTR CEF , Laboratory Manager Il attached analytical data are of ratory Accreditation Conference www.dudy add current Florida DOH lab cert ejection of the report, possible of the DOH Bureau of Laborato sample dates and locations for TION (to be completed by D actory Yes No	RTIFICATION correct and unless noted meet all e (NELAC). ification number and a current A enforcement against the public to ory Services. or each quarter. EP or DOH) Sample Analysis Info Sa pove) Revised Report Reque	1/-28-05 Inalyte Sheet for the attached water system for failure to sample, attisfactory: Yes No
ATTACH DOH ANALYTE SH Myrna Santiago (Print Name) Io HEREBY CERTIFY that a lational Environmental Labor Signature: Failure to provide a valid ar nalysis results will result in re nd may result in notification Please provide radiological COMPLIANCE DETERMINAT ample Collection Info Satisfa Replacement Sample(s) Require Additional Monitoring Require	IEET FOR EACH SUBCONTR CEF , Laboratory Manager II attached analytical data are of ratory Accreditation Conference www.uc.uc.uc.uc.uc.uc.uc.uc.uc.uc.uc.uc.uc.	RTIFICATION correct and unless noted meet all e (NELAC). ification number and a current A enforcement against the public to ory Services. or each quarter. EP or DOH) Sample Analysis Info Sa pove) Revised Report Reque	1/-28-05 Inalyte Sheet for the attached water system for failure to sample attisfactory: Yes No
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ATTACH DOH ANALYTE SH Myrna Santiago (Print Name) Io HEREBY CERTIFY that a National Environmental Labor Signature: Failure to provide a valid ar nalysis results will result in ro nd may result in notification Please provide radiological COMPLIANCE DETERMINAT ample Collection Info Satisfa Replacement Sample(s) Require Additional Monitoring Require ason(s): MCL(s) Exceet Missing Analy Other:	IEET FOR EACH SUBCONTR CEF , Laboratory Manager Il attached analytical data are of ratory Accreditation Conference www.uc.uc. but current Florida DOH lab cert ejection of the report, possible of the DOH Bureau of Laborato sample dates and locations for TION (to be completed by D actory Yes No ested (circle or highlight group(s) at uired (circle or highlight group(s)	RTIFICATION correct and unless noted meet all e (NELAC). ification number and a current A enforcement against the public to ory Services. or each quarter. EP or DOH) Sample Analysis Info Sa nove) Revised Report Reque s) above) ection(s) ation Unsatisfactory	1/- 28-05 Inalyte Sheet for the attached water system for failure to sample atisfactory: Yes No ested (circle or highlight group(s) above
ATTACH DOH ANALYTE SH Myrna Santiago (Print Name) to HEREBY CERTIFY that a National Environmental Labor Signature: Failure to provide a valid ar inalysis results will result in ru ind may result in notification * Please provide radiological COMPLIANCE DETERMINAT Sample Collection Info Satisfa Replacement Sample(s) Require Additional Monitoring Require teason(s): MCL(s) Exceet Missing Analy	IEET FOR EACH SUBCONTR CEF , Laboratory Manager Il attached analytical data are of ratory Accreditation Conference www.uc.uc. but current Florida DOH lab cert ejection of the report, possible of the DOH Bureau of Laborato sample dates and locations for TION (to be completed by D actory Yes No ested (circle or highlight group(s) at uired (circle or highlight group(s)	RTIFICATION correct and unless noted meet all e (NELAC). ification number and a current A enforcement against the public to ory Services. or each quarter. EP or DOH) Sample Analysis Info Sa nove) Revised Report Reque s) above) ection(s) ation Unsatisfactory	11-28-05 Inalyte Sheet for the attached water system for failure to sample, atisfactory: Yes No ested (circle or highlight group(s) above Incomplete Report Analysis Unsatisfactory

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P2



6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Client:	Utilities, Inc.	Report No.:	A054716
Project Name:	Clemont #1	Date Sampled:	11/15/2005
Project Number:		Date Received:	11/15/05 16:40
PWS ID#:		Date Reported:	11/25/2005
Attention:	William Coates		
Phone Number:	8002721919		
Address:	200 Weathersfield Ave.		

Altamonte Springs, FL 32714

# Project Description

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

Project Name: Clemont #1

Approved By: Myrna Santlago, Laboratory Manager

If there are any questions involving this report, the above named should be contacted.

#### THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages =

# Advanced Environmental Laboratories, Inc.

Analytical Report

	Client: Utilities, Inc.							Report N	<b>o.:</b> A054	1716
Proje	ect Name: Clemont #1							Date/Time Sample	ed: 11/15	/05 9:30
	Matrix: Drinking Water							Date/Time Receiv	ed: 11/15	/05 16:40
P	PWS ID#:									
<b>Client Sa</b>	mple ID: 1							Semaled <b>D</b>	Church	Caburadaa
	Site: POE							Sampled By Shinning Mathe	•	Schwades
Sample	Number: A054716-01							Shipping Metho	oa: Client	arop on
Inorgan	ic Contaminants									
Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert. #
1040	Nitrate (as N)	10	mg/L	4.9		SM4500NO3-F	0.14	11/17/2005	9:32	E84589

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MDL Method Reporting Limit For all Results qualified with an I, the PQL is defined to be 4 times the MDL

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Client: _	JTILITIES, INC. (UT	ſL-A)	Project name:	CLEMONT #1	
Date/Time Rcvd:	11-15-05	16:40	Log-In request number: _	A054716	
Received by:	MS		Completed by:	<u> </u>	
Cooler/Shippin				0	

Courier: AEL Defient UPS Pony Express E FedEx Other (describe):

Type: 🛛 Cooler 🗆 Box 🗇 Other (describe) \_\_\_\_\_

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	1				
Temp (°C)	Ø.				
Temp taken from	Temp blank Cooler	Temp blank Cooler	Temp blank     Cooler	Temp blank     Cooler	Temp blank Cooler
Temp measured with	☐ IR gun ☐ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	<ul> <li>IR gun</li> <li>Thermometer (enter</li> <li>ID):</li> </ul>	<ul> <li>IR gun</li> <li>Thermometer (enter ID):</li> </ul>

#### **Other Information:**

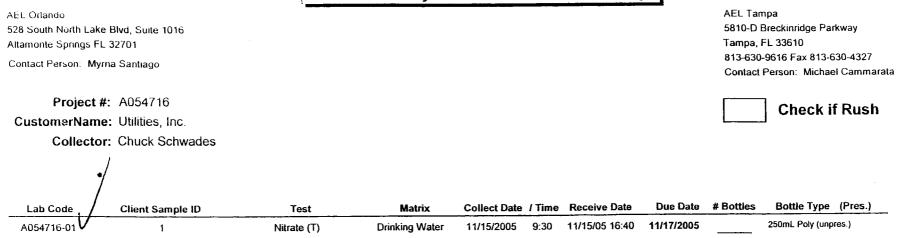
Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			
2.	Were custody papers properly included with samples?			
3.	Were custody papers properly filled out (ink, signed, match labels)?			
4.	Did all bottles arrive in good condition (unbroken)?			
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?			
6.	Did the sample labels agree with the chain of custody?			
7.	Were correct bottles used for the tests indicated?			
8.	Were proper sample preservation techniques indicated on the label?	1		
9.	Were samples received within holding times?	1		
10.	Were all VOA vials checked for the presence of air bubbles?			1
11.	Were there air bubbles present in the VOA vials?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE			
13.	Was the cooler temperature less than 6°C?			
14.	Were sample pHs checked and recorded by Sample control?			1
	NOTE: VOA samples are checked by laboratory analysts.			<i>.</i>
15.	Were the sample containers provided by AEL?	1		
16.	Were samples accepted into the laboratory?			
17.	Was it necessary to split samples into other bottles?		1	

Kit ID

**Comments:** 

Chain-of-Custody for AEL Orlando to AEL Tampa



Orlando Relinquisher:

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C. Fer puron

She trick Shipping Receiver: AEL Courier

Shipping Relinquisher: AEL Courier

Tampa Receiver:

Date/Time: 11-16-05 17:00 Date/Time: 11-17-05 17:9:00

Page 1 of 1

	🚽 Tampa:	5810-D Bred	kenridge Parkwa	y, Tampa, FL 3	33610 • (813)	) 363-9350 Fax ( ) 630-9616 Fax (8 352) 367-1500 Fa	313) 630-4327	0		A	05	4	71	6		 of	
CLIENT NAME:				PROJE	ECT NAM	E:					•••				-		
UtiLi-	ris In	i of fl	~ .							& TYPE	ļ			Ì			
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LI RUSH	SW=surface	water GW		<b>DW</b> =drinki	ing water Grab Composite	SAM	air <b>SO</b> =si PLING TIME	oil SI MATRIX			TI XX A						
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URUSH	SW=surface	SAMPLE DE		DW=drinki	Grab Composite	SAMI DATE	PLING TIME	MATRIX	, NO.		V 2 12 / 12 .						1
URUSH	SW=surface	SAMPLE DE	SCRIPTION		Grab Composite	SAMI ■ DATE   -15 งร	PLING TIME of 30	MATRIX						ed by:			/ 
URUSH WW= waste water SAMPLE ID SAMPLE ID	SW=surface $(L_X) M1$ $(H_2SC)$ Method S	SAMPLE DE	SCRIPTION	Sodium Thios	Grab Composite	SAMI ■ DATE   -15 งร	PLING TIME		, NO.	Time		F	leceive			ate	/ / Time





Page 1 of 4

### Laboratory Scope of Accreditation

#### THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E84589

EPA Lab Code: FL01092

(813) 630-9616

E84589 Advanced Environmental Laboratories, Inc. - Tampa

9610 Princess Palm Avenue Tampa, FL 33619

Matrix: Drinking Water

Analyte	Method/Tech	Category	Certification Type	Effective Date
Alkalinity as CaCO3	SM 2320 B	Primary Inorganic Contaminants	NELAP	10/1 1/2002
Amenable cyanide	SM 4500-CN G	Primary Inorganic Contaminants	NELAP	10/11/2002
Bromide	EPA 300.0	Primary Inorganic Contaminanta	NELAP	10/11/2002
Chloride	EPA 300.0	Secondary Inorganic Contaminants	NELAP	10/1 1/2002
Chloride	SM 4500 CI- B	Secondary Inorganic Contaminanta	NELAP	10/11/2002
Chloritz	EPA 300.0	Primary inorganic Contaminants	NELAP	8/20/2003
Color	EPA 110.2	Secondary Inorganic Contaminants	NELAP	10/11/2002
Conductivity	SM 2510 B	Primary Inorganic Contaminants	NELAP	10/11/2002
Cyanide	SM 4500-CN E	Primary Inorganic Contaminants	NELAP	10/11/2002
Fecal coliforms	SM 9221 B	Microbiology	NELAP	2/14/2003
Fluoride	BPA 300.0	Primary Inorganic Contaminanta	NELAP	10/11/2002
Fluoride	SM 4500 F-C	Primary Inorganic Contaminants, Secondary Inorganic Contaminànts	NELAP	10/11/2002
Heterotrophic plate count	SM 9215 B	Microbiology	NELAP	10/11/2002
Nitrate	EPA 300.0	Primary Inorganic Contaminants	NELAP	10/11/2002
Nitrate	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	10/11/2002
Nitrate-nitrite	EPA 300.0	Primary Inorganic Contaminants	NELAP	10/1 1/2002
Nitrite	EPA 300.0	Primary Inorganic Contaminants	NBLAP	10/11/2002
Nitrite	SM 4500-NO3 F	Primary inorganic Contaminanta	NELAP	10/11/2002
Odor	SM 2150 B	Secondary Inorganic Contaminants	NELAP	10/11/2002
Orthophosphate as P	<b>BPA 300.0</b>	Primary Inorganic Contaminants	NELAP	10/11/2002
Orthophosphate as P	EPA 365.1	Primary Inorganic Contaminants	NELAP	10/11/2002
p <b>H</b>	BPA 150.1	Secondary Inorganic Contaminants	NELAP	10/11/2002
luifate	EPA 300.0	Primary Inorganic Contaminants	NELAP	10/11/2002
Sulfate	EPA 375.4	Secondary Inorganic Contaminants	NELAP	10/11/2002
Surfactants - MBAS	EPA 425.1	Secondary Inorganic Contaminants	NELAP	10/11/2002
Total coliforms	SM 9222 B	Microbiology	NELAP	2/14/2003
otal coliforms & E. coli	SM 9223 B	Microbiology	NELAP	2/14/2003
otal dissolved solids	EPA 160.1	Secondary Inorganic Contaminants	NELAP	10/11/2002
otal nitrate-nitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	10/11/2002
otal organic carbon	SM 5310B	Primary Inorganic Contaminants	NELAP	10/11/2002
urbidity	BPA 180.1	Secondary Inorganic Contaminants	NELAP	10/11/2002
		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · ·	

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards. NON-TRANSFERABLE 07/01/2004-E8458

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## CLERMONT II

25.30.440 (3) CHEMICAL ANALYSES

## LAKE UTILITY SERVICES, INC.

200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440 Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 E-Mail: uif@iag.net

February 18, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. Orlando, FL 32803

Re: Xylenes Monitoring Requirements Chapter 62-550 FAC Clermont II PWS ID# 3350153

Dear Mr. Morrison:

Enclosed please find the annual sample results taken for the above referenced analysis and system.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, extension. 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Buyn X. 2

Bryan K. Gongre Assistant Operations Manager

Enclosures

#### 02/01/2005 17:20 #174 P.001/007



Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, Florida 32218 (904) 363-9350 FAX (904) 363-9354

Client:	Utilities, Inc.	Report No.:	T050815
Project Name:	Clermont #2	Date Sampled:	1/26/2005
Project Number:		Date Received	1/27/05 10:40
PWS ID#:		Date Reported	: 2/1/2005
Attention:	Dan Sherwood		
Phone Number:	8002721919		

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

#### **Project Description**

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

Project Name: Clermont #2

Approved By:

MMI 774 

If you have any questions, the above named should be contacted.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages =

From: ADVANCED ENVIRONMENTAL LABS 813 630 4327

02/01/2005 17:21 #174 P.003/007

## Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIO	DN (to be completed by sampler - Please type or print legibly)
System Name: <u>Clermon</u>	+ #2 PWS1.D.#3350153
System Type (check one): 🛛 🖾 Communit	y Nontransient Noncommunity Transient Noncommunity
Address: 200 weathersfield	
City: <u>CLERMONT</u> Altamonte	Springs State: FL ZIP Code: 32714
Phone #: 407- 869- 1919	Fax#: 407-869-696/
E-Mail Address:	
SAMPLE INFORMATION (to be completed	l bu complex)
Sample Number: T050815-DI	Location Code (If known): <u>P.O.E</u>
Sample Date: 1/26/2005	Sample Time: <u>/O.'45</u> (AM) PM (Circle One)
•	nt to distribution system at Treatment plant
	g results for trihalomethanes and haloacetic acids): _/_/_ mg/L Field pH:
CisilingCrant Residual (Required when reporting	
Sample Type (Check Only One)	Reason(s) for Sample (Check all that apply)
	Routine Compliance (with 62-550)     Quarterly (Which Quarter?
The second se	Confirmation of MCL Exceedance* Special (not for compliance with 62-550)
Entry Point (to Distribution)	Composite of Multiple Sites**
	Clearance (permitting)
Raw (at well or intake)	Mother: Annual Compliance 15T of 3
	Sampling Procedure Used or Other Comments:
	Samping Procedure Used of Other Comments.
Near First Customer *See 62-550.500(6) for requiren	nents and restrictions. **See 62-550.550(4) for requirements and
NOTE: See 62-550.512(3) for a for nitrate or nitrite MCL	dditional requirements attach a results page for each site.
Sampler's Name: DANIEL SH	ERWOOD
Sampler's Phone #: 32/- 388- 7	7893 Sampler's Fax #: 33-1- 352-242-0465
Sampler's E-Mail Address:	
•	
CERTIFICATION (to be completed by	sampler)
1 DAWER SHERING	DPERATOR
I, <u>DANIEL SHERWOC</u> (Print Name)	(Print Title)
do HEREBY CERTIFY that the abo	ve public water system and sample collection information is
complete and correct.	
Signature: Coni Sanoa	Date: 2/1/05
Reporting Format 62-550.730 Effective January 1995, Revised January 2004	Page 1 of [insert number of pages]
	· · · · · · · · · · · · · · · · · · ·
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ATTACH CURRENT DOH AN		npleted by lab - Please type o	r print legibly)
		•	
LabName: Advanced Environ			a Certification #: E84589
Address: 9610 Princess Pal		Ceruncation	Expiration Date: 6/30/2005
Tampa, Florida 33	619		phone #: (813) 630-9616
ANALYSIS INFORMATION (to	be completed by lab		
PWS ID (from page 1):		Date Sampl	e(s) Received: 1/27/2005 10:40:0
Lab Assigned Report Number	or Job ID T050815	Sample Number	(From page 1)
Group(s) Analyzed Results at	tached for compliance with cha	apter 62-550, F.A.C. (check al	that appl
inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts
Ali 17			
Partial	All Except Dioxin	Partial.	Haloaceti
Nitrate	Partial	Radionuclides	Bromate
	Dioxin Only	<u> </u>	
Asbestos Only		Single Samp	Secondaries
		Qtrly Composite**	
Vere any analyses subcontrac	ted? 🔽 Yes 🗌 No	· · · · · · · · · · · · · · · · · · ·	
yes, please provide DOH cert			
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ATTACH DOH ANALYTE SHE	ET FOR EACH SUBCONTRA	CTED LAB	
	CERT	<b>FIFICATION</b>	
·			
, Nannette Staley	, Project Coordinator	······································	
(Print Name)			
O HEREBY CERTIFY that all a			ll requirements of the
o HEREBY CERTIFY that all a			ll requirements of the
o HEREBY CERTIFY that all a		(NELAC).	-
o HEREBY CERTIFY that all a		(NELAC).	Il requirements of the $21-05$
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b HEREBY CERTIFY that all a ational Environmental Laborat Labo	tory Accreditation Conference Current Florida DOH lab certific torion of the report, possible er the DOH Bureau of Laboratory ample dates Jocations for each (to be completed by DEP or ory  Yes No ed (circle or highlight group(s) above d  Detect Sheet(s) Location	(NELAC). Date: cation number and a current A forcement against the public ( Services. a quarter. DOH) Sample Analysis Info Si re) I Revised Report Require above) tion(s) on Unsatisfactory	2 1-05 unalyte Sheet for the attached water system for failure to sample atisfactory: I Yes I No ested (circle or highlight group(s) above I Incomplete Report Analysis Unsatisfactory

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8. J

### Advanced Environmental Laboratories, Inc.

Analytical Report

Client	Utilities, Inc.	Report No.:	T050815
Project Name	Clermont #2	Date/Time Sampled:	01/26/05 10:45
Matrix:	Drinking Water	Date/Time Received:	1/27/05 10:40
PWS ID#:			121100 10.40
Client Sample ID:	Annual Total Xylenes		D 01
Site:	Clermont		Dan Sherwood
Sample Number:	T050815-01	Shipping Method:	AEL Pick-up

Volatile (	Organics										
Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	RDL	Analysis Dete	Analysia Time	DOH Lab Cert. #
2378	1,2,4-Trichlorobenzene	. 70	ug/L	0.20	U	E502.2	0.20	1.0	1/30/2005	0:54	E82574
2380	Cis-1,2-dichloroethens	70	u <b>g/L</b>	0.20	U.	E502.2	0.20	1.0	1/30/2005	0:54	E82574
2955	Xylanes (Total)	10000	ug/L	0.50	U	E502.2	0.50	1.0	1/30/2005	0:54	E82574
2964	Methylene Chioride	5.0	ug/L	0.44	U	E502.2	0.44	1.0	1/30/2005	0:54	E82574
2968	1,2-Dichlorobenzane	600	ug/L	0.26	U	E502.2	0.26	1.0	1/30/2005	0:54	E82574
2969	1,4-Dichlorobenzene	75	ug/L	0.11	U	E502.2	0.11	1.0	1/30/2005	0:54	E82574
2976	Vinyi Chioride	1.0	ug/L	0.29	U	E502.2	0.29	1.0	1/30/2005	0:54	E82574
2977	1,1-Dichioroethene	7.0	ug/L	0.21	U	E502.2	0.21	1.0	1/30/2005	0:54	E82574
2979	Trans-1,2-dichloroethene	100	ug/L	9.27	U	E502.2	0.27	1.0	1/30/2005	0:54	E82574
2980	1,2-Dichloroethane	3.0	ug/L	0.22	U	E502.2	0.22	1.0	1/30/2005	0:54	E82574
2981	1,1,1-Trichloroethane	200	u <b>g/L</b>	0.33	U	E502.2	0.33	1.0	1/30/2005	0:54	E82574
2982	Carbon Tetrachloride	3.0	ug/L	0.31	U	E502.2	0.31	1.0	1/30/2005	0:54	E82574
2983	1,2-Dichloropropane	5.0	ug/L	0.22	U	E502.2	0.22	1.0	1/30/2005	0:54	E82574
2984	Trichloroethene	3.0	ug/L	0.28	U	E502.2	0.28	1.0	1/30/2005	0:54	E82574
2985	1,1,2-Trichloroethane	5.0	ug/L	0.32	U	E502.2	0.32	1.0	1/30/2005	0:54	E82574
2987	Tetrachioroethene	3.0	ug/L	0.31	U	E502.2	0.31	1.0	1/30/2005	0:54	E82574
2989	Chlorobenzene	100	ug/L	0.18	u	E502.2	0.18	1.0	1/30/2005	0:54	E82574
2990	Benzene	1.0	ug/L	0.21	U	E502.2	0.21	1.0	1/30/2005	0:54	E82574
2991	Toluene	1000	ug/L	0.10	U	E502.2	0.10	1.0	1/30/2005	0:54	E82574
992	Ethylbenzene	700	ug/L	0.15	U .	E502.2	0.15	1.0	1/30/2005	0:54	E82574
996	Styrene	100	ug/L	0.14	U	E502.2	<del>0</del> .14	1.0	1/30/2005	0:54	E82574

U The compound was analyzed for but not detected.

MDL Method Reporting Limit

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

Chain-of-Custody for AEL Tampa to AEL Jax

AEL Tampa AEL Jax 9610 Princess Palm Avenue 6601 Southpoint Parkway Tampa, FL 33619 Jacksonville, FL 32216 813-630-9616 Fax 813-630-4327 Contact Person: Michael Cammarata Contact Person: Sean Hyde Project #: T050815 CustomerName: Utilities, Inc. Collector: Dan Sherwood

Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	<b>Receive Date</b>	Due Date	# Bottles	Bottle Type	(Pres.)
T050815-01	Annual Total Xylenes	62-550 VOCs DW	Drinking Water	1/26/2005	10:45	1/27/05 10:40	2/9/2005		40mL VOC Vial	
	$\rangle$	lylenes on	14							

Tampa Relinquisher: Date/Time: Shipping Receiver: Shipping Relinquisher: Date/Time: Jacksonville Receiver:

Page 1 of 1

02/01/2005 17:22 #174 P.005/007

From: ADVANCED ENVIRONMENTAL LABS 813 630 4327 02/01/2005 17:22 #174 P.006/007

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Doub Think Tuby			Log-in request number.	10500	2		<u> </u>
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	Gainesville: 2106 N	W 67th Place, Suite 7 North Lake Blvd., Suite	, Gainesville, FL 34	806 • (352) 367-1500	Fax (352) 367-0050	) (407) 937-1597	7			Pa	ige	of	
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#### LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES. INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440

Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 florida@utilitiesinc-usa.com

June 15, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd., Suite 232 Orlando, FL 32803-3767

RE: Annual Nitrate & Nitrite Sampling 2005 Chapter 62-550 FAC Clermont #2 - PWS ID 3350153

Dear Mr. Morrison:

Please find the enclosed sample results as specified above for the 2005 monitoring period.

If you should have any questions, please call 407.869.8588, extension 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Bug 7. 3

Bryan K. Gongre Assistant Operations Manager

Enclosures: Sample Results

Cc: Bill Coates, A.M., UIOF

# Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIO	N (to be completed by sampler – Please type or print legibly)
System Name: <u>Clermon +</u>	≠ 2 PWS I.D. #: 3 3 5 0 1 5 3
System Type (check one):	
Address: CakeUtility See	vies, Inc.
	eld Avenue
City: <u>Altamonte Sprin</u>	ع State: <u>۲</u> ZIP Code: <u>32714</u>
Phone #:	Fax #: 407.869.6961
E-Mail Address:	utilities inc-usa.com
SAMPLE INFORMATION (to be completed	
	Location Code (if known):
•	Sample Time:/O / D AM PM (Circle One)
Sample Location (be specific):	to distribution system
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic acids): mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for Sample (Check all that apply)
	Routine Compliance (with 62-550)
Entry Point (to Distribution)	Confirmation of MCL Exceedance* Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites** Violation Resolution
Raw (at well or intake)	Clearance (permitting)
Max Residence Time	Other:
Ave Residence Time	Sampling Procedure Used or Other Comments:
Near First Customer	
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for ac for nitrate or nitrite MCL (	Iditional requirements attach a results page for each site.
Sampler's Name: Don 5h	erwoal
Sampler's Phone #:	
Sampler's E-Mail Address:	
CERTIFICATION (to be completed by a	sampler)
I, <u>Daniel Sherwood</u> (Print Name)	Operator,
(Print Name)	(Print Title)
do HEREBY CERTIFY that the above complete and correct.	e public water system and sample collection information is
Signature: And And	Date: 6/15/05
Reporting Format 62-550.730	Page 1 of

Effective January 1995, Revised January 2004

	TORY CERTIFICATIO		(to be compl	eted by lab - Please type or	r print legibly)
lahName	: Advanced Environm	iental Labs - Orlan	do	Florid	a Certification #: E53076
Address:					Expiration Date: 6/30/2005
-uui 633.	Altamonte Springs,				Telephone #: (407) 937-1594
					<u></u>
ANALYSI	S INFORMATION (to 1	be completed by la	ab		
PWS ID (1	from page 1):		-	Date Sampl	e(s) Received: 5/11/2005 2:50:00
Lab Assig	ned Report Number of	r Job ID A051640		Sample Number	(From page 1) A051640-01
Group(s) /	Analyzed Results atta	iched for complian	ce with chapt	er 62-550, F.A.C. (check al	i that apply):
	Inorganics	Synthetic Orga	inics	Volatile Organics	Disinfection Byproducts
l	All 17	🗖 All 30		All 21	Trihalomethanes
ĺ	Partial	All Except C	Dioxin	Partial	Haloacetic Acids
	V Nitrate	Partial		Radionuclides	Bromate
l		Dioxin Only		Single Sample	Chlorite
[	Asbestos Only			Qtrly Composite**	Secondaries
					🔲 All 14
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f yes, plea	•	-	BCONTRACT	TED LAB	
f yes, plea ATTACH I , Myrna S	DOH ANALYTE SHEE Santiago		BCONTRACT CERTIF		
f yes, plea ATTACH I , Myrna S	DOH ANALYTE SHEE Santiago (Print Name)	T FOR EACH SU	BCONTRACT CERTIF		
If yes, plea ATTACH I , <u>Myrna S</u> do HEREE	DOH ANALYTE SHEE Santiago (Print Name) BY CERTIFY that all al	T FOR EACH SU	BCONTRACT CERTIF nager data are corre	FICATION	all requirements of the
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6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Client:	Utilities, Inc.	Report No.:	A051640
Project Name:	Clermont #2	Date Sampled:	5/11/2005
Project Number:		Date Received:	5/11/05 14:50
PWS ID#:		Date Reported:	5/25/2005
Attention:	William Coates		
Phone Number:	8002721919		
Address:	200 Weathersfield Ave.		

<sup>+</sup> Altamonte Springs, FL 32714

**Project Description** 

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

Project Name: Clermont #2

Approved By: 0 Myrna Santiago, Laboratory Manager

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advenced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages = &

P. 3

## Advanced Environmental Laboratories, Inc.

Analytical Report

Inorganic Conta	minants	Analysis		 Analysia	Analysis	DOH Lab
Sample Number:	A051640-01		 	 		
Site:	Point of Entry			Shipping Metho	d: AEL C	Courier
Client Sample (D:				Sampled By	: Dan S	herwood
PWS (D#:						
Matrix:	Drinking Water			Date/Time Receive	e <b>d:</b> 5/11/0	05 14:50
Project Name:	Clermont #2			Date/Time Sample	d: 05/11	/05 10:10
Client:	Utilities, Inc.			Report No	<b>.:</b> A051	1640

Contam ID	Contam Name	MCL	Units	Results	Qualifier	Analytical Method	Lab MDL	Date	Time	Cert. #	
								5/12/2005	16:35	E82574	
1040	Nitrate (as N)	10	mg/L	0.20		SM4500NO3-F	0.014				
1041	Nitrite (as N)	1.0	mg/L	0.041	1	SM4500NO3-F	0.013	5/12/2005	16:35	E82574	

R'

The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit. 1

MDL Method Reporting Limit For all Results qualified with an I, the PQL is defined to be 4 times the MDL



Advanced Environmental Labs Inc

Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

Client:	UTIL	ITIES,	INC.	(UTL-A)

Project name: CLEMONT #2

Date/Time Rcvd: 5/11/05 Received by: RPG

Completed by: RPG

Log-In request number: A051640

#### **Cooler/Shipping Information:**

Courler: 🖾 AEL 🗆 Client 🗆 UPS 🛄 Pony Express 🛄 FedEx 🗅 Other (describe): \_\_\_\_\_

14.50

Type: 🔀 Cooler 🗆 Box 🗖 Other (describe) \_\_\_

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	1				
Temp (°C)	2				
Temp taken from	Temp blank Cooler	Temp blank Cooler	Temp blank     Cooler	Cooler	Temp blank Cooler
Temp measured with	IR gun Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):			

#### Other Information:

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?	1		
3.	Were custody papers properly filled out (ink, signed, match labels)?	1		
4.	Did all bottles arrive in good condition (unbroken)?	1		
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?	1		
6.	Did the sample labels agree with the chain of custody?	1		
7.	Were correct bottles used for the tests indicated?	1		
8.	Were proper sample preservation techniques indicated on the label?	1		
9.	Were samples received within holding times?			
10.	Were all VOA vials checked for the presence of air bubbles?			1
11.	Were there air bubbles present in the VOA vials?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE	1		
13.	Was the cooler temperature less than 6°C?	1		
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.			-
15.	Were the sample containers provided by AEL?	1		
16.	Were samples accepted into the laboratory?	1		
	Was it necessary to split samples into other bottles?		1	

#### Kit ID Comments:

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Chain-of-Custody for AEL Orlando to AEL Jax

AEL Jax 6601 Southpoint Parkway Jacksonville, Fl 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde

Check if Rush

Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles	Bottle Type (	Pres.)
A051640-01	1	Nitrate (J)-DW	Drinking Water	5/11/2005	10:10	5/11/05 14:50	5/13/2005		250mL Poly	
A051640-01	1	Nitrite (J)-DW	Drinking Water	5/11/2005	10:10	5/11/05 14:50	5/13/2005		250mL Poly	

 Orlando Relinquisher:
 Providence
 Shipping Receiver:
 AEL Courier
 Date/Time:
 5/11/05/700

 Shipping Relinquisher:
 AEL Courier
 Jacksonville Receiver:
 9MM
 Date/Time:
 5/12/05/1045

.21

Page 1 of 1

AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701

Contact Person: Myrna Santiago

Project #: A051640 CustomerName: Utilities, Inc. Collector: Dan Sherwood

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STANDARD				· •					18					
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1 RUSH									2					
VW≖ waste water	SW=surface water	GW-ground water	DW=drinking water		=air SO=		-0.000	Preserv						
SAMPLE ID	SAMPLI	E DESCRIPTION	Gra			MATRIX	NO. CONT.							
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John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

> of 27 Page 3

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#### THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

Laboratory Scope of Accreditation

State Laboratory ID: E82574

FL00949 EPA Lab Code:

(904) 363-9350

E82574 Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, FL 32216 Drinking Water

Analyte         Description         Display         1/1/100           Endothall         EPA 548.1         Synthetic Organic Contaminants         NELAP         1/1/100           Endothall         EPA 502.2         Other Regulated Contaminants         NELAP         3/24/200           Ethylbenzene         EPA 502.2         Other Regulated Contaminants         NELAP         4/4/2002           Ethylbenzene         EPA 508         Synthetic Organic Contaminants         NELAP         3/24/200           gamma-Hexachtorocyclobexane)         EPA 508         Synthetic Organic Contaminants         NELAP         3/24/200           Hepsechlor         EPA 508         Synthetic Organic Contaminants         NELAP         3/24/200           Heterotrophic plate count         SM 9215 B         Microbiology         NELAP         3/24/200           Hexachtorocrazene         EPA 508         Synthetic Organic Contaminants         NELAP         3/24/200           Itead         EPA 200.7         Secondary Inorganic Contaminants         NELAP         4/4/2002           Itead         EPA 200.7         Secondary Inorganic Contaminants         NELAP         4/4/2002           Manganese         EPA 200.7         Primary Inorganic Contaminants         NELAP         4/4/2002           Mercury	Matrix: Drinking Water			Certification	
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Detassium     EPA 200.7     Secondary Inorganic Contaminants     NELAP     1/21/2005       esidue-filterable (TDS)     EPA 160.1     Secondary Inorganic Contaminants     NELAP     4/4/2002       elenium     EPA 200.9     Primary Inorganic Contaminants     NELAP     4/17/2002       elenium     EPA 200.9     Primary Inorganic Contaminants     NELAP     4/17/2002	icloram	EPA 515.3		NELAP	1/21/2005
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cienium			, .	NELAP	4/17/2002
	elenium	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.

NON-TRANSFERABLE 04/24/2005-E82574

#### LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440 Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 florida@utilitiesinc-usa.com

December 20, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Boulevard-Suite 232 Orlando, FL 32803-3767

RE: Total Trihalomethane / Haloacetic Acids Quarterly Monitoring Clermont #2 - PWS ID 3350153

Dear Mr. Morrison:

Please find the enclosed sample results as specified above for the fourth quarter of the 2005 monitoring period.

This sample was taken on November 30, 2005 at a time when the Utility had fully completed replacing the existing galvanized water mains with new PVC water mains and severed all connections to the galvanized water mains.

If you should have any questions, please call 407.869.8588, extension 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Buy X. Dog

Bryan K. Gongre Assistant Operations Manager

Enclosures

Cc: William Coates, A.M., UIOF

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Plorida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Form

Public Water System Information (to	be completed by sam	pler)	••••••••••••••••••••••••••••••••••••••	
System Name: Clermont2/C	Carr System	P	WS ID #: 335	0153
System Type (check ane): Di Commu Address: <u>Loke Utility Se</u> 200 Weathersfi	ruices, Inc.		Transient Non	
City: <u>Altamente Sprin</u> Phone #: <u>401.864.1919</u> E-Mail Address: <u>b.K.gongree u</u>	÷	State:		
Sample Information (to be completed Sample Number: 19903 Sample Date: <u>November 30, 21</u> Sample Location (be specific): <u>12801</u> Disinfectant Residual (required when rej	505 s s Lakevin , Cher	ample Time: <u>4</u> mont, PL 34	จาา	(circis one)
Sample Type (check only one) Distribution Entry Point (for Distribution) Plant Tap (not for compliance with 82-55) Rew (at well or intake)	Routine Compliance     Confirmation of MC     Composite of Multip     Clearance (permitter     Other:	e (with 52-550) :L Exceedence * ole Sites ** ng)	(check all that apply) Cuarterly (which quarterly (which	narter?) (2005) mpliance with 82-550) ralidated sample)
Avg Residence Time	Sampling Procedure U	sed or Other Comm	ants:	
* See 62-550.500(6) for requirements NOTE: See 62-550.512(3) for additions for nitrate or nitrate MCL exceedances.			550(2) for requirements page for each sits.	and
Sampler's Name: <b>Charles Schu</b> Sampler's Phone #: <b>407.844.1919</b> Sampler's E-Mail Address:	si si		407.869.616I	
Certification (to be completed by s	ampler)			
Charles Schwades		LeadDe	entor	
(Frim Name)			(Print Title)	
do HEREBY CERTIFY that the above public signature:	ic weter system and c	ollection informat	ion is complete and co	ртвст. <u>12/20/05</u>
	Page 1	1		

.0100 3949

NTILITIES INC OF FL

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#### Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Form

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Laboratory Certification	Information (to be complet	ed by lab)	
Lab Name: Flowers Ch	emical Laboratories, Inc.	Florida Certific	ation #: E83018
Address: P. O. Box 15	0597	Certification E	xpiration Date: 6/30/2006
Altamonte Sp	orings, FL 32715-0597		
Analysis Information	(to be completed by lab)	Report Numbe	r: 1990320051130
		•	
Group(s) analyzed and	results attached for compliance v	with Chapter 62-550, F.A.C. (c	heck all that apply)
Inorganics.	Volatile Organics	Radionuclides.	Disinfection Byproducts
-	All 21 Partial	Single Sample	
			•
			_
	Synthetic Organics	Secondaries	
	All 30 Partial	All 14 Partial	
	Technical Director, do HEREBY	CERTIFY that all attached analy	
Signature:		Date: 12/13/0	5
<ul> <li>Failure to provide a valid</li> </ul>	and current Florida Dept. of Health	lab ID number and a current Analy	te Sheet for the attached
analysis results will resu	It in rejection of the report and possi	ble enforcement against the public	water system for failure to sample.
• • Please provide radioche	emical sample dates and locations fo	r each quarter.	
Compliance Determinati	on (to be complete	d by DEP or DOH)	······
Resample Requested	(circle or highlight groups above) e Report	Revised Report Requeste	ed (circle or highlight groups above) Analysis Unsatisfactory
•	,		
Group(s) analyzed and results attached for compliance with Chapter 62-550, F.A.C. (check all that apply)         Inorganics.       Volatile Organics       Badionuclides.       Disinfection Byproducts            All 17          All 21       Partial       Group(s) Single Sample       Trihalomethanes            Partial          Otriy Composite**       Indiadocetic Acids       Bromate            Nitrate          Datrial          All 30       Partial          Chlorite            Asbestos          All 30       Partial          Chlorite          Chlorite            Asbestos          All 30          Partial          Chlorite          Chlorite            Asbestos          All 30          Partial          Chlorite          Chlorite            Asbestos          All 30          Partial          Chlorite          Chlorite            Asbestos          All 30          Partial          Chlorite          Chlorite            Asbestos          All 30          Partial          Chlorite          Chlorite          Chlorite            Were any analyses subcontracted?          Yes       !  No       (If yes, please provide subcontractor's Florida drinking water certification number with each result provided by that lab).          Chlorite            Jefferson S. Flowers, Technical Director, do HEREBY CERTIFY that all at			
Date Reviewed:	DEP/DOH Reviewing	Utricial:	

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#### Florida Department of Environmental Protection

#### Safe Drinking Water Program Laboratory Reporting Form

Disinfection Byproducts: 62-550.310(3) Lab ID: 19903 PWS ID: Clermont 2 Sample ID: 12808 Lakeview

Contam				Analysis		Analytical	Lab	Analysis	Analysis
ID	Contam Name	Units	MCL	Result	Qualifier	Method	MDL	Date	Time
2450	Monochloroacetic Acid	ug/L	N/A	2.00	- <u> </u>	EPA552.2	2.00	12/08/05	
2451	Dichloroacetic Acid	ug/L	N/A	20.7		EPA552.2	2.00	12/08/05	
2452	Trichloroacetic Acid	ug/L	N/A	18.9		EPA552.2	0.500	12/08/05	
2453	Monobromoacetic Acid	ug/L	N/A	1.00	υ	EPA552.2	1.00	12/08/05	
2454	Dibromoacetic Acid	ug/L	N/A	5.62		EPA552.2	0.500	12/08/05	
2456	HAA5	ug/L	60ррb	45.2		EPA552.2	0.500	12/08/05	
2941	Chloroform	ug/L	N/A	37.3		EPA524.2	0.500	12/05/05	
2942	Bromoform	ug/L	N/A	0.500	U	EPA524.2	0.500	12/05/05	
2943	Bromodichloromethane	ug/L	N/A	11.8		EPA524.2	0.500	12/05/05	
2944	Dibromochloromethane	ug/L	N/A	3.33		EPA524.2	0.500	12/05/05	
2950	Total Trihalomethanes	ug/L	80	52.4		EPA524.2	0.500	12/05/05	

T.







State of Florida Department of Health, Bureau of Laboratories

This is to certify that

#### E83018 FLOWERS CHEMICAL LABORATORIES 481 NEWBURYPORT AVENUE ALTAMONTE SPRINGS, FL 32701

has complied with Florida Administrative Code 64E-1, for the examination of Environmental samples in the following categories

DRINKING WATER - GROUP I UNREGULATED CONTAMINANTS, DRINKING WATER - GROUP II UNREGULATED CONTAMINANTS, DRINKING WATER - OTHER REGULATED CONTAMINANTS, DRINKING WATER - MICROBIOLOGY, DRINKING WATER - PRIMARY INORGANIC CONTAMINANTS, DRINKING WATER - SECONDARY INORGANIC CONTAMINANTS, DRINKING WATER - SYNTHETIC ORGANIC CONTAMINANTS, NON-POTABLE WATER - EXTRACTABLE ORGANICS, NON-POTABLE WATER - GENERAL CHEMISTRY, NON-POTABLE WATER - METALS, NON-POTABLE WATER -MICROBIOLOGY, NON-POTABLE WATER - PESTICIDES-HERBICIDES-PCB'S, NON-POTABLE WATER - VOLATILE ORGANICS, SOLID AND CHEMICAL MATERIALS - EXTRACTABLE ORGANICS, SOLID AND CHEMICAL MATERIALS - GENERAL CHEMISTRY, SOLID AND CHEMICAL MATERIALS -METALS, SOLID AND CHEMICAL MATERIALS - MICROBIOLOGY, SOLID AND CHEMICAL MATERIALS - PESTICIDES-HERBICIDES-PCB'S, SOLID AND CHEMICAL MATERIALS - VOLATILE ORGANICS

Continued certification is contingent upon successful on-going compliance with the NELAC Standards and FAC Rule 64E-1 regulations. Specific methods and analytes certified are cited on the Laboratory Scope of Accreditation for this laboratory and are on file at the Bureau of Laboratories, P. O. Box 210, Jacksonville, Florida 32231. Clients and customers are urged to verify with this agency the laboratory's certification status in Florida for particular methods and analytes.

EFFECTIVE November 10, 2005 THROUGH June 30, 2006

Ming S. Chan, Ph.D. Bureau Chief, Bureau of Laboratories Florida Department of Health DH Form 1697, 7/04 NON-TRANSFERABLE E83018-04-11/10/2005





M. Rony François, M.D., M.S.P.H, Ph.D.

Secretary

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Laboratory Scope of Accreditation

Page 2 of 33

#### Attachment to Certificate #: E83018-04, expiration date June 30, 2006. This listing of accredited analytes should be used only when associated with a valid certificate.

State Laboratory ID: E83018

EPA Lab Code: FL00091 (407) 339-5984

E83018

Flowers Chemical Laboratories

481 Newburyport Avenue Altamonte Springs, FL 32701

Matrix:	Drin	king	Water

Analyte	Method/Tech	Category	Certification Type	Effective Date		
,3,5-Trimethylbenzene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001		
,3-Dichlorobenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001		
,3-Dichlorobenzene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001		
,3-Dichloropropane	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001		
,3-Dichloropropane	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001		
,4-Dichlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	6/1/2001		
,4-Dichlorobenzene	EPA 524.2	Other Regulated Contaminants	NELAP	6/1/2001		
,2-Dichloropropane	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001		
,2-Dichloropropane	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001		
.4-D	EPA 515.1	Synthetic Organic Contaminants	NELAP	11/29/2001		
-Butanone (Methyl ethyl ketone, MEK)	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001		
-Chlorotoluene	EPA 502.2	Group II Unregulated Contaminants	NELAP	3/1/2002		
-Chlorotoluene	EPA 524.2	- Group II Unregulated Contaminants	NELAP	3/1/2002		
Hexanone	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001		
Hydroxycarbofuran	EPA 531.1	Group I Unregulated Contaminants	NELAP	6/1/2001		
Chlorotoluene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001		
Chiorotoluene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001		
Isopropyltoluene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001		
Isopropyltoluene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001		
Methyl-2-pentanone (MIBK)	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001		
cetone	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001		
lachlor	EPA 507	Synthetic Organic Contaminants	NELAP	3/1/2002		
dicarb (Temik)	EPA 531.1	Group I Unregulated Contaminants	NELAP	6/1/2001		
dicarb sulfone	EPA 531.1	Group I Unregulated Contaminants	NELAP	6/1/2001		
dicarb sulfoxide	EPA 531.1	Group I Unregulated Contaminants	NELAP	6/1/2001		
drin	EPA 505	Group I Unregulated Contaminants	NELAP	6/1/2001		
uminum	EPA 200.7	Secondary Inorganic Contaminants	NELAP	3/1/2002		
սայսու	EPA 200.8	Secondary Inorganic Contaminants	NELAP	3/1/2002		
timony	EPA 200.8	Primary Inorganic Contaminants	NELAP	6/1/2001		
senic	EPA 200.8	Primary Inorganic Contaminants	NELAP	6/1/2001		
razine	EPA 507	Synthetic Organic Contaminants	NELAP	3/1/2002		
rium	EPA 200.7	Primary Inorganic Contaminants	NELAP	6/1/2001		
rium	EPA 200.8	Primary Inorganic Contaminants	NELAP	6/1/2001		
nzene	EPA 502.2	Other Regulated Contaminants	NELAP	6/1/2001		
nzene	EPA 524.2	Other Regulated Contaminants	NELAP	6/1/2001		
nzo(a)pyrene	EPA 550	Synthetic Organic Contaminants	NELAP	6/1/2001		

Clients and Customers are urged to verify the laboratory's current certification status with the Environmental Laboratory Certification Program. Issue Date: 11/10/2005

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Expiration Date: 6/30/2006

Dichlorodifluoromethane

Dichlorodifluoromethane

Dieldrin

Diquat Endothall

Endrin

Ethylbenzene

Dichloromethane (DCM, Methylene chloride)

Dichloromethane (DCM, Methylene chloride)

Dinoseb (2-sec-butyl-4,6-dinitrophenol, DNBP)





M. Rony François, M.D., M.S.P.H, Ph.D.

Secretary

Laboratory Scope of Accreditation

Page 4 of 33

Attachment to Certificate #: E83018-04, expiration date June 30, 2006. This listing of accredited

State Laboratory ID: E8	3018 EPA	Lab Code: FL00091	(407) 339-5984				
E83018 Flowers Chemical Labo 481 Newburyport Aven Altamonte Springs, FL	ue 32701						
Matrix: Drinking Wa	ter		Certification				
Апајуte	Method/Tech	Category	Туре	Effective Date			
Chloroform	EPA 524.2	Other Regulated Contaminants,Group II Unregulated Contaminants	NELAP I	6/1/2001			
Chromium	EPA 200.7	Primary Inorganic Contaminants	NELAP	6/1/2001			
Chromium	EPA 200.8	Primary Inorganic Contaminants	NELAP	6/1/2001			
cis-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	6/1/2001			
sis-1,2-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	6/1/2001			
is-1,3-Dichloropropene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001			
is-1,3-Dichloropropene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001			
Color	SM 2120 B	Secondary Inorganic Contaminants	NELAP	6/1/2001			
Copper	EPA 200.7	Primary Inorganic Contaminants,Secondary Inorganic Contaminants	NELAP	6/1/2001			
Copper	EPA 200.8	Primary Inorganic Contaminants Secondary Inorganic Contaminants	NELAP	6/1/2001			
lyanide	SM 4500CN-E	Primary Inorganic Contaminants	NELAP	6/1/2001			
alapon	EPA 515.1	Synthetic Organic Contaminants	NELAP	6/1/2001			
i(2-ethylhexyl)adipate	EPA 525.2	Synthetic Organic Contaminants	NELAP	6/1/2001			
ibromoacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	3/14/2003			
ibromochloromethane	EPA 502.2	Group II Unregulated Contaminants,Other Regulated Contaminants	NELAP	6/1/2001			
ibromochloromethane	EPA 524.2	Other Regulated Contaminants, Group II Unregulated Contaminants	NELAP	6/1/2001			
ibromomethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001			
bromomethane	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001			
icamba	EPA 515.1	Group I Unregulated Contaminants	NELAP	3/1/2002			

Group II Unregulated Contaminants

Group II Unregulated Contaminants

Other Regulated Contaminants

Other Regulated Contaminants

Synthetic Organic Contaminants

Synthetic Organic Contaminants

Synthetic Organic Contaminants

Synthetic Organic Contaminants

Other Regulated Contaminants

Group I Unregulated Contaminants

Clients and Customers are urged to verify the laboratory's current certification status with the Environmental Laboratory Certification Program. Issue Date: 11/10/2005

EPA 502.2

EPA 524.2

EPA 502.2

EPA 524.2

EPA 505

EPA 515.1

EPA 549.2

EPA 548.1

EPA 502.2

EPA 505

Expiration Date: 6/30/2006

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M. Rony François, M.D., M.S.P.H, Ph.D. Secretary

> of 33 Page 6

Laboratory Scope of Accreditation

Attachment to Certificate #: E83018-04, expiration date June 30, 2006. This listing of accredited analytes should be used only when associated with a valid certificate.

EPA Lab Code: FL00091 State Laboratory ID: E83018

(407) 339-5984

E83018 Flowers Chemical Laboratories 481 Newburyport Avenue Altamonte Springs, FL 32701

Matrix: Drinking Water			Certification	
Analyte	Method/Tech	Category	Туре	Effective Date
Nickel	EPA 200.7	Primary Inorganic Contaminants	NELAP	6/1/2001
Nickel	EPA 200.8	Primary Inorganic Contaminants	NELAP	6/1/2001
Nitrate	EPA 300.0	Primary Inorganic Contaminants	NELAP	6/1/2001
Nitrite	EPA 300.0	Primary Inorganic Contaminants	NELAP	6/1/2001
n-Propylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
n-Propylbenzene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Odor	SM 2150 B	Secondary Inorganic Contaminants	NELAP	6/1/2001
Orthophosphate as P	EPA 300.0	Primary Inorganic Contaminants	NELAP	6/1/2001
Oxamyl	EPA 531.1	Synthetic Organic Contaminants	NELAP	6/1/2001
PCBs	EPA 505	Synthetic Organic Contaminants	NELAP	6/1/2001
Pentachlorophenol	EPA 515.1	Synthetic Organic Contaminants	NELAP	6/1/2001
pH .	EPA 150.1	Secondary Inorganic Contaminants,Primary Inorganic Contaminants	NELAP	6/1/2001
Picloram	EPA 515.1	Synthetic Organic Contaminants	NELAP	6/1/2001
Propachlor (Ramrod)	EPA 508	Group I Unregulated Contaminants	NELAP	6/1/2001
ec-Butylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
ec-Butylbenzene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Selenium	EPA 200.8	Primary Inorganic Contaminants	NELAP	3/1/2002
Silver	EPA 200.7	Secondary Inorganic Contaminants	NELAP	6/1/2001
Silver	EPA 200.8	Secondary Inorganic Contaminants	NELAP	6/1/2001
Silvex (2,4,5-TP)	EPA 515.1	Synthetic Organic Contaminants	NELAP	6/1/2001
Simazine	EPA 507	Synthetic Organic Contaminants	NELAP	3/1/2002
odium	EPA 200.7	Primary Inorganic Contaminants	NELAP	6/1/2001
ityrene	EPA 502.2	Other Regulated Contaminants	NELAP	6/1/2001
Styrene	EPA 524.2	Other Regulated Contaminants	NELAP	6/1/2001
Sulfate	EPA 300.0	Primary Inorganic Contaminants,Secondary Inorganic Contaminants	NELAP	6/1/2001
urfactants - MBAS	SM 5540 C	Secondary Inorganic Contaminants	NELAP	6/1/2001
rt-Butylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
rt-Butylbenzene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
etrachloroethylene (Perchloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	6/1/2001
strachloroethylene (Perchloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	6/1/2001
allium	EPA 200.8	Primary Inorganic Contaminants	NELAP	6/1/2001
bluene	EPA 502.2	Other Regulated Contaminants	NELAP	6/1/2001
bluene	EPA 524.2	Other Regulated Contaminants	NELAP	6/1/2001
otal coliforms	SM 9222 B	Microbiology	NELAP	3/22/2002

Clients and Customers are urged to verify the laboratory's current certification status with the Environmental Laboratory Certification Program. Issue Date: 11/10/2005

Expiration Date: 6/30/2006

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<ul> <li>Flowers Chemical Laboratories, Inc.</li> <li>4b) Newburyport Ave.</li> <li>Altamonte Springs, FL 32701</li> <li>Bus: 407-339-5984</li> <li>Fax: 407-260-6110</li> <li>www.flowerslabs.com</li> </ul>			1	8253 South US Hwy. 1 Port St. Lucie, FL 34952 Bus: 772-343-8006 Fax: 772-343-8089					FLOWERS CHEMICAL LABORATORIES						_	Ŷ	3								
Phone	200 WeAth Altrinoure	SPrin							Projec Conta /J FCL L Reque		<u>An</u> Dosdina		n n mb il	T _	TL e				P.C	). #					
Sample C. Sample C	407-669-1919 BOBY (PRINT): Professionality Professionality Sig	rcl+5 / · DW - di	inking w	ater '	-25 WW - WW	astewate A - Air	r	NUMBER		PRE	SERV	ATIVE	Na <sub>2</sub> S <sub>2</sub> O <sub>3</sub>		NALYSE	π/			1	7	7	7	1/	Сомм	(ENT
ITEM NO. 1	SAMPLE DESCRI 12808 LAKEV		DATE 11/30/01-		MATRIX DW			NUN	BNON	H204	-ONH	Ÿ	Nas		3	() 1	Ÿ 	$\square$	6	$\square$	6		/	2	1-
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10 Re	elinquished By / Affiliation	Date 12/1/05-	<b>Time</b>	Acce	pled By / Af	Riation	Date		Time		Relina	puishe	d 8y / A	AT Wash		Dak	<u> </u> 	Time		Acce	pted B	y / Affili	ation	Deta	7
Lo car	y Jakon		/205				<u> </u>	+		-	<u> </u>								<u>†                                    </u>	Z		7.	K	zlila	7

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## CRESCENT BAY

25.30.440 (3) CHEMICAL ANALYSES

#### LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440

Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 florida@utilitiesinc-usa.com

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May 25, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd., Suite 232 Orlando, FL 32803-3767

RE: Annual Nitrate & Nitrite Sampling 2005 Chapter 62-550 FAC Crescent Bay - PWS ID 3354686

Dear Mr. Morrison:

Please find the enclosed sample results as specified above for the 2005 monitoring period.

If you should have any questions, please call 407.869.8588, extension 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Bugut. Boz

Bryan K. Gongre Assistant Operations Manager

Enclosures

Cc: Bill Coates, Area Manager, UIOF

Page 1 of 1 Operations:660:661:3: 2:2005:Annl.NO.62-550Cr.Bay.05 FILE COPY

#### Florida Department of Environmental Protection RECEIVED Safe Drinking Water Program Laboratory Reporting Format<sub>MAY 2.4 2005</sub>

PUBLIC WATER SYSTEM INFORMATIC	<b>DN</b> (to be completed by sampler – Please type or print legibly)
System Name:F	Bey PWSID. # 3354686
System Type (check one): Community Address: <u>Lake Utility Service</u> 200 weathersfield	s, Inc.
	State: FL ZIP Code: 32714
	Fax #: 407.869.6961
E-Mail Address:	
•	b         Location Code (if known):
Sample Type (Check Only One)	Reason(s) for Sample (Check all that apply)
	Routine Compliance (with 62-550)
Entry Point (to Distribution)	Confirmation of MCL Exceedance* Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**
Raw (at well or intake)	Clearance (permitting)
Max Residence Time	□Other:
Ave Residence Time	Sampling Procedure Used or Other Comments:
Near First Customer	
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for a for nitrate or nitrite MCL	dditional requirements attach a results page for each site. exceedances.
Sampler's Name: <u>DANIEL Sh</u>	ERWOOD
Sampler's Phone #: 32/ 388-78	
Sampler's E-Mail Address:	
CERTIFICATION (to be completed by	
I, DANIEL SHERWO. (Print Name)	<u>OS</u> , <u>LEAS OPERATOR</u> , (Print Title)
do HEREBY CERTIFY that the abo	ve public water system and sample collection information is

complete and correct.

Signature: Danie Somerel

Date: 5/26/0.5

Reporting Format 62-550.730 Effective January 1995, Revised January 2004

Florida Department of Env		tion Safe Drinking Wa ng Format	ater Program Laboratory
LABORATORY CERTIFICATION INFO		eted by lab - Please type or p	print legibly)
LabName: Advanced Environmental La	bs - Orlando	Florida	Certification #: E53076
Address: 528 S. North Lake Blvd., Su	ite 1016	Certification E	xpiration Date: 6/30/2005
Altamonte Springs, FL 3270	01		Telephone #: (407) 937-1594
ANALYSIS INFORMATION (to be comp	eleted by lab		
PWS ID (from page 1):		Date Sample(	s) Received: 5/11/2005 2:50:00
Lab Assigned Report Number or Job ID	A051647	Sample Number (F	rom page 1) A051647-01
Group(s) Analyzed Results attached for	compliance with chapte	er 62-550, F.A.C. (check all t	hat apply):
	hetic Organics	Volatile Organics	Disinfection Byproducts
	ll 30 Il Except Dioxin	☐ All 21 ☐ Partial	Trihalomethanes Haloacetic Acids
	artial	Radionuclides	
	ioxin Only	Single Sample	Chlorite
Asbestos Only		Qtrly Composite**	Secondaries
			All 14
Were any analyses subcontracted?	ZYes 🗌 No		Partial
If yes, please provide DOH certification	number E82574		
ATTACH DOH ANALYTE SHEET FOR	EACH SUBCONTRACT	ED LAB	
	CERTIF	ICATION	
	ratory Manager	I	
(Print Name) do HEREBY CERTIFY that all attached a National Environmental Laboratory Accre			requirements of the
Signature: Myna Sunce		Date:	123/05
<ul> <li>Failure to provide a valid and current F analysis results will result in rejection of t and may result in notification of the DOH</li> </ul>	he report, possible enfo	prcement against the public w	
** Please provide radiological sample dat			
COMPLIANCE DETERMINATION (to	be completed by DEP	or DOH)	
Sample Collection Info Satisfactory	Yes 🚺 No	Sample Analysis Info Sa	itisfactory: 🗌 Yes 🔲 No
Replacement Sample(s) Requested (circle of	or highlight group(s) above)	Revised Report Reque	ested (circle or highlight group(s) above)
Additional Monitoring Required (circle	or highlight group(s) at	oove)	
Reason(s): 🔄 MCL(s) Exceeded	Detectio	n(s)	🔄 Incomplete Report
Missing Analyte Sheet(s)	C Location	Unsatisfactory	Analysis Unsatisfactory
Person Notified:		Date N	Notified:
Comments			·····
Date Reviewed:		Reviewing Official:	

P. 2



6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Client:	Utilities, Inc.
Project Name:	Cresent Bay

Project Number:

PWS ID#:

Attention: William Coates

Phone Number: 8002721919

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

 Report No.:
 A051647

 Date Sampled:
 5/11/2005

 Date Received:
 5/11/05 14:50

 Date Reported:
 5/21/2005

#### **Project Description**

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

Project Name: Cresent Bay

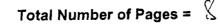
Approved By:

Myrna Santlago, Laboratory Manager

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.



## Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Uti	ities, Inc.	Report No.:	A051647	
Project Name: Cre	esent Bay	Date/Time Sampled:	05/11/05	7:30
Matrix: Dri		Date/Time Received:	5/11/05 14:5	0
PWS ID#:				
Client Sample ID: 1		Sampled By:	Dan Sherwoo	bd
Site: Po	nt of Entry	Shipping Method:		
Sample Number: A0	51647-01			
Inorganic Contami	nants			

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab <u>Cert. #</u>	-
1040	Nitrate (as N)	10	mg/L	0.37		SM4500NO3-F	0.014	5/12/2005	16:35	E82574	
1041	Nitrite (as N)	1.0	mg/L	0.052	1	SM4500NO3-F	0.013	5/12/2005	16:35	E82574	

The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit, i

MDL Method Reporting Limit For all Results qualified with an I, the PQL is defined to be 4 times the MDL



Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

Completed by: RPG

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Client: U	TILITIES, INC. (U	TL-A)	Project name: CRESCENT BAY
Date/Time Rcvd: 5/	/11/05	14.50	Log-In request number: A051647

Received by: RPG

#### **Cooler/Shipping Information:**

Courier: 🛛 AEL 🗆 Client 🗇 UPS 🗇 Pony Express 🗇 FedEx 🗇 Other (describe): \_\_\_\_\_

Type: 🔀 Cooler 🛱 Box 🛱 Other (describe)

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	1				
Temp (°C)	2				
Temp taken from	□ Temp blank ☑ Cooler	Temp blank Cooler	Temp blank     Cooler	Temp blank     Cooler	Temp blank     Cooler
Temp measured with	IR gun Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	IR gun Thermometer (enter ID):

# Other Information:

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?	1		
3.	Were custody papers properly filled out (ink, signed, match labels)?	1		
4.	Did all bottles arrive in good condition (unbroken)?	1		
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?			
6.	Did the sample labels agree with the chain of custody?			
7.	Were correct bottles used for the tests indicated?	1		
8.	Were proper sample preservation techniques indicated on the label?	1		
9.	Were samples received within holding times?			
10.	Were all VOA vials checked for the presence of air bubbles?			1
11.	Were there air bubbles present in the VOA vials?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE	1		
13.	Was the cooler temperature less than 6°C?			
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.			
15.	Were the sample containers provided by AEL?	1		
16.	Were samples accepted into the laboratory?			
17.	Was it necessary to split samples into other bottles?		1	

# <u>Kit ID</u>

<u>Comments:</u>

23

Chain-of-Custody for AEL Orlando to AEL Jax

AEL Jax 6601 Southpoint Parkway Jacksonville, Fl 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde

Check if Rush

AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701

Contact Person: Myrna Santiago

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Project #: A051647 CustomerName: Utilities, Inc. Collector: Dan Sherwood

Lab Code **Client Sample ID** Test Matrix Collect Date / Time Receive Date Due Date # Bottles Bottle Type (Pres.) A051647-01 1 Nitrate (J)-DW **Drinking Water** 250mL Poly 5/11/2005 7:30 5/11/05 14:50 5/13/2005 A051647-01 1 Nitrite (J)-DW **Drinking Water** 5/11/2005 7:30 5/11/05 14:50 5/13/2005 250mL Poly

	21				11
Orlando Relinquisher:		Shipping Receiver:	AEL Courier	Date/Time:	Ships now
Shipping Relinquisher:	AEL Courier	Jacksonville Receiver:	MM	Date/Time:	5/12/05 1045

	L Tampa:	6601 Southp 9610 Prince: 2106 NW 67	IBS, INC. point Parkway, Jaci ss Palm Avenue, T (th Place, Suite 7, h Lake Blvd., Suite	ksonville, FL 32 Tampa, FL 3361 Gainesville, FL	216 • (904) 9 • (813) 6 32606 • (3	30-9616 Fax (81 52) 367-1500 Fa	904) 363-9354 3) 630-4327 Ix (352) 367-005	0			LAB	ри њ <i>а</i> г		51	64'	7	
CLIENT NAME:				PROJEC		~				BOTTLE SIZE		- 1	LU	-T		-	
DTILITIES				CRE.	sen/	- BAY				& TYPE		ļ					
ADDRESS: ふいろ しら	ATHERSFIE	O AU	C	P.O. NU	MBER / I	PROJECT NI	JMBER:			AR							-
ALTRMONS PHONE: 407-569- CONTACT: B,11	TE SPRICE	5 F-2 3 FAX: 572-292	274 2-0565		LERM	ition: GONT Sherwa				NE AQ LU YI SR IE SD	4						
TURN AROUNE			EMARKS / SP		RUCTIC		<u>230/</u>		-		NO3/NO.						
												1					
WW= waste water	SW=surface wa	ater GW	=ground water	<b>DW</b> =drinking	water	OIL A=	air <b>SO</b> =s	oil <b>S</b> I	L≖sludge	Preserv	100						-
WW= waste water SAMPLE ID	1		=ground water SCRIPTION	<b>DW</b> =drinking	ywater Grab Composite	SAM	air <b>SO</b> =s PLING TIME	oil <b>SI</b> - MATRIX		1.1.1.1.1.1.1	100						
	1	MPLE DE		DW=drinking	Grab	SAM	PLING TIME	-	, NO.		100 X						-
	SA	MPLE DE		DW=drinking	Grab Composite	SAM DATE	PLING TIME	MATRIX	, NO.	1.1.1.1.1.1.1							-
	SA	MPLE DE		DW=drinking	Grab Composite	SAM DATE	PLING TIME	MATRIX	, NO.								-
	SA	MPLE DE		DW=drinking	Grab Composite	SAM DATE	PLING TIME	MATRIX	, NO.								
	SA	MPLE DE		DW=drinking	Grab Composite	SAM DATE	PLING TIME	MATRIX	, NO.								· · · ·
	SA	MPLE DE		<b>DW</b> =drinking	Grab Composite	SAM DATE	PLING TIME	MATRIX	, NO.								·
	SA	MPLE DE		DW=drinking	Grab Composite	SAM DATE	PLING TIME	MATRIX	, NO.								
	SA	MPLE DE		DW=drinking	Grab Composite	SAM DATE	PLING TIME	MATRIX	, NO.								
SAMPLE ID	si P.O.E	AMPLE DE	SCRIPTION		Grab Composite	SAM DATE	PLING TIME	MATRIX	, NO.								-
SAMPLE ID	SI P=O.E D) $S = (H_2SO_4)$	MPLE DE </td <td>SCRIPTION</td> <td>odium Thiosul</td> <td>Grab Composite</td> <td>SAMI DATE S/11/05</td> <td>PLING TIME</td> <td>Du</td> <td>, NO.</td> <td>Time</td> <td>×</td> <td></td> <td>eceived</td> <td>)by:</td> <td></td> <td></td> <td></td>	SCRIPTION	odium Thiosul	Grab Composite	SAMI DATE S/11/05	PLING TIME	Du	, NO.	Time	×		eceived	)by:			
SAMPLE ID	SI P=O.E D) $S = (H_2SO_4)$	MPLE DE </td <td>SCRIPTION</td> <td>odium Thiosul</td> <td>Grab Composite</td> <td>SAMI DATE S/11/05</td> <td></td> <td>Du</td> <td>(NO. CONT. )</td> <td>Time 139</td> <td>×</td> <td></td> <td>eceived</td> <td>)by:</td> <td></td> <td></td> <td>- - -</td>	SCRIPTION	odium Thiosul	Grab Composite	SAMI DATE S/11/05		Du	(NO. CONT. )	Time 139	×		eceived	)by:			- - -
SAMPLE ID	SA P.O.E D.O.E P.O.E P.O.E P.O.E P.O.E $R_{2}SO_{4}$ Method Sam RB. AB.	AMPLE DE 	SCRIPTION SCRIPTION NO <sub>3</sub> ) T = (Sc Çooler #_	odium Thiosul	Grab Composite	SAMI DATE S/11/05		Du	(NO. CONT. )	Time	×		eceived	)by:	5/1	Pate 1/05	· · · · ·

1

Jeb Bush Governor





John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

Page 3 of 27

# Laboratory Scope of Accreditation

#### THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code: FL00949

(904) 363-9350

E82574 Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, FL 32216 Matrix: Drinking Water

latrix: Drinking Water			Certification	
nalyte	Method/Tech	Category	Туре	Effective Date
ndothall	EPA 548.1	Synthetic Organic Contaminants	NELAP	1/21/2005
ndrin	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
thylbenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
thylbenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
amma-BHC (Lindane, amma-Hexachlorocyclohexane)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
leptachlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
eptachlor epoxide	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
eterotrophic plate count	SM 9215 B	Microbiology	NELAP	1/21/2005
exachlorobenzene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
exachlorocyclopentadiene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
on	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
ead	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
ead	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002
lagnesium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
langanese	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
ercury	EPA 245.1	Primary Inorganic Contaminants	NELAP	4/4/2002
iercury	SM 3112 B	Primary Inorganic Contaminants	NELAP	4/4/2002
ethoxychlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
ickel	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
itrate	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
itrate-nitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
itrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
itrite as N	SM 4500-NO2 B	Primary Inorganic Contaminants	NELAP	1/21/2005
dor	SM 2150 B	Secondary Inorganic Contaminants	NELAP	2/13/2003
rthophosphate as P	EPA 365.1	Primary Inorganic Contaminants	NELAP	2/13/2003
rthophosphate as P	SM 4500-P E	Primary Inorganic Contaminants	NELAP	1/21/2005
xamyl	EPA 531.1	Synthetic Organic Contaminants	NELAP	4/19/2005
CBs	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
entachlorophenol	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
4	EPA 150.1	Primary Inorganic Contaminants,Secondary Inorganic Contaminants	NELAP	4/4/2002
cloram	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
otassium	EPA 200.7	Secondary Inorganic Contaminants	NELAP	1/21/2005
esidue-filterable (TDS)	EPA 160.1	Secondary Inorganic Contaminants	NELAP	4/4/2002
elenium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/17/2002
11 W 2 2 2 W 2 2 2	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards. NON-TRANSFERABLE 04/24/2005-E82574

#### LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440 Telephone: 407-869-1949 Florida: 800-272-1919 Fax: 407-869-6961 florida@utilitiesinc-usa.com

September 23, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd., Suite 232 Orlando, FL 32803-3767

RE: Total Trihalomethane / Haloacetic Acids Annual Monitoring Crescent Bay - PWS ID 3354686

Dear Mr. Morrison:

Please find the enclosed sample results as specified above for the 2005 monitoring period.

If you should have any questions, please call 407.869.8588, extension 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Buzand. Borep

Bryan K. Gongre Assistant Operations Manager

Enclosures

cc: Bill Coates, A.M., UIOF

# Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIC	DN (to be completed by sampler – Please type or print legibly)
System Name: <u>Cresent</u>	Bay PWSID. # 3354686
System Type (check one):	y  Ontransient Noncommunity  Ontransient Noncommunity
Address:LakeUtility Se	rvius, Inc.
200 weatherst	ick Avenue
City: Altamonte Sprin	State: <u>FL</u> ZIP Code: <u>32714</u>
Phone #:407.869.1919	Fax #: <u>40.969,6961</u>
E-Mail Address:	
•	
SAMPLE INFORMATION (to be completed	
Sample Number: <u>A052853</u>	- 0 / Location Code (If known):
Sample Date: <u>819/05</u>	Sample Time: <u>12:50</u> AM Circle One)
Sample Location (be specific): 10332	Murray Drive, Clermant, FL
Disinfectant Residual (Required when reporting	g results for trihalomethanes and haloacetic acids): <u>0, 4</u> mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for Sample (Check all that apply)
	Routine Compliance (with 62-550)
	Confirmation of MCL Exceedance* Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**
Raw (at well or intake)	Clearance (permitting)
Max Residence Time	☐Other:
Ave Residence Time	Sampling Procedure Used or Other Comments:
Near First Customer	
*See 62-550.500(6) for requiren NOTE: See 62-550.512(3) for a for nitrate or nitrite MCL	additional requirements attach a results page for each site.
Sampler's Name:Charles 5ch	vades
Sampler's Phone #: 40.869.191	
Sampler's E-Mail Address:	
CERTIFICATION (to be completed by	sampler)
I, <u>Charles Schwades</u> (Print Name)	, <u>Operator</u> (Print Title)
do HEREBY CERTIFY that the abc complete and correct.	ove public water system and sample collection information is
Signature: Charles of hu	Date: 9/19/05
Reporting Format 62-550.730	Page 1 of $\mathcal{A}$

Effective January 1995, Revised January 2004

Florida Department of		ection Safe Drinking W ling Format	/ater Program Laboratory
LABORATORY CERTIFICATION I ATTACH CURRENT DOH ANALY		pleted by lab - Please type or	print legibly)
LabName: Advanced Environment	al Labs - Orlando	Florida	Certification #: E53076
Address: 528 S. North Lake Blvd	., Suite 1016	Certification	Expiration Date: 6/30/2006
Altamonte Springs, FL	32701		Telephone #: (407) 937-1594
ANALYSIS INFORMATION (to be a	completed by lab		
PWS ID (from page 1):		Date Sample	e(s) Received: 8/11/2005 1:10:00
Lab Assigned Report Number or Jo	b ID A052853	Sample Number (	(From page 1) A052853-01
Group(s) Analyzed Results attache	ed for compliance with chap	oter 62-550, F.A.C. (check all	that apply):
Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts
🗌 All 17	Ali 30	All 21	Trihalomethanes
Partial	All Except Dioxin	🗌 Partial	Haloacetic Acids
	Partial	Radionuclides	Bromate
☐ Nitrite ☐ Asbestos Only	] Dioxin Only	🗌 Single Sample	
		Qtrly Composite**	Secondaries
Were any analyses subcontracted?	🖌 Yes 📋 No		Partial
If yes, please provide DOH certifica	tion number E82574		
ATTACH DOH ANALYTE SHEET F	OR EACH SUBCONTRAC	TED LAB	
	CERTI	FICATION	
	Laboratory Manager	·	
(Print Name)	)		
do HEREBY CERTIFY that all attac National Environmental Laboratory	hed analytical data are con Accreditation Conference (I	rect and unless noted meet a NELAC).	
Signature:	vhago	Date:	9/2/05
<ul> <li>Failure to provide a valid and curra analysis results vill result in rejectio and may result in notification of the</li> </ul>	n of the report, possible en	forcement against the public	Analyte Sheet for the attached water system for failure to sample,
** Please provide radiological sample	e dates and locations for e	each quarter.	
COMPLIANCE DETERMINATION	(to be completed by DEF	or DOH)	
Sample Collection Info Satisfactory	🖪 Yes 📓 No	Sample Analysis Info S	atisfactory: 🔳 Yes 🔳 No
Replacement Sample(s) Requested (contraction)	circle or highlight group(s) abov	e) 🗐 Revised Report Requ	uested (circle or highlight group(s) above)
Additional Monitoring Required (	circle or highlight group(s) a	above)	
Reason(s): 🔳 MCL(s) Exceeded	Detect	ion(s)	a Incomplete Report
<ul><li>Missing Analyte She</li><li>Other:</li></ul>		on Unsatisfactory	a Analysis Unsatisfactory
Person Notified:		Date	Notified:
Commonte			
Date Reviewed:		H Reviewing Official:	

.



6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Client: Utilities, Inc. Project Name: Cresent Bay Project Number: PWS ID#:

Attention: William Coates Phone Number: 8002721919

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

 Report No.:
 A052853

 Date Sampled:
 8/9/2005

 Date Received:
 8/11/05 13:10

 Date Reported:
 9/2/2005

#### **Project Description**

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

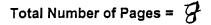
Project Name: Cresent Bay

Approved By: Mpanesmuno Leurenar Pharmer

If there are/any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.



# Advanced Environmental Laboratories, Inc.

# Analytical Report

Client: Utilities, Inc. Project Name: Cresent Bay

Matrix: Drinking Water

PWS ID#:

# Client Sample ID: 1

Site: 10332 Murray Dr

Report No.: A052853 Date/Time Sampled: 08/09/05 12:50

Ä

1

Date/Time Received: 8/11/05 13:10

Sampled By: Client Shipping Method: AEL Courier

# Sample Number: A052853-01 **Disinfection Byproducts**

Contam ID	Contam Name	MCL	Units	Analysia Resulta	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert. #
2450	Chioroacetic Acid		սց/Լ	0.81	υ	E552.2	0.81	8/18/2005	17:16	E82574
2451	Dichloroacetic Acid		ug/L	11		E552.2	0.56	8/18/2005	17:16	E82574
2452	Trichloroacetic Acid		ug/L	7.6		E552.2	0.60	8/18/2005	17:16	E82574
2453	Bromoacetic Acid		ug/L	1.2	1	E552.2	0.34	8/18/2005	17:16	E82574
2454	Dibromoacetic Acid		ug/L	3.6		E552.2	0.45	8/18/2005	17:18	E82574
2941	Chloroform		ug/L	20		E502.2	0.31	8/15/2005	14:26	E82574
2942	Bromoform		ug/L	2.6		E502.2	0.36	8/15/2005	14:26	E82574
2943	Bromodichloromethane		ug/L	13		E502.2	0.38	8/15/2005	14:26	E82574
2944	Dibromochloromethane		ug/L	8.5		E502.2	0.28	8/15/2005	14:26	E82574

The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit. ı.

υ The compound was analyzed for but not detected.

MDL Method Reporting Limit For all Results qualified with an I, the PQL is defined to be 4 times the MDL



Client:	UTILITIES, II	NC. (UTL-A)	Project name: CRESCENT BAY
Date/Time Rcvd:	8/11/05	13.10	Log-In request number: A052853
Received by:	RPG		Completed by: RPG

#### **Cooler/Shipping Information:**

Courier: 🖾 AEL 🗆 Client 🗆 UPS 🗆 Pony Express 🖾 FedEx 🗅 Other (describe):

Type: 🖾 Cooler 🗖 Box 🗆 Other (describe) \_\_\_

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	1				
Temp (°C)	2				
Temp taken from	Temp blank Cooler	Temp blank     Cooler	Temp blank     Cooler	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	Temp blank     Cooler
Temp measured with	☐ IR gun ☐ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):

#### Other Information:

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
١.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?			
3.	Were custody papers properly filled out (ink, signed, match labels)?	1		
4.	Did all bottles arrive in good condition (unbroken)?			
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?	1		
6.	Did the sample labels agree with the chain of custody?	1		
7.	Were correct bottles used for the tests indicated?			
8.	Were proper sample preservation techniques indicated on the label?	1		
9.	Were samples received within holding times?	1		
10.	Were all VOA vials checked for the presence of air bubbles?			1
11.	Were there air bubbles present in the VOA vials?			1
12.	Were samples in direct contact with wet ice? If "No," check one: D NO ICE D BLUE ICE	1		
13.	Was the cooler temperature less than 6°C?	1		
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.			· ·
15.	Were the sample containers provided by AEL?	1		
16.	Were samples accepted into the laboratory?			
17.	Was it necessary to split samples into other bottles?			

#### <u>Kit ID</u>

## Comments:

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\_\_\_\_\_

Chain-of-Custody for AEL Orlando to AEL Jax

AEL Jax 6601 Southpoint Parkway Jacksonville, Fl 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde

**Check if Rush** 

AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701

Contact Person: Myrna Santiago

Project #: A052853 CustomerName: Utilities, Inc.

Collector: Client

la	b Code	Client Sample ID	Test	Matrix	<b>Collect Date</b>	; / Time	Receive Date	Due Date	# Bottles	Bottle Type (Pres.)
	2853-01	1	550 Haloacetic Acids (J)-55	Drinking Water	8/9/2005	12:50	8/11/05 13:10	8/23/2005		40mL Vial Amber
A05	2853-01	1	THMs (DW)	Drinking Water	8/9/2005	12:50	8/11/05 13:10	8/23/2005		40mL VOC vial

Date/Time: Shipping Receiver: AEL Orlando Relinquisher: Date/Time: Shipping Relinquisher: AEL Courier Jacksonville Receiver:

Page 1 of 1

Advanced Environmental Laboratories, Inc.	CHAIN	OF CUS	tody re	CORD			LAE	3 NUN	IBER:					
Lacksonville: 6601 Southpoint Parkway, Jacks     Tampa: 5810-D Breckenridge Parkway,     Gainesville: 2106 NW 67th Place, Suite 7, G	Tampa, FL 33610 • (813) 6	30-9616 Fax (8	313) 630-4327	0						Pa	.ge	1	of	2
CLIENT NAME:	PROJECT NAME:				E	IOTTLE SIZE								
UTILITIES INC						& TYPE								
ADDRESS: 200 WENTHERS FIELD AUE	P.O. NUMBER / PF	ROJECT NU	JMBER:		}	AR								
	PROJECT LOCAT	ION:		:		N E   A Q   L U	TT	TH I	МŚ	+	Ht	A	کړک	A B
ALTA MONTE SAINGER 32714 PHONE: FAX: 407-869-1919 407-869-6961						Y I S R								N U
CONTACT: COATES	SAMPLED BY:					I E S D								M B E
TURN AROUND TIME: REMARKS / SPE	CIAL INSTRUCTION													н
STANDARD		$\frac{CR.U}{UKR}$	DEST- CI	2										
CR .BAY - C	Le 0.4	ANB.	HIC.C	12				-						
	and the second second second second second second second second second second second second second second second	-												
CR. WEST - C	12						<u>SRI</u>	AC	5	$\underline{p}_{\underline{N}}$	<u> </u>	<u>6</u>		$\left  \cdot \right $
WW= waste water SW=surface water GW=ground water	DW=drinking water C	DIL A=		oil SL	0.00	Preserv	<u>X</u>	X	X	X	$\left  \right\rangle$	X	X	X
SAMPLE ID SAMPLE DESCRIPTION	Grab Composite	DATE	PLING	MATRIX	NO. CONT.									
AUS2850 1635 US 27- (7-11		8/10/05	1405	D.W	6		Х		 					
AOSZ851 ORANGES-10001 CRENSTAL	J CT 6	9/0/15	1110	DW	6			X		<u> </u>				
& ASSISST Hickland PT - HUHO CHARESS		$\times$	$\mathbf{X}$	DW	6				X					
AOS2853 CRESCENT BAY - 10332 MUNRA		3/9/05	1250	D.W	6		·			X	 	ļ		
AUS2854 4K. CR. H. 16 - 10351 Thomps		3/9/05	1415	Ъω	6						X			
A051955 CR. WEST - 10731 PRIEB		9/1/05	1340	DG)	6							X		
		41405	1525	Đω	6								X	
AUS285 6 /15 RIDGE CLUB - 12134 NUTCO	K DR G	71903	10.0	2,00										
AUS2856 /15 RIDGE CLUB - 12134 OUTCOM AUS2857 AMB HILL-12647 VALE		3/9/05	1210	DW	6		L		-		 	_		X
A652857 AMB $H_1LC-12G47$ VALE, I = ice H = (HCI) S = (H_2SO4) N = (HNO3) T = (Soc		3/9/05		DW	Date,	Time			Receiv	red by:	 		-F	Time 930
		3/9/05	1210	DW		0930	F		Receiv	red by:	 }	81	1/ust a	Time 930 313

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Jeb Bush Governor



John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

Page 4 of 27

Laboratory Scope of Accreditation

#### THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code: FL00949

(904) 363-9350

E82574

Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, FL 32216

Matrix: Drinking Water	Method/Tech	Category	Certification	Effective Date
Analyte	EPA 200.7	Primary Inorganic Contaminants	Type NELAP	1/21/2005
Silica as SiO2			NELAP	4/4/2002
Silver	EPA 200.7	Secondary Inorganic Contaminants		
Silvex (2,4,5-TP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Simezine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/24/2005
Sodium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Styrene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Styrene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Sulfate	EPA 375.4	Secondary Inorganic Contaminants	NELAP	2/13/2003
Surfactants - MBAS	EPA 425.1	Secondary Inorganic Contaminants	NELAP	1/21/2005
etrachloroethylene (Perchloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
etrachloroethylene (Perchloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Thallium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
Coluene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
oluene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Total coliforms	SM 9222 B	Microbiology	NELAP	4/4/2002
fotal coliforms & E. coli	SM 9223 B	Microbiology	NELAP	9/5/2002
fotal haloscetic acids	EPA 552.2	Synthetic Organic Contaminants	NELAP	1/21/2005
fotal trihalomethanes	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Total trihalomethanes	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Foxaphene (Chlorinated camphene)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
rans-1,2-Dichloroethylene	EPA 502.2	· Other Regulated Contaminants	NELAP	4/4/2002
rans-1,2-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Frichloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
Frichloroethene (Trichloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Frichloroethene (Trichloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Furbidity	EPA 180.1	Secondary Inorganic Contaminants	NELAP	7/17/2002
/inyl chloride	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Vinyl chloride	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Xylene (totai)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Xylene (total)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Zinc	EPA 200,7	Secondary Inorganic Contaminants	NELAP	4/4/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.

NON-TRANSFERABLE 04/24/2005-E82574

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TTHM/HAA5 REPORTING COMPLIANCE SUMMARY FOR PWSs	MONITORI	IG ANNUALLY	
TTHM COMPLIANCE SUMMARY	•	HAAS COMPLIANCE SUMMARY	
Provide the number of TTHM samples taken during the last year"	1	Provide the number of HAA5 samples taken during the last year*	1
Calculate the arithmetic average of all TTHM samples taken over the last year	44.1	Calculate the arithmetic average all HAA5s samples taken over the last , year	23.4
Does the arithmetic average of the TTHM samples exceed the Maximum Contaminant Level of 0.060 mg/L for TTHMs? (YES/10)**	ND	Does the arithmetic average of the HAA5 samples exceed the Maximum Contaminant Level of 0.060 mg/L for HAA5s? (YES/10)**	NO

\*Also, for each sample taken during the last year, provide the information requested in the tables on pages 3 and 4 of this format.

100 back sample later during the last year, provide the within auth requested in the tables on pages 3 and 4 or this format.
 \*\*If the TTHM or HAA5 sample (or average of the samples, if more than one sample is taken) exceeds the Maximum Contaminant Level, the system must increase monitoring to one TTHM and one HAA5 sample per treatment plant per quarter, taken at a point in the distribution system reflecting the maximum residence time, until the system meets the criteria in 40 CFR 131.132(b)(1)(iv). Please see 40 CFR 141.132 (b)(1) for complete details.

TOTAL TRIHALOMETHAN	E (TTHM) ANALYS	S RESULTS	FOR REPORTIN	g PERIOD		Alexandra	an and an and a second	The state of the state
Sample Lõcation	Sample Location In the Distribution System (Average or Maximum Residence Time)	Date of Sample Collection (mo/da/yr)	Disinfectant Residual (mg/L) at Time of Sample Collection	Name of Person Collecting Sample	Date of Analysis (moldalyr)	Analytical Method	Laboritory Nilme & Certification Number	
10332 Murray Drive	1	8/9/05	0,4	C.Schwades	8115/05	E 502.2	AEL E 53076	44.1
					+			+
			+		+	+		
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4								

AAS) ANAL TOIS M	30L13 FUR						
Semple Location in the Distribution System (Average or Maximum Residence Time)	Date of Sample Collection (mo/da/yr)	Disinfectant Residual (mg/L) at Time of Sample Collection	Name of Person Collecting Semple	Date of Analysis (mo/da/yr)	Analytical Method	Laboratory Name & Certification Number	HAA5 Analysis Result (ug/L
MRT	9/9/05	0.4	C.Schundes	5118105	6552.2	AEL E 53076	23.4
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				<u> </u>	<b></b>		+
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	Semple Location in the Distribution System (Average or Meximum Residence Time)	Semple Location In the Distribution System (Average or Maximum Residence Time)	Semple Location In the Distribution System (Average or Maximum Residence Time)         Date of Semple Collection (mo/da/yr)         Disinfectant Residuel (mg/L) st Time of Sample Collection	System (Average or Maximum         Collection (mo/de/yr)         at Time of Sample         Collecting Sample           Residence Time)         (mo/de/yr)         Collection         Sample	Semple Location In the Distribution System (Average or Maximum Residence Time)         Date of Semple Collection (mo/da/yr)         Disinfectant Residual (mg/L) st Time of Sample Collection         Name of Person Sample Collection         Date of Analysis (mo/da/yr)	Semple Location In the Distribution System (Average or Maximum Residence Time)         Date of Semple Collection         Disinfectant Residuel (mg/L) Semple Semple         Name of Person Semple         Date of Analysis (mo/da/yr)         Analytical Method	Semple Location In the Distribution System (Average or Maximum Residence Time)         Date of Semple Collection         Disinfectant Residual (mg/L) at Time of Sample Collection         Name of Person Sample Collecting Sample         Date of Analysis (mo/da/yr)         Analytical Method         Laboratory Name & Certification Number

Page 4 of 5

Effective January 2004

## LAKE UTILITY SERVICES, INC.

AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

661

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440 Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 E-Mail: uif@iag.net

L

April 20, 2006

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. - Suite 232 Orlando, FL 32803

RE: Triennial Monitoring Chapter 62-550 FAC Inorganics/VOC/SOC/Secondaries Crescent Bay WTP PWS ID# 335488-9

Dear Mr. Morrison:

Enclosed please find the results of samples taken February 20th and 21st, 2006 for the above referenced analysis and system.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, ext. 502.

Sincerely,

LAKE UTILITY SERVICES , INC.

Walter to Cost to T

William H. Coates Assistant Operations Manager

Enclosures: Sample Results

Cc: Chuck Schwades, Area Manager, UIOF Bryan K. Gongre, Regional Manager, UIOF

Page 1 of 1 + 100.0.4 10 Operations 660\31212006/Tri Cr Bay 02202006.doe

# Fiorida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIC	<b>DN</b> (to be completed by sampler – Please typ	e or print legibly)				
System Name: Crescent Bay WTP	PWS1.D	. #: 335488-9				
System Type (check one):	y Nontransient Noncommunity	Transient Noncommunity				
Address: 11001 Crescent Bay Blvd.	-	•				
City: <u>Clermont</u>	State: Fla.	ZIP Code: <u>34711</u>				
Phone #: 407-869-1919	Fax #: <u>407-86</u>	9-6961				
E-Mail Address: <u>b.coates@utilitiesinc-usa</u>	a.com					
SAMPLE INFORMATION (to be completed	by sampler)					
Sample Number: <u>11116DW1</u>	Location Code (if kn	own): <u>Water</u>				
Sample Date: <u>2/20/2006 &amp; 2/21/2006</u>	Sample Time: <u>2:40</u>	pm & 7:30 am AM PM (Circle One)				
Sample Location (be specific): <u>P.O.E.</u>	and the second second second second second second second second second second second second second second second					
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic acids):	mg/L Field pH:				
Sample Type (Check Only One)	Reason(s) for Sa	mple (Check all that apply)				
	Routine Compliance (with 62-550)	Quarterly (Which Quarter?				
Entry Point (to Distribution)	Confirmation of MCL Exceedance*	Special (not for compliance with 62-550)				
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**	☐Violation Resolution				
Raw (at well or intake)	Clearance (permitting)	Replacement (of Invalidated Sample)				
Max Residence Time	Other:					
Ave Residence Time	Sampling Procedure Used or Other Co	mments:				
Near First Customer						
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for a for nitrate or nitrite MCL	dditional requirements attach	2-550.550(4) for requirements and a results page for each site.				
Sampler's Name: Charles G. Schwades		· · · · · · · · · · · · · · · · · · ·				
Sampler's Phone #: <u>321-388-7895</u>	Sampler's Fax #: <u>4</u>	07-869-6961				
Sampler's E-Mail Address:						
<b>CERTIFICATION</b> (to be completed by	sampler)					
L Charles G. Sebwades	, <u>Area Mana</u>	ner				
I, <u>Charles G. Schwades</u> (Print Name)		(Print Title)				
do HEREBY CERTIFY that the abo complete and correct.	ve public water system and sampl	le collection information is				
	I II - 1					
Signature:	And Company	Date:////////////////////////////////				

Reporting Format 62-550.730 Effective January 1995, Revised January 2004

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## Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Form

		rogram Laboratory Reporting For	
Laboratory Certification Info	ormation (to be comple	eted by lab)	
Lab Name: Flowers Chemic	al Laboratories, Inc.	Florida Certifica	, ation #: E83018
Address: P. O. Box 150597	7	Certification Ex	piration Date: 6/30/2006
Altamonte Springs	s, FL 32715-0597	Phone #: 407-3	339-5984
Analysis Information (to	be completed by lab)	Papart Number	. 11110
•	be completed by lab)	Report Number	
Sample Number: 11116DW	1	Date Sample R	eceived: 02/21/06
Group(s) analyzed and resul	ts attached for compliance	with Chapter 62-550, F.A.C. (cf	neck all that apply)
Inorganics.	Volatile Organics	Radiopuclides.	Disinfection Byproducts
	🗹 All 21 🛛 Partial	Single Sample	Trihalomethanes
Partial		Otrly Composite* •	Haloacetic Acids
🗖 Nitrate			Bromate
Nitrite	Synthetic Organics	Secondaries	Chlorite
Asbestos	🗆 All 30 🗹 Partial	🗹 All 14 🛛 Partial	
Were any analyses subcontr	racted? 🛛 Yes 🗹 No		ntractor's Florida drinking water ch result provided by that lab).
		Certification	
		Y CERTIFY that all attached analy ental Laboratory Accreditation Co	
Signature:	$\sim \sim$	Date: 03/10/06	3
	rejection of the report and pos	th lab ID number and a current Analys ssible enforcement against the public for each quarter.	
Compliance Determination	(to be complet	ted by DEP or DOH)	
Comments:	e or highlight groups above port 🛛 Loo te Sheet(s) 🔹 Oti	cation Unsatisfactory her Dat	d (circle or highlight groups above) Analysis Unsatisfactory e Notified:

i.

#### Safe Drinking Water Program Laboratory Reporting Form

Inorganic Contaminants: 62-550.310(1) Lab ID: 11116DW1 PWS ID: 3354883-9 Sample ID: water

Contam				Analysis		Analytical	Lab	Analysis	Analysis
ID	Contam Name	Units	MCL	Result	Qualifier	Method	MDL	Date	Time
1005	Arsenic	mg/L	0.01 (0.05)	0.00190		EPA200.8	0.00100	02/23/06	
1010	Barium	mg/L	2	0.0109		EPA200.8	0.00200	02/23/06	
1015	Cadmium	mg/L	0.005	0.00100	U	EPA200.8	0.00100	02/23/06	
1020	Chromium	mg/L	0.1	0.00590		EPA200.8	0.00100	02/23/06	
1024	Cyanide	mg/L	0.2	0.00500	U	SM4500-CN E	0.00500	02/27/06	
1025	Fluoride	mg/L	2.0 (4.0)	0.200	U	EPA300.0	0.200	02/22/06	
1030	Lead	mg/L	0.015	0.00100	U	EPA200.8	0.00100	02/23/06	
1035	Mercury	mg/L	0.002	0.000200	U	EPA245.1	0.000200	03/02/06	
1036	Nickel	mg/L	0.1	0.00200	U	EPA200.8	0.00200	02/23/06	
1040	Nitrate	mg/L	10	0.492		EPA300.0	0.0500	02/22/06	12:42 PM
1041	Nitrite	mg/L	1	0.0500	υ	EPA300.0	0.0500	02/22/06	12:42 PM
1045	Selenium	mg/L	0.05	0.00200	U	EPA200.8	0.00200	02/23/06	
1052	Sodium	mg/L	160	9.49		EPA200.7	0.500	02/22/06	
1074	Antimony	mg/L	0.006	0.00100	U	EPA200.8	0.00100	02/23/06	
1075	Beryllium	mg/L	0.004	0.00100	υ	EPA200.8	0.00100	02/23/06	
1085	Thallium	mg/L	0.002	0.00100	U	EPA200.8	0.00100	02/23/06	

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#### Safe Drinking Water Program Laboratory Reporting Form

Secondary Contaminants: 62-550.320 Lab ID: 11116DW1 PWS ID: 3354883-9

Sample ID: water

Contam				Analysis		Analytical	Lab	Analysis	Analysis
ID	Contam Name	Units	MCL	Result	Qualifier	Method	MDL	Date	Time
1002	Aluminum	mg/L	0.2	0.0200	U	EPA200.8	0.0200	02/23/06	
1017	Chloride	mg/L	250	19.5		EPA300.0	0.400	02/22/06	
1022	Copper	mg/L	1.0	0.00200		EPA200.8	0.00100	02/23/06	
1025	Fluoride	mg/L	2.0 (4.0)	0.200	U	EPA300.0	0.200	02/22/06	
1028	Iron	mg/L	0.3	0.0776		EPA200.7	0.0100	02/22/06	
1032	Manganese	mg/L	0.05	0.0100	U	EPA200.7	0.0100	02/22/06	
1050	Silver	mg/L	0.1	0.00100	U	EPA200.8	0.00100	02/23/06	
1055	Sulfate	mg/L	250	15.5		EPA300.0	1.00	02/22/06	
1095	Zinc	mg/L	5	0.0100	υ	EPA200.8	0.0100	02/23/06	
1905	Color	PCU	15 color units	s 1.00	U	SM2120B	1.00	02/21/06	04:16 PM
1920	Odor	TON	3	1.00	U	SM2150B	1.00	02/21/06	
1925	рН	pН	6.5 -8.5	7.37		EPA150.1	0.0100	02/22/06	11:45 AM
1930	Total Dissolved Solids	mg/L	500	214		SM2540C	2.50	02/24/06	
2905	Foaming Agents	mgLAS(340)/L	0.5	0.200	U	SM5540C	0.200	02/21/06	09:20 AM

#### Safe Drinking Water Program Laboratory Reporting Form

Volatile Organics: 62-550.310(2)(b) Lab ID: 11116DW1 PWS ID: 3354883-9

3-9 Sample ID: water

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Contam				Analysis		Analytical	Lab	Analysis	Analysis
ID	Contam Name	Units	MCL	Result	Qualifier	Method	MDL	Date	Time
2378	1,2,4,-trichlorobenzene	ug/L	70	0.500	- <u> </u>	EPA524.2	0.500	02/24/06	
2380	cis-1,2-Dichloroethylene	ug/L	70	0.500	U	EPA524.2	0.500	02/24/06	
2955	Xylenes	ug/L	10,000	0.500	U	EPA524.2	0.500	02/24/06	
2964	Dichloromethane	ug/L	5	0.500	U	EPA524.2	0.500	02/24/06	
2968	o-dichlorobenzene	ug/L	600	0.500	U	EPA524.2	0.500	02/24/06	
2969	Para-dichlorobenzene	ug/L	75	0.500	U	EPA524.2	0.500	02/24/06	
2976	Vinyl Chloride	ug/L	1	0.500	U	EPA524.2	0.500	02/24/06	
2977	1,1-Dichloroethylene	ug/L	7	0.500	U	EPA524.2	0.500	02/24/06	
2979	trans-1,2-Dichloroethylene	ug/L	100	0.500	U	EPA524.2	0.500	02/24/06	
2980	1,2-dichloroethane	ug/L	3(5)	0.500	υ	EPA524.2	0.500	02/24/06	
2981	1,1,1-trichloroethane	ug/L	200	0.500	υ	EPA524.2	0.500	02/24/06	
2982	Carbon tetrachloride	ug/L	3	0.500	U	EPA524.2	0.500	02/24/06	
2983	1,2-dichloropropane	ug/L	5	0.500	U	EPA524.2	0.500	02/24/06	
2984	Trichloroethylene	ug/L	3(5)	0.500	U	EPA524.2	0.500	02/24/06	
2985	1,1,2-trichloroethane	ug/L	5	0.500	U	EPA524.2	0.500	02/24/06	
2987	Tetrachloroethylene	ug/L	3(5)	0.500	U	EPA524.2	0.500	02/24/06	
2989	Monochlorobenzene	ug/L	100	0.500	U	EPA524.2	0.500	02/24/06	
2990	Benzene	ug/L	1	0.500	U	EPA524.2	0.500	02/24/06	
2991	Toluene	ug/L	1,000	0.500	U	EPA524.2	0.500	02/24/06	
2992	Ethylbenzene	ug/L	700	0.500	U	EPA524.2	0.500	02/24/06	
2996	Styrene	ug/L	100	0.500	U	EPA524.2	0.500	02/24/06	

# Safe Drinking Water Program Laboratory Reporting Form

Synthetic Organics: 62-550.310(2)(c) Lab ID: 11116DW1 PWS ID: 3354883-9

354883-9 Sample ID: water

Contam				Analysis		Analytical	Lab	Analysis	Analysis
ID	Contam Name	Units	MCL	Result	Qualifier	Method	MDL	Date	Time
2005	Endrin	ug/L	2	0.0100	<u> </u>	EPA505	0.0100	02/28/06	
2010	Lindane	ug/L	0.2	0.0100	U	EPA505	0.0100	02/28/06	
2015	Methoxychlor	ug/L	40	0.0500	U	EPA505	0.0500	02/28/06	
2020	Toxaphene	ug/L	3	0.500	U	EPA505	0.500	02/28/06	
2031	Dalapon	ug/L	200	0.100	U	EPA515.1	0.100	03/07/06	
2032	Diquat	ug/L	20	0.400	U	EPA549.2	0.400	03/08/06	
2033	Endothall	ug/L	100	9.00	U	EPA548.1	9.00	03/09/06	
2034	Glyphosate	ug/L	700	6.00	U	EPA547	6.00	03/06/06	
2035	Di(2-ethylhexyl) adipate	ug/L	400	0.600	U	EPA525.2	0.600	03/01/06	
2036	Oxamyl (Vydate)	ug/L	200	2.00	U	EPA531.1	2.00	02/27/06	
2037	Simazine	ug/L	4	0.0700	U	EPA507	0.0700	03/06/06	
2039	Di(2-ethylhexyl)phthalate	ug/L	6	0.600	U	EPA525.2	0.600	03/01/06	
2040	Picloram	ug/L	500	0.100	U	EPA515.1	0.100	03/07/06	
2041	Dinoseb	ug/L	7	0.200	U	EPA515.1	0.200	03/07/06	
2042	Hexachlorocyclopentadiene	ug/L	50	0.100	U	EPA505	0.100	02/28/06	
2046	Carbofuran	ug/L	40	0.900	U	EPA531.1	0.900	02/27/06	
2050	Atrazine	ug/L	3	0.100	U	EPA507	0.100	03/06/06	
2051	Alachlor	ug/L	2	0.200	U	EPA507	0.200	03/06/06	
2065	Heptachlor	ug/L	0.4	0.0100	U	EPA505	0.0100	02/28/06	
2067	Heptachlor epoxide	ug/L	0.2	0.0100	U	EPA505	0.0100	02/28/06	
2105	2,4-D	ug/L	70	0.100	U	EPA515.1	0.100	03/07/06	
2110	2,4,5-TP	ug/L	50	0.200	υ	EPA515.1	0.200	03/07/06	
2274	Hexachlorobenzene	ug/L	1	0.100	U	EPA505	0.100	02/28/06	
2306	Benzo(a)pyrene	ug/L	0.2	0.0200	υ	EPA550	0.0200	03/07/06	
2326	Pentachlorophenol	ug/L	1	0.0400	U	EPA515.1	0.0400	03/07/06	
2383	Polychlorinated biphenyls (PCBs)	ug/L	0.5	0.100	U	EPA505	0.100	02/28/06	
2931	Dibromochloropropane	ug/L	0.2	0.0200	ບ	EPA504.1	0.0200	03/02/06	
2946	Ethylene Dibromide	ug/L	0.02	0.0100	U	EPA504.1	0.0100	03/02/06	
2959	Chlordane	ug/L	2	0.0100	U	EPA505	0.0100	02/28/06	
9999	Diquat Extraction	mL		100		X549.2		02/23/06	
9999	Chlor Herb Extraction	mL		1000		X515.1		03/02/06	
9999	Benzo(a)pyrene Extraction	mL		1000		X550		02/27/06	
9999	Endothall_Extraction	mL		100		X548		02/23/06	
9999	Brom Insect Extraction	mL		35.0		X504		02/27/06	-
9999	Phos Pest Extraction	mL		1000		X507		03/01/06	-

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Safe Drinking Water Program Laboratory Reporting Form

9999 Chlor Pest Extraction

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mL

35.0

X505

02/27/06

FLOWER CHEMIC, LABORATOR IN CORPORA		Å			L	48 Ali Bu Fa	tamo is: 4 ix: 4	ewt onte 107-1	oury 9 Sp 339 260	emi port pring -598 -611 abs.	: Av s, F 34 10	e. L 32		<b>ator</b> i 1	ies,	Inc	-		Po Bu	53 S rt St s: 77	outl . Lu 72-3	h US	: Hwy FL 3 1006	<b>i Lab</b> 7. 1 14952	s-Souti
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407-869-1919 Sempled By (BEINE)								PL	ublic V	Water	Syst	em Tv	De:	 Г			Jse Co					COMA	AENTS		
Chuck Schwar	les													nmunit											
Sampler Signatur		Date Sampl	led			PRE	SERV					-7	7		-7			7				<u> </u>	7		
DRINKING WATER - Chain of C	ustody			NUMBER	щ	Ŧ	-		°0,		/	Secon Interna	Caries		/ /	\$		/ /	/	455 R428 R42	\$2 }		/ ,		ptin
NO. SAMPLE DESCRIPTION	DATE	TIME	LAB NO.	4	NONE	NaOH	°ONH7	Ÿ	Na <sub>2</sub> S <sub>2</sub> (			*/ °	ة ک_	?/ Ş	³/ ş				3/3		Soleson,				γik ≻ ι• Fleid
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2 Sec/Prim Matals	720/06	2:54		1			Х				X	X										+			1.9
3 Prim CYANide	2/20/05	2:55		(		X					X											+	╂───		1.9
4 Order/color	2/20/06	1449		T								X											<u> </u>		<u> </u>
5 525.2/550 (Soc	2/20/06	2:46		2				X						X								<del> </del>	┼		1.9
6 507/515,1/548,1/547	3/20/06	1440		ł					X													+	<u> </u>		1.9
<sup>7</sup> EOB/OBCA (Soc)	26.1	0730	-	2		<b>  </b>			X		+	-+		X								+			1.9
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PDW 02-04

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LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714



CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440

Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 E-Mail: uif@iag.net

August 11, 2006

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. – Suite 232 Orlando, FL 32803

Re: Second Quarter SOC Monitoring Chapter 62-550 FAC Lake Utility Services, Inc. – North/Crescent Bay PWS ID# 3354883-9

Dear Mr. Morrison:

Enclosed please find the second quarter results of samples taken for the above referenced analysis and system during calendar year 2006.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, ext. 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Bugart. Dog

Bryan K, Gongre Regional Manager

Cc: Domenic Gentilucci, AM, UIF

Enclosures: Sample Results

# Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIO	N (to be completed by sampler – Please ty	ne or print legibly)
System Name: <u>Crescent Bay Water Plant</u>	سيدهم	a present pres
System Type (check one): Southand		بالمستاليهما ليستا ليستا ليشيأ
		,
City: Altamonte Springs	State: <u>Fl</u>	ZIP Code: <u>332714</u>
Phone #: 407-869-1919	Fax #: <u>407-8</u> 6	69-6961
E-Mail Address:		
SAMPLE INFORMATION (to be completed		
Sample Number: 17999DW1		nown):
Sample Date: <u>6-15-06</u>		20 PM AM PM (Circle One)
Sample Location (be specific): P.O.E.		
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic acids)	: <u>1.8</u> mg/L Field pH: <u>6.8</u>
Sample Type (Check Only One)	Reason(s) for Sa	ample (Check all that apply)
	Routine Compliance (with 62-550)	
	_)	
Entry Point (to Distribution)	Confirmation of MCL Exceedance*	Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**	□ Violation Resolution
Raw (at well or intake)	Clearance (permitting)	Replacement (of invalidated Sample)
Max Residence Time	□ Other:	
Ave Residence Time	Sampling Procedure Used or Other Co	omments:
Near First Customer		
rSee 62-550,500(6) for requireme NOTE: See 62-550,512(3) for ad for nitrate or nitrite MCL c	ditional requirements attact	32-550.550(4) for requirements and n a results page for each site.
Sampler's Name: <u>Steve Pfouts</u>		
Sampler's Phone #: <u>407-869-1919</u>	Sampler's Fax #: 4	407-869-6961
Sampler's E-Mail Address:		
CERTIFICATION (to be completed by		
CERTIFICATION (to be completed by s	sampler)	
I, Steve Pfouts	· · · · · · · · · · · · · · · · · · ·	
(Print Name)		(Print Title) <u>Operator</u>
do HEREBY CERTIFY that the abov complete and correct.	e public water system and samp	le collection information is
Signature: <u>1200 Place</u>		Date: 7/21/06
)		

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# Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Form

Lab Name: Flowers Chemic Address: P. O. Box 150593	cal Laboratories, Inc.	Florida Cer	tification #: E83018
	7		on Expiration Date: 6/30/2007
Altamonte Spring	s, FL 32715-0597		07-339-5984
Analysis Information (to	be completed by lab)	Report Nur	nber: 17999
Sample Number: 17999DW	/1	Date Samp	ble Received: 06/15/06
Group(s) analyzed and resul	Its attached for compliance	with Chapter 62-550, F.A.C	2. (check all that apply)
Inorganics.	Volatile Organics	<b>Badionuclides</b>	Disinfection Byproducts
🗆 All 17	🛛 All 21 💭 Partial	🗖 Single Sample	🔲 Trihalomethanes
Partial		Catrly Composite**	Haloacetic Acids
Nitrate			Bromate
□ Nitrite	Synthetic Organics	Secondaries	Chlorite
Asbestos	🗆 All 30 🗹 Partial	All 14 Partial	
Were any analyses subcontr			ubcontractor's Florida drinking water h each result provided by that lab).
		ntal Laboratory Accreditation	N SOMOIDING (NELAC).
Signature:		Date: 07/1	2/06
<ul> <li>Failure to provide a valid and analysis results will result in re-</li> <li>Please provide radiochemical</li> </ul>	ejection of the report and poss	sible enforcement against the pu	nalyte Sheet for the attached ublic water system for failure to sample.
Compliance Determination	(to be complete	ed by DEP or DOH)	
Sample Collection Info Satisf Resample Requested (circle Reason(s): Incomplete Rep Missing Analyt Person Notified:	e or highlight groups above port Loc te Sheet(s) Oth	ation Unsatisfactory	ested (circle or highlight groups above Analysis Unsatisfactory
			Date Notified:
	- <u></u>	······································	
	DEP/DOH Reviewing	o Official:	

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#### Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Form

Synthetic Organics: 62-550.310(2)(c) Lab ID: 17999DW1 PWS ID: 3354883-9 Sample ID: Cresent Bay POE

Contam				Analysis		Analytical	Lab	Analysis	Analysis
ID	Contam Name	Units	MCL	Result	Qualifier	Method	MDL	Date	Time
2005	Endrin	ug/L	2	0.0100	U	EPA505	0.0100	06/23/06	
2010	Lindane	ug/L	0.2	0.0100	U	EPA505	0.0100	06/23/06	
2015	Methoxychlor	ug/L	40	0.0500	U	EPA505	0.0500	06/23/06	
2020	Toxaphene	ug/L	3	0.500	υ	EPA505	0.500	06/23/06	
2031	Dalapon	ug/L	200	0.100	υ	EPA515.1	0.100	07/06/06	
2032	Diquat	ug/L	20	0.400	υ	EPA549.2	0.400	06/27/06	
2033	Endothall	ug/L	100	9.00	บ	EPA548.1	9.00	07/03/06	
2034	Glyphosate	ug/L	700	6.00	U	EPA547	6.00	06/28/06	
2035	Di(2-ethylhexyl) adipate	ug/L	400	0,600	U	EPA525.2	0.600	07/03/06	
2036	Oxamyl (Vydate)	ug/L	200	2.00	U	EPA531.1	2.00	06/26/06	
2037	Simazine	ug/L	4	0.0700	U	EPA507	0.0700	07/04/06	
2039	Di(2-ethylhexyl)phthalate	ug/L	6	0.600	U	EPA525.2	0.600	07/03/06	
2040	Pictoram	ug/L	500	0.100	U	EPA515.1	0.100	07/06/06	
2041	Dinoseb	ug/L	7	0.200	U	EPA515.1	0.200	07/06/06	
2042	Hexachlorocyclopentadiene	ug/L	50	0.100	U	EPA505	0.100	06/23/06	
2046	Carbofuran	ug/L	40	0.900	U	EPA531.1	0.900	06/26/06	
2050	Atrazine	ug/L	3	0.100	U	EPA507	0.100	07/04/06	
2051	Alachlor	ug/L	2	0.200	U	EPA507	0.200	07/04/06	
2065	Heptachlor	ug/L	0.4	0.0100	U	EPA505	0.0100	06/23/06	
2067	Heptachlor epoxide	ug/L	0.2	0.0100	U	EPA505	0.0100	06/23/06	
2105	2,4-D	ug/L	70	0.100	U	EPA515.1	0.100	07/06/06	
2110	2,4,5-TP	ug/L	50	0.200	U	EPA515.1	0.200	07/06/06	
2274	Hexachlorobenzene	ug/L	1	0.100	U	EPA505	0.100	06/23/06	
2306	Benzo(a)pyrene	ug/L	0.2	0.0200	U	EPA550	0.0200	06/30/06	
2326	Pentachlorophenol	ug/L	1	0.0400	U	EPA515.1	0.0400	07/06/06	
2383	Polychlorinated biphenyls (PCBs)	ug/L	0.5	0.100	U	EPA505	0.100	06/23/06	
2931	Dibromochloropropane	ug/L	.2	0.0200	υ	EPA504.1	0.0200	06/23/06	
2946	Ethylene Dibromide	ug/L	0.02	0.0100	υ	EPA504.1	0.0100	06/23/06	
2959	Chlordane	ug/L	2	0.0100	U	EPA505	0.0100	06/23/06	
9999	Brom Insect Extraction	տե		35.0		X504		06/22/06	
9999	Phos Pest Extraction	mL		1000		X507		06/20/06	
9999	Diquat Extraction	mL		100		X549.2		06/22/06	
9999	Chlor Pest Extraction	mL		35.0		X505		06/22/06	
9999	Chlor Herb Extraction	mL		1000		X515.1		06/29/06	-
9999	Endothall_Extraction	mL		100		X548		06/22/06	

# Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Form 9999 Benzo(a)pyrene Extraction mL 1000 X550 06/16/06



Flowers Chemical Laboratories. Inc.
 481 Newburyport Ave.
 Altamonte Springs, FL 32701
 Bus: 407-339-5984
 Fax: 407-260-6110
 www.flowerslabs.com

# 🗌 Flowers Chemical Labs-Scuth

8253 South US Hwy. 1 Port St. Lucie, FL 34952 Bus: 772-343-8006 Fax: 772-343-8089

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• WHITE - Ship with Samples / To Be Returned with Results

• YELLOW - Field Copy / Retain For Your Records

FOW 02-04

# CRESCENT WEST

25.30.440 (3) CHEMICAL ANALYSES

#### LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440 Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 E-Mail: uif@iag.net

March 21, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. Orlando, FL 32803

Re: Di(2-ethylhexyl) phthalate Monitoring Requirements Chapter 62-550 FAC Crescent West PWS ID# 3354690

Dear Mr. Morrison:

Enclosed please find the annual results of samples taken for the above referenced analysis and system during calendar year 2005.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, ext. 234.

Sincerely,

LAKE UTILITY SERVICES, INC.

Buyar X. Bo

Bryan K, Gongre Assistant Operations Manager

Enclosures

# Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATI	ON (to be completed by sampler - Please type or print legibly)
System Name: Crescent West	PWS1.D.#3354690
System Type (check one):	
Address: Lake Utility Serv	• • • • • • • • • • • • • • • • • • • •
200 weathersfield Aver	
City: Attamonte Springs	State: FL ZIP Code:
Phone #: 407. 8161. 1919	Fax#: 407.869.6961
E-Mail Address:	
Sample Type (Check Only One)	Resson(s) for Semple (Check all that apply)
	Routine Compliance (with 62-550)
Entry Point to Distribution)	Confirmation of MCL Exceedance* Special (not for complemee with 62-550)
Plant Tap (not for compliance with 62-650)	Composite of Multiple Sites**
Raw (at well or intake)	Clearance (permitting) Replacement (of invalidated Semple)
Max Residence Time	190ther Annual monitoring-15 of 3 consecutive years
Ave Residence Time	Sempling Procedure Used or Other Comments:
Near First Customer	
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for ac for nitrate or nitrite MCL (	ditional requirements attach a results page for each site.
Sampler's Name: Nathaniel Cor	Ver
Sampler's Phone #: 407.869.1919	Sampler's Fax # _ 407.864.6961
Sempler's E-Mail Address:	
CERTIFICATION (to be completed by	sampler)
1. Nathaniel Carver	noerator
(Print Name)	(Print Title)
do HEREBY CERTIFY that the above complete and correct.	ve public water system and sample collection information is
Signature: <u>Autre</u>	Date: 3/21/05
Reporting Format 62-550.730 Effective January 1995, Revised January 2004	Page 1 of [insert number of pages]

Mar 11 2005 16:27

7 Southern Analytical Labs 813-855-2218

SOUTHERN ANALYTICAL LABORATORIES, INC.

110 BAYNEW BOULEVARD, OLDEMAR, R. 34677 813-655-1844 fax 813-665-2218

Advanced Environmental Laboratories Inc. 9610 Princess Palm Avenue Tampa, FL 33619-

February 1, 2006 Project No: 48242

P.2

# Laboratory Report

FDEP Report form attached for the following asmples:

Client Project Description:

T050812,813

Sample Number 48242.01 48242.02 Sample Description T050812-01 T050813-02

Dule & Th	e Collected	Date & Time	Receive
01/26/05	10:15	01/27/05	11:30
01/29/05	13:07	01/27/05	11:30

Test require presented in this report meet all the requirements of the NELAC standards.

FDOH Laboratory No. E14129 NELAP Accredited Approved By: Francis L Daniels, Laboratory Director Lesile C. Boardman, Q.A. Manager

pЧ

T050812,815 Bample ID:	vironmental Laboratorice In: T060812-02	Syntt	ietic Org 150.310(/	unics (Xb)					February 1, 2 Semple No.: PWS ID:		
Contaminant ID 2038	Contaminant Neme Di(2-sthy?noxy()pithalate	MCL Units 6 pg/L	Analysis Fesult 1.0	Qualifier" U	Analytical Method EPA 525.2	Lab MDL	**	Extraction Date 01/31/05	Analysis Data	Anelysis Tima	DOH Leb Certification#
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PAGE 05

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LAKE UTILITIES

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PAGE 07

LAKE UTILITIES

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### SOUTHERN ANALYTICAL LABORATORIES, INC.

110 BAYVIEW BOULEVARD, OLDSMAR, FL 34677 813-865-1844 fax 813-855-2218

Advanced Environmental Laboratories inc. 9610 Princess Palm Avenue Tampa, FL 33619February 1, 2005 Project No: 48242

# Laboratory Report

FDEP Report form attached for the following samples:

Client Project Description: T050812,813

Sampte Number	Sample Description	Date & Time Collected	Date & Time Received
48242.01	T050812-01	01/26/05 10:15	01/27/05 11:30
48242.02	T050813-02	01/26/05 13:07	01/27/05 11:30

RECEIVED MAR 1 7 2005 BY: \$---

Test results presented in this report meet all the requirements of the NELAC standards.

i

FDOH Laboratory No. E84129 NELAP Accredited

File: 660.662.3.2

Approved By: Francis I. Daniels, Laboratory Director Lestie C. Boardman, Q.A. Manager

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Contaminant ID	Contaminant Nam <del>a</del>	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	RDL	Extraction Date	Analysis Date	Analysis Time	DOH Leb Certification#	
2039	Di(2-ethylhexyl)phthalate	6	µg/L	1.0	U	EPA 525.2	1.0	0.6	the second second second second second second second second second second second second second second second s		06:04	E84129	
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" Qualifiers;

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\*\* Non-detects with a reported lab MDL <50% of the MCL are acceptable for compliance with 62-550.310(4)(b).

Analyte was undetected. Indicated concentration is method detection limit.

니 lampa: 9610 P 이 Gainesville: 2106 N	Tincess Palm Avenue, Tampa IW 67th Place, Suite 7, Gain	1, FL 33619 · (813) { esville, FL 32606 · (	530-9616 Fax (81 352) 367-1500 Fa	3) 630-4327 x (352) 387-0056	)			L		Page		of	
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SW=surface water	GW=ground water DV	-drinking water	OIL A=	air SO=so	a SL	.=sludge	Preserv				Ð		
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	□ Jacksonville: 6601 S □ Tampa: 9610 F □ Gainesville: 2106 N □ Orlando: 528 S. Tampa FA <u>Tampa</u> FA <u>Tampa</u> FA UChael (a DTIME: SW=surface water SAMPLE TO50812 TD50813	SAMPLE DESCRIPTION	Jacksonville:       6601 Southpoint Parkway, Jacksonville, FL 32216 - (900         Tampa:       9610 Princess Palm Avenue, Tampa, FL 33619 - (813) (900         Gainesville:       2106 NW 67th Place, Suite 7, Gainesville, FL 32606 + (900         Orlando:       528 S. North Lake Blvd., Suite 1016, Attamonte Springs         PROJECT NAM       PROJECT NAM         PROJECT LOC,       FAX:         PROJECT LOC,       FAX:         PROJECT LOC,       FAX:         Suite:       SAMPLED BY:         Suite:       Suite The Springs         Suite:       Sample:         Suite:       REMARKS / SPECIAL INSTRUCTION         SW=suriace water       GW=ground water       DW=drinking water         SAMPLE DESCRIPTION       Grab         T050812 - D /       Composit	D. Jacksonville:       6601 Southpoint Parkway, Jacksonville, FL 32216 - (904) 363-9350 Fax /         D. Tampa:       9610 Princess Paim Avenue, Tampa, FL 33215 - (813) 630-9616 Fax (81)         G. Garnesville:       2106 WW 67th Place, Sule 7, Galabox - (852) 850 - (	D Jacksonville:       6601 Southpoint Parkway, Jacksonville, FL 32216 - (904) 383-3350 Fax (904) 383-3354         D Tampa:       9610 Princess Palm Avenue, Tampa, FL 32619 - (813) 630-9617         G Ganesville:       2108 NW 671h Place, Suite 7, Ganesville, FL 32606 (952) 387-1050 Fax (52) 587-100 Fax (52) 587-100 Fax (52) 587-100 Fax (52) 587-100 Fax (52) 587-100 Fax (52) 587-100 Fax (52) 577-100 Fax (52) Fax	Indecomilie: 601 Southpoint Parkway, Jackson/Ref. R. 32216 - 6001 363-8356           Immo: 9010 Princess Palm Avenue, Tampa, R. 33619 - 6131 600-6127           Gainesville: 2106 NW 67th Place, Suite 7, Gainesville, FL 3206 - (602) 867-1507 Area (613) 600-6127           Immo: Sea S. North Lake Bird, Suite 1016, Attamonte Springs, RL 32701 - (407) 337-1504 Fax (407) 837-11           Immo: Sea S. North Lake Bird, Suite 1016, Attamonte Springs, RL 32701 - (407) 337-1504 Fax (407) 837-11           Immo: Sea S. North Lake Bird, Suite 1016, Attamonte Springs, RL 32701 - (407) 337-1504 Fax (407) 837-11           Immo: Sea S. North Lake Bird, Suite 1016, Attamonte Springs, RL 32701 - (407) 337-1504 Fax (407) 837-11           Immo: Sea S. North Lake Bird, Suite 1016, Attamonte Springs, RL 32701 - (407) 337-1504 Fax (407) 837-11           Immo: Fax:           PROJECT LOCATION:           Fax:           Immo: Fax:           Immo: Fax:           Immo: Fax:           Immo: Fax:           Immo: Fax:           Immo: Fax:           Immo: Fax:           Immo: Fax:           Immo: Fax:           Immo: Fax:           Immo: Fax:           Immo: Fax:           Immo: Fax:           Immo: Fax:           Immo: Fax:           Immo: Fax:           Immo: Fax:           Immo: Fax:	Diddomilie: 6601 Southpoint Parkwy, Jacksonwike, FL 32216 - 604) 363-9356 Fax (804) 363-9354           Tampa:         9010 Princess Path Annue, Tampa, FL 32916 - 613) 630-9616 Fax (813) 630-9427           Ganesville:         2106 NW 6710 Place, Suite 7, Ganesville, FL 32606 - 652) 367-1500 Fax (823) 387-1504 Fax (407) 937-1594 Fax (407) 937-1594 Fax (407) 937-1597           Tampa:         PROJECT NAME:           Tampa:         PROJECT NAME:           PROJECT LOCATION:         FAX:           The:         PROJECT LOCATION:           FAX:         SAMPLED BY:           Stub to Southward and the Study of the study of t	Indecondite:       Bothpoint Parkway, Jackson Rie, FL 32216 - (004) 383-8256 Fax (904) 383-8257         Impair:       Soft Phinoss Path Avenue, Impair, FL 33016 - (382) 387-1500 Fax (532) 387-0500         Impair:       Soft Phinoss Path Avenue, Impair, FL 33016 - (382) 387-1500 Fax (532) 387-0500         Impair:       Soft Phinoss Path Avenue, Suite 71, Gainesville, FL 32506 - (382) 387-1500 Fax (532) 387-0500         Impair:       PROJECT NAME:         Impair:       PROJECT NAME:         Impair:       PROJECT LOCATION:         Impair:       Subb to SouthPark         Impair:       REMARKS / SPECIAL INSTRUCTIONS:         Impair:       Subb to SouthPark         Impair:       REMARKS / SPECIAL INSTRUCTIONS:         Impair:       Subb to SouthPark         Impair:       Subb to SouthPark         Impair:       Impair         Impair       <	Diadocondie:         Gott Southpoint Parkowy, Jacksonville, IT, 22716 - (Bod) 383-950 Fax (904) 983-9827           Diames, 2010 Princes Pain Avenue, Timme, IT, 3301-581 (2013) 683-9165 Ref (191) 583-987         Bioline Southpoint Parkowy, Jacksonville, IT, 23206 - (BS2) 387-1500 Fax (407) 937-1597           Diames, 2010 Princes Sale Status, 2010 Fill, Status, 2010 Fax (352) 387-1500 Fax (407) 937-1597         Bioline Southpoint Parkowy, Jacksonville, IT, 23206 - (BS2) 387-1500 Fax (407) 937-1597           Tamp, A         PROJECT NAME:         Bioline Southpoint Parkowy, Jacksonville, IT, 23206 - (BS2) 387-1500 Fax (407) 937-1597           Tamp, A         PROJECT NAME:         Bioline Southpoint Parkowy, Jacksonville, IT, 2400 Fax (407) 937-1597           Tamp, A         PROJECT NOMBER / PROJECT NUMBER:         A R O YA           PROJECT LOCATION:         A R O YA           FAX:         PROJECT LOCATION:         A R O YA           TIME:         REMARKS / SPECIAL INSTRUCTIONS:         S D           Subb + D         SouthPArk         Subpoint           Subb + D         SouthPArk         Preserv           SAMPLE DESCRIPTION         Composite         SAMPLING         MATRIX           TD.500813 - D Z         1         24 / 05 / 130 7         W           TD.500813 - D Z         1         24 / 05 / 130 7         W	Diadcomile:       601 Societypoint Parkway, Jackson Mar. PL. 32016 - (1001) 383: 5850 Fax (1001) 382:03824         Tampa       9010 Princes Plan Merue, Jampa PL. 33016 - (1001) 382:030:03010 Fax (1052) 387:0500         O diamesulie:       2108 North Lake Bird, Suite 1016, Attamone Spring, FL 32010 - (407) 397-1594 Fax (407) 597-1597         Tamp A       PROJECT NAME:         PROJECT LOCATION:       A P. P.O. NUMBER / PROJECT NUMBER:         PROJECT LOCATION:       N E         FAX:       PROJECT LOCATION:         FAX:       S D         State of the state of th	Charloomilie:     601 Southpoint Previews, Justicement, FL 32016 - (001 363-8354 a)     (A)       Tampa:     301 Princes Park Avenue, Tampa, 133016 - (010 369-1687 a)     (305 963 156 101 500 - 487 2000)       Calinewite:     2108 MW 0711 Place, Sub of C, Galorewite, FL 32006 - (100 966 156 16 101 500 - 487 2000)     (307 1630 4 207 1537 2000)       Calinewite:     2108 MW 0711 Place, Sub of C, Galorewite, FL 32006 - (100 967 1500 Fax 150	D. Jackomile:     Bolt Southpoint Parking, Jacksonik, P. 32219 - (204) 302-3364     [DA-4/2]       Tampa:     Sale Nerni Lake Bird, Sub of 12, 3039 - (303) 987-1500 Fax (102) 987-1507     Page       Tampa:     PROJECT NAME:     Southout State St	D     Jackandler     Edit Southpole Parking, Laksbornik, Fl. 32/14 - (30) 353 4550 1542 (56) 350-3507     Page



Advanced Environmental Labs 9610 Princess Palm Ave. Tampa, FL 33619

1135 115 Date/Time Rcvd: / Received by:

Log-In request number: Completed by:

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FL

Cooler/Shipping information:

Courier: 2 AEL 🖸 Client 🗇 UPS 🗇 Pony Express 🗇 FedEx 🗖 Other (describe):\_\_

Type: Cooler D Box D Other (describe) \_\_\_\_

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	· · · · · ·				
Temp (°C)	0.5				
Temp taken from	Temp blank Sample bottle Fice Water	Temp blank Sample bottle Ice Water	Temp blank Sample bottle Ice Water	Temp blank Sample bottle Ice Water	☐ Temp blank ☐ Sample bottle ☐ Ice Water
Temp measured with	-B-IR gun D Thermometer (enter ID):	D IR gun D Thermometer (enter ID):	IR gun     Thermometer (enter ID):	LR gun Thermometer (enter ID):	IR gun Thermometer (enter ID):

Other Information:

Any "NO" responses or discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			
2.	Were custody papers properly included with samples?			
3.	Were custody papers properly filled out (ink, signed, match labels)?			
4.	Did all bottles arrive in good condition (unbroken)?			
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?			
6.	Did the sample labels agree with the chain of custody?			
7.	Were correct bottles used for the tests indicated?			
8.	Were proper sample preservation techniques indicated on the label?			
9.	Were samples received within holding times?			
10.	Were all VOA vials checked for the presence of air bubbles?			-
11,	Were there air bubbles present in the VOA vials?			
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE	(		
13,	Was the cooler temperature less than 6°C?			
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.			
15.	Were the sample containers provided by AEL?		•	
16.	Were samples accepted into the laboratory?			

Comments:

Kit ID:

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MAR	Ĩ	ĩ	2005	

BY: <u>)</u>

	Advanced	CHAIN	OF CUS		CORD						
	Environmental Laboratories, Inc.							LA	B NUMBEI	R: 70502	9/3
	<ul> <li>Jacksonville: 6601 Southpoint Parkway, Jacks</li> <li>Tampa: 9610 Princess Palm Avenue, Tar</li> <li>Gainesville: 2106 NW 67th Place. Suite 7. G.</li> <li>Orlando: 528 S. North Lake Blvd., Suite 10</li> </ul>	npa. FL 33619 • (813) 63 ainesville, FL 32606 • (35	0-9616 Fax (810 52) 367-1500 Fa	3) 630-4327 x (352) 367-0050	) (407) 937-15	597				Page _	of
CLIENT NAME	· · · · · · · · · · · · · · · · · · ·	PROJECT NAME					BOTTLE SIZE				
(T)	TTES INC OF FLORIDA	CF	ESCENT	- WEST	-		& TYPE				
		P.O. NUMBER / F	-								
	O WEATTHOUS FIELD AVE	PROJECT LOCA					A R N E		5		ц. Д
ALTAMON	FE SPRING FE 3	CUEL					A Q L U		phthical		8
PHONE: 407-	TE SPRINCE FC 3 869-1919 FAX: 407-869-6961						Y I S R		T I		
CONTACT:	X BILL COATES	SAMPLED BY:	NATE	ALVER			I E S D		enteryc		/ Е. 2005 па
TURN AROUN		CIAL INSTRUCTIO					1		LT.		ETV + 7 20 - 3 T
Varus								NIJALIN	Ē		
STANDARD								F			REC MAN- BY: 35
LI RUSH								Z	315-2		
<u> 1</u> RUSH											
WW≈ waste wate	r SW=surface water GW=ground water	DW=drinking water	OIL A=	air <b>SO</b> ≃s	oil <b>SI</b>	_=sludge	Preser	강	NA ACL Sefit	-	
SAMPLE ID	SAMPLE DESCRIPTION	Grab Composite		PLING TIME	MATRIX	NO.					
1	CRESCENT WEST	G	1/24/05	13:05	DW	1		×			+01
d	CRESCET WEST	G	1/2/05	13:07	DN	1			×		-02
3		6	· · · · · · · · · · · · · · · · · · ·		DW	1		*			03
5	FOUR LAKES		1/20/05	(12.02		+		<u> </u>			
			ļ			<u> </u>			+		
							-				
				<u> </u>		_					
l = Ice H = (I	(01) 0 = (1.2004) 3,	dium Thiosulfate)	Re	nquished by	: 	Date	Tim			ceived by:	Date Time
Shipment	Method Sample Kit Cooler # Via: RBD/T		2107	gym	1-	1 1	1.807		flight	And c	42712 1726
Out: / /	Via:   RBD/1 ABD/T	2	Aug	pelal	012	105	103			2 Jun	- n-in-1 N.J
Ret: / /	Via: Trip Bl.	3	V	<i>V</i>		/					
	AC TRIVIS TO	4 Received	l			L	1			revised 8/01	

...

LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440 Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 florida@utilitiesinc-usa.com

September 23, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd., Suite 232 Orlando, FL 32803-3767

RE: Total Trihalomethane / Haloacetic Acids Annual Monitoring Crescent West - PWS ID 3354690

Dear Mr. Morrison:

Please find the enclosed sample results as specified above for the 2005 monitoring period.

If you should have any questions, please call 407.869.8588, extension 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Buyand. Darge

Bryan K. Gongre Assistant Operations Manager

Enclosures

cc: Bill Coates, A.M., UIOF

# Safe Drinking Water Program Laboratory Reporting Format

		·					
PUBLIC WATER SYSTEM INFORMATIO	N (to be completed b	y sampler – Piease typ	e or print legibl	y)			
System Name: <u>Cresent</u>	West	PWS I.D	. #: 3 3	54	6	9	0
System Type (check one):	Nontran	sient Noncommunity	□Tra	nsient Nor	Icomm	unity	/
Address:Laka, Utility Se	ruices, Inc.						
200 Weathersti	eld Avenue						
City: Attamente Sprin	45	State: FL.	ZIP Co	də:			, 
Phone #:		Fax #:	· ·	•			
E-Mail Address:					. <u> </u>		
•		•		•		•	
SAMPLE INFORMATION (to be completed	by sampler)		. Sa Kanded	Anites of <sup>1</sup> 13			·····.
Sample Number: <u>A05285</u>	5-01	Location Code (If kn	own):			:	
Sample Date: 8/9/05		Sample Time:[	:40	AM		(Circle	a One)
Sample Location (be specific):	riebe Road	Clermont, F	L				
Disinfectant Residual (Required when reporting	results for trihalomethar	nes and haloacetic acids):	<u></u>	L Fi	eld pH:		
					· .		
Sample Type (Check Only One)	· · ·	Reason(s) for Sa	mpie (Check all	that apply)	•		
	Routine Compli	ance (with 62-550)	Quarterly	(Which Quar	ter?		)
Entry Point (to Distribution)	Confirmation of	MCL Exceedance*	Special (n	ot for compli	ince with	h 62-5	550)
Plant Tap (not for compliance with 62-550)	Composite of M	iultiple Sites**	□Violation I	Resolution			
Raw (at well or intake)		itting)		ient (of Inva	lidated S	Sampl	e)
Max Residence Time							
Ave Residence Time	Sampling Procedu	re Used or Other Co	mments:				
Near First Customer		· · · · · · · · · · · · · · · · · · ·					·
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for ad for nitrate or nitrite MCL e	iditional reguirements		2-550.550(4) fo a results page			d .	
Sampler's Name: Charles Schu	vades			•			
Sampler's Phone #: 40.869.191		Sampler's Fax #:	407.86	9.6961			
Sampler's E-Mail Address:							
		· · · · ·					
CERTIFICATION (to be completed by s	sampler)	· .					
I, <u>Charles Schwades</u> (Print Name)	·	,C	Derator				
(Print Name)		•	r (Print T	itie)	`.		
do HEREBY CERTIFY that the above complete and correct.	ve public water s	system and samp	le collectior	n informa	ition i	S	
Signature: Charles	ade		Date:	9/19	105		
			•		•		•
			a				
Reporting Format 62-550.730 Effective January 1995. Revised January 2004		Page 1 of E	3				

		Re	eporting Format	
	ORY CERTIFICATIC	•	completed by lab - Please type or	r print legibly)
	Advanced Environm		Elarid	a Certification #: E53076
	528 S. North Lake E			
	Altamonte Springs,			Expiration Date: 6/30/2006
•			_	Telephone #: (407) 937-1594
ANALYSIS	S INFORMATION (to	be completed by lab		
•	rom page 1):		·	e(s) Received: 8/11/2005 1:10:00
-	ned Report Number o		· · · ·	(From page 1) A052855-01
Group(s) A	Analyzed Results atta	iched for compliance wit	h chapter 62-550, F.A.C. (check all	l that apply):
-	Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts
. [	All 17	All 30	🛄 All 21	Trihalomethanes
Ĺ	_ Partial	All Except Dioxin	Partial	Haloacetic Acids
L	Nitrate	Partial Dioxin Only	Radionuclides	Bromate
ľ	Asbestos Only		Single Sample	Secondaries
-			Qtrly Composite**	
			,	Partial
Vere any	analyses subcontract	ed? 🗹 Yes 🗌 No		
yes, plea	ase provide DOH certi	fication number E82574	<b>i</b>	
	OOH ANALYTE SHEE	T FOR EACH SUBCON	ITRACTED LAB	
		c	ERTIFICATION	
, Myrna S		, Laboratory Manager	······································	
	(Print Name)			
io HEREB	IY CERTIFY that all a nvironmental Laborati	ttached analytical data a ory Accreditation Conference	re correct and unless noted meet a ence (NELAC).	all requirements of the
	Autonh		····· ( ····· )	.111
lignature	: MATHOR	MAAGO	Date:	1/2/05
inalysis re	suits will result in reje			Analyte Sheet for the attached t water system for failure to sample
* Please p	provide radiological sa	mple dates and location	ns for each quarter.	
COMPLIA		N (to be completed b	y DEP or DOH)	
Sample Co	dilection Info Satisfact	ory 🖼 Yes 🔳 No	Sample Analysis Info S	Satisfactory: 📺 Yes 🔳 No
		ed (circle or highlight group(		juested (circle or highlight group(s) above
Addition	nal Monitoring Require	ed (circle or highlight gro	up(s) above)	
_	MCL(s) Exceede		Detection(s)	🖼 Incomplete Report
	Missing Analyte Other:		Location Unsatisfactory	Analysis Unsatisfactory
	tified:		Date	e Notified:
erson No				
erson No Comments				

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-



6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Client:	Utilities, Inc.	Report No.:	A052855
Project Name:	Cresent West	Date Sampled:	8/9/2005
Project Number:		Date Received:	8/11/05 13:10
PWS ID#:		Date Reported:	9/2/2005
Attention:	William Coates		
Phone Number:	8002721919		
Address:	200 Weathersfield Ave.		

Altamonte Springs, FL 32714

#### **Project Description**

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

Project Name: Cresent West

Approved By:

0

www.stallockupp.co.alantit.

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages = 7

# Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Utilities, Inc. Project Name: Cresent West Matrix: Drinking Water

Report No.: A052855 13:40 ' Date/Time Sampled: 08/09/05 Date/Time Received: 8/11/05 13:10

# PWS ID#:

Client Sample ID: 5

Site: 10731 Priebe Rd

Sample Number: A052855-01

Sampled By: Client Shipping Method: AEL Courier

#### **Disinfection Byproducts**

Contam ID	Contam Name	MCL	Units	Analysia Results	Qualifier	Analytical Method	Lab MOL	Analysis Date	Analysis <u>Time</u>	DOH Lab Cert. #
2450	Chloroscetic Acid		ug/L	0.81	U	E552.2	0.81	8/18/2005	17:16	E82574
2451	Dichloroacetic Acid		ug/L	15		E552.2	0.56	8/18/2005	17:16	E82574
2452	Trichioroacetic Acid		ug/L	17		E552.2	0.60	8/18/2005	17:16	E82574
2453	Bromoacetic Acid		ug/L	0.34	U	E552.2	0.34	8/18/2005	17:16	E82574
2454	Dibromoacetic Acid		ug/L	3.0		E552.2	0.45	8/18/2005	17:16	E82574
2941	Chleroform		ug/L	36		E502.2	0.31	8/15/2005	14:28	E82574
2942	Bromoform		ug/L	2.3		E502.2	0.36	8/15/2005	14:26	E82574
2943	Bromodichloromethane		ug/L	14		E502.2	0.38	8/15/2005	14:28	E82574
2944	Dibromochloromethane		ug/L	8.1		E502.2	0.28	8/15/2005	14:26	E82574

U The compound was analyzed for but not detected.

MDL Method Reporting Limit For all Results qualified with an 1, the PQL is defined to be 4 times the MDL



Client: UTILITIES, INC.	(UTL-A)	Project name: CRESCENT WEST
Date/Time Rcvd: 8/11/05	13.10	Log-In request number: A052855

Received by: RPG

Completed by: RPG

#### Cooler/Shipping Information:

Courier: 🖾 AEL 🗆 Client 🗆 UPS 🗆 Pony Express 🗆 FedEx 🗇 Other (describe): \_\_\_\_\_

Type: 🖾 Cooler 🗖 Box 🖾 Other (describe) \_\_\_\_\_

Cooler temperature: identify the cooler and document the temperature blank or ice water measurement

Cooler ID	1				
Temp (°C)	2				
Temp taken from	Temp blank Cooler	Temp blank	Temp blank Cooler	Temp blank Cooler	Temp blank     Cooler
Temp measured with		□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter 1D):

#### Other Information:

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?	1		· ·
3.	Were custody papers properly filled out (ink, signed, match labels)?	1		
4.	Did all bottles arrive in good condition (unbroken)?			
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?	1		
6.	Did the sample labels agree with the chain of custody?			
7.	Were correct bottles used for the tests indicated?	1		
8.	Were proper sample preservation techniques indicated on the label?	1		
9.	Were samples received within holding times?	1		
10.	Were all VOA vials checked for the presence of air bubbles?			1
11.	Were there air bubbles present in the VOA vials?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE			
13.	Was the cooler temperature less than 6°C?			
14.	Were sample pHs checked and recorded by Sample control?			1
	NOTE: VOA samples are checked by laboratory analysts.			~
15.	Were the sample containers provided by AEL?			
16.	Were samples accepted into the laboratory?	1		
	Was it necessary to split samples into other bottles?		1	

### Kit ID Comments:

Chain-of-Custody for AEL Orlando to AEL Jax

AEL Jax 6601 Southpoint Parkway Jacksonville, FI 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde



AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701

Contact Person: Myrna Santiago

Project #: A052855 CustomerName: Utilities, Inc. Collector: Client

Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles	Bottle Type (Pres.)
A052855-01	5	550 Haloacetic Acids (J)-55	Drinking Water	8/9/2005	13:40	8/11/05 13:10	8/23/2005		40mL Vial Amber
A052855-01	5	THMs (DW)	Drinking Water	8/9/2005	13:40	8/11/05 13:10	8/23/2005		40mL VOC vial

Orlando Relinquisher:

Shipping Receiver: AEL Jacksonville Receiver:

Date/Time: 🔗 Date/Time:

Page 1 of 1

Shipping Relinquisher: AEL Courier

Environmental Laboratorie	nt Parkway, Jacksonville, FL	. 32216 • (9	04) 363-9350 Fa	x (904) 363-935	4			L							
C         Tampa:         5810-D Brecks           C         Gainesville:         2106 NW 67th	enridge Parkway, Tampa, FL Place, Suite 7, Gainesville,	33610 • (81	13) 630-9616 Fa:	(813) 630-432	7						P	age _		_ of	2
CLIENT NAME:		PROJECT NAME: BO					вотты		<u> </u>	T	1		Τ	<u></u>	
UTILITIES INC							SIZE								
ADDRESS: 200 WEATHERS FIGLD AUE	P.O. N	P.O. NUMBER / PROJECT NUMBER:						L							
ALTA MONTE SAMASER 3	2714 PROJ	ECT LOC	CATION:			· <u> </u>	A R N E A Q		TH	m'a		H	AA	63	L
<u>ALTA MONTE SPRINGS FC 3</u> PHONE: FAX: 407-569-1919 407-869-6	961						LU YI							μ,	B
CONTACT: COATES		LED BY:					S R I E S D								U M
	ARKS / SPECIAL INS	TBUCTI		SUES - A	10										BEB
ORI	onges-ch						ł				ļ				
	AF - CLE		_LK.1	WEST- ( RIDGE - C	12		1								
	BAY - CL2 R MILLS-CJ2		-AAB.	HIL. C	12						}				
	VEST - Cla	1.0													
						·		SR1	1/L	5	DN	1	66		
	ound water DW=drinkir			<b>≃air SO</b> =	soil S	L-sludge	Preserv	Х	$X^{\circ}$	X	X	X	$\lambda$	X	χ
SAMPLE ID SAMPLE DESC		Grab Composite	DATE	PLING	MATRIX	ONO.				<b>4</b>	- <b>E</b>		<u>r</u> -	·	
A052850 1635 US 27-	(7-11)	6	8/10/05	1405	D.W			X	····						
AOSZ851 ORANGES-10001		G	8/0/05	1110	DW	6			χ						
ASSISSE Hickland PT 1410		G	$\mathbf{X}$	$\mathbf{\nabla}$		0			$\mathbf{\nabla}$	$\overline{\mathbf{v}}$					
		6	9/9/05		JW.	b				X			<u> </u>		
ADS7857 PATTOR FROM 1990	I MONKAY OR		MALAS	1250	$(\mathbf{b}, \boldsymbol{\omega})$	6					X				
AUSTREST CRESPENT BAY- 1033; AUSTREST UN ON 11 11			01 .												
AUS2854 U.C. CR. H. 16 - 1035	Thompson IN.	6	8/9/05	1415	DW	6				·		X			
A052854 UK. CR. H. 16 - 1035	Thompson LN. PRIEBE Rd	66	8/9/05 8/1/05			6						X	Х		
AUS2854 LIC. CR. H. 16 - 1035 ( AUS2854 CR. WEST - 10731 AUS2856 LIK. RIDGE CLUB - 1213	PRIEBE RD	600	8/9/05 8/1/05 8/1405	1415	DW DW					-		X	Х	×	
AUS2854 LIC. CR. H. 16 - 1035 ( AUS2854 CR. WEST - 10731 AUS2856 LIK. RIDGE CLUB - 1213	PRIEBE RD	600	8/9/05 8/1/05	1415 1340	D.W D.W D.W	6						X	Х	X	X
AUS2854 U.C. C.R. H. 16 - 1035 AUS2854 U.C. C.R. H. 16 - 1035 AUS2856 C.R. WEST - 10731 AUS2856 U.C. RIDGE CIUB - 1213 AUS2857 AMB HILC-1264 = ICE H = (HCI) S = (H2SO4) N = (HNO3)	Thompson IN PRIEBE RD OUTCODIS DR T URCEMAN DA T = (Sodium Thiosul	600	0/9/05 8/1/05 8/1405 0/4/05	1415 1340 1525	DW DW	6	Time			eceiveo	t by:	X		X	X
AUS2854 LIC. CR. H. 16 - 1035 ( AUS2854 CR. WEST - 10731 AUS2856 LIK. RIDGE CLUB - 1213	Thompson IN PRIEBE RD OUTCODIS DR T URCEMAN DA T = (Sodium Thiosul	600	0/9/05 8/1/05 8/1405 0/4/05	1415 1340 1525 1210	D.W D.W D.W D.W	6 6 0 Date	Time 0930			eceived	1 by:	X	X Da		X Time 30

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Jeb Bush Governor



John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

Page 4 of 27

# THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code: FL00949

(904) 363-9350

E82574

Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, FL 32216

Matrix: Drinking Water

Matrix: Drinking Water Analyte	Method/Tech	Category	Certification Type	Effective Date
Silica as SiO2	EPA 200.7	Primary Inorganic Contaminants	NELAP	1/21/2005
Silver	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Silvex (2,4,5-TP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Simazine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/24/2005
Sodium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Styrene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Styrene	EPA 524,2	Other Regulated Contaminants	NELAP	1/21/2005
Sulfate	EPA 375.4	Secondary Inorganic Contaminants	NELAP	2/13/2003
Surfactants - MBAS	EPA 425.1	Secondary Inorganic Contaminants	NELAP	1/21/2005
Tetrachloroethylene (Perchloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Fetrachloroethylene (Perchloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Thallium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
foluene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Toluene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Fotal coliforms	SM 9222 B	Microbiology	NELAP	4/4/2002
Fotal coliforms & E. coli	SM 9223 B	Microbiology	NELAP	9/5/2002
Fotal haloacetic acids	EPA 552.2	Synthetic Organic Contaminants	NELAP	1/21/2005
otal trihalomethanes	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Fotal trihalomethanes	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Toxaphene (Chlorinated camphene)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
rans-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
rans-1,2-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Frichloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
Frichloroethene (Trichloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Trichloroethene (Trichloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Furbidity	EPA 180.1	Secondary Inorganic Contaminants	NELAP	7/17/2002
/inyl chloride	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
/inyl chloride	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
(ylene (total)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Xylene (total)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Zinc	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.

NON-TRANSFERABLE 04/24/2005-E82574

R'

TTHMHAA5 REPORTING COMPLIANCE SUMMARY FOR PWSs	MONITORIN	IG ANNUALLY	
TTHM COMPLIANCE SUMMARY		HAAS COMPLIANCE SUMMARY	
Provide the number of TTHM samples taken during the last year*	1	Provide the number of HAA5 samples taken during the last year*	1
Calculate the arithmetic average of all TTHM samples taken over the last year	58.4	Calculate the arithmetic average all HAA5s samples taken over the last _ year	35.0
Does the arithmetic average of the TTHM samples exceed the Maximum Contaminant Level of 0.060 mg/L for TTHMs? (YES/10)**	NÒ	Does the arithmetic average of the HAA5 samples exceed the Maximum Contaminant Level of 0.060 mg/L for HAA5e? (YES/NQ)**	NO

\*Also, for each sample taken during the last year, provide the information requested in the tables on pages 3 and 4 of this format. \*\*If the TTHM or HAA5 sample (or average of the samples, if more than one sample is taken) exceeds the Maximum Contaminant Level, the system must increase monitoring to one TTHM and one HAA5 sample per treatment plant per quarter, taken at a point in the distribution system reflecting the maximum residence time, until the system meets the criteria in 40 CFR 131.132(b)(1)(iv). Please see 40 CFR 141.132 (b)(1) for complete details.

Page 2 of 5

	Sample Location In the Distribution	Date of	Disinfectant Residual (mg/L)	Name of	Dete of			1
Sample Location	System (Average or Meximum Residence Time)	Sample Collection (mo/da/yr)	at Time of Sample Collection	Person Collecting Sample	Analysis (mo/da/yr)	Analytical Method	Laboratory Name & Certification Number	HAA5 Analysis Result (ug/L)
0731 Pricke Road	MRT	819/05	1.0	C.Schwades	8/18/05	E 552.2	AEL E 53076	35.0
					<u> </u>			+
							·	
			+			+		-
					<u> </u>			
			+	+		+		
		+						
				_				

Effective January 2004

**x** ...

Page 4 of 5

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and the second

UTAL TRIHALOMETHAN	E (TTHN) ANALTS	S RESULTS			in the Arian delayed and			
Sample Location	Sample Location In the Distribution System (Average or Maximum Residence Time)	Date of Sample Gollaction (mo/da/yr)	Disinfectant Residual (mg/L) at Time of Sample Collection	Person Collecting Sample	Date of Analysis (mo/de/yr)	Analytical Method	Laboratory Name & Certification Number	TTHM Analysis Hesut (ug/L)
0731 Priebe Road	MRT	8/9/05	1.0	C.Schwades	8/15/05	6502.2	AEL E53076	58.4
U (SI FREDEROLDE								
					ļ	<b>_</b>		
					+	+		
				+	+	+	+	
		<b></b>			+			
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Effective January 2004

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#### LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES, NC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440

Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 E-Mail: uif@iag.net

December 7, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. Orlando, FL 32803

RE: 4th Quarter 2005 Nitrate Analysis Chapter 62-550 FAC Crescent West PWS ID# 3354690

Dear Mr. Morrison:

Enclosed please find the results of samples taken for the above referenced analyses and system.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, ext. 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Bezand. B

Bryan K. Gongre Assistant Operations Manager

Enclosures

Cc: Bill Coates, Area Manager, UIOF

Page 1 of 1 \\100.0.4.10\operations\660\662\3\ 2\2005\4thQtr.NO3.Cres.West.2005.doc

662 3.2 (2005)

# Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMAT	ION (to be completed by sampler - Please t	vpe or print legibly)
System Name: <u>Crescht</u> W		
System Name: <u>Crescht ru</u>	est Pwst	D#3354690
System Type (check one): 🛛 🕅 Commun	ity INontransient Noncommuni	ty Transient Noncommunity
Address: Lakeltility Serv	iles, Inc.	
	L Avenue	
City: Altamente Sprin	State: FL	ZIP Code: 32714-
Phone #: <u>4-07-869-1919</u>	Fax #:	10.869.6961
E-Mail Address: <u>b.K.gongre</u>	Outilitiesinc-use.com	······································
SAMPLE INFORMATION (to be complete	d by sampler)	
Sample Number: <u>Ao 54718-0</u>		known):
		Z Circle One)
Sample Location (be specific): Entry P	oint to Distribution Sustan	
Disinfectant Residual (Required when reportin	•	
Sample Type (Check Only One)	Reason(s) for S	ample (Check all that apply)
	Routine Compliance (with 62-550)	Quarterly (Which Quarter?
Entry Point (to Distribution)	Confirmation of MCL Exceedance*	Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**	Violation Resolution
Raw (at well or intake)	Clearance (permitting)	Replacement (of Invalidated Sample)
Max Residence Time	Other:	
Ave Residence Time	Sampling Procedure Used or Other C	omments:
Near First Customer	·	
*See 62-550.500(6) for requiren NOTE: See 62-550.512(3) for a for nitrate or nitrite MCL	dditional requirements attac	62-550.550(4) for requirements and h a results page for each site.
Sampler's Name: Charles Schu	rades	
Sampler's Phone #:	Sampler's Fax #:	407.869.6961
Sampler's E-Mail Address:		
CERTIFICATION (to be completed by	sampler)	
I, Charles G. Schung (Print Name)	des leur	aperater.
(Print Name)		(Print Title)
do HEREBY CERTIFY that the abo	ve public water system and same	ble collection information is
complete and correct.		
Signature: <u>Aarlu I</u>	John here the	Date: <u>12-6-05</u>

Reporting Format 62-550.730 Effective January 1995, Revised January 2004

			orting Format	ater Program Laboratory
	TORY CERTIFICATI CURRENT DOH AN		mpleted by lab - Please type or	print legibly)
LabName	: Advanced Environ	mental Labs - Orlando	Florida	a Certification #: E53076
Address:	528 S. North Lake	Blvd., Suite 1016		Expiration Date: 6/30/2006
	Altamonte Springs	, FL 32701		Telephone #: (407) 937-1594
ANALYSIS	recomposition of the second second	be completed by lab		
	rom page 1):		Date Sample	e(s) Received: 11/15/2005 4:40:00
Lab Assigr	ned Report Number of	or Job ID A054718		From page 1) A054718-01
Group(s) A	Analyzed Results att	ached for compliance with ch	apter 62-550, F.A.C. (check all	internet and a second second second second second second second second second second second second second second
I	Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts
-	All 17	All 30	All 21	Trihalomethanes
-	Partial	All Except Dioxin	Partial	Haloacetic Acids
Ţ	Nitrate	Partial	Radionuclides	Bromate
	Nitrite	Dioxin Only	Single Sample	Chlorite
L_	Asbestos Only		Qtrly Composite**	Secondaries
				🔄 All 14
Were any a	analyses subcontract	ed? 🔽 Yes 🗌 No		Partial
If ves, pleas	se provide DOH certi	ification number E84589		
ATTACH D	•			
ATTACH D	•	ET FOR EACH SUBCONTRA		
	OH ANALYTE SHEE	ET FOR EACH SUBCONTRA	CTED LAB	
I, Myrna Sa	OH ANALYTE SHEE	ET FOR EACH SUBCONTRA		
I, <u>Myrna Sa</u> (F do HEREBY	OH ANALYTE SHEE antiago Print Name) ( CERTIFY that all all	ET FOR EACH SUBCONTRA CERT		requirements of the
I, <u>Myrna Sa</u> (F do HEREBY	OH ANALYTE SHEE antiago Print Name) ( CERTIFY that all a vironmental aborato	ET FOR EACH SUBCONTRA CERT , Laboratory Manager ttached analytical data are co	rrect and unless noted meet all (NELAC).	requirements of the $11   28   05$
I, <u>Myrna Sa</u> (F do HEREBY National EN SIgnature: * Failure to analysis resi	OH ANALYTE SHEE antiago Print Name) CERTIFY that all a vironmental aborato provide a valid and c ults will result in rejet	ET FOR EACH SUBCONTRA CERT , Laboratory Manager ttached analytical data are co ory Accreditation Conference Care ago current Florida DOH lab certifi	TIFICATION  rrect and unless noted meet all (NELAC).  Date:  cation number and a current An nforcement against the public v	11/28/05
I, <u>Myrna Sa</u> (F do HEREBY National E S <b>Ignature:</b> Failure to analysis res and may res	OH ANALYTE SHEE antiago Print Name) Y CERTIFY that all a vironmental baborato provide a valid and c ults will result in reject sult in notification of t ovide radiological sat	ET FOR EACH SUBCONTRA CERT , Laboratory Manager ttached analytical data are co ory Accreditation Conference dual age current Florida DOH lab certific totion of the report, possible en the DOH Bureau of Laboratory rmple dates and locations for	TIFICATION  rrect and unless noted meet all (NELAC).  Date:  cation number and a current An forcement against the public v y Services. each quarter.	1) 28 05 nalyte Sheet for the attached vater system for failure to sample,
I, <u>Myrna Sa</u> (F do HEREBY National E Signature: Failure to analysis resu and may res * Please pro	OH ANALYTE SHEE antiago Print Name) Y CERTIFY that all a vironmental baborato provide a valid and c ults will result in reject sult in notification of t ovide radiological sat	ET FOR EACH SUBCONTRA CERT , Laboratory Manager ttached analytical data are co ory Accreditation Conference Corrent Florida DOH lab certific totion of the report, possible en the DOH Bureau of Laboratory mple dates and locations for	TIFICATION  rrect and unless noted meet all (NELAC).  Date:  cation number and a current An forcement against the public v y Services. each quarter.	11 28 05 natyte Sheet for the attached
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I, <u>Myrna Sa</u> (F do HEREBY National E Signature: Failure to unalysis res * Please pro COMPLIANC cample Colle	OH ANALYTE SHEE antiago Print Name) Y CERTIFY that all at vironmental aborato provide a valid and co ults will result in rejection sult in notification of t ovide radiological sat CE DETERMINATIO ection Info Satisfacto	ET FOR EACH SUBCONTRA CERT , Laboratory Manager ttached analytical data are co ory Accreditation Conference dual and current Florida DOH lab certific tion of the report, possible en the DOH Bureau of Laboratory mple dates and locations for	rrect and unless noted meet all (NELAC). Date: cation number and a current Ainforcement against the public way Services. each quarter. P or DOH) Sample Analysis Info Sa	1) 28 05 nalyte Sheet for the attached vater system for failure to sample,
I, <u>Myrna Sa</u> (F do HEREBY National E Signature: Failure to analysis rest and may res * Please pro COMPLIANC Sample Colle ( Replaceme	OH ANALYTE SHEE antiago Print Name) Y CERTIFY that all a vironmental aborato provide a valid and c ults will result in rejet sult in notification of t ovide radiological sau CE DETERMINATIO ection Info Satisfacto ent Sample(s) Requeste	ET FOR EACH SUBCONTRA CERT , Laboratory Manager ttached analytical data are co ory Accreditation Conference ware and a conference wa	TIFICATION  Trect and unless noted meet all (NELAC).  Date:  Cation number and a current An  nforcement against the public w  y Services.  each quarter.  P or DOH)  Sample Analysis Info Sa  Ye)  Revised Report Reque	1) 28/05 nalyte Sheet for the attached vater system for failure to sample, tisfactory: Yes No
I, Myrna Sa (F Do HEREBY National E Signature: Failure to inalysis resi ind may res Please pro COMPLIANC Gample Collo Replacement Additiona	OH ANALYTE SHEE antiago Print Name) CERTIFY that all a vironmental baborato provide a valid and c ults will result in rejec sult in notification of t ovide radiological sau CE DETERMINATIO ection Info Satisfacto ent Sample(s) Requeste il Monitoring Required	ET FOR EACH SUBCONTRA CERT , Laboratory Manager ttached analytical data are co ory Accreditation Conference Corrent Florida DOH lab certifiction of the report, possible en the DOH Bureau of Laboratory mple dates and locations for IN (to be completed by DEI ory 2 Yes 2 No ed (circle or highlight group(s) above d (circle or highlight group(s)	rrect and unless noted meet all (NELAC). Date: ( cation number and a current Al nforcement against the public w y Services. each quarter. P or DOH) Sample Analysis Info Sa (e) Revised Report Reque above)	11 28 05 nalyte Sheet for the attached vater system for failure to sample, tisfactory: Yes No sted (circle or highlight group(s) above)
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I, <u>Myrna Sa</u> (F do HEREBY National E Signature: Failure to malysis result and may res Please pro COMPLIANC ample Collo Replacement Additiona eason(s):	OH ANALYTE SHEE antiago Print Name) CERTIFY that all a vironmental aborato provide a valid and c ults will result in reject sult in notification of t ovide radiological sau CE DETERMINATIO ection Info Satisfacto ent Sample(s) Requester il Monitoring Required il Monitoring Re	ET FOR EACH SUBCONTRA CERT , Laboratory Manager ttached analytical data are co ory Accreditation Conference ware and a conference wa	TIFICATION  rrect and unless noted meet all (NELAC).  Date:  cation number and a current Ai nforcement against the public w y Services. each quarter.  P or DOH)  Sample Analysis Info Sa re)  ix Revised Report Reque above) tion(s) on Unsatisfactory	11       28       05         nalyte Sheet for the attached vater system for failure to sample,         tisfactory:       Yes       No         sted (circle or highlight group(s) above)         Incomplete Report       Analysis Unsatisfactory
I, Myrna Sa (F do HEREBY National E Signature: Failure to analysis resi and may res * Please pro COMPLIANC Sample Colle a Replacement Additiona leason(s):	OH ANALYTE SHEE antiago Print Name) CERTIFY that all a vironmental aborato provide a valid and c ults will result in reject sult in notification of t ovide radiological sau CE DETERMINATIO ection Info Satisfacto ent Sample(s) Requester il Monitoring Required il Monitoring Re	ET FOR EACH SUBCONTRA CERT , Laboratory Manager ttached analytical data are co ory Accreditation Conference ware and a conference wa	TIFICATION  rrect and unless noted meet all (NELAC).  Date:  cation number and a current Ai nforcement against the public w y Services. each quarter.  P or DOH)  Sample Analysis Info Sa re)  ix Revised Report Reque above) tion(s) on Unsatisfactory	11 28 05 nalyte Sheet for the attached vater system for failure to sample, tisfactory: Yes No sted (circle or highlight group(s) above)



6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Client:	Utilities, Inc.
Project Name:	Cresent West
Project Number:	
PWS ID#:	
Attention:	William Coates
Phone Number:	8002721919
Address:	200 Weathersfield Ave.

Altamonte Springs, FL 32714

 Report No.:
 A054718

 Date Sampled:
 11/15/2005

 Date Received:
 11/15/05 16:40

 Date Reported:
 11/25/2005

#### **Project Description**

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

Project Name: Cresent West

Approved By:

Myrna Santlago, Laboratory Manager

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages =

# Advanced Environmental Laboratories, Inc.

Analytical Report

Contam ID Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert. #
Inorganic Contaminants									
Sample Number: A054718-01							Shipping Meth	10d: Client	drop off
Site: POE							Sampled I	•	Schwades
Client Sample ID: 1							•		<b>.</b>
PWS ID#:									
Matrix: Drinking Water							Date/Time Recei	ived: 11/15	/05 16:40
Project Name: Cresent West							Date/Time Sam	pled: 11/15	/05 14:00
Client: Utilities, Inc.							Report I	No.: A054	4718 ′

1040 Nitrate (as N) 10 mg/L 1.5 SM4500NO3-F 0.027 11/17/2005

MDL Method Reporting Limit For all Results qualified with an I, the PQL is defined to be 4 times the MDL

9:04

E84589



Advanced Environmental Labs Inc

Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

Client:	UTILITIES, INC. (UTL-A)		Project name:	CRESCENT WEST	
Date/Time Rcvd:	11-15-05	16:40	Log-In request number:	A054718	
Received by:	nIS		Completed by:	C/	
Cooler/Shippin	g Information:			$\mathcal{O}$	

Courier: AEL Client UPS Pony Express FedEx Other (describe):

Type: 🛛 Cooler 🗆 Box 🗆 Other (describe) \_\_\_\_\_

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	1				
Temp (°C)	0'				
Temp taken from	Temp blank	Temp blank Cooler	Temp blank     Cooler	Temp blank     Cooler	Temp blank Cooler
Temp measured with	IR gun Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):

## Other Information:

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			
2.	Were custody papers properly included with samples?			
3.	Were custody papers properly filled out (ink, signed, match labels)?			
4.	Did all bottles arrive in good condition (unbroken)?	1		
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?	1		
6.	Did the sample labels agree with the chain of custody?			
7.	Were correct bottles used for the tests indicated?			
8.	Were proper sample preservation techniques indicated on the label?	1		
9.	Were samples received within holding times?	1		
10.	Were all VOA vials checked for the presence of air bubbles?			1
11.	Were there air bubbles present in the VOA vials?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE			
13.	Was the cooler temperature less than 6°C?			
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.			
15.	Were the sample containers provided by AEL?			
16.	Were samples accepted into the laboratory?			
17.	Was it necessary to split samples into other bottles?		1	

## <u>Kit ID</u>

1

Comments:

p.

Chain-of-Custody for AEL Orlando to AEL Tampa AEL Orlando AEL Tampa 528 South North Lake Blvd, Suite 1016 5810-D Breckinridge Parkway Altamonte Springs FL 32701 Tampa, FL 33610 Contact Person: Myrna Santiago 813-630-9616 Fax 813-630-4327 Contact Person: Michael Cammarata Project #: A054718 **Check if Rush** CustomerName: Utilities, Inc. Collector: Chuck Schwades Client Sample ID Lab Code Test Matrix Collect Date / Time Receive Date Due Date # Bottles Bottle Type (Pres.) A054718-01 1 Nitrate (T) Drinking Water 11/15/2005 14:00 11/15/05 16:40 11/17/2005 250mL Poly (unpres.)

Orlando Relinguisher:

Jerviso

Shipping Receiver: Alto Courier Martille Tampa Receiver:

Date/Time: 11-16-05 17:00 Date/Time: 11-17-05 09:0

Shipping Relinquisher: AEL Courier

Page 1 of 1

	IONMENEAL Laboratories, Inc.           Jacksonville:         6601 Southpoint Parkway, Jacksonville:           Fampa:         5810-D Breckenridge Parkway	ay, Tampa, FL 33610 • (8	13) 630-9616 Fax (8	313) 630-4327				A	054	471	8	:
CLIENT NAME:	Gainesville: 2106 NW 67th Place, Suite	7, Gainesville, FL 32606 PROJECT NA		ux (352) 367-005	0							
1) trities	INC. OF FL-					SIZ & TYF						
ADDRESS:	men Field Ave	P.O. NUMBER	/ PROJECT NU	JMBER:					 			
	oprings FL-32744	PROJECT LO	CATION:				=   ]					
PHONE:	FAX:											
	CONGIC CONGIC	SAMPLED BY	Chuck	Sch	1.4	ii   s	⊑					
				JON WA	962							
							4	-1412				
GISTANDAND												
ü RUSH								イン				
WW= waste water SV	V=surface water GW=ground water	<b>DW</b> =drinking water	OIL A=	air <b>SO</b> =s	ioil SL:	=sludge Pre	T room	$\rightarrow$	++			
						=siuoge } ' 'o						1 1
SAMPLE ID	SAMPLE DESCRIPTION	Gra Compo		PLING		1						
		Compo	DATE	PLING TIME	MATRIX	NO. CONT.						
	SAMPLE DESCRIPTION		DATE	PLING TIME		NO. CONT.		/				
		Compo	DATE	PLING TIME	MATRIX	1						
		Compo	DATE	PLING TIME	MATRIX	NO. CONT.						
		Compo	DATE	PLING TIME	MATRIX							
		Compo	DATE	PLING TIME	MATRIX							
		Compo	DATE	PLING TIME	MATRIX							
		Compo	DATE	PLING TIME	MATRIX							
	Keseent West		J II-(5 %5	PLING TIME I 4 00	MATRIX DW				Bibleive	d by:		
I = Ice H = (HCI) S Shipment Meth	$f < S \ Limit WST$ $S = (H_2SO_4) N = (HNO_3) T =$ od Sample Kit Cooler f	(Sodium Thiosulfate)	J II-(5 %5	PLING TIME					Pereive	d by:		
	$S = (H_2SO_4) \qquad N = (HNO_3) \qquad T = OC$	(Sodium Thiosulfate)	J II-(5 %5	PLING TIME I 4 00		NO. CONT.		)   	Pêceive	d by:		

Jeb Bush Governor





Laboratory Scope of Accreditation

Page 1 of 4

#### THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E84589

EPA Lab Code: FL01092

(813) 630-9616

E84589

#### Advanced Environmental Laboratories, Inc. - Tampa 9610 Princess Palm Avenue Tampa, FL 33619

Matrix: Drinking Water

Analyte	Method/Tech	Category	Certification Type	Effective Date
Alkalinity as CaCO3	SM 2320 B	Primary Inorganic Contaminants	NELAP	10/1 1/2002
Amenable cyanide	SM 4500-CN G	Primary Inorganic Contaminants	NELAP	10/11/2002
Bromide	EPA 300.0	Primary Inorganic Contaminants	NELAP	10/11/2002
Chloride	EPA 300.0	Secondary Inorganic Contaminants	NELAP	10/11/2002
Chloride	SM 4500 CI- B	Secondary Inorganic Contaminants	NELAP	10/11/2002
Chlorite	EPA 300.0	Primary Inorganic Contaminants	NELAP	8/20/2003
Color	EPA 110.2	Secondary Inorganic Contaminants	NELAP	10/11/2002
Conductivity	SM 2510 B	Primary Inorganic Contaminants	NELAP	10/11/2002
Cyanide	SM 4500-CN E	Primery Inorganic Contaminants	NELAP	10/11/2002
Pecal coliforms	SM 9221 B	Microbiology	NELAP	2/14/2003
luoride	EPA 300.0	Primary Inorganic Contaminants	NELAP	10/11/2002
Ruoride	SM 4500 F-C	Primary Inorganic Contaminants,Secondary Inorganic Contaminanta	NELAP	10/11/2002
Isterotrophic plate count	SM 9215 B	Microbiology	NELAP	10/11/2002
litrate	EPA 300.0	Primary Inorganic Contaminants	NELAP	10/11/2002
litrate	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	10/11/2002
litrate-nitrite	EPA 300.0	Primary Inorganic Contaminants	NELAP	10/11/2002
litrite	EPA 300.0	Primary Inorganic Contaminants	NELAP	10/11/2002
litzite	SM 4500-NO3 F	Primary inorganic Contaminants	NELAP	10/11/2002
Ndor	SM 2150 B	Secondary Inorganic Contaminants	NELAP	10/11/2002
rthophosphate as P	EPA 300.0	Primary Inorganic Contaminants	NELAP	10/11/2002
rthophosphate as P	EPA 365.1	Primary Inorganic Contaminants	NELAP	10/11/2002
н	BPA 150.1	Secondary Inorganic Contaminants	NELAP	10/11/2002
ulfate	EPÁ 300.0	Primary Inorganic Contaminants	NELAP	10/11/2002
lfate	EPA 375.4	Secondary Inorganic Contaminants	NELAP	10/11/2002
urfactants - MBAS	EPA 425.1	Secondary Inorganic Contaminants	NELAP	10/1 1/2002
tal coliforms	SM 9222 B	Microbiology	NELAP	2/14/2003
val coliforms & B. coli	SM 9223 B	Microbiology	NELAP	2/14/2003
tal dissolved solids	EPA 160.1	Secondary Inorganic Contaminants	NELAP	10/11/2002
tal nitrate-nitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	10/11/2002
tal organic carbon	SM 5310B	Primary Inorganic Contaminants	NELAP	10/11/2002
chidity	EPA 180.1	Secondary Inorganic Contaminants	NELAP	10/11/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards. NON-TRANSFERABLE 07/01/2004-E8458

?

# FOUR LAKES

25.30.440 (3) CHEMICAL ANALYSES

### LAKE UTILITY SERVICES, INC.

AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440

Telephone: 407-869,1919 Florida: 800-272-1919 Fax: 407-869-6961 E-Mail: uif@iag.net

April 24, 2006

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. Orlando, FL 32803

RE: Triennial Monitoring Chapter 62-550 FAC Inorganics/VOC/SOC/Secondaries Four Lakes PWS ID# 3354647

Dear Mr. Morrison:

Enclosed please find the results of samples taken March 1, 2006 for the above referenced analyses and system.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-1919, ext. 502.

Sincerely,

LAKE UTILITY SERVICES, INC.

Willing & Conta

William H. Coates Assistant Operations Manager

Enclosures

Cc: Bryan K. Gongre, Regional Manager, UIOF Chuck Schwades, Area Manager, UIOF

Page 1 of 2 100.0.4.10 Operations 660.663.3. 2.2006.62.550 march tri.Fr.Lk 2005 doe

# Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIO	N (to be completed by complete Dispective	
System Name: Four Lakes WTP		•
• • • •	Nontransient Noncommunity	,
Address: <u>Rear of Lot 33 on Alpha</u>	. <u> </u>	
City: <u>Montverde</u>	State: Fla.	ZIP Code: 34756
Phone #: 407-869-1919		9-6961
E-Mail Address: <u>b.coates@utilitiesinc-usa</u>		
SAMPLE INFORMATION (to be completed	by sampler)	
Sample Number: <u>11527DW1</u>	Location Code (if know	own): Water
Sample Date: <u>3/1/2006</u>	Sample Time: <u>7:10</u>	am AM PM (Circle One)
Sample Location (be specific): _P.O.E.		
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic acids);	mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for Sar	mple (Check all that apply)
	Routine Compliance (with 62-550)	Quarterly (Which Quarter?
Entry Point (to Distribution)	Confirmation of MCL Exceedance*	Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**	□Violation Resolution
Raw (at well or intake)	Clearance (permitting)	Replacement (of Invalidated Sample)
Max Residence Time	Other:	
Ave Residence Time	Sampling Procedure Used or Other Con	mments:
Near First Customer		
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for ad for nitrate or nitrite MCL e	ditional requirements attach	2-550.550(4) for requirements and a results page for each site.
Sampler's Name: Charles G. Schwades		
Sampler's Phone #: <u>321-388-7895</u>	Sampler's Fax #: <u>4</u>	07-869-6961
Sampler's E-Mail Address:		
CERTIFICATION (to be completed by s	sampler)	
I, Charles G. Schwades	, Area Manag	ger
(Print Name)		(Print Title)
do HEREBY CERTIFY that the above complete and correct?	11	e collection information is
Signature:	<u> </u>	Date:

Reporting Format 62-550-730 Effective January 1995, Revised January 2004

Page 1 of 9

#### Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Form

Laboratory Certification Information (to be completed by lab)	
Lab Name: Flowers Chemical Laboratories, Inc.	, Florida Certification #: E83018
Address: P. O. Box 150597	Certification Expiration Date; 6/30/2006
Altamonte Springs, FL 32715-0597	Phone #: 407-339-5984
Analysis Information (to be completed by lab)	Report Number: 11527
Sample Number: 11527DW1	Date Sample Received: 03/01/06

	•		moon an enar appry/
Inorganics_	Volatile Organics	Badiopuclides.	Disinfection Byproducts
□ All 17	MAII 21 Partial	Single Sample	Trihalomethanes
Partial		Otrly Composite**	Haloacetic Acids
Nitrate			Bromate
□ Nitrite	Synthetic Organics	Secondaries	Chlorite
Asbestos	All 30 Deartial	All 14 Partial	
	/		
Were any analyses su	ubcontracted? Yes MNo	(if yes, please provide subc	optractor's Elorida drinking wat

Vere any analyses subcontracted?

(If yes, please provide subcontractor's Florida drinking water certification number with each result provided by that lab).

#### Certification

I, Jefferson S. Flowers, Technical Director, do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).



Date: 03/27/06

• Failure to provide a valid and current Florida Dept. of Health lab ID number and a current Analyte Sheet for the attached

analysis results will result in rejection of the report and possible enforcement against the public water system for failure to sample.

•• Please provide radiochemical sample dates and locations for each quarter.

Compliance Determination	(to be completed by DEP or DOH)				
Sample Collection Info Satisfactory	ht groups above)	Sample Analysis Info Revised Report Re n Unsatisfactory	equested (circle ) Analys	or highlight group sis Unsatisfactory	s above)
Person Notified:				l:	
Comments: DEF		ficial:			

### Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Form

Inorganic Contaminants: 62-550.310(1) Lab ID: 11527DW1 PWS ID: 3354647

Sample ID: water

Contam				Analysis		Analytical	Lab	Analysis	Applyois
<u>ID</u>	Contam Name	Units	MCL	Result	Qualifier	Method	MDL	Date	Analysis Tim -
1005	Arsenic	mg/L	0.01 (0.05)	0.00110		EPA200.8	0.00100	03/02/06	Time
1010	Barium	mg/L	2	0.00740		EPA200.8	0.00200	03/02/06	
1015	Cadmium	mg/L	0.005	0.00100	U	EPA200.8	0.00200	03/02/06	
1020	Chromium	mg/L	0.1	0.00330	Ũ	EPA200.8	0.00100		
1024	Cyanide	mg/L	0.2	0.00500	U	SM4500-CN E	0.00500	03/02/06	
1025	Fluoride	mg/L	2.0 (4.0)	0.200	U U	EPA300.0		03/06/06	
1030	Lead	mg/L	0.015	0.00100	υ υ		0.200	03/02/06	
1035	Mercury	mg/L	0.002	0.000200	υ	EPA200.8	0.00100	03/02/06	
1036	Nickel	mg/L	0.1	0.00200	U	EPA245.1	0.000200	03/09/06	
1040	Nitrate	mg/L	10		0	EPA200.8	0.00200	03/02/06	
1041	Nitrite	mg/L	10	5.95		EPA300.0	0.0500	03/02/06	05:42 PM
1045	Selenium	•		0.0500	U	EPA300.0	0.0500	03/02/06	05:30 PM
1052	Sodium	mg/L	0.05	0.00200	U	EPA200.8	0.00200	03/02/06	
1074	Antimony	mg/L	160	6.95		EPA200.7	0.500	03/02/06	
1075	Beryllium	mg/L	0.006	0.00100	U	EPA200.8	0.00100	03/02/06	
1085	•	mg/L	0.004	0.00100	U	EPA200.8	0.00100	03/02/06	
1085	Thallium	mg/L	0.002	0.00100	U	EPA200.8	0.00100	03/02/06	

#### Florida Department of Environmental Protection

#### Safe Drinking Water Program Laboratory Reporting Form

Secondary Contaminants: 62-550.320 Lab ID: 11527DW1 PWS ID: 3354647

Sample ID: water

Contam				Analysis		Analytical	Lab	Analysis	Analysis
ID	Contam Name	Units	MCL	Result	Qualifier	Method	MDL	Date	Time
1002	Aluminum	mg/L	0.2	0.0200	U	EPA200.8	0.0200	03/02/06	
1017	Chloride	mg/L	250	12.9		EPA300.0	0.400	03/02/06	
1022	Copper	mg/L	1.0	0.00100	U	EPA200.8	0.00100	03/02/06	
1025	Fluoride	mg/L	2.0 (4.0)	0.200	ŭ	EPA300.0	0.200	03/02/06	
1028	Iron	mg/L	0.3	0.0100	Ŭ	EPA200.7	0.0100	03/02/06	
1032	Manganèse	mg/L	0.05	0.0100	U	EPA200.7	0.0100	03/02/06	
1050	Silver	mg/L	0.1	0.00100	U	EPA200.8	0.00100	03/02/06	
1055	Sulfate	mg/L	250	98.6		EPA300.0	1.00	03/02/06	
1095	Zinc	mg/L	5	0.0100	U	EPA200.8	0.0100	03/02/06	
1905	Color	PCU	15 color units	1.00	Ŭ	SM2120B	1.00	03/01/06	03:30 PM
1920	Odor	TON	3	1.00	U	SM2150B	1.00	03/01/06	00.00 / 11
1925	рН	ρH	6.5 -8.5	8.26		EPA150.1	0.0100	03/02/06	10:40 AM
1930	Total Dissolved Solids	mg/L	500	172		SM2540C	2.50	03/07/06	
2905	Foaming Agents	mgLAS(340)/L	0.5	0.200	υ	SM5540C	0.200	03/01/06	10:51 AM

#### Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Form

Volatile Organics: 62-550.310(2)(b) Lab ID: 11527DW1 PWS ID: 3354647 Sample ID: water

Contam				Analysis		Analytical	Lab	Analysis	Analysis
1D	Contam Name	Units	MCL	Result	Qualifier	Method	MDL	Date	Time
2378	1,2,4,-trichlorobenzene	ug/L	70	0.500	U	EPA524.2	0.500	03/09/06	
2380	cis-1,2-Dichloroethylene	ug/L	70	0.500	U	EPA524.2	0.500	03/09/06	
2955	Xylenes	ug/L	10,000	0.500	U	EPA524.2	0.500	03/09/06	
2964	Dichloromethane	ug/L	5	0.500	υ	EPA524.2	0.500	03/09/06	
2968	o-dichlorobenzene	ug/L	600	0.500	U	EPA524.2	0.500	03/09/06	
2969	Para-dichlorobenzene	ug/L	75	0.500	U	EPA524.2	0.500	03/09/06	
2976	Vinył Chloride	ug/L	1	0.500	υ	EPA524.2	0.500	03/09/06	
2977	1,1-Dichloroethylene	ug/L	7	0.500	U	EPA524.2	0.500	03/09/06	
2979	trans-1,2-Dichloroethylene	ug/Ĺ	100	0.500	U	EPA524.2	0.500	03/09/06	
2980	1,2-dichloroethane	ug/L	3(5)	0.500	U	EPA524.2	0.500	03/09/06	
2981	1,1,1-trichloroethane	ug/L	200	0.500	U	EPA524.2	0.500	03/09/06	
2982	Carbon tetrachloride	ug/L	3	0.500	U	EPA524.2	0.500	03/09/06	
2983	1,2-dichloropropane	ug/L	5	0.500	υ	EPA524.2	0.500	03/09/06	
2984	Trichloroethylene	ug/L	3(5)	0.500	U	EPA524.2	0.500	03/09/06	
2985	1,1,2-trichloroethane	ug/L	5	0.500	Ū	EPA524.2	0.500	03/09/06	
2987	Tetrachloroethylene	ug/L	3(5)	0.500	U	EPA524.2	0.500	03/09/06	
2989	Monochlorobenzene	ug/L	100	0.500	Ū	EPA524.2	0.500	03/09/06	
2990	Benzene	ug/L	1	0.500	U	EPA524.2	0.500	03/09/06	
2991	Toluene	ug/L	1,000	0.500	Ŭ	EPA524.2	0.500	03/09/06	
2992	Ethylbenzene	ug/L	700	0.500	υ	EPA524.2	0.500	03/09/06	
2996	Styrene	ug/L	100	0.500	Ŭ	EPA524.2	0.500	03/09/06	
		-			-			= = = = = = = = = = = = = = =	

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### Florida Department of Environmental Protection

### Safe Drinking Water Program Laboratory Reporting Form

Synthetic Organics: 62-550.310(2)(c) Lab ID: 11527DW1 PWS ID: 3354647

. . . .

Sample ID: water

Contam				Analysis		Analytical	Lab	Analysis	Analysi
D	Contam Name	Units	MCL	Result	Qualifier	Method	MDL	Date	Time
2005	Endrin	ug/L	2	0.0100	U	EPA505	0.0100	03/08/06	
2010	Lindane	ug/L	0.2	0.0100	U	EPA505	0.0100	03/08/06	
2015	Methoxychlor	ug/L	40	0.0500	U	EPA505	0.0500	03/08/06	
2020	Toxaphene	ug/L	3	0.500	U	EPA505	0.500	03/08/06	
2031	Dalapon	ug/L	200	0.100	U	EPA515.1	0.100	03/14/06	
2032	Diquat	ug/L	20	0.400	U	EPA549.2	0.400	03/20/06	
2033	Endothall	ug/L	100	9.00	U	EPA548.1	9.00	03/17/06	
2034	Glyphosate	ug/L	700	6.00	U	EPA547	6.00	03/06/06	
2035	Di(2-ethylhexyl) adipate	ug/L	400	0.600	U	EPA525.2	0.600	03/20/06	
2036	Oxamyl (Vydate)	ug/L	200	2.00	U	EPA531.1	2.00	03/13/06	
2037	Simazine	ug/L	4	0.0700	U	EPA507	0.0700	03/09/06	
2039	Di(2-ethylhexyl)phthalate	ug/L	6	0.600	U	EPA525.2	0.600	03/20/06	
2040	Picloram	սց/Լ	500	0.100	υ	EPA515.1	0.100	03/14/06	
2041	Dinoseb	ug/L	7	0.200	U	EPA515.1	0.200	03/14/06	
2042	Hexachlorocyclopentadiene	սց/Լ	50	0.100	U	EPA505	0.100	03/08/06	
2046	Carbofuran	ug/L	40	0.900	U	EPA531.1	0.900	03/13/06	
2050	Atrazine	ug/L	3	0.100	υ	EPA507	0.100	03/09/06	
2051	Alachlor	ug/L	2	0.200	U	EPA507	0.200	03/09/06	
2065	Heptachlor	ug/L	0.4	0.0100	U	EPA505	0.0100	03/08/06	
2067	Heptachlor epoxide	ug/L	0.2	0.0100	U	EPA505	0.0100	03/08/06	
2105	2,4-D	ug/L	70	0.100	υ	EPA515.1	0,100	03/14/06	
2110	2,4,5-TP	ug/L	50	0.200	U	EPA515.1	0.200	03/14/06	
2274	Hexachlorobenzene	ug/L	1	0.100	υ	EPA505	0.100	03/08/06	
2306	Benzo(a)pyrene	ug/L	0.2	0.0200	U	EPA550	0.0200	03/13/06	
2326	Pentachlorophenol	ug/L	1	0.0400	U	EPA515.1	0.0400	03/14/06	
2383	Polychlorinated biphenyls (PCBs)	ug/L	0.5	0.100	Ū	EPA505	0.100	03/08/06	
2931	Dibromochloropropane	ug/L	0.2	0.0200	Ū	EPA504.1	0.0200	03/08/06	
2946	Ethylene Dibromide	ug/L	0.02	0.0100	Ū	EPA504.1	0.0100	03/08/06	
2959	Chlordane	ug/L	2	0.0100	ΰ	EPA505	0.0100	03/08/06	
9999	Chlor Herb Extraction	mL	-	1000	-	X515.1	0.0700	03/08/06	
9999	Chlor Pest Extraction	mL		35.0		X505		03/07/06	
9999	Phos Pest Extraction	mL		1000		X507		03/03/06	
9999	Benzo(a)pyrene Extraction	mL		1000		X550		03/02/06	
9999	Diquat Extraction	mL		100		X549.2		03/08/06	-
9999	Brom Insect Extraction	mL		35.0		X504		03/07/06	

Page 6

### Florida Department of Environmental Protection

### Safe Drinking Water Program Laboratory Reporting Form

X548

9999 Endothall\_Extraction

**r**-1

action

mL

100

03/08/06



### E Flowers Chemical Laboratories, Inc.

481 Newburyport Ave. Altamonte Springs, FL 32701 Bus: 407-339-5984 Fax: 407-260-6110 www.flowerslabs.com

### Flowers Chemical Labs-South

8253 South US Hwy. 1 Port St. Lucie, FL 34952 Bus: 772-343-8006 Fax: 772-343-8089

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4	Order color	3/1/4	0710		1																						2.1
5	525,2/550	3/1/	0710		2				X						χ												2.1
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7	EDA DACA (SOC)	3/1/01	UJIV		2					X					Χ												2.1
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## Flowers Chemical Laboratories

THIS IS NOT TO BE USED AS A CHAIN OF CUSTODY

481 Newburyport Ave.

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	onte Springs, FL 32701		Pho	ne (4	07) 3	39-5	984	Fax (	407)	260-6	6110				FCI	_ Pr	oject	Mai	nage	er:	J. S	mit	h		
Total		С					ser	vativ	e			Pl	asti		onta					ss (	_				
Containers	PARAMETERS	o n t a r s per Sample	M a t r i x	M e t h a n o I 10ml	ΗΖΟ <sub>3</sub>	H 2 S O 4	Ναγυνου		NaOH~ASC-D	MCA BUFFER	ΗCL				500 mL		Whirl Pak Bag	40 mL vial	500 mL	1 L C L E A R	1 L A M B E R	4 L A M B E R	4 oz Soil	8 oz Soil Jar	300 mL BOD Bottle
1	Secondaries/Primary	1	DW													x							:::		
1	Secondaries/Prim. metals	1	DW	1	X											X									
1	Prim (Cyanide	1	DW						X						X										
1	Odor/Color	1	DW																		X				
	EPA525.2/550(SOC)	2	DW	-	•••						X										X				
	EPA507/515.1/548.1/547 (SC	1	DW			-	X															X			
	EDB/DBCP(SOC)	2	DW				X											X							
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### LAKE UTILITY SERVICES, INC.

AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALFAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440

Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 E-Mail: uif@iag.net

April 28, 2006

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. Orlando, FL 32803

RE: 1st Quarter Nitrate Analysis Chapter 62-550 FAC Four Lakes PWS ID# 3354647

Dear Mr. Morrison:

Enclosed please find the results of samples taken for the above referenced analyses and system.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588

Sincerely,

LAKE UTILITY SERVICES, INC.

Willing the Confr.

William H. Coates Assistant Operations Manager

Enclosures

Cc: Bryan K. Gongre Regional Manager, UIOF Chuck Schwades Area Manager, UIOF

Page 1 of 2 100.0.4 49 Operations 660'663 3' 2 2006 ExQir NO3 Fr1k 2006 doc

660 663 3.2 2006

### Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIC	N (to be completed by sampler – Please tw	na or print legibly)
System Name: Four Lakes WTP		
	/  Nontransient Noncommunity	
City: <u>Montverde</u>	State: Fla.	ZIP Code: <u>35756</u>
Phone #: 407-869-1919		69-6961
E-Mail Address: b.coates@utilitiesinc-usa	.com	
SAMPLE INFORMATION (to be completed	by sampler)	
Sample Number: <u>14765</u>	Location Code (if kr	nown): Water
Sample Date: 01/19/06	Sample Time: <u>8</u> ;	45 am AM PM (Circle One)
Sample Location (be specific): P.O.E (To Dis	tribution system)	
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic acids)	: mg/L Field pH:
		and the second second
Sample Type (Check Only One)		
	Routine Compliance (with 62-550)	
	Confirmation of MCL Exceedance*	Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**	Violation Resolution
Raw (at well or intake)	Clearance (permitting)	Replacement (of Invalidated Sample)
	Other:	
Ave Residence Time	Sampling Procedure Used of Other Co	omments:
Near First Customer *See 62-550.500(6) for requirement	ants and restrictions **Soc 6	2-550.550(4) for requirements and
NOTE: See 62-550.512(3) for ad for nitrate or nitrite MCL e	ditional requirements attach	a results page for each site.
Sampler's Name: <u>Steve Pfouts</u>		
Sampler's Phone #: <u>407-869-1919</u>	Sampler's Fax #:	407-869-6961
Sampler's E-Mail Address:		
CERTIFICATION (to be completed by s	sampler)	
I, Steve Pfouts	, Operator	·····
(Print Name)		(Print Title)
do HEREBY CERTIFY that the abov complete and correct.	e public water system and samp	le collection information is
Signature: Plane Plonto		Date:5

### Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Form

Address: P. O. Box 150	mical Laboratories, Inc.	Elorida Certifi	cation #: E83018
			Expiration Date: 6/30/2006
Altamonte Spr	ings, FL 32715-0597	Phone #: 407	
·	<b>3</b>		
Analysis Information	(to be completed by lab)	Report Numb	er: 1476520060119
Sample Number: 14765		Date Sample	Received: 01/19/06
Group(s) analyzed and re	esults attached for compliance w	ith Chapter 62-550, F.A.C. (cheo	ck all that apply)
Inorganics	Volatile Organics	Radionuclides.	Disinfection Byproducts
All 17	🗖 All 21 🔲 Partial	Single Sample	
Partial		Qtrly Composite**	Haloacetic Acids
 □ Nitrate			
Nitrite	Synthetic Organics	Secondaries	
Asbestos	All 30 Partial	Ali 14 Partial	
	echnical Director, do HEREBY C nts of the National Environmenta		
-		Date: 01/23/06	
Failure to provide a valid an	nd current Florida Dept. of Health lab	ID number and a current Analyte Si	neet for the attached
	nd current Florida Dept. of Health lab	ID number and a current Analyte Si	neet for the attached
Failure to provide a valid an analysis results will result in		ID number and a current Analyte Si enforcement against the public wate	neet for the attached
Failure to provide a valid an analysis results will result in	rejection of the report and possible of cal sample dates and locations for ea	ID number and a current Analyte Si enforcement against the public wate	neet for the attached
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Failure to provide a valid ar analysis results will result in Please provide radiochemic ompliance Determinatio	rejection of the report and possible of cal sample dates and locations for ea on (to be completed	ID number and a current Analyte Si enforcement against the public wate ich quarter.	neet for the attached r system for failure to sample.
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Page 2

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### Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

## INORGANIC CONTAMINANTS 62-550.310(1)

Report Number / Job ID: 1476520060119

PWS ID (From Page 1): 3354647

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification #
1040	Nitrate (as N)	10	mg/L	5.84		EPA300.0	0.0500	01/20/06	09:30am	E83018
1041	Nitrite (as N)	1	mg/L							E
1005	Arsenic	0.05	mg/L	·····						E
1010	Barium	2	mg/L							E
1015	Cadmium	0.005	mg/L							E
1020	Chromium	0.1	mg/L							E
1024	Cyanide	0.2	mg/L			1				E
1025	Fluoride	4.0	mg/L							E
1030	Lead	0.015	mg/L							E
1035	Mercury	0.002	mg/L							E
1036	Nickel	0.1	mg/L					1		E
1045	Selenium	0.05	mg/L							E
1052	Sodium	160	mg/L							E
1074	Antimony	0.006	mg/L							E
1075	Beryllium	0.004	mg/L		1	1				E
1085	Thallium	0.002	mg/L			1		1		E
1094	Asbestos	7 MFL	MFL		1	1				E

Reporting Format 62-550.730 Effective January 1995, Revised January 2004

*t* -

\*Results must be reported with appropriate qualifiers in accordance with Florida Administrative Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, \*, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.







### State of Florida Department of Health, Bureau of Laboratories

This is to certify that

E83018 FLOWERS CHEMICAL LABORATORIES 481 NEWBURYPORT AVENUE ALTAMONTE SPRINGS, FL. 32701

has complied with Florida Administrative Code 64E-1, for the examination of Environmental samples in the following categories

DRINKING WATER - GROUP I UNREGULATED CONTAMINANTS, DRINKING WATER - GROUP II UNREGULATED CONTAMINANTS, DRINKING WATER - OTHER REGULATED CONTAMINANTS, DRINKING WATER - GROUP III UNREGULATED CONTAMINANTS, DRINKING WATER -MICROBIOLOGY, DRINKING WATER - PRIMARY INORGANIC CONTAMINANTS, DRINKING WATER - SECONDARY INORGANIC CONTAMINANTS, DRINKING WATER - SYNTHETIC ORGANIC CONTAMINANTS, NON-POTABLE WATER - EXTRACTABLE ORGANICS, NON-POTABLE WATER -GENERAL CHEMISTRY, NON-POTABLE WATER - METALS, NON-POTABLE WATER - MICROBIOLOGY, NON-POTABLE WATER -PESTICIDES-HERBICIDES-PCB'S, NON-POTABLE WATER - VOLATILE ORGANICS, SOLID AND CHEMICAL MATERIALS - EXTRACTABLE ORGANICS, SOLID AND CHEMICAL MATERIALS - GENERAL CHEMISTRY, SOLID AND CHEMICAL MATERIALS - METALS, SOLID AND CHEMICAL MATERIALS -PESTICIDES-HERBICIDES-PCB'S, SOLID AND CHEMICAL MATERIALS - VOLATILE ORGANICS

Continued certification is contingent upon successful on-going compliance with the NELAC Standards and FAC Rule 64E-1 regulations. Specific methods and analytes certified are cited on the Laboratory Scope of Accreditation for this laboratory and are on file at the Bureau of Laboratories, P. O. Box 210, Jacksonville, Fiorida 32231. Clients and customers are urged to verify with this agency the laboratory's certification status in Florida for particular methods and analytes.

EFFECTIVE July 30, 2005 THROUGH June 30, 2006



Ming S. Chen, Ph.D. **Bureau Chief, Bureau of Laboratories** Florida Department of Health DH Form 1697, 7/04 NON-TRANSFERABLE E83018-02-7/30/2005







John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

Laboratory Scope of Accreditation

FL00091

Page 6 of 33

## Attachment to Certificate #: E83018-02, expiration date June 30, 2006. This listing of accredited analytes should be used only when associated with a valid certificate.

State Laboratory ID: E83018

EPA Lab Code:

(407) 339-5984

E83018 Flowers Chemical Laboratories 481 Newburyport Avenue Altamonte Springs, FL 32701 Matrix: Drinking Water

Analyte	Method/Tech	Category	Certification Type	Effective Date
Methyl chloride (Chloromethane)	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Methyl tert-butyl ether (MTBE)	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Methyl tert-butyl ether (MTBE)	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Metolachlor	EPA 507	Group I Unregulated Contaminants	NELAP	6/1/2001
Metribuzin	EPA 507	Group I Unregulated Contaminants	NELAP	6/1/2001
Naphthalene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Naphthalene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
n-Butylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
n-Butylbenzene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Nickel	EPA 200.7	Primary Inorganic Contaminants	NELAP	6/1/2001
Nickel	EPA 200.8	Primary Inorganic Contaminants	NELAP	6/1/2001
Nitrate	EPA 300.0	Primary Inorganic Contaminants	NELAP	6/1/2001
Nitrite	EPA 300.0	Primary Inorganic Contaminants	NELAP	6/1/2001
n-Propylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
n-Propylbenzene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Odor	SM 2150 B	Secondary Inorganic Contaminants	NELAP	6/1/2001
Orthophosphate as P	EPA 300.0	Primary Inorganic Contaminants	NELAP	6/1/2001
Oxamyl	EPA 531.1	Synthetic Organic Contaminants	NELAP	6/1/2001
℃Bs	EPA 505	Synthetic Organic Contaminants	NELAP	6/1/2001
Pentachlorophenol	EPA 515.1	Synthetic Organic Contaminants	NELAP	6/1/2001
н	EPA 150.1	Secondary Inorganic Contaminants,Primary Inorganic Contaminants	NELAP	6/1/2001
henol	EPA 625	Group III Unregulated Contaminants	NELAP	6/1/2001
icloram	EPA 515.1	Synthetic Organic Contaminants	NELAP	6/1/2001
ropachlor (Ramrod)	EPA 508	Group I Unregulated Contaminants	NELAP	6/1/2001
c-Butylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
c-Butylbenzene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
elenium	EPA 200.8	Primary Inorganic Contaminants	NELAP	VI/2002
lver	EPA 200.7	Secondary Inorganic Contaminants	NELAP	6/1/2001
lver	EPA 200.8	Secondary Inorganic Contaminants	NELAP	6/1/2001
lvex (2,4,5-TP)	EPA 515.1	Synthetic Organic Contaminants	NELAP	5/1/2001
mazine	EPA 507	Synthetic Organic Contaminants	NELAP	3/1/20/02
dium	EPA 200.7	Primary Inorganic Contaminants	NELAP	6/1/2001
yrene	EPA 502.2	Other Regulated Contaminants	NELAP	5/1-2001
rene	EPA 524.2	Other Regulated Contaminants	NELAP	6/1/2001

Clients and Customers are urged to verify the laboratory's current certification status with the Environmental Laboratory Certification Program. Issue Date: 7/30/2005

Expiration Date: 6/30/2006

LAKE UTILITY SERVICES, INC.

AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

103

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440 FILE COPY

Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 E-Mail: uif@iag.net

May 23, 2006

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. Orlando, FL 32803

RE: 2nd Quarter Nitrate Analysis Chapter 62-550 FAC Four Lakes PWS ID# 3354647

Dear Mr. Morrison:

Enclosed please find the results of samples taken for the above referenced analyses and system.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588 ext. 257

Sincerely,

LAKE UTILITY SERVICES, INC.

William H. Coates

Assistant Operations Manager

Enclosures

Cc: Bryan K. Gongre Regional Manager, UIOF Chuck Schwades Area Manager, UIOF

Page 1 of 2 1100/04/10 Operations 660/663°3 / 2/2006/2ndQtr NO3 Fr1 k 2006 doe

### Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIO	N (to be completed by sampler - Please tur	e or print logibly)
System Name: Four Lakes WTP		354647-
	Nontransient Noncommunity	
	•	
Address. 200 Weathersheld Ave.		
City: Altamonte Springs	State: Fla.	ZIP Code: <u>32714</u>
Phone #: 407-869-1919	Fax #: <u>407-86</u>	9-6961
E-Mail Address: b.coates@utilitiesinc-usa	com	
SAMPLE INFORMATION (to be completed	by sampler)	
Sample Number: <u>16144DW1</u>	Location Code (if kn	own): <u>Water</u>
Sample Date: <u>05/16/06</u>	Sample Time: _7;4	15 am AM PM (Circle One)
Sample Location (be specific): P.O.E (To Dis	tribution system)	
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic acids):	mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for Sa	mple (Check all that apply)
	Routine Compliance (with 62-550)	Quarterly (Which Quarter? <u>Second</u>
Entry Point (to Distribution)	Confirmation of MCL Exceedance*	Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**	□Violation Resolution
Raw (at well or intake)	Clearance (permitting)	Replacement (of Invalidated Sample)
Max Residence Time	Other:	
Ave Residence Time	Sampling Procedure Used or Other Co	mments:
Near First Customer		
*See 62-550.500(6) for requireme NOTE: See 62-550.512(3) for ad for nitrate or nitrite MCL e	ditional requirements attach	2-550.550(4) for requirements and a results page for each site.
Sampler's Name: <u>Steve Pfouts</u>		
Sampler's Phone #: <u>407-869-1919</u>	Sampler's Fax #:	407-869-6961
Sampler's E-Mail Address:		
<b>CERTIFICATION</b> (to be completed by s	sampler)	
I, Steve Pfouts	, <u>Operator</u>	
(Print Name)		(Print Title)
do HEREBY CERTIFY that the above complete and correct.	e public water system and samp	le collection information is
•		
Signature: _ 2 terre Pout		Date:3.56
3		

### Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Form

Laboratory Certification	nformation (to be compl	eted by lab)	
Lab Name: Flowers Chem	nical Laboratories, Inc.	Florida Certific	cation #: E83018
Address: P. O. Box 1505	•		xpiration Date: 6/30/2006
Altamonte Sprin	ngs, FL 32715-0597	Phone #: 407	•
Analysis Information (1	to be completed by lab)	Report Numbe	er: 16144
Sample Number: 16144D	W1	Date Sample F	Received: 05/16/06
Group(s) analyzed and res	sults attached for compliance	e with Chapter 62-550, F.A.C. (c	heck all that apply)
loorganics.	Volatile Organics	Badionuclides	Disinfection Byproducts
🗆 All 17	🗌 All 21 🗍 Partial	Single Sample	
Partial		Ctrly Composite**	Haloacetic Acids
Mitrate			🗖 Bromate
Nitrite	Synthetic Organics	Secondaries	Chlorite
Asbestos	All 30 Partial	All 14 Partial	
Were any analyses subcor	ntracted? 🗌 Yes 🗹 No		ontractor's Florida drinking water ach result provided by that lab).
		Certification	
I, Jefferson S. Flowers, Te	echnical Director, do HEREBY	CERTIFY that all attached analy	rtical data are correct and unless
		ental Laboratory Accreditation Co	
Signature:		Date: 05/19/06	-
<ul> <li>Failure to provide a valid an</li> </ul>	nd current Florida Dept. of Healt	h lab ID number and a current Analy	te Sheet for the attached
analysis results will result ir	rejection of the report and pos	sible enforcement against the public	water system for failure to sample.

\*\* Please provide radiochemical sample dates and locations for each quarter.

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Compliance Determination (to	be completed	by DEP or DOH)		
Sample Collection Info Satisfactory Ye Resample Requested (circle or highlight g Reason(s): Incomplete Report Missing Analyte Sheet(s)	roups above)	Sample Analysis In Revised Report F on Unsatisfactory	Requested (circle o Analys	or highlight groups above) sis Unsatisfactory
Person Notified:			Date Notified	ł:
Comments: Date Reviewed: DEP/DO	H Reviewing Of	ificial:		

### Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Form

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inorganic Contaminants: 62-550.310(1) Lab ID: 16144DW1 PWS ID: Four Lake Sample ID: POE

Contam				Analysis		Analytical	Lab	Analysis	Analysis
ID	Contam Name	Units	MCL	Result	Qualifier	Method	MDL	Date	Time
1040	Nitrate	mg/L	10	5.74		EPA300,0	0.0500	05/17/06	10:30 AM

🗆 Flowers Chemical Laboratories, Inc. 481 Newburyport Ave. Altamonte Springs, FL 32701 Bus: 407-339-5984 Fax: 407-260-6110 www.flowerslabs.com

### Flowers Chemical Labs-South 8253 South US Hwy. 1

Port St. Lucie, FL 34952 Bus: 772-343-8006

Fax: 772-343-8089



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SW - surface water S -	Solveolid	SL -	sludge	A - Air	۲.					8	1		/	'n/	/ /		/ /	/ ,		Γ,		/		
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LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440

FILE COPY

Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 E-Mail: uif@iag.net

August 24, 2006

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. – Suite 232 Orlando, FL 32803

Re: TTHM/HAA5 Monitoring, Annual 2006 Lake Utilities Services Inc. – Four Lakes WTP PWS ID# 3354647

Dear Mr. Morrison:

Enclosed please find the annual results of samples taken for the above referenced analysis and system during calendar year 2006.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, ext. 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

1 Jugit. E

Bryan K, Gongre Regional Manager

Cc: Domenic Gentilucci, AM, UIF

Enclosures: Sample Results

063.3.2

### DISINFECTION BYPRODUCTS (TOTAL TRIHALOMETHANES [TTHMs] AND HALOACETIC ACIDS FIVE [HAA5s]) EXAMPLE REPORTING FORMAT

			YEAR: 2006	
	QUARTERLY REPORTING PERIOD:	July - September	1 EAR. 2006	
SYSTEM INFORMATION				
PWS NAME: Lake Utility Services Inc Four Lakes WTP				
PWS ID NUMBER: 3354647	COUNTY: Lake			
CONTACT PERSON: Bryan Gongre	PHONE NUMBER : 407-869-1919			
E-MAIL ADDRESS (optional):b.gongre@utilitiesinc-usa.com	FAX NUMBER (optional): 407-869-6961			

#### TTHM/HAA5 COMPLIANCE SUMMARY FOR PWSs MONITORING ON A QUARTERLY OR MORE FREQUENT BASIS TTHM COMPLIANCE SUMMARY HAA5 COMPLIANCE SUMMARY Last Four Quarters QTR 1 QTR 2 QTR 3 QTR 4 Last Four Quarters QTR 1 QTR 2 QTR 3 QTR 4 Actual Quarter/Year Actual Quarter/Year Provide the number of TTHM Provide the number of HAA5 samples taken during the last samples taken during the last quarter\* quarter\* Provide the arithmetic average of Provide the arithmetic average of all TTHM samples taken in each all HAA5 samples taken in each quarter for the last four quarters quarter for the last four quarters Calculate the Running Annual Average (RAA) for TTHMs (i.e., calculate Calculate the Running Annual Average (RAA) for HAA5s (i.e., calculate the arithmetic average of the guarterly arithmetic averages for the last four the arithmetic average of the guarterly arithmetic averages for the last four quarters) quarters) Does the RAA for HAA5s violate the Maximum Contaminant Level of Does the RAA for TTHMs violate the Maximum Contaminant Level of 0.080 mg/L for TTHMs? (YES/NO) 0.060 mg/L for HAA5s? (YES/NO)

\*Aiso, for each sample taken during the last quarter, provide the information requested in the tables on pages 3 and 4 of this format.

### TTHM/HAA5 REPORTING COMPLIANCE SUMMARY FOR PWSs MONITORING ANNUALLY

TTHM COMPLIANCE SUMMARY		HAA5 COMPLIANCE SUMMARY		
Provide the number of TTHM samples taken during the last year*	1	Provide the number of HAA5 samples taken during the last year*	1	
Calculate the arithmetic average of all TTHM samples taken over the last year	1.00	Calculate the arithmetic average all HAA5s samples taken over the last year	1.59	
Does the arithmetic average of the TTHM samples exceed the Maximum Contaminant Level of 0.080 mg/L for TTHMs? (YES/NO)**	No	Does the arithmetic average of the HAA5 samples exceed the Maximum Contaminant Level of 0.060 mg/L for HAA5s? (YES/NO)**	No	

\*Also, for each sample taken during the last year, provide the information requested in the tables on pages 3 and 4 of this format. \*\*If the TTHM or HAA5 sample (or average of the samples, if more than one sample is taken) exceeds the Maximum Contaminant Level, the system must increase monitoring to one TTHM and one HAA5 sample per treatment plant per quarter, taken at a point in the distribution system reflecting the maximum residence time, until the system meets the criteria in 40 CFR 131.132(b)(1)(iv). Please see 40 CFR 141.132 (b)(1) for complete details.

TOTAL TRIHALOMETH			LIGFUNNER	OKTING FERIOD				
Sample Location	Sample Location in the Distribution System (Average or Maximum Residence Time)	Date of Sample Collection (mo/da/yr)	Disinfectant Residual (mg/L) at Time of Sample Collection	Name of Person Collecting Sample	Date of Analysis (mo/da/yr)	Analytical Method	Laboratory Name & Certification Number	TTHM Analysis Result (ug/L)
16040 Harbor Oaks Dr.	MRT	7/27/06	1.7	Daniel Anderson	8/7/06	EPA 524.2	Flowers Chemical Laboratories (E83018)	1.00
			+		+			

Effective January 2004

Page 3 of 5

HALOACETIC ACIDS 5	Sample Location in the Distribution System (Average or Maximum Residence Time)	Date of Sample Collection (mo/da/yr)	Disinfectant Residual (mg/L) at Time of Sample Collection	Name of Person Collecting Sample	Date of Analysis (mo/da/yr)	Analytical Method	Laboratory Name & Certification Number	HAA5 Analysis Result (ug/L)
16040 Harbor Oaks Dr.	MRT	7/27/06	1.7	Daniel Anderson	8/7/06	EPA 552.2	Flowers Chemical Laboratories (E83018)	1.59
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Effective January 2004

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Page 4 of 5

### Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIC	N (to be completed by sampler - Please to	(pe or print legibly)
System Name: Lake Utilities Services Inc	· · · · · ·	D. #: 3354647
System Type (check one):		
		,
City: <u>Montverde</u>	State: Fla.	ZIP Code: <u>32778</u>
Phone #: 407-869-1919	Fax #: <u>407-</u> {	869-6961
E-Mail Address: <u>b.k.gongre@utilitiesinc-u</u>	sa.com	·
SAMPLE INFORMATION (to be completed	by sampler)	
Sample Number: 20758DW1	Location Code (if	known): <u>Water</u>
Sample Date: <u>7/27/06</u>	Sample Time: 11	:50 AM AM PM (Circle One)
Sample Location (be specific): <u>16040 Harb</u>	or Oaks Dr.	
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic acids).	: <u>1.7</u> mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for S	ample (Check all that apply)
Distribution	Routine Compliance (with 62-550)	Quarterly (Which Quarter? <u>Annual</u>
Entry Point (to Distribution)	Confirmation of MCL Exceedance	Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**	Violation Resolution
Raw (at well or intake)	Clearance (permitting)	Replacement (of Invalidated Sample)
Max Residence Time	Other:	
Ave Residence Time	Sampling Procedure Used or Other C	Comments:
Near First Customer		
*See 62-550,500(6) for requirem NOTE: See 62-550,512(3) for a for nitrate or nitrite MCL	dditional requirements attac	62-550,550(4) for requirements and ch a results page for each site.
Sampler's Name: Daniel Anderson		
Sampler's Phone #: <u>352-528-2296</u>	Sampler's Fax #:	407-869-6961
Sampler's E-Mail Address:		
CERTIFICATION (to be completed by	sampler)	
I, Daniel Anderson	, <u>Plant Ope</u>	rator
(Print Name)		(Print Title)
do HEREBY CERTIFY that the above complete and correct.	e public water system and samp	ple collection information is
Signature: Daniel A. Anders	wn	Date: <u>8/25/06</u>

Page 1 of 9

1	Florida D	epartm	ent of En	vironmenta	al Protectio	n
Safe	Drinking	Water	Program	Laboratory	Reporting	Form

	Sate Drinking water Pl	rogram Laboratory Reporting Fo	· ·	
Laboratory Certification	nformation (to be complet	ted by lab)		
Lab Name: Flowers Cher	nical Laboratories, Inc.	Florida Certifi	cation #: E83018	•
Address: P. O. Box 150	597	Certification I	xpiration Date: 6/30	/2007
Altamonte Spri	ngs, FL 32715-0597	Phone #: 407	-339-5984	
Analysis Information	to be completed by lab)	Report Numb	er: 20758	
Sample Number: 20758	DW1	Date Sample	Received: 07/2	8/06
Group(s) analyzed and re	sults attached for compliance	with Chapter 62-550, F.A.C. (	check all that apply)	
Inorganics.	Volatile Organics	Badionuclides.	Disinfection By	products
🗆 All 17	All 21 Partial	Single Sample	Trihalometha	anes
Partial		Ctrly Composite* •	Haloacetic A	cids
Nitrate			🗖 Bromate	
Nitrite	Synthetic Organics	Secondaries	Chlorite	
	All 30 Partial	All 14 Partial		
	Fechnical Director, do HEREBY	certification number with e Certification CERTIFY that all attached ana Intal Laboratory Accreditation (	ytical data are corre	ct and unless
Signature:		Date: 08/08/0	06	
analysis results will result		h lab ID number and a current Ana sible enforcement against the publ for each quarter.		
Compliance Determinatio	n (to be complet	ted by DEP or DOH)	<u> </u>	
Reason(s): Incomplete	circle or highlight groups above Report	cation Unsatisfactory her	ted (circle or highlig) Analysis Unsati	
Comments:	· · · · · · · · · · · · · · · · · · ·		·····	

Date Reviewed: \_\_\_\_\_ DEP/DOH Reviewing Official:\_\_

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Page 2

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### Florida Department of Environmental Protection

#### Safe Drinking Water Program Laboratory Reporting Form

Disinfection Byproducts: 62-550.310(3) Lab ID: 20758DW1 PWS ID: 3354647

Sample ID: 16040 Harbor Oaks Dr.

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Contam				Analysis		Analytical	Lab	Analysis	Analysis
ID	Contam Name	Units	MCL	Result	Qualifier	Method	MDL	Date	Time
2450	Monochloroacetic Acid	ug/L	N/A	2.00	<u> </u>	EPA552.2	2.00	08/04/06	
2451	Dichloroacetic Acid	ug/L	N/A	2.00	U	EPA552.2	· 2.00	08/04/06	
2452	Trichloroacetic Acid	ug/L	N/A	0.500	U	EPA552.2	0.500	08/04/06	
2453	Monobromoacetic Acid	ug/L	N/A	1.00	U	EPA552.2	1.00	08/04/06	
2454	Dibromoacetic Acid	ug/L	N/A	1.59		EPA552.2	0.500	08/04/06	
2456	HAA5	ug/L	60ppb	1.59		EPA552.2	0.500	08/04/06	
2941	Chloroform	ug/L	N/A	0.500	U	EPA524.2	0.500	08/07/06	
2942	Bromoform	ug/L	N/A	0.500	U	EPA524.2	0.500	08/07/06	
2943	Bromodichloromethane	ug/L	N/A	0.500	ų	EPA524.2	0.500	08/07/06	
2944	Dibromochloromethane	ug/L	N/A	0.500	U	EPA524.2	0.500	08/07/06	
2950	Total Trihalomethanes	ug/L	80	1.00	U	EPA524.2	1.00	08/07/06	
9999	HAA_Extraction	mL	N/A	40.0		X552		08/04/06	

Jeb Bush Governor

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M. Rony François, M.D., M.S.P.H, Ph.D. Secretary

### Laboratory Scope of Accreditation

Page 7 ' of 33

Attachment to Certificate #: E83018-09, expiration date June 30, 2007. This listing of accredited analytes should be used only when associated with a valid certificate.

State Laboratory ID: E83018

EPA Lab Code: FL00091

(407) 339-5984

E83018 Flowers Chemical Laboratories 481 Newburyport Avenue Altamonte Springs, FL 32701

Matrix: Drinking Water			Cantillantia-	· · · · · · · · · · · · · · · · · · ·
Analyte	Method/Tech	Category	Certification Type	Effective Date
Total nitrate-nitrite	EPA 300.0	Primary Inorganic Contaminants	NELAP	6/1/2001
Total nitrate-nitrite	EPA 353.2	Primary Inorganic Contaminants	NELAP	3/29/2006
Total organic carbon	SM 5310B	Primary Inorganic Contaminants	NELAP	3/29/2006
Total tribulomethanes	EPA 502.2	Other Regulated Contaminants	NELAP	6/1/2001
Total tribalomethanes	EPA 524.2	Other Regulated Contaminants	NELAP	6/1/2001
Foxaphene (Chlorinated camphene)	EPA 505	Synthetic Organic Contaminants	NELAP	6/1/2001
rans-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	6/1/2001
rans-1,2-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	6/1/2001
rans-1,3-Dichloropropylene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
ans-1,3-Dichloropropylene	EPA 524.2	Group If Unregulated Contaminants	NELAP	6/1/2001
richloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	3/14/2003
richloroethene (Trichloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	6/1/2001
richioroethens (Trichloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	6/1/2001
richlorofluoromethane	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
nchlorofluoromethans	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
urbidity	EPA 180.1	Secondary Inorganic Contaminants	NELAP	3/14/2003
ranium	EPA 200.8	Primary Inorganic Contaminants	NELAP	2/23/2005
anadium	EPA 200.8	Secondary Inorganic Contaminants	NELAP	11/10/2005
inyl chloride	EPA 502.2	Other Regulated Contaminants	NELAP	6/1/2001
inyl chloride	EPA 524.2	Other Regulated Contaminants	NELAP	6/1/2001
ylene (total)	EPA 502.2	Other Regulated Contaminants	NELAP	6/1/2001
viene (total)	EPA 524.2	Other Regulated Contaminants	NELAP	6/1/2001
nc	EPA 200.7	Secondary Inorganic Contaminants	NBLAP	6/1/2001
nc	EPA 200.8	Secondary Inorganic Contaminants	NELAP	6/1/2001

Clients and Customers are urged to verify the laboratory's current certification status with the Environmental Laboratory Certification Program. Issue Date: 7/1/2006

Expiration Date: 6/30/2007

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M. Rony François, M.D., M.S.P.H, Ph.D. Secretary

### Laboratory Scope of Accreditation

Page 6 of 33

## Attachment to Certificate #: E83018-09, expiration date June 30, 2007. This listing of accredited analytes should be used only when associated with a valid certificate.

State Laboratory ID: E83018

EPA Lab Code: FL00091

(407) 339-5984

E83018 Flowers Chemical Laboratories 481 Newburyport Avenue Altamonte Springs, FL 32701

Analyte	Method/Tech	Category	Certification Type	Effective Date
Nitrite as N	EPA 353.2	Primary Inorganic Contaminants	NELAP	3/29/2006
n-Propylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
n-Propylbenzene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Odor	SM 2150 B	Secondary Inorganic Contaminants	NELAP	6/1/2001
Orthophosphate as P	EPA 300.0	Primary Inorganic Contaminants	NELAP	6/1/2001
Oxamyl	EPA 531.1	Synthetic Organic Contaminants	NELAP	6/1/2001
PCBs	EPA 505	Synthetic Organic Contaminants	NELAP	6/1/2001
Pentachlorophenol	EPA 515.1	Synthetic Organic Contaminants	NELAP	6/8/2006
pH	EPA 150.1	Secondary Inorganic Contaminants, Primary Inorganic Contaminants	NELAP	6/1/2001
Picloram	EPA 515.1	Synthetic Organic Contaminants	NELAP	6/1/2001
Propachior (Ramrod)	EPA 508	Group I Unregulated Contaminants	NELAP	6/1/2001
sec-Butylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
sec-Butylbenzene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Selenium	EPA 200.8	Primary Inorganic Contaminants	NELAP	3/1/2002
Silver	EPA 200.7	Secondary Inorganic Contaminants	NELAP	6/1/2001
Silver	EPA 200.8	Secondary Inorganic Contaminants	NELAP	6/1/2001
Silvex (2,4,5-TP)	EPA 515.1	Synthetic Organic Contaminants	NELAP	6/1/2001
Simazine	EPA 507	Synthetic Organic Contaminants	NELAP	3/1/2002
Sodium	EPA 200.7	Primary Inorganic Contaminants	NELAP	6/1/2001
Styrene	EPA 502.2	Other Regulated Contaminants	NELAP	6/1/2001
Styrene	EPA 524.2	Other Regulated Contaminants	NELAP	6/1/2001
Sulfate	EPA 300.0	Primary Inorganic Contaminants,Secondary Inorganic Contaminants	NELAP	6/1/2001
Surfactants - MBAS	SM 5540 C	Secondary Inorganic Contaminants	NELAP	6/1/2001
ert-Butylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
ert-Butylbenzene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
etrachloroethylene (Perchloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	6/1/2001
etrachloroethylene (Perchloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	6/1/2001
hallium	EPA 200.8	Primary Inorganic Contaminants	NELAP	6/1/2001
oluene	EPA 502.2	Other Regulated Contaminants	NELAP	6/1/2001
oluene	EPA 524 2	Other Regulated Contaminants	NELAP	6/1/2001
otal coliforms	SM 9222 B	Microbiology	NELAP	3/22/2002
otal coliforms & E. coli	COLITAG	Microbiology	NELAP	11/10/2005
tal dissolved solids	SM 2540 C	Secondary Inorganic Contaminants	NELAP	6/1/2001
tal haloacetic acids	EPA 552.2	Synthetic Organic Contaminants	NELAP	5/15/2003

Clients and Customers are urged to verify the laboratory's current certification status with the Environmental Laboratory Certification Program. Issue Date: 7/1/2006

Expiration Date: 6/30/2007

### LAKE UTILITY SERVICES, INC.

AND AFFILIATED COMPANIES 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440

Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961

December 4, 2006

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd., Suite 232 Orlando, FL 32803-3767

RE: Fourth Quarter Nitrate Monitoring Requirements Chapter 62-550 FAC Four Lakes Water Treatment Plant / Lake Utility Services Inc. PWS ID 3354647

Dear Mr. Morrison:

Please find the enclosed results sampled on November 15, 2006 as specified above for the above referenced analysis and system.

If you should have any questions or require additional information please do not hesitate to call 407.869.1919, extension 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Bur X. E

Bryan K. Gongre Regional Manager

Enclosures

cc: Domenic Gentilucci, Area Manager, LUSI

Page 1 of 1 Four Lakes62-550 4th atr 2006 NO3

### Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIC	<b>DN</b> (to be completed by sampler - Please type	e or print legibly)
System Name: Lake Utilities Services Inc		3 5 4 6 4 7
System Type (check one):		
	, <u> </u>	<b>-</b>
City: Montverde	State: Fl.	ZIP Code: <u>34756</u>
Phone #: <u>407-869-1919</u>	Fax #: <u>407-86</u>	9-6961
E-Mail Address: <u>bkgongre@uiwater.com</u>	1	
SAMPLE INFORMATION (to be completed	by sampler)	
Sample Number:28472 DW1	Location Code (if kno	wn): Four Lakes WTP POE
Sample Date: <u>11/15/06</u>	Sample Time: <u>7:50</u>	AN PM (Circle One)
Sample Location (be specific): Four Lakes	NTP POE	
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic acids):	1.5 mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for Sar	nple (Check all that apply)
	Routine Compliance (with 62-550)	Quarterly (Which Quarter? 4th
Entry Point (to Distribution)	Confirmation of MCL Exceedance	Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites	Violation Resolution
Raw (at well or intake)	Clearance (permitting)	Replacement (of Invalidated Sample)
Max Residence Time	Other:	
Ave Residence Time	Sampling Procedure Used or Other Co	mments:
Near First Customer		
Sampler's Name: <u>Raymond Parrish</u>		
Sampler's Phone #: 407-869-1919	Sampler's Fax #: 40	07-869-6961
Sampler's E-Mail Address:		
CERTIFICATION (to be completed by	sampler)	
L Boumond Partich		
I, <u>Raymond Parrish</u> (Print Name)	······································	(Print Title) <u>Plant Operator</u>
do HEREBY CERTIFY that the abo	ve public water system and sample	e collection information is
complete and correct	1.1.7.	
Signature 1		Date: 12/01/06
Signature: _////////////////////////////////////	a justa	Date: <u>12/01/06</u>
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Page 1 of 9

### Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Form

Laboratory Certification Inf	ormation (to	be completed	i by lab)		
Lab Name: Flowers Chemic	al Laboratories,	Inc.	Florida Cer	tification #: E8	, 3018
Address; P. O. Box 15059	7		Certificatio	n Expiration Da	ite: 6/30/2007
Altamonte Spring	s, FL 32715-05	97	Phone #: 4	07-339-5984	
Analysis Information (to	be completed by	/ lab)	Report Nun	nber: 28472	
Sample Number: 28472DW	/1		Date Samp	le Received:	11/15/06
Group(s) analyzed and resu	Its attached for d	compliance wi	th Chapter 62-550, F.A.C	. (check all tha	t apply)
Inorganics.	Volatile Organ	nics	Radionuclides.	Disinfe	ction Ryproducts
🗆 All 17	🗌 All 21 🔲	Partial	Single Sample	🗋 Triha	lomethanes
□ Partial Í Nitrate			Ctrly Composite*•	Haio:	acetic Acids nate
Nitrite	Synthetic Org	anics	Secondaries	Chlor	
			All 14 Partial		
Were any analyses subcont	racted?	s 🗹 No	(If yes, please provide su certification number with		
I, Jefferson S. Flowers, Tec		do HEREBY C			
I, Jefferson S. Flowers, Tec noted meet all requirement		do HEREBY C	ERTIFY that all attached a		
		do HEREBY C	ERTIFY that all attached a	n Conference (N	
noted meet all requirement	s of the National	do HEREBY CI Environmenta ept. of Health la port and possible	ERTIFY that all attached an al Laboratory Accreditation Date: 11/2 b ID number and a current A e enforcement against the pu	n Conference (N 1/06 nalyte Sheet for	IELAC). the attached
noted meet all requirement Signature: • Failure to provide a valid and analysis results will result in	s of the National	do HEREBY CI Environmenta ept. of Health la port and possible d locations for e	ERTIFY that all attached an al Laboratory Accreditation Date: 11/2 b ID number and a current A e enforcement against the pu	n Conference (N 1/06 nalyte Sheet for	IELAC). the attached
noted meet all requirement Signature: • Failure to provide a valid and analysis results will result in • Please provide radiochemica Compliance Determination Sample Collection Info Satis Resample Requested (circo Reason(s): Incomplete Re	s of the National	do HEREBY CI Environmenta ept. of Health la bort and possible d locations for e be completed be completed Doups above)	ERTIFY that all attached an al Laboratory Accreditation Date: 11/2 b ID number and a current A e enforcement against the pu- bach quarter. by DEP or DOH) Sample Analysis Info S Revised Report Requi- ion Unsatisfactory	n Conference (N 1/06 nalyte Sheet for ublic water system atisfactory ested (circle or □ Analysis	IELAC). the attached m for failure to sample.
noted meet all requirement Signature: • Failure to provide a valid and analysis results will result in • Please provide radiochemica Compliance Determination Sample Collection Info Satis Resample Requested (circo Reason(s): Incomplete Re Missing Analy Person Notified:	s of the National	do HEREBY CI Environmenta ept. of Health la bort and possible d locations for e be completed be completed Doups above) Clocati Other	ERTIFY that all attached and a laboratory Accreditation Date: 11/2 b ID number and a current A e enforcement against the purple oach quarter. by DEP or DOH) Sample Analysis Info S Revised Report Require fon Unsatisfactory	n Conference (N 1/06 nalyte Sheet for ublic water system atisfactory ested (circle or □ Analysis	NELAC). the attached m for failure to sample. Yes No highlight groups above Unsatisfactory
noted meet all requirement Signature: • Failure to provide a valid and analysis results will result in • Please provide radiochemica Compliance Determination Sample Collection Info Satis Resample Requested (circo Reason(s): Incomplete Re Missing Analy Person Notified:	s of the National	do HEREBY Cl Environmenta ept. of Health la bort and possible d locations for e be completed Doups above) Locati Other	ERTIFY that all attached and al Laboratory Accreditation Date: 11/2 b ID number and a current A e enforcement against the pur- pach quarter. by DEP or DOH) Sample Analysis Info S Revised Report Require ion Unsatisfactory	n Conference (N 1/06 nalyte Sheet for iblic water system atisfactory ested (circle or Analysis Date Notified:	IELAC). the attached m for failure to sample. Yes No highlight groups above Unsatisfactory

Page 2

### Florida Department of Environmental Protection

#### Safe Drinking Water Program Laboratory Reporting Form

Inorganic Contaminants: 62-550.310(1) Lab ID: 28472DW1 PWS ID: 3354647 Sample ID: 4 Lks. POE

Contam				Analysis		Analytical	Lab	Analysis	Analysis	DOH Lab
ID	Contam Name	MCL	Units	Result	Qualifier	Method	MDL	Date	Time	Cert #
1040	Nitrate (as N)	10	mg/L	5.75		EPA300.0	0.0500	11/15/06	01:30 PM	E83018
1041	Nitrite (as N)	1	mg/L	0.0500	U	EPA300.0	0.0500	11/15/06	01:30 PM	E83018

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M. Rony François, M.D., M.S.P.H, Ph.D. Secretary

(407) 339-5984

### Laboratory Scope of Accreditation

FL00091

Page 5 of 33

Attachment to Certificate #: E83018-09, expiration date June 30, 2007. This listing of accredited analytes should be used only when associated with a valid certificate.

State Laboratory ID: E83018

EPA Lab Code:

E83018 **Flowers Chemical Laboratories** 481 Newburyport Avenue Altamonte Springs, FL 32701 Matrix: **Drinking Water** 

Analyte	Method/Tech	Category	Certification Type	Effective Date
gamma-BHC (Lindane, gamma-Hexachlorocyclohexane)	EPA 505	Synthetic Organic Contaminants	NELAP	6/1/2001
Glyphosate	EPA 547	Synthetic Organic Contaminants	NELAP	6/1/2001
Heptachior	EPA 505	Synthetic Organic Contaminants	NELAP	6/1/2001
Heptachlor epoxide	EPA 505	Synthetic Organic Contaminants	NELAP	6/1/2001
Heterotrophic plate count	SM 9215 C	Microbiology	NELAP	3/14/2003
Hexachlorobenzene	EPA 505	Synthetic Organic Contaminants	NELAP	6/1/2001
Hexachlorobutadiene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Hexachlorobutadiene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Hexachlorocyclopentadiene	EPA 505	Synthetic Organic Contaminants	NELAP	6/8/2006
Hexachloroethane	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Iodomethane (Methyl iodide)	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Iron	EPA 200.7	Secondary Inorganic Contaminants	NELAP	6/1/2001
Isopropyibenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Isopropylbenzene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Lead	EPA 200.8	Primary Inorganic Contaminants	NELAP	6/1/2001
Manganese	EPA 200.7	Secondary Inorganic Contaminants	NELAP	6/1/2001
Mercury	EPA 245.1	Primary Inorganic Contaminants	NELAP	6/1/2001
Methomyl (Lannate)	EPA 531.1	Group I Unregulated Contaminants	NELAP	10/23/2003
Methoxychlor	EPA 505	Synthetic Organic Contaminants	NELAP	6/1/2001
Methyl bromide (Bromomethane)	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
fethyl bromide (Bromomethanc)	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
lethyl chloride (Chloromethane)	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
lethyl chloride (Chloromethane)	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
(ethyl tert-butyl ether (MTBE)	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
fethyl tert-butyl ether (MTBE)	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
fetolachlor	EPA 507	Group I Unregulated Contaminants	NELAP	6/1/2001
letribuzin	EPA 507	Group I Unregulated Contaminants	NELAP	6/1/2001
aphthalene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
aphthalene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Butylbenzene	EPA 502.2	Group II Unregulated Contaminants	NELAP	6/1/2001
Butylbenzene	EPA 524.2	Group II Unregulated Contaminants	NELAP	6/1/2001
ckel	EPA 200.7	Primary Inorganic Contaminants	NELAP	6/1/2001
ckel	EPA 200.8	Primary Inorganic Contaminants	NELAP	
trate	EPA 300.0	Primary Inorganic Contaminants	NELAP	6/1/2001 6/1/2001
raie as N	EPA 353.2	Primary Inorganic Contaminants	NELAP	
nic	EPA 300.0	Primary Inorganic Contaminants	NELAP	3/29 <b>/2006</b> 6/1/2001

Clients and Customers are urged to verify the laboratory's current certification status with the Environmental Laboratory Certification Program. Issue Date: 7/1/2006

Expiration Date: 6/30/2007

# GREATER GROVES

25.30.440 (3) CHEMICAL ANALYSES

#### LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440 Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 E-Mail: uif@iag.net

April 7, 2005

Mr. Paul Morrison Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. - Suite 232 Orlando, FL 32803

RE: Triennial Monitoring Chapter 62-550 FAC Inorganics & Secondaries Greater Groves PWS ID# 3354881-1

Dear Mr. Morrison:

Enclosed please find the results of samples taken March 9 and March 16, 2005 for the above referenced analysis and system. Although the result for Nitrate under the initial Secondary contaminant analysis was within acceptable limits, the operator for some reason obtained a second sample. The results of said sampling are also enclosed.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, ext. 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Bug X. Bog

Bryan K. Gongre Assistant Operations Manager

Enclosures: Sample Results

ec: Bill Coates, Area Manager, UIOF



6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Client:	Utilities, Inc.					
Project Name:	Greater Groves WTP					
Project Number:						
PWS ID#:						
Attention:	Bryan Gongre					
Phone Number:	8002721919					

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

Report No.:	T052277				
Date Sampled:	3/9/2005				
Date Received:	3/10/05 11:20				
Date Reported:	3/23/2005				

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### **Project Description**

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

Project Name: Greater Groves WTP

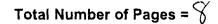
Approved By:

Nannette Staley, Project Coordinator

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.



### Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Utilities, Inc.

Project Name: Greater Groves WTP

Matrix: Drinking Water

PWS ID#:

Client Sample ID: POE

Site: 2425 US 27

Sample Number: T052277-01

#### Inorganic Contaminants

Report No.:	T052277	
Date/Time Sampled;	03/09/05	15:30
Date/Time Received:	3/10/05 11:20	0

Sampled By: Dan Sherwood

Shipping Method: AEL Pick-up

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Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert. #
1005	Arsenic	0.050	mg/L	0.0070	U	E200.7	0.0070	3/14/2005	10:54	E82574
1010	Barium	2.0	mg/∟	0.020		E200.7	0.0025	3/14/2005	10:54	E82574
1015	Cadmium	0.0050	mg/L	0.00021	U	E200.7	0.00021	3/14/2005	10:54	E82574
1020	Chromium	0.10	mg/L	0.00032	i	E200.7	0.00016	3/14/2005	10:54	E82574
1024	Cyanide	0.20	mg/L	0.0049	U	SM4500CN-E	0.0049	3/22/2005	9:30	E84589
1025	Fluoride	4.0	mg/L	0.079	ł	SM4500F-C	0.061	3/17/2005	13:00	E84589
1030	Lead	0.015	mg/L	0.0013	U	SM3113B	0.0013	3/11/2005	15:54	E82574
1035	Mercury	0.0020	mg/Ľ	0.000020	U	E245.1	0.000020	3/17/2005	12:37	E82574
10 <b>36</b>	Nickel	0.10	mg/L	0.0030	i	E200.7	0.0026	3/14/2005	10:54	E82574
1040	Nitrate (as N)	10	mg/L	4.0		SM4500NO3-F	0.027	3/10/2005	15:24	E84589
1041	Nitrite (as N)	1.0	mg/L	0.034	U	SM4500NO3-F	0.034	3/10/2005	15:24	E84589
1045	Selenium	0.050	mg/L	0.0018	1	SM3113B	0.0016	3/16/2005	11:15	E82574
1052	Sodium	160	mg/L	11		E200.7	0.0084	3/14/2005	10:54	E82574
1074	Antimony	0.0060	mg/L	0.0025	U	SM3113B	0.0025	3/17/2005	13:50	E82574
1075	Beryillum	0.0040	mg/L	0.000027	U	E200.7	0.000027	3/14/2005	10:54	E82574
1085	Thaillum	0.0020	mg/L	0.0016	U	E200.9	0.0016	3/15/2005	16:57	E82574

i The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.

U The compound was analyzed for but not detected.

MDL Method Reporting Limit

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

### Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Utilities, Inc.

Project Name: Greater Groves WTP

Matrix: Drinking Water

PWS ID#:

Client Sample ID: POE

Site: 2425 US 27

Sample Number: T052277-01

#### Secondary Contaminants

Sampled By:	Dan Sherv
Shipping Method	AEL Pick-

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert. #
1002	Aluminum	0.20	mg/L	0.017	υ	E200.7	0.017	3/14/2005	10:54	E82574
1017	Total Chlorides	250	mg/L	18		E325.3	1.3	3/14/2005	11:00	E84589
1022	Copper	1.0	mg/L	0.021		E200.7	0.00096	3/14/2005	10:54	E82574
1025	Fluoride	2.0	mg/L	0.079	i	SM4500F-C	0.061	3/17/2005	13:00	E84589
1028	Iron	0.30	mg/L	0.016	U	E200.7	0.016	3/14/2005	10:54	E82574
1032	Manganese	0.050	mg/L	0.0012		E200.7	0.00022	3/14/2005	10:54	E82574
1050	Silver	0.10	mg/L	0.0019	U	E200.7	0.0019	3/14/2005	10:54	E82574
1055	Sulfate (as SO4)	250	mg/L	8.5		E375.4	1.4	3/15/2005	8:45	E84589
1095	Zinc	5.0	mg/L	0.0072	U	E200.7	0.0072	3/14/2005	10:54	E82574
1905	Color	150	olor Uni	5.0	U	SM2120B	5.0	3/10/2005	14:50	E84589
1920	Odor	3.0	TON	1.0	U	SM2150B	1.0	3/10/2005	14:40	E84589
1925	pН	6.5-8.5 p	oH Units	7.85	, Q	E150.1		3/10/2005	15:00	E84589
1930	Total Dissolved Solids	500	mg/L	130		E160.1	10	3/11/2005	17:30	E84589
2905	MBAS, as LAS, mol. wt. 340	0.50	mg/L	0.041	ł	E425.1	0.035	3/11/2005	9:15	E84589

The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.

Q Sample held beyond the acceptable hold time.

υ The compound was analyzed for but not detected.

MDL Method Reporting Limit

,

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

I.

Report No.: T052277 Date/Time Sampled: 03/09/05 15:30 Date/Time Received: 3/10/05 11:20

> wood -up

## Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIC	DN (to be completed by sampler – Please type or print legibly)							
System Name: <u>Greater</u>	Groves pws 1.D. # 3354881-0							
	kelttilitz Services, Inc.							
200 Weathersfield Avenue								
City: <u>Clermont Altumin</u>								
Phone #: $\frac{207 - 869 - 1919}{569 - 696}$ Fax #: $\frac{407 - 869 - 696}{-696}$								
E-Mail Address:								
SAMPLE INFORMATION (								
SAMPLE INFORMATION (to be completed Sample Number: <u>1052277-01</u>								
Sample Date: 3/9/05								
	Sample Time: <u>3-30</u> AM (PM) <sup>(Circle One)</sup>							
Sample Location (be specific): 6K649								
Disinfectant Residual (Required when reporting	g results for trihalomethanes and haloacetic acids): mg/L Field pH:							
Sample Time (Start Only Carl)								
Sample Type (Check Only One)	Reason(s) for Sample (Check all that apply)							
	Routine Compliance (with 62-550)     Quarterly (Which Quarter?)							
	Confirmation of MCL Exceedance* Special (not for compliance with 62-550)							
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites** Violation Resolution							
Raw (at well or intake)								
Max Residence Time								
Near First Customer	Sampling Procedure Used or Other Comments:							
*See 62-550.500(6) for requiren	nents and restrictions. **See 62-550.550(4) for requirements and							
NOTE: See 62-550.512(3) for a for nitrate or nitrite MCL	dditional requirements attach a results page for each site.							
Sampler's Name:	SHERWOOD							
Sampler's Phone #: _321-385-	7893 Sampler's Fax #: 407.869.6961							
Sampler's E-Mail Address:								
CERTIFICATION (to be completed by	sampler)							
TAMEL Shaping	OPERATR.							
I, DANIEL Sherwa (Print Name)	(Print Title)							
do HEREBY CERTIFY that the abo	ve public water system and sample collection information is							
complete and correct.								
Signature: Dan M	Date: 4/4/85							

Reporting Format 62-550.730 Effective January 1995, Revised January 2004

Page 1 of [insert number of pages]

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Florida Department of Environmental Protection Safe Drinking Water Program Laboratory
Reporting Format

LabName	: Advanced Environmo	ental Labs - Tampa	F	Florida Certification #: E84589					
Address:	9610 Princess Palm	<u>`</u>		Certification Expiration Date: 6/30/2005					
	Tampa, Florida 3361	9		phone #: (813) 630-9616					
	S INFORMATION (to b	e completed by lab		<u></u>					
			Dete St						
	(from page 1): ned Report Number or			ample(s) Received: <u>3/10/2005 11:20:00</u>					
			// Sample Num	nber (From page 1)					
,	•	·							
	Inorganics	Synthetic Organics		Disinfection Byproducts					
I	✓ All 17	All 30	All 21	Triha					
l	Partial	All Except Dioxi		🔛 Haloaceti					
[	Nitrite	Dioxin Only	Radionuclides						
L L	Asbestos Only		Single Samp						
			Qtrly Composite						
				IV All 14					
Vere any	analyses subcontracte	d? 🔽 Yes 🗔 N	0						
f yes, plea	ase provide DOH certifi	ication number E8257	74						
	OOH ANALYTE SHEET	T FOR EACH SUBCO	NTRACTED LAB						
			CERTIFICATION						
, Nannett	e Staley	, Project Coordinator							
	(Print Name)	, The contract		,					
	,	ached analytical data	are correct and unless noted me	eet all requirements of the					
	nvironmental Laborator								
	Dannet	40 Stat		323-05					
ignature	- manua	1 ral	~						
nalysis re		tion of the report, poss	sible enforcement against the pu	rent Analyte Sheet for the attached ublic water system for failure to sample					
•	provide radiological sam		-						
		(to be completed by (	DEP or DOH)						
				nto Satisfactory					
•	Ilection Info Satisfactor ment Sample(s) Requested		Sample Analysis Ir	nfo Satisfactory: <u>Yes</u> No Requested (circle or highlight group(s) above					
-				riequested (circle of highlight group(s) above					
	al Monitoring Required		oup(s) above)						
eason(s):	MCL(s) Exceeded		Detection(s)	Incomplete Report					
	Missing Analyte S	heet(s)	Location Unsatisfactory	Analysis Unsatisfactory					
			r	Date Notified:					
erson Noti omments	ified:			Date Notified:					

2.4

Chain-of-Custody for AEL Tampa to AEL Jax

AEL Tampa 9610 Princess Palm Avenue Tampa, FL 33619 813-630-9616 Fax 813-630-4327 Contact Person: Michael Cammarata

Project #: T052277 CustomerName: Utilities, Inc. Collector: Dan Sherwood AEL Jax 6601 Southpoint Parkway Jacksonville, FL 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde



Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles	Bottle Type (Pres.)
T052277-01	POE	-550 Metals ICP (Primary) D	Drinking Water	3/9/2005	15:30	3/10/05 11:20	3/24/2005	<u></u>	1L Poly
T052277-01	POE	i50 Metals ICP (Secondary)	Drinking Water	3/9/2005	15:30	3/10/05 11:20	3/24/2005		1L Poly
T052277-01	POE	Hg (DW)	Drinking Water	3/9/2005	15:30	3/10/05 11:20	3/24/2005		500mL Poly (HNO3)
T052277-01	POE	Pb (DW)	Drinking Water	3/9/2005	15:30	3/10/05 11:20	3/24/2005	<u> </u>	500mL Poly (HNO3)
T052277-01	POE	Sb (DW)	Drinking Water	3/9/2005	15:30	3/10/05 11:20	3/24/2005	<u></u>	500mL Poly (HNO3)
T052277-01	POE	Se (DW)	Drinking Water	3/9/2005	15:30	3/10/05 11:20	3/24/2005		500mL Poly (HNO3)
T052277-01	POE	TI (DW)	Drinking Water	3/9/2005	15:30	3/10/05 11:20	3/24/2005		500mL Poly (HNO3)

20

M Tampa Relinquisher:

1115

Shipping Receiver:

Shipping Relinquisher:

Jacksonville Receiver:

<u>UPS</u> Date/Time: <u>3/10/05</u> Jenguson Date/Time: <u>3/11/05</u>

Page 1 of 1

1120 Б Date/Time Rovd; 3/ 10 Received by:

Advanced Environmental Labs 9610 Princess Palm Ave. Tampa, FL 33619

Log-In	request numbe	ert 🦾
	Completed b	y:

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Cooler/Shipping information:

Courier: @AEL Client DUPS Dony Express D FedEx D Other (describe):\_

Type: Cooler D Box D Other (describe) \_\_\_\_

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	· · · · · · · · · · · · · · · · · · ·				
Temp (°C)	οĽ				
Temp taken from	Temp blank Sample bottle file file file	□ Temp blank □ Sample bottle □ Ice Water	Temp blank Sample bottle Lice Water	Temp blank Sample bottle Ice Water	Temp blank Sample bottle I ce Water
Temp measured with	2 IR gun D Thermometer (enter ID):	IR gun IThermometer (enter ID):	D IR gans D Thermometer (enter ID):	IR gun     Thermometer (enter ID):	IR gus     Thermometer (enter ID):

Other Information: Any "NO" responses or discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			
2.	Were custody papers properly included with samples?			
3.	Were custody papers properly filled out (ink, signed, match labels)?			
4.	Did all bottles arrive in good condition (unbroken)?			
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?			
6.	Did the sample labels agree with the chain of custody?			
7.	Were correct bottles used for the tests indicated?	-		
8,	Were proper sample preservation techniques indicated on the label?			
9.	Were samples received within holding times?			
10.	Were all VOA vials checked for the presence of air bubbles?			
11.	Were there air bubbles present in the VOA vials?	•	_	-
12.	Were samples in direct contact with wet ice? If "No," check one: INO ICE IBLUE ICE			
13.	Was the cooler temperature less than 6°C?	-		
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.		1	
15.	Were the sample containers provided by AEL?			
16.	Were samples accepted into the laboratory?			

Comments:

Kit ID:

nuvanceu Environmental Laboratories, Inc.	onville, FL 32216 • (904) 363-9350 Fax (904) 363-9354	LA	B NUM	BER:	P	5227	7	
J Tampa: 9610 Princess Palm Avenue, Tam J Gainesville: 2106 NW 67th Place, Suite 7, Ga	npa, FL 33619 • (813) 630-9616 Fax (813) 630-4327 ainesville, FL 32606 • (352) 367-1500 Fax (352) 367-0050 016, Altamonte Springs, FL 32701 • (407) 937-1594 Fax (407) 937-1597				Page	C	of	
CLIENT NAME: UTILITIES INC	PROJECT NAME: <b>GREATER</b> P.O. NUMBER / PROJECT NUMBER: BOTTL SIZE & TYPE		500		L			
ADDRESS WEATHERS FIELD AVE ALTAMONTE SPRINGS, FL 32714 PHONE: 407-869-1919 407-869-6961 CONTACT BRYAN GONGRE	PROJECT LOCATION: 2425 Us $27LU$	ML	we7	57825	ŵe7		L A B N U M B	0. 8
		P YALIDE	PRIMARY SECONDARY	DAIMARY M.	CARY		ER	t
WW= waste water         SW=surface water         GW=ground water           SAMPLE ID         SAMPLE DESCRIPTION	Composite DATE TIME MATRIX CONT.	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Non	Huo	Arte			
P.O.E . P.O.E	G 3-9-05 3.30 PM IW / G 3-9-05 DW /	×	X	X				10
POE POE	6 3-9-05 Del /				X		Z	*2 m
		5						
Out: / / Via: no	1 Marilla 1		ļ.	Regeiv	joni	03 16 3-10	ate Til <b>05</b> 0 <b>0</b> 5 //	me 730 '20
Ret: / / Via: Trip BI.	3 4 Lieceived				revised 8/01			

63.5 I

11.1



6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

4

Client:	Utilities, Inc.	Report No.:	T05
Project Name:	Greater Groves WTP	Date Sampled:	3/16/
Project Number:		Date Received:	3/17/0
PWS ID#:		Date Reported:	3/21/
Attention:	Dan Sherwood		
Phone Number:	8002721919		

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

2543 /2005 5 11:20 /2005

Q

### **Project Description**

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

> Greater Groves WTP **Project Name:**

Approved By:

Uni

Nannette Staley, Project Coordinator

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.



## Advanced Environmental Laboratories, Inc.

Analytical Report

Sample Number: T052543-01	Shipping Method: AEL Courier
Site: Clermont	Sampled By: Dan Sherwood
Client Sample ID: POE	
PWS ID#:	
Matrix: Drinking Water	Date/Time Received: 3/17/05 11:20
Project Name: Greater Groves WTP	Date/Time Sampled: 03/16/05 15:4
Client: Utilities, Inc.	Report No.: T052543

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis <u>Time</u>	DOH Lab
1040	Nitrate (as N)	10	mg/L	4.1		SM4500NO3-F	0.027	3/17/2005	15:48	E84589

MDL Method Reporting Limit For all Results qualified with an I, the PQL is defined to be 4 times the MDL

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## Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATION	I (to be completed by sampler – Please type	or print legibly)
System Name: Greater Gro	Ve_S PWS I.D.	#3354881-0
System Type (check one): Community Address: 2425 05 77 L	Nontransient Noncommunity	Transient Noncommunity
200 weathersfield Avenue		
City: - CLERMONT Altamorte		ZIP Code: 32714
Phone #: 407.869.1919		1.869.6961
E-Mail Address:		
SAMPLE INFORMATION (to be completed	ov sampler)	
Sample Number <u>T052543-01</u>	Location Code (if kno	wn)'
Sample Date:3/(6/0)	Sample Time:	
Sample Location (be specific):		
Disinfectant Residual (Required when reporting	•	(·3 mg/L Field pH:
Disiniectant Residual (Required when reporting		
	Deason(s) for Sa	nple (Check all that apply)
Sample Type (Check Only One)	Routine Compliance (with 62-550)	Quarterly (Which Quarter?)
	Confirmation of MCL Exceedance*	Special (not for compliance with 62-550)
	Composite of Multiple Sites**	
Plant Tap (not for compliance with 62-550)		Replacement (of Invalidated Sample)
Raw (at well or intake)	Clearance (permitting)	
		· · · · · · · · · · · · · · · · · · ·
	Sampling Procedure Used or Other Co	
		2-550.550(4) for requirements and
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for ac for nitrate or nitrite MCL	ditional requirements attach	a results page for each site.
Sampler's Name: DRNIEL S	herwood	· · · · · · · · · · · · · · · · · · ·
Sampler's Phone #: 321-356-	7873 Sampler's Fax #:	407.869.6961
Sampler's E-Mail Address:		·
• ~		
CERTIFICATION (to be completed by	sampler)	
. The standard	$d \qquad of$	FRATOR
I, DANIEL SMRWOO (Print Name)	<u>d</u> ,04	(Print Title)
do HEREBY CERTIFY that the abo	ve public water system and same	le collection information is
complete and correct.		
	5	el. hr
Signature:	/	Date: 4/8/85
Reporting Format 62-550.730	Dess 1 of lisson symbols of the	

Reporting Format 62-550.730 Effective January 1995, Revised January 2004

Page 1 of [insert number of pages]

J. F

ABORATORY CERTIFICATION INFORMATION (to be com ATTACH CURRENT DOH ANALYTE SHEET*	pleted by lab - Please type or	print legibly)
_abName: Advanced Environmental Labs - Tampa	Florida	Certification #: E84589
Address: 9610 Princess Palm Avenue	Certification E	Expiration Date: 6/30/2005
Tampa, Florida 33619		phone #: (813) 630-9616
ANALYSIS INFORMATION (to be completed by lab		
PWS ID (from page 1):	Date Sample	(s) Received: 3/17/2005 11:20:00
ab Assigned Report Number or Job ID T052543	Sample Number (	From page 1)
Group(s) Analyzed Results attached for compliance with cha		
Inorganics Synthetic Organics	Volatile Organics	Disinfection Byproducts
All 17 All 30	Ali 21	Triha
Partial All Except Dioxin	Partial	🔲 Haloaceti
🗹 Nitrate 🗌 Partial	Radionuclides	🗋 Bromate
🗌 Nitrite 📃 Dioxin Only	Single Samp	Chlorite
Asbestos Only	Qtrly Composite**	Secondaries
		 Partial
Vere any analyses subcontracted? 🛛 🗌 Yes 🗹 No		-
f yes, please provide DOH certification number		
ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRA	CTED LAB	
CERT	IFICATION	
Nannette Staley , Project Coordinator	t	
(Print Name)		
<ul> <li>HEREBY CERTIFY that all attached analytical data are co lational Environmental Laboratory Accreditation Conference</li> </ul>		I requirements of the
Ignature: Manuette Stat	Date:	21-05
Failure to provide a valid and current Florida DOH lab certifi nalysis results will result in rejection of the report, possible en nd may result in notification of the DOH Bureau of Laborator	nforcement against the public v	nalyte Sheet for the attached water system for failure to sample
Please provide radiological sample dates locations for each	h quarter.	

Sample Collection Info Satisfactory \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ Replacement Sample(s) Requested (circle or highlight group(s) above)

..... Yes Sample Analysis Info Satisfactory:

Revised Report Requested (circle or highlight group(s) above)

..... Additional Monitoring Required (circle or highlight group(s) above)

Reason(s): MCL(s) Exceeded Missing Analyte Sheet(s) Other:	Detection(s)	Analysis Unsatisfactory
Person Notified:		Date Notified:
Comments		
Date Reviewed:	DEP/DOH Reviewing Official:	

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|--|

Advanced Environmental Labs 9610 Princess Palm Ave. Tampa, FL 33619

Date/Time Rovd: 5 Received by:

Log-In request number: Completed by:

Cooler/Shipping Information:

Courier-2 AEL Client DUPS Pony Express FedEx Other (describe):

Type: 2 Cooler 🗆 Box 🗆 Other (describe) \_

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	· · · · ·	**************************************			
Temp (°C)	0 C				
Temp taken from	Temp blank Sample bottle Tee Water	.□ Temp blank □ Sample bottle □ Ice Water	Temp blank Sample bottle loc Water	Temp blank Sample bottle Ice Water	Temp blank Sample bottle I lee Water
Temp measured with	DIR gun D Thermometer (enter ID):	D IR gun D Thermometer (enter ID);	D IR gun D Thermometer (enter ID):	D IR gun D Thermometer (enter ID):	<ul> <li>IR gus</li> <li>Thermometer (enter ID);</li> </ul>

Other Information: Any "NO" responses or discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			
2.	Were custody papers properly included with samples?			
3.	Were custody papers properly filled out (ink, signed, match labels)?	-		
4.	Did all bottles arrive in good condition (unbroken)?			
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?			
6.	Did the sample labels agree with the chain of custody?	/		
7.	Were correct bottles used for the tests indicated?			· ·
8.	Were proper sample preservation techniques indicated on the label?			
9.	Were samples received within holding times?	-		
10.	Were all VOA vials checked for the presence of air bubbles?			-
11.	Were there air bubbles present in the VOA vials?			
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE			
13.				
14.	Were sample pHs checked and recorded by Sample control?			-
	NOTE: VOA samples are checked by laboratory analysis.		l	
15.	Were the sample containers provided by AEL?			
16.	Were samples accepted into the laboratory?	/ /		

Comments:

Kit ID:

Ð	Advanced6601 Southpoint ParkwayJacksonville, Florida 32216(904) 363-9350Environmental Laboratories, Inc.FAX (904) 363-9354					
Laboratory Project No.	aboratory Project No./SDG#: T052543		Greater Groves WTP			
Client Name: Utilities, Inc.		Analytical Ba	Analytical Batch ID: wct031705no2			
I. RECEIPT						
	No Exceptions were encountered.					
II. HOLDING TIMES						
Preparation:	All holding times were met.					
Analysis:	All holding times were met.					
III. METHOD						
Analysis:	SM4500NO3-F					
Preparation:	NONE					
V. PREPARATION						
	Sample preparation proceeded normally.					
V. ANALYSIS						
A. Calibration:	All acceptance criteria were met.					
B. Blanks:	All acceptance criteria were met.					
C. Spikes:	T052543 had sufficient concentration of the target analyte that of the matrix spikes.	required a diluition and	did not allow for the calcula			
D. Duplicates:	All acceptance criteria were met.					
E. Serial Dilution:	All acceptance criteria were met.					
F. Samples:	Sample analyses proceeded normally.					
G. Other:						

I certify that this data package is in compliance with the terms and conditions agreed to by Advanced Environmental Laboratories, Inc. and by the client, both technically and for completeness, except for the conditions detailed above. The Quality Assurance Officer, or designee, as verified by the following signature, has authorized release of the data contained in this data package:

2.1

Manuette Stally Nannette Staley, Project Coordinator

	□ Gainesville: 2106 NW 67th Place, Suite 7 □ Orlando: 528 S. North Lake Blvd., Suite				7) 937-1597			Pa	age	of	
CLIENT NAME:	S INC		NAME: ENTER (-	- - ROVES		BOTTLE SIZE & TYPE					
ADDRESS WE	ATHERSFIELD AVE		ER / PROJECT N		·····						
	•	PROJECT I	LOCATION:			N E A Q L U					A B
PHONE: 407-869-	TE SPRINGS 327 64 FAX: 1919 407-869-1919	CLEP	RMONT			Y I S R					N U
CONTACT:		SAMPLED	RMONT BY: Sher	wood		I E S D					B E
TURN AROUND		PECIAL INSTRU	ICTIONS:								R
STANDARD	RE-	SOMPLO	Ē				176				
							Цn				
🗅 RUSH							マ				
WW= waste water	SW=surface water GW=ground water	<b>DW</b> =drinking wa		=air <b>SO=</b> soil	SL=sludg						
SAMPLE ID	SAMPLE DESCRIPTION		Grab SAN mposite DATE	IPLING TIME	MATRIX NO. CON	Т.					
		1		+				1 1			-01
	P.D.E	E	= 3/16/5	1545	Dal 1						
	P.D.E	E	> 3[16/0	5 1545	Dal 1	_					
	P.D.E	E	> 3[16/~	5 7543	Dal 1						
	P.D.E		> 3[16/20	5 7543	Der 1						
	P.D.E		> 3[16/2	5 7543	Der 1						
	P.D.E		> 3[16/2	5 7543							
	P.D.E		> 3[16/2	5 7543							
	P.D.E		> 3[16/2	7543							
I = Ice H = (HC		Sodium Thiosulfate		linquistiled by:	Date			Received by		Date	Time

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#### LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES, INC.

200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440 Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 E-Mail: uif@iag.net

45

April 27, 2005

Mr. Paul Morrison Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. - Suite 232 Orlando, FL 32803

RE: Triennial Monitoring Chapter 62-550 FAC V.O.C.'s & Gross Alpha/228 Greater Groves PWS ID# 3354881-1

Dear Mr. Morrison:

Enclosed please find the results of samples taken February 23, 2005 for the above referenced analysis and system.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, ext. 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Bugard. Dong

Bryan K. Gongre Assistant Operations Manager

Enclosures: Sample Results

ec: Bill Coates, Area Manager, UIOF

## Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIO	N (to be completed by sampler - Piesse typ	e or print legibly)			
System Name: <u>Greater Groves</u>	PWS I.D	* 3354881-1			
System Type (check one):					
Address:Lake Utility 5					
200 weathers.	Field Avenue				
City: <u>Altamonte Spri</u>	ng State: FL	ZIP Code: <u>327/4</u>			
Phone 8: 401-707, 1414	Pax #	1.067.67.41			
E-Mail Address: b.K. gongre @	utiliticsinc-usa.con				
SAMPLE INFORMATION (to be completed	by sampler)				
Sample Number					
Sample Date:2/23/05		3:00 AM (PM) (Circle One)			
Sample Location (be specific): _Entry pr	pintto distribution system	£			
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloecetic acids)	: mg/L Field pH:			
Sample Type (Check Only One)	Reason(s) for Sa	mple (Check all that apply)			
Distribution	Routine Compliance (with 62-550)	Quarterly (Which Quarter?)			
Entry Point (to Distribution)	Confirmation of MCL Exceedance*	Special (not for compliance with 62-550)			
Plant Tap (not for compliance with 62-650)	Composite of Multiple Sites**	Violation Resolution			
Raw (at well or intake)	Clearance (permitting)	Replacement (of Invalidated Sample)			
Max Residence Time	Other:				
Ave Residence Time	Sampling Procedure Used or Other Co	omments:			
Near First Customer					
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for ac for nitrate or nitrite MCL (	ditional requirements attac	2-550.550(4) for requirements and h a results page for each site.			
Sampler's Name: Daniel Sher	wood				
Sampler's Phone #: 407.869.1919	Sampler's Fax #	407.869.6961			
Sempler's E-Mail Address:					
·					
CERTIFICATION (to be completed by	sampler)	perator			
1, Daniel Sherwood	Asst	- Operations Manacer			
(Print Name)		(Print Title)			
do HEREBY CERTIFY that the above	ve public water system and samp	ble collection information is			
complete and correct.	)				
and the off	P	Date: 4/28/05			
Signature: <u>Manue Mon</u>	JOOU				

Reporting Format 62-550.730 Effective January 1995, Revised January 2004

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Page 1 of [insert number of pages]



Client:Utilities, Inc.Project Name:Greater Groves WTPProject Number:PWS ID#:Attention:Brian GongrePhone Number:8002721919

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Report No.:	T051798
Date Sampled:	2/23/2005
Date Received:	2/24/05 11:00
Date Reported:	4/18/2005

#### **Project Description**

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

Project Name: Greater Groves WTP

Approved By:

Michael Cammarata, Laboratory Manager

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages =

## Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Utilities, Inc.

Site: Clermont

Project Name: Greater Groves WTP

Matrix: Drinking Water

#### PWS ID#:

Client Sample ID: POE

## Report No.: T051798 Date/Time Sampled: 2/23/2005 15:00 Date/Time Received: 2/24/05 11:00

Sampled By: Dan Sherwood

Shipping Method: AEL Pick-up

Sample Number: T051798-04

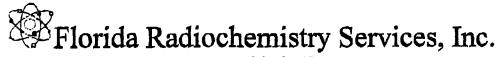
Volatile Organics Analysis Analysis DOH Lab Analysis MCL Units Qualifier Analytical Method Lab MDL RDL Contam ID Contam Name Results Date Time Cert. # υ 3/1/2005 70 0.20 E502.2 0.20 1.0 15:33 2378 1,2,4-Trichlorobenzene ug/L E82574 E502.2 υ 3/1/2005 2380 Cis-1,2-dichloroethene 70 ug/L 0.20 0.20 1.0 15:33 E82574 E502.2 3/1/2005 2955 Xylenes (Total) 10000 ug/L 0.50 U 0.50 1.0 15:33 E82574 E502.2 2964 **Methylene Chloride** 5.0 ug/L 0.44 υ 0.44 1.0 3/1/2005 15:33 E82574 2968 1,2-Dichlorobenzene 600 ug/L 0.26 υ E502.2 0.26 1.0 3/1/2005 15:33 E82574 E502.2 2969 1,4-Dichlorobenzene 75 ug/L 0.11 υ 0.11 1.0 3/1/2005 15:33 E82574 2976 Vinyl Chioride 1.0 ug/L 0.29 υ E502.2 0.29 1.0 3/1/2005 15:33 E82574 2977 1,1-Dichloroethene 7.0 ug/L 0.21 υ E502.2 0.21 1.0 3/1/2005 15:33 E82574 2979 Trans-1,2-dichloroethene 100 ug/L 0.27 Ų E502.2 0.27 1.0 3/1/2005 15:33 E82574 2980 1,2-Dichloroethane 3.0 ug/L 0.22 U E502.2 0.22 1.0 3/1/2005 15:33 E82574 2981 1,1,1-Trichloroethane 200 ug/L 0.33 U E502.2 0.33 1.0 3/1/2005 15:33 E82574 2982 Carbon Tetrachloride 3.0 ug/L 0.31 U E502.2 0.31 1.0 3/1/2005 15:33 E82574 2983 1,2-Dichloropropane 5.0 ug/L 0.22 U E502.2 0.22 1.0 3/1/2005 15:33 E82574 2984 Trichloroethene 3.0 ug/L 0.28 υ E502.2 0.28 1.0 3/1/2005 15:33 E82574 2985 1,1,2-Trichloroethane 5.0 ug/L 0.32 υ E502.2 0.32 1.0 3/1/2005 15:33 E82574 2987 Tetrachloroethene 3.0 ug/L 0.31 υ E502.2 0.31 1.0 3/1/2005 15:33 E82574 100 ug/L 0.18 υ E502.2 0.18 1.0 3/1/2005 15:33 2989 Chlorobenzene E82574 2990 Benzene 1.0 ug/L 0.21 U E502.2 0.21 1.0 3/1/2005 15:33 E82574 1000 ug/L 0.10 U E502.2 0.10 1.0 3/1/2005 15:33 2991 Toluene E82574 700 ug/L 0.15 U E502.2 0.15 1.0 3/1/2005 15:33 E82574 2992 Ethylbenzene 100 0.14 Ų E502.2 0.14 1.0 3/1/2005 15:33 2996 Styrene ug/L E82574

U The compound was analyzed for but not detected.

MDL Method Reporting Limit

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

NU. 45/ Y. Y



<u>Contact: Michael J. Naumann</u> 5456 Hoffner Ave., Suite 201 Orlando, FL 32812 Phone: (407) 382-7733 Fax: (407)382-7744 Certification I. D. # E83033

Work Order #: 0502245 Report Date: 03/08/05

Report to:

Advanced Environmental Laboratories, Inc. 9610 Princess Palm Ave. Tampa, FL 33619 Attention: Michael Cammarata

I do hereby affirm that this record contains no willful misrepresentations and that this information given by me is true to the best of my knowledge and belief. I further certify that the methods and quality control measures used to produce these laboratory results were implemented in accordance with the requirements of this laboratory's certification and NELAC Standards.

Signed Mana Michael J/Naumann - President

Date 3-8-05

Page 1 of 3

9.

APK. 18. 2005 10:53AM

NU. 45/ Y. 10

1

Florida Radiochemistry Services, Inc.

Sample Login

Client:	Advanced Environmental Laboratories, Inc.	Date / Time Received 02/25/05 10:16	Work order # 0502245
Client Contact:	Michael Cammarata		
Client P.O.			
Project I.D.	T0 <b>51795</b>		٠
Lab Sample I.D.	Client Sample I.D.	Sample Date/Time	Analysis Requested
0502245-01	T051798-01	02/23/05 15:00	Ga, Ra228

Analysis Results

Gross Alpha	1.8	Radium 228	1.1
Error +/-	1.1	Error +/-	0.6
MDL	1.4	MDL	0.8
EPA Method	900.0	EPA Method	Ra-05
Prep Date	03/02/05	Prep Date	03/03/05
Analysis Date	03/02/05	Analysis Date	03/06/05
Analyst	MJN	Analyst	PJ
Units	pCi/l	Units	pCi/l

Page 2 of 3

APK. 18. 2005 10:53AM

NU. 45/ F. 11



## QA Page

Analyte	Sample #	Date Analyzed	Sample Result	Amount Spiked	-	Spike /Dup Result	Spike % Rec.	Spiks Dup % Rpd
Gross Alpha	0502245-01	03/03/05	1.8	10.2	10.9	10.8	89	<b>6.9</b>
Radium 228	0502245-01	03/08/05	1.1	9.4	8,6	9,4	80	8.9
		Quality	Control	Limits				
		% RPD		% Rec.				
Gross Alpha		18.1		88-116				
Radium 228		25.0		70-125				

Page 3 of 3

## Chain-of-Custody for AEL Tampa to Florida Radioch

AEL Tampa 9610 Princess Palm Avenue Tampa, FL 33619 813-630-9616 Fax 813-630-4327 Contact Person: Michael Cammarata

Project #: T051798

Florida Radlochemistry 5456 Hoffner Ave., Suite 201 Orlando, FL 32812-2517 407-382-7733 Contact Person: Sample Receiving

Department: FloridaRad

Check if Rush

Lab Code	Client Sample 10	Test	Matrix	Collect Date	/ Time	Receive Dale	Due Dale	#Bottles Bo	ttle Type (Pres.)	
T051798-01	POE	Gross Alpha	Drinking Water	2/23/2005	15:00	2/24/05 11:00	3/10/2005	<u></u>	1L Amber glass	
T051798-02	POE	Radium 228	<b>Drinking Water</b>	2/23/2005	15:00	2/24/05 11:00	3/16/2005	<u> </u>	1L Amber glass	

Tampa Relinquisher:

UPZ Shipping Receiver. Wind Florida Radiochemistry Receiver:

Date/Time: 2/24/2005 3:15:09 PM 2/25/05 14:14 Date/Time:

Page 1 of 1

Shipping Relinquisher:

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NU. 45 /

		Reporting Format	ar print logibly)
ABORATORY CERTIFICATIO		be completed by lab - Please type	or print legibly)
abName: Advanced Environ	mental Labs - Tampa	Flori	ida Certification #: E84589
dress: 9610 Princess Palr	n Avenue	Certificatio	n Expiration Date: 6/30/2005
Tampa, Florida 330	619		phone #: (813) 630-9616
NALYSIS INFORMATION (to	be completed by lab		
WS ID (from page 1):		Date Sam	ple(s) Received: 2/24/2005 11:00:00
ab Assigned Report Number	or Job ID T051798	Sample Numbe	ar (From page 1) 757179
roup(s) Analyzed _Results att	ached for compliance w	vith chapter 62-550, F.A.C. (check a	all that appl
Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts
All 17	All 30	✓ All 21	🗍 Triha
Partial	All Except Diox	in 🗌 Partial	Haloaceti
Nitrate	Partial	Radionuclides	
Nitrite	Dioxin Only	Single Samp	Chlorite
Asbestos Only		Qtrly Composite**	Secondaries
			All 14
ere any analyses subcontrac	ted? 🔽 Yes 🦳 N	lo	Partial
• •			
ion, plance provide DOH cer	tification number 5825	74 E83033	
		ONTRACTED LAB	
yes, please provide DOH cer TTACH DOH ANALYTE SHE			
TTACH DOH ANALYTE SHE		ONTRACTED LAB	
TTACH DOH ANALYTE SHE Michael Cammarata (Print Name)	ET FOR EACH SUBCO	ONTRACTED LAB CERTIFICATION Pr,	
TTACH DOH ANALYTE SHE Michael Cammarata (Print Name)	ET FOR EACH SUBCO	DNTRACTED LAB CERTIFICATION er, e are correct and unless noted mee	
Michael Cammarata (Print Name) HEREBY CERTIFY that all ational Environmental Zabora	ET FOR EACH SUBCO	DNTRACTED LAB CERTIFICATION er, e are correct and unless noted mee	It all requirements of the $4/14/37$
Michael Cammarata (Print Name) HEREBY CERTIFY that all ational Environmental abora gnature: Failure to provide a valid and alysis results will result in rej d may result in notification of	ET FOR EACH SUBCO	DNTRACTED LAB CERTIFICATION ar are correct and unless noted mee erence (NELAC). Date: b certification number and a curren ssible enforcement against the publi boratory Services.	4/11/0r
Michael Cammarata (Print Name) HEREBY CERTIFY that all tional Environmental abora gnature: Failure to provide a valid and alysis results will result in rej d may result in notification of	ET FOR EACH SUBCO	DNTRACTED LAB CERTIFICATION ar are correct and unless noted mee erence (NELAC). Date: b certification number and a curren ssible enforcement against the publi boratory Services.	4/11/37 ht Analyte Sheet for the attached
Michael Cammarata (Print Name) HEREBY CERTIFY that all ational Environmental Zabora gnature: Failure to provide a valid and alvsis results will result in rei	ET FOR EACH SUBCO	DNTRACTED LAB CERTIFICATION er, a are correct and unless noted mee erence (NELAC). Date: b certification number and a curren ssible enforcement against the publi boratory Services. for each quarter.	4/11/37 ht Analyte Sheet for the attached
Michael Cammarata (Print Name) HEREBY CERTIFY that all tional Environmental Cabora gnature: Failure to provide a valid and alysis results will result in rej d may result in notification of Please provide radiological s DMPLIANCE DETERMINATI	ET FOR EACH SUBCO , Laboratory Manage attached analytical data tory Accreditation Confe ection of the report, pos f the DOH Bureau of La sample dates Jocations O (to be completed by ctoryYesNo	DNTRACTED LAB         CERTIFICATION         ar         are correct and unless noted mee         erence (NELAC).         Date:         b certification number and a current spible enforcement against the public boratory Services.         for each quarter.         DEP or DOH)         Dample Analysis Info	4/14/57         Int Analyte Sheet for the attached         lic water system for failure to sample,         Satisfactory:         Yes         No
Michael Cammarata (Print Name) HEREBY CERTIFY that all tional Environmental Labora gnature: Failure to provide a valid and alysis results will result in rej d may result in notification of Please provide radiological s MPLIANCE DETERMINATI	ET FOR EACH SUBCO , Laboratory Manage attached analytical data tory Accreditation Confe ection of the report, pos f the DOH Bureau of La sample dates Jocations O (to be completed by ctoryYesNo	DNTRACTED LAB         CERTIFICATION         ar         are correct and unless noted mee         erence (NELAC).         Date:         b certification number and a current spible enforcement against the public boratory Services.         for each quarter.         DEP or DOH)         Dample Analysis Info	4/14/37 Int Analyte Sheet for the attached lic water system for failure to sample,
Michael Cammarata (Print Name) HEREBY CERTIFY that all ational Environmental Cabora gnature: Failure to provide a valid and alysis results will result in rej d may result in notification of Please provide radiological s DMPLIANCE DETERMINATI	ET FOR EACH SUBCO , Laboratory Manage attached analytical data tory Accreditation Confe l current Florida DOH la ection of the report, pos f the DOH Bureau of La ample dates Jocations O (to be completed by ctoryYesNo	DNTRACTED LAB         CERTIFICATION         er         are correct and unless noted mee         erence (NELAC).         Date:         b certification number and a current         sible enforcement against the public         boratory Services.         for each quarter.         DEP or DOH)         Date:         DEP or DOH)         Description         Revised Report Repo	4/14/57         Int Analyte Sheet for the attached         lic water system for failure to sample,         Satisfactory:         Yes         No
Michael Cammarata (Print Name) HEREBY CERTIFY that all tional Environmental Zabora gnature: Failure to provide a valid and alysis results will result in rej d may result in notification of Please provide radiological s OMPLIANCE DETERMINATI mple Collection Info Satisfac Replacement Sample(s) Reques Additional Monitoring Requi	ET FOR EACH SUBCO , Laboratory Manage attached analytical data tory Accreditation Confe ection of the report, pos f the DOH Bureau of La eample dates Jocations O (to be completed by ctory Yes No sted (circle or highlight grou red (circle or highlight grou	DNTRACTED LAB         CERTIFICATION         er         are correct and unless noted mee         erence (NELAC).         Date:         b certification number and a current         sible enforcement against the public         boratory Services.         for each quarter.         DEP or DOH)         Date:         DEP or DOH)         Description         Revised Report Repo	4/14/57         Int Analyte Sheet for the attached         lic water system for failure to sample,         Satisfactory:         Yes         No
Michael Cammarata (Print Name) HEREBY CERTIFY that all ational Environmental Zabora gnature: Failure to provide a valid and alysis results will result in rej d may result in notification of Please provide radiological s DMPLIANCE DETERMINATI Imple Collection Info Satisfac Replacement Sample(s) Reques Additional Monitoring Requi	ET FOR EACH SUBCO , Laboratory Manage attached analytical data tory Accreditation Confe current Florida DOH la ection of the report, pos f the DOH Bureau of La mample dates Jocations O (to be completed by storyYes No sted (circle or highlight grou red (circle or highlight grou red (circle or highlight grou	DNTRACTED LAB CERTIFICATION ar are correct and unless noted mee erence (NELAC). Date: b certification number and a curren ssible enforcement against the public boratory Services. for each quarter. DEP or DOH) Sample Analysis Infor p(s) above) Detection(s) Location Unsatisfactory	4/14/57         It Analyte Sheet for the attached lic water system for failure to sample,         D Satisfactory:       Yes         No         equested (circle or highlight group(s) above)
Michael Cammarata (Print Name) HEREBY CERTIFY that all ational Environmental Cabora gnature: Failure to provide a valid and alysis results will result in rej d may result in notification of Please provide radiological s DMPLIANCE DETERMINATI Imple Collection Info Satisfac Replacement Sample(s) Reques Additional Monitoring Requi	ET FOR EACH SUBCO , Laboratory Manage attached analytical data tory Accreditation Confe ection of the report, pos f the DOH Bureau of La eample dates Jocations O (to be completed by ctoryYesNo sted (circle or highlight grou red (circle or highlight grou	DNTRACTED LAB         CERTIFICATION         ar         are correct and unless noted mee         erence (NELAC).         Date:         b certification number and a current spible enforcement against the public boratory Services.         for each quarter.         DEP or DOH)         p(s) above)         Revised Report Revised Repor	4/14/57         It Analyte Sheet for the attached lic water system for failure to sample,         D Satisfactory:       Yes         No         equested (circle or highlight group(s) above)         Incomplete Report

## P.7

32

05 110T Date/Time Rcvd: Received by:

Advanced Environmental Labs 9610 Princess Palm Ave.

Tampa, FL 33619

Log-in	request	number:	
			-

Completed by:

8

Cooler/Shipping information:

Courier: AEL Client UPS Pony Express FedEx Other (describe):

Type: D Cooler D Box D Other (describe)

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID					
Temp (°C)	Di				
Temp taken from	Temp blank Sample bottle Control	□ Temp blank □ Sample bottle □ Ice Water	Temp blank Sample bottle loc Water	<ul> <li>Temp blank</li> <li>Sample bottle</li> <li>Ice Water</li> </ul>	Temp blank Sample bottle Ice Water
Temp measured with	Thermometer (enter ID):	D IR gun D Thermometer (enter ID):	□ IR yun □ Thermometer (enter ID):	IR gun     Thermometer (enter ID):	IR gua D Thermometer (enter ID):

Other Information: Any "NO" responses or discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1,	Were custody seals on shipping container(s) intact?			
2.	Were custody papers properly included with samples?			
3.	Were custody papers properly filled out (ink, signed, match labels)?			
4.	Did all bottles arrive in good condition (unbroken)?			
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?			
6,	Did the sample labels agree with the chain of custody?			
7.	Were correct bottles used for the tests indicated?		_	
8.	Were proper sample preservation techniques indicated on the label?			·
9	Were samples received within holding times?	/		
10.	Were all VOA vials checked for the presence of air bubbles?		_	
11.	Were there air bubbles present in the VOA vials?	•	_	-
12.	Were samples in direct contact with wet ice? If "No," check one: INO ICE IBLUE ICE			
13.	Was the cooler temperature less than 6°C?	/		
14.	Were sample pHs checked and recorded by Sample control? NOTE: VOA samples are checked by laboratory analysts.			
15.	Were the sample containers provided by AEL?	-		
16.	Were samples accepted into the laboratory?			!

Comments:

Kit ID:

Chain-of-Custody for AEL Tampa to AEL Jax

#### AEL Tampa

9610 Princess Palm Avenue Tampa, FL 33619 813-630-9616 Fax 813-630-4327 Contact Person: Michael Cammarata

Project #: T051798 CustomerName: Utilities, Inc. Collector: Dan Sherwood

#### AEL Jax

6601 Southpoint Parkway Jacksonville, FL 32210 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde



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Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles	Bottle Type (Pres.)
T <del>951798-03</del>	POE	-550 Metals ICP (Primary) D	Drinking Water	2/23/2005	15:00	2/24/05 11.00	3/10/2005		
r <del>T051798-03 -</del>	POE_	50 Metals ICP (Secondary)	Drinking Water	2/23/2005	15:00	2/24/05 11:00	3/10/2005		1L Poly
T051798-03	POE	,_ <del>Hg (DW)−</del>	Drinking Water	2/23/2005	15:00	2/24/05 11:00	3/10/2005		500mL Poly (HNO3)
T051798-03	POE	<del>Pb (DW)</del>	Drinking Water	2/23/2005	15:00	2/24/05 11:00	3/10/2005		500mL Poły (HNO3)
1051798-03	POE	- Sb (DW)	Drinking Water	2/23/2005	15:00	2/24/05 11:00	3/10/2005		500mL Poly (HNO3)
<del>- T051798-03</del>	<b>P</b> OE		Drinking Water	2/23/2005	15:00	2/24/05 11:00	3/10/2005		500mL Poly (HNO3)
T051798-03	POE	- TT(DWZ)	Drinking Water	2/23/2005	15:00	2/24/05 11:00	3/10/2005	····-	500mL Poly (HNO3)
T051798-04	POE	62-550 VOCs DW	Drinking Water	2/23/2005	15:00	2/24/05 11:00	3/9/2005		40mL VOC Vial

Metals bottle damaged

11R Tampa Relinquisher: Shipping Relinquisher:

Shipping Receiver: Jacksonville Receiver:

Date/Time: 2 -'300 Date/Time:

Page 1 of 1

Huvanceu Environmenta	l Laboratories. Inc.			262 0254	<u>_</u>		LAB	NUM	BER:	70	51	79'8	>	
☐ Jacksonville ☐ Tampa: ☐ Gainesville: ☐ Orlando:	<ul> <li>6601 Southpoint Parkway, Jackso 9610 Princess Palm Avenue, Tan 2106 NW 67th Place, Suite 7, Ga 528 S. North Lake Blvd., Suite 10</li> </ul>	ipa, FL 33619 • (813) 630 inesville, FL 32606 • (352	)-9616 Fax (813) 63 2) 367-1500 Fax (35	62) 367-0050	07) 937-1597					Pa	ge	\	of <u> </u>	
CLIENT NAME:		PROJECT NAME:				BOTTLE SIZE						BACON		
		GREAT	er Gri	51 <i>1</i> E5			l		-	-	500			
UTILITIES INC		P.O. NUMBER / P			······································		12	12	, <b>н</b> с	ML	MC	12		
DDRESS: WEATHERS FIEL	> AUE					A R N E								L A
ALTAMONTE SPRIN	KS FC 32714	PROJECT LOCAT	HON:											в
437-869-1919	FAX:	CLERMO	NA FI			Y I S R			S S S	1				N U
						I E S D	8		2 <	3-1-5	is i	100		M B
CONTACT: BRIAN GONG	SR <u>5</u>	SAMPLED BY:	<u>ChERWOO</u>	<u>d</u>		_	ette	de		Ś	1	in		E R
TURN AROUND TIME:	REMARKS / SPE	CIAL INSTRUCTIO	NS:				しい	228	5		$ \mathcal{D} $			
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🛎 STANDARD							2202	A	1	I [		L D	2	
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🗅 RUSH							0	] Q	1 1		4	\$	4	
			OIL A=air	SO=so	oil <b>SL</b> =slu	dae Prese	v							
WW= waste water SW≃surface	water <b>GW</b> =ground water	DW=drinking water	SAMPL									-		
SAMPLE ID	SAMPLE DESCRIPTION	Grab Composite		TIME	MATRIX	ONT.		<u> </u>						
	0 1.1.	G	2/23/05		D.W	U T	X						-	01
P.06	GROSS ALPHA			1	+			X	-					n7
P.OE	RAO 228	6	2/23/05		D.00									02
		6	8/23/05		D.W				X		_			
POE	1020 WET	G				, .				X			(	D
POG	CN	0	2/23/05		$D.\omega$			-	_		X			
POE	(0	G	2/23/05		D.W					_			+	
		6	2/23/05	}	D.W	1 .						X		1
Poe	2° WET					2							X	-04
PDE	VOC- HCLS	G	2/23/05	1500	D.4 -								<u></u>	
$I = Ice H = (HCI) S = (H_2S)$	$SO_4$ ) N = (HNO <sub>3</sub> ) T = (S	odium Thiosulfate)	Relino	uisbed by	: <u> </u>	ate Tir	ne		Rece	ived b	,	-1-1-1	Pate	Time
	Sample Kit Cooler #_		1 km	Kourt	2 21	Hos C	124	fh	<b>A</b> A	mly	0	부활	03	572
Onpriorit	RBD/T	2	Xinda	M	12/24	05 11	D	J	J/S	100M	1	1 4	405	110/
	ABD/T	3	()	<i>~~~</i>	17									
Ret: / / Via:		<b>J</b>								revise	4 8/01			
Received on ice: Wes J 10	QC Usent	Treceived								104136				

## LAKE UTILITY SERVICES, INC.

200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440 Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 E-Mail: uif@iag.net

April 29, 2005

Mr. Paul Morrison Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. - Suite 232 Orlando, FL 32803

RE: Triennial Monitoring Chapter 62-550 FAC Synthetic Organics Greater Groves PWS ID# 3354881-1

Dear Mr. Morrison:

Enclosed please find the results of samples taken March 18, 2005 for the above referenced analysis and system. A former employee obtained the samples. Due to his absence, I have taken the liberty of signing my name to the reporting form. If this is of concern or presents a problem, please let me know.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, ext. 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Bryan K. Gongre Assistant Operations Manager

Enclosures: Sample Results

ec: Bill Coates, Area Manager, UIOF

	ION (to be completed by sampler - Please type or print legibly)
System Name: Corecter Con	NEG PWSID. # 3354881
System Type (check one):	hty Nontransient Noncommunity Transient Noncommunity
	ty Services, Inc.
	ersfield Avenue
City: Altamonte Spring	State: FL ZIP Code: 32714
	Fax# 407.869.6961
E-Mall Address: <u>b.k.aonarca</u>	utilitiesing-usa.com
Sample Number, <u>A050915</u> Sample Date: <u>3/18/05</u> Sample Location (be specific): <u>Entry</u> p	Location Code (if known): Sample Time: <u>D9:15</u> (AM) PM (Cine One)
Disinfectant Residual (Required when reportin	ng results for trihalomethanes and haloacetic acids): mg/L Field pH;
Sample Type (Check Only One)	Reason(s) for Sample (Check all that apply)
Distribution ZEntry Point (to Distribution)	Confirmation of MCL Exceedance*
Plant Tap (not for compliance with \$2-550)	
	Composite of Multiple Sites**
_	
Raw (at wail or intake)	Clearance (permitting)
☐Raw (at well or Intske) ]Max Residence Time	Other:
Raw (et well or Intaks) Max Residence Time Ave Residence Time	
Raw (at wait or intaks) Max Residence Time Ave Residence Time Near First Customer Sampler's Name: <u>Nathuni</u>	Other: Sampling Procedure Used or Other Comments:
Raw (et well ar Intake)         Max Residence Time         Ave Residence Time         Ave Residence Time         Near First Customer         Sampler's Name:	Carver
Rsw (at well or intake)         Max Residence Time         Ave Residence Time         Near First Customer         Sampler's Name:         Nathon i         Sampler's Phone #:	
Raw (at well or intake)         Max Residence Time         Ave Residence Time         Ave Residence Time         Near First Customer         Sampler's Name:       Nathani         Sampler's Phone #:       N/A         Sampler's E-Mail Address:	
Raw (at well or Inteks)         Max Residence Time         Ave Residence Time         Ave Residence Time         Near First Customer         Sampler's Name:       Nathani         Sampler's Phone #:       N/A         Sampler's E-Mail Address:       Sampler's Customer	
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Raw (at well or totaks)         Max Residence Time         Ave Residence Time         Near First Customer         Sampler's Name:       Nathani         Sampler's Phone #:       N/A         Sampler's E-Mail Address:       Sampler's E-Mail Address:         ERTIFICATION (to be completed by       Bryan K. Gonarc         (Print Name)       (Print Name)	Sampling Procedure Used or Other Comments:
Raw (at well or intake)         Max Residence Time         Ave Residence Time         Ave Residence Time         Near First Customer         Sampler's Name:       NAhani         Sampler's Phone #:       N/A         Sampler's E-Mail Address:       Sampler's E-Mail Address:         CERTIFICATION (to be completed by       Bryan K. Gonarc         (Print Name)       O HEREBY CERTIFY that the above	
Raw (at well or totaks)         Max Residence Time         Ave Residence Time         Near First Customer         Sampler's Name:       Nathani         Sampler's Phone #:       N/A         Sampler's E-Mail Address:       Sampler's E-Mail Address:         ERTIFICATION (to be completed by       Bryan K. Gonarc         (Print Name)       (Print Name)	Image: Convertional state         Sampling Procedure Used or Other Comments:         el Convert         Sampler's Fax #:         Sampler's Fax #:         V sampler)         Asst. Operations Manager (Print Title)

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LABORA	TORY CERTIFICATI	ON INFORMATION	I (ha be com	pleted by lab - Please type o	( vint legibly)
	CURRENT DOM AN		the real could	horen nà ian - Liggae ràbe ô	i kua alimiki
LabName	: Advanced Environ	mental Labs - Orlar	ndo	Florid	a Cartification #: E53076
	528 S. North Lake			Certification	Expiration Date: 6/30/2005
	Altamonte Springs,				Telephone #: (407) 937-1594
ANALYSI	S INFORMATION (to	be completed by li	de de		
PWS ID (	from page 1):		_	Date Samp	e(s) Ruceived: 3/18/2005 1:20:00
Lab Assig	ned Report Number (	or Job ID A050915		Sample Number	(From page 1) A050916-01
		and the second sec	ce with chap	pter 82-550, F.A.C. (check al	s that apply):
-	Inorganica	Synthetic Orga	nice	Votatile Organics	Disinfection Byproducts
1		All 30		All 21	Trihalomethanes
	Partial		Dioxim	Partial	Haloacetic Acids
		Partial		Radionucides	Bromate
ĺ	Nitrite	Diaxin Only			Chlorite
i	Asbestos Only			Single Sample           Quity Composite**	Secondaries
					AI 14
					Partisi
Were any	analyses subcontract	bod? 🗹 Yes [	] NO		
	DOH ANALYTE SHEE	Iffication number E	CONTRAC		~
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ATTACH (	DOH ANALYTE SHE		CERTI		- 1986
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ATTACH ( , <u>Myms S</u> (	Santiago (Print Name) IY CERTIFY that all a Invironmental Laborat	T FOR EACH SU	CERTI	IFICATION	all requirements of the $\frac{4}{20}/05$
ATTACH ( , <u>Myma S</u> do MEREB National Ed Signature: Failure k analysis re- and may re-	Contago (Print Name) (Print Print Pr	Laboratory Mar Laboratory Mar Angle Analytical of any Accreditation C Current Florida DOI Inclon of the report, the DOH Bureau of	CERTI CERTI data are cont onference () H leb certific possible em i Laboratory	IFICATION IFICATION International internation number and a current of forcement against the public Services.	all requirements of the <u>4/20/05</u> Analyte Sheet for the attached water system for failure to sampl
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ATTACH ( , <u>Myma S</u> do HEREB National E Signatures Failure to inalysis re- ind wise re- ind ysis re- ind ysis re- COMPLIAN Sample Co Replacer	COH ANALYTE SHEE Sentiago (Print Name) SY CERTIFY that all a revisionmental Laboration provide a velid and o suits will result in rejection provide radiological as NCE DETERMINATION Mection Info Satisfactor	Laboratory Mar , Laboratory Mar and Analytical of any Accreditation C and analytical any Accreditation C and analytical any Accreditation C any Ac	CERTI CERTI cate are corrient conference () H leb certific possible em i Laboratory cations for e etcd by DEP No group(s) above	IFICATION IFICATION Internation of the second secon	4/20/05 Analyle Sheet for the attached water system for failure to sampl Satisfactory: Yee No
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## SOUTHERN ANALYTICAL LABORATORIES, INC.

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1 Hg/L

0.5 HU/L

0.2

0.02 µg4. 2 µg4.

hid.

10A

<u>i</u>gyl

March 31, 2006

PWS ID:

Extraction

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0.1

0.02

0.01

03/28/95

03/28/05

03/20/05

03/28/05

03/28/05

03/28/06

24 Non-detects with a reported lab 5,001, <500 ef the 1421. Se sace public for compliance with 62.5503 10(4)(b)

0.2 03/28/05

0.05

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0.1

52

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Sample No.: 49434.01

Anelves

Time

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04:59

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04:52

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07:02

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64:59

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03:48

22.24

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Advanced Environmental Laboratories, Inc.

Contaminant

A9509f8

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\* Cumlifiers:

Benzo(a)pyrena

(PCBs)

Chlordane

Hexachlorobenzene

Pentachiorophanol

Dipromochioropropens

Ethylane Dibramide (EDB)

Samale iD: A050915-01

RDL

Ana yeat

84/28/2005 13: ង

Certification#

DOH Lab

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# PAGE 19/30

Analyte was undetected, indicated concentration is matting detector line.

2013

EPA 525.2

EPA 525.2

EPA 515.3

EPA 500.1

EPA 564.1

EPA 604.1

EPA 568.1

			Parte Mana		2-33 <b>mi</b> 1 <u>3</u> 5 mi 2-00		N D H	Setting of the set of a	
Name	MCL	Units	Result	Qualifier	Method	Lab MDL	**	Date	Analysis Date
Endrin	2	HUL	Đ,1	U	EPA 525.2	9,1	0.01	03/28/05	03/30/05
Lindape	82	HOL	0.08	U U	EPA 525.2	0.06	0.02	03/28/05	03/80/05
Malhoxychior	40	HOR	0.05	. Ų	EPA 5252	0.06	0,1	03/28/05	03/30/05
Toxaphene	3	µg∕l.	0.5	ù i	EPA 508.1	0,6	1	03/28/95	03/29/05
Dalapan	206	Hay!	1	U.	EPA 615.3	1	1	03/29/05	03/30/05
Diqual	20	HU/L	1	Ų.	EPA 549/2		0.4	19/24/06	03/28/05
Enclothali	100	MON	20		EPA 548.1	20	9	03/22/05	03/23/05
Glyphosale	700	UDIL.	10	ų.	EPA 647	10	Ő.	-	83/23/05
GI(2-othylhexyl)sdipate	490	<b>ygi</b>	0.3	U	EPA 526.2	0.3	0.6	03/28/05	09/30/05
Ocarry (Vydate)	200		0.5	U.	EPA 531.1	0.5	2		03/13/06
Simazina	-4	DOL	0.07	U.	EPA 525.2	0.07	0.07	09/20/05	83/30/85
Dig styney) phile a	6		1.0	· U	EPA 525.2	1.9	0.6	08/28/05	03/30/05
Pickram	500				EPA 615.3	0.75	0/1	03/20/05	03/30/05
Clinoseb	Ŧ		0,6		EPA 5163	0.5		03/29/05	03/30/05
Hexachiorocyplogentaciene	50		0.2		EPA 626.2	0.2		03/28/06	09/30/05
Carboturan	49		<b>N</b> E		EBA 531.1	0.6		L	03/23/05
Atrazine	3				EPA 525.2	0.08	9.1	03/28/05	03/30/05
Alaeblar	. 2				EPA 525.2			03/29/05	03/3005
Heptachier	0.4				EPA 525.2			03/28/05	03/30/05
Heptachlor Eposite	0.2				EPA 525.2		-	03/20/05	03/36/05
2.4-D	70			t V	EPA 516.3		0.1	03/29/05	03/30/05
24,5-TP (Silvex)	50				EPA 516.3		. U.	2 03/20/85	03/30/05
ef d'alle faithearth									

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Synthetic Organics

62-550.310(4)(b)

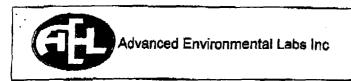
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AEL ORLANDO



Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

Client: UTILITIES, INC. (UTL-A) Project name: GREATER GROVES

		-		فتوسعه ويودده ألماه مسمع فيقفكني مستقير فالكاكر
Date/Time Rovd: 3/18/05	13.20	Log-in request number:	A050915	
	1/		P	
Received by:	<u> </u>	Completed by;		

## Cooler/Shipping Information:

Courier: 🔯 AEL 🗇 Client 🗇 UPS 🗇 Pony Express 🛄 FedEx 📮 Other (describe): \_\_\_

Type: 🖾 Cooler 🗋 Box 🗅 Other (describe) \_\_\_

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	1				
Temp (°C)	2				
Temp taken from	Cooler	Cooler	Cooler	Temp blank     Cooler	Cooler
Temp measured with	D Thermometer (outer ID):	D IR gun D Thermometer (enter ID):	Li TR, gun Li Thermomotor (enter ID);	D Thermometer (anic) Thermometer (anic) TD);	D TR gam D Thermometer (enter ID):

## Other Information:

Any discrepancies should be explained in the "Comments" section below.

Comments:

	CHECKLIST	YES	NO	NA_
1.	Were custody seals on shipping container(s) intact?			
2,	Were custody papers properly included with samples?			
3.	Were custody papers properly filled out (ink, signed, match labels)?			
4.	Did all bottles arrive in good condition (unbroken)?			
5.	Were all bonie labels complete (sample #, date, signed, analysis, preservatives)?	17		
6.	Did the sample labels agree with the chain of custody?	17		
7.	Were correct bottles used for the tests indicated?			
8.	Were proper sample preservation techniques indicated on the label?			
9.	Were samples received within holding times?	17		
10.	Were all VOA vials checked for the presence of air bubbles?			1
11.	Were there air bubbles present in the VOA vials?			~
12.	Were samples in direct contact with wet ice? If "No," check one: INO ICE DELUE ICE	171		
13,	Was the pooler temperature less than 6°C?			
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.			-
15.	Were the sample containers provided by AEL?	171		
16.	Were samples accepted into the laboratory?	17		
17.	Was it necessary to split samples into other bottles?		7	

## Kit ID

PAGE 12

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								414	34	
AEL Orlando 528 South Nord Allamonta Sprin Carilael Person	ih Lake: Blvd, S ngé FL 32701 1: Myrne Sanflego	Chain-of-Cu	stody for AEL	Olando to	Sei	uthern Ana	Squ( 110) Qids <b>&amp;13</b> -	kan Andylical Bayview Blvd, Mar, FL 34677 855:1844 Iáci Peïson: Sample	Receiving,	04/28/2005 13:53
Project Lab Goda	#: A050915 Client Sample ID					Ĩ	Chu	sa ack if Bush	-	4879371597
A060915-01 A060915-01 A060915-01 A050916-01 A050915-01 A050915-01 A050915-01 A050915-01	* 1 1 1 1 1 1 1	Test 92.560 649.2 62.650 649.2 62.650 647 62.550 647 62.550 531.1 62.669 628.2 62.630 615,1 62.550 608.1 62.550 604.1	Majorix Drinking Water Drinking Water Drinking Water Drinking Water Odriking Water Odriking Water	Collect Dale 3/18/2005 3/18/2005 3/18/2005 3/18/2005 3/18/2005 3/18/2005 3/18/2005 3/18/2005	1 Tinie 2:16 2:15 2:15 2:15 2:15 2:16 2:15	Receive Date 3/18/05 13/20 3/18/05 13/20 3/18/05 13/20 3/18/05 13/20 3/18/05 13/20 3/18/05 13/20 3/18/05 13/20 3/18/05 13/20	Duis Date 471/2005 4/1/2005 4/1/2005 4/1/2005 4/1/2005 4/1/2005	#Ballice Bollis 3 Yem 4 Yem 1 Yom 1 Yom 3 ILI	AV V LV NG2503/1 LV NG25013/1 MV NH4CI	M. AEL ORLANDO
	elinquisher:	<u></u>	Shipping i Southern Analytical I		<u>ups</u> etha	right Deg	Dale/T		<u>і 12:44:31 Рм</u> 5., ШС	PAGE
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LAKE UTILITIES

04/28/2005 13:34 3522420565

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247207200 13:03 4079371597

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## SOUTHERN ANALYTICAL LABORATORIES, INC.

110 BAYVIEW BOULEVAND, OLDEWAR, FL 34677 BY 3805-1844 FX 813-855-2216

Advanced Environmental Laboratories, Inc. 528 S. North Lake Blvd. Suite 1015 Alternome Springs, FL 32701-

March 31, 2905 Project No: 49435

Laboratory Report

FDEP Report form attached for the following samples;

Client Project Description: A050916

Sample Number 49435;01

Stample Description

1918 5. Time Collected. 12 Corrector Gauss 6

Dates Time Rangiver

Test results presented in this report meet all the requirements of the NELAC standards.

FDOH Laboratory No. E84129 NELAF Accredited

Approved By: Francis L Daniels, Laboratory Director Leslis C. Boardman, Q.A. Monager

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ADDRESS:	WEATHERS	LORIDA Ecol			_	ROJECT NU	BER:		_	A VPE	204	 	 + +	 L
ALTAN	DATE SPRIN 869-1919	vs, FC3	1461						N A L Y S					A B N U J
CONTACT: B	LL COAT		S				ALVE	<u> </u>		D				8 E R
TURN AROUND		<b>TEMATIK</b>		₩3119U	, <b>⇔ 78</b> Q¶									
											205			
0 RUSH		-								- 1				
WW weste wither	SW-auntace water	GW=ground w	water DV	¥=duintiëng wa	der .	OIL A	air SO=so		-	Paresonv	۱,۳	 		
	SW-auntace water	GW-ground w			der Grab mposie	SAM	eir 80-=== PLING TIME	a SL Matrix	NO. CONT.	Presorv				
WW- weste within	SW-auntace water	LE DESCRIPT	<b>FION</b>	Ca	Grab mposite	SAM	PLING TIME		-	Preserv	1,T X		 	ŀ
WW- mosto wither SAMPLE ID	SW-auntace water SAMP	LE DESCRIPT	<b>FION</b>	Ca	Grab mposite	SAM	PLING TIME	MATRIX	NO. CONT.	Presserv				6
WW- mosto wither SAMPLE ID	SW-auntace water SAMP	LE DESCRIPT	<b>FION</b>	Ca	Grab mposite	SAM	PLING TIME	MATRIX	NO. CONT.	Presserv				6
WW- weste wither SAMPLE ID	SW-auntace water SAMP	LE DESCRIPT	<b>FION</b>	Ca	Grab mposite	SAM	PLING TIME	MATRIX	NO. CONT.	Presserv				ß
WW- weste wither SAMPLE ID	SW-auntace water SAMP	LE DESCRIPT	<b>FION</b>	Ca	Grab mposite	SAM	PLING TIME	MATRIX	NO. CONT.	Pressav				6
WW- weste writer SAMPLE ID	SW-auntace water SAMP	LE DESCRIPT	<b>FION</b>	Ca	Grab mposite	SAM	PLING TIME	MATRIX	NO. CONT.	Pessar				6

LHUE 14

LAKE UTILITIES

04/28/2005 13:34 3522420565

#### LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES. INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440

Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 E-Mail: uif@iag.net

June 15, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. - Suite 232 Orlando, FL 32803

RE: Triennial Monitoring Chapter 62-550 FAC Annual Nitrate/Nitrite & Gross Alpha/228 Greater Groves PWS ID# 3354881-1

Dear Mr. Morrison:

Enclosed please find the results of samples taken May 11, 2005 for the above referenced analysis and system.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, ext. 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Burnt. 2

Bryan K. Gongre Assistant Operations Manager

Enclosures: Sample Results

ec: Bill Coates, Area Manager, UIOF

Page 1 of 1 Operations:675:3: 2:2005:Triennial.62.550.Groves-1.05(4)

## Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIO	<b>N</b> (to be completed by sampler – Please typ	e or print legibly)
System Name: <u>Giveater Gir</u>	OVES WTP PWSI.D.	# 3354881-
System Type (check one): 🗹 Community	Nontransient Noncommunity	Transient Noncommunity
Address: Lake Utility Services		
200 weatherstick		
City: <u>Altamonte Springs</u>		
Phone #: 407.869.1919	Fax #: <b>40</b>	7.869.6961
E-Mail Address:	tilitiesinc-usa.com	
SAMPLE INFORMATION (to be completed	by sampler)	
Sample Number:		own):
Sample Date:5/11/05	Sample Time:	<u>/0 / ^ (Circle One)</u>
Sample Location (be specific):POE +c	distribution system	
Disinfectant Residual (Required when reporting	results for trihalomethanes and haloacetic acids):	mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for Sa	mple (Check all that apply)
Distribution	Routine Compliance (with 62-550)	Quarterly (Which Quarter?)
Point (to Distribution)	Confirmation of MCL Exceedance*	Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**	☐Violation Resolution
Raw (at well or intake)	Clearance (permitting)	Replacement (of Invalidated Sample)
Max Residence Time	Other:	
Ave Residence Time	Sampling Procedure Used or Other Co	mments:
Near First Customer		
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for ac for nitrate or nitrite MCL e	Iditional requirements attach	2-550.550(4) for requirements and a results page for each site.
Sampler's Name: william (Bill)	Coates	
Sampler's Phone #: 407.869. [9]9		407.869.6961
Sampler's E-Mail Address:		
CERTIFICATION (to be completed by	sampler)	
1, William Coates	, Area	(PAnt Title)
(Print Name)		•
do HEREBY CERTIFY that the above complete and correct.	e public water system and samp	le collection information is
Signature: Willing Com	8	Date: 6-15-05

Reporting Format 62-550.730 Effective January 1995, Revised January 2004 Page 1 of 13

## Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

• • •

	DRY CERTIFICATION	•	pleted by lab - Please type or	print legibly)				
LabName:	Advanced Environme	ntal Labs - Orlando	Florida Certification #: E53076					
-	528 S. North Lake Bl			Expiration Date: 6/30/2005				
• - •	Altamonte Springs, F							
	INFORMATION (to be	e completed by Iab						
PWS ID (fro				e(s) Received: 5/11/2005 2:50:00				
•	ed Report Number or			From page 1) A051651-01 & -02				
Group(s) Ar	nalyzed Results attac		pter 62-550, F.A.C. (check all	that apply):				
In	norganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts				
	] All 17		□ All 21	Trihalomethanes				
	] Partial 1 Nitrat <del>e</del>	☐ All Except Dioxin ☐ Partial	Dertial	Haloacetic Acids				
<u>л</u> к	Nitrate		Radionuclides					
	] Asbestos Only		Single Sample	Secondaries				
			Qtrly Composite**					
				Partial				
Were any ar	nalyses subcontracted	1? 🔽 Yes 🗋 No						
lf yes, pleas	e provide DOH certific	ation number E83033	E82574					
ATTACH DO	OH ANALYTE SHEET	FOR EACH SUBCONTRAC	CTED LAB					
		CERT	IFICATION					
I, <u>Myrna Sa</u> (P	intiago Print Name)	, Laboratory Manager						
		ached analytical data are cor y Accreditation Conference (	rrect and unless noted meet a NELAC).	Il requirements of the				
Signature:	Mynasa	rtago		5/25/05				
			cation number and a current A					
		e DOH Bureau of Laboratory		water system for failure to sample,				
and may res	sult in notification of the		/ Services.	water system for failure to sample,				
and may res	sult in notification of the	e DOH Bureau of Laboratory ple dates and locations for	v Services. each quarter.	water system for failure to sample,				
and may res ** Please pro COMPLIANC	oult in notification of the ovide radiological sam	e DOH Bureau of Laboratory ple dates and locations for (to be completed by DEF	v Services. each quarter.					
and may res Please pro COMPLIANC Sample Colle	oult in notification of the ovide radiological sam CE DETERMINATION ection Info Satisfactor	e DOH Bureau of Laboratory ple dates and locations for (to be completed by DEF	v Services. each quarter. P or DOH) Sample Analysis Info S	atisfactory: 🗋 Yes 🛄 No				
and may res ** Please pro COMPLIANO Sample Collo Replaceme	oult in notification of the ovide radiological sam CE DETERMINATION ection Info Satisfactor ent Sample(s) Requested	e DOH Bureau of Laboratory ple dates and locations for (to be completed by DEF (The Second Se	v Services. each quarter. P or DOH) Sample Analysis Info S ve) : Revised Report Requ					
and may res ** Please pro COMPLIANC Sample Colle Replaceme Additiona	sult in notification of the ovide radiological sam CE DETERMINATION ection Info Satisfactor ent Sample(s) Requested al Monitoring Required	e DOH Bureau of Laboratory ple dates and locations for (to be completed by DEF y Yes No (circle or highlight group(s) abov	v Services. each quarter. > or DOH) Sample Analysis Info S ve)	atisfactory: 🗋 Yes 🛄 No				
and may res ** Please pro <b>COMPLIANO</b> Sample Collo Replacemon Additiona	sult in notification of the ovide radiological sam CE DETERMINATION ection Info Satisfactor ent Sample(s) Requested al Monitoring Required	e DOH Bureau of Laboratory ple dates and locations for (to be completed by DEF y Yes No (circle or highlight group(s) abov (circle or highlight group(s) a Quetect	v Services. each quarter. > or DOH) Sample Analysis Info S ve)	atisfactory: 🔄 Yes 🗔 No ested (circle or highlight group(s) above)				
and may res ** Please pro COMPLIANO Sample Collo Replaceme	CE DETERMINATION CE DETERMINATION ection Info Satisfactor ent Sample(s) Requested al Monitoring Required MCL(s) Exceeded Missing Analyte St Other:	e DOH Bureau of Laboratory ple dates and locations for (to be completed by DEF y Yes No (circle or highlight group(s) abov (circle or highlight group(s) a Quetect	v Services. each quarter. P or DOH) Sample Analysis Info S ve) Revised Report Requ above) tion(s) on Unsatisfactory	atisfactory: Yes No ested (circle or highlight group(s) above) Incomplete Report Analysis Unsatisfactory				
and may res ** Please pro <b>COMPLIANO</b> Sample Colle Replaceme Additiona Reason(s):	CE DETERMINATION CE DETERMINATION ection Info Satisfactor ent Sample(s) Requested al Monitoring Required MCL(s) Exceeded Missing Analyte St Other:	e DOH Bureau of Laboratory ple dates and locations for (to be completed by DEF y Yes No (circle or highlight group(s) abov (circle or highlight group(s) a Quetect	v Services. each quarter. P or DOH) Sample Analysis Info S ve) Revised Report Requ above) tion(s) on Unsatisfactory	atisfactory: Yes SNo ested (circle or highlight group(s) above)				

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**Greater Groves** 

6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

R.3

Client:	Utilities, Inc.

Project Name: Project Number:

PWS ID#:

Attention: William Coates

Phone Number: 8002721919

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

Report No.:	A051651
Date Sampled:	5/11/2005
Date Received:	5/11/05 14:50
Date Reported:	5/25/2005

## **Project Description**

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

Project Name: Greater Groves

Approved By:

Myrna Santiago, Laboratory Manager

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages = 13

## Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Utilities, Inc.	Report No.: A051651
Project Name: Greater Groves	Date/Time Sampled: 05/11/05 10:10
Matrix: Drinking Water	Date/Time Received: 5/11/05 14:50
PWS ID#:	
Client Sample ID: 2	Sampled By: Bill Coates
Site: Point of Entry	Shipping Method: AEL Courier
Sample Number: A051651-02	
Inorganic Contaminants	

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert. #
1040	Nitrate (as N)	10	mg/L	3.3		SM4500NO3-F	0.070	5/12/2005	16:35	E82574
1041	Nitrite (as N)	1.0	mg/L	0.19	i	SM4500NO3-F	0.064	5/12/2005	16:35	E82574

The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.

MDL Method Reporting Limit

1

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

# Florida Radiochemistry Services, Inc.

<u>Contact: Michael J. Naumann</u> 5456 Hoffner Ave., Suite 201 Orlando, FL 32812 Phone: (407) 382-7733 Fax: (407)382-7744 Certification I. D. # E83033

Work Order #: 0505191 Report Date: 05/19/05

Report to:

Advanced Environmental Laboratories, Inc. 528 South North Lake Blvd., S Altamonte Springs, FL 32701 Attention: Myrna Santiago

I do hereby affirm that this record contains no willful misrepresentations and that this information given by me is true to the best of my knowledge and belief. I further certify that the methods and quality control measures used to produce these laboratory results were implemented in accordance with the requirements of this laboratory's certification and NELAC Standards.

Signed Michael 4. 1 Koumann - President

Date 5-19-25

Page 1 of 3



Florida Radiochemistry Services, Inc.

### Sample Login

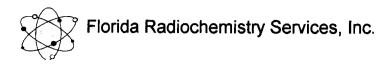
Client:	Advanced Environmental Laboratories, Inc.	Date / Time Received 05/12/05 09:00	Work order # 0505191
Client Contact:	Myrna Santiago	00/12/00 03.00	0000131
Client P.O.			
Project I.D.	A051651		
Lab Sample I.D.	Client Sample I.D.	Sampl <del>e</del> Date/Time	Analysis Requested
0505191-01	A051651-01	05/11/05 10:10	Gross Alpha

Analysis Results

Gross Alpha	<1.8
Error +/-	1.3
MDL	1.8
EPA Method	900.0
Prep Date	05/17/05
Analysis Date	05/18/05
Analyst Initials	MJN
Units	pCi/l

Page 2 of 3

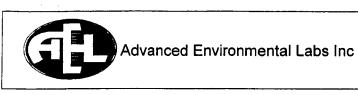
í.



## QA Page

Analyte	Sample #	Date Analyzed	-	Amount Spiked	•	Spike /Dup Result	Spike % Rec.	Spike Dup % Rpd
Gross Alpha	0505194-03	05/18/05	5.4	10.2	15.1	15.7	95	3.9
		Quality	Control	Limits				
		% RPD		% Rec.				
Gross Alpha		18.1		68-116				

Page 3 of 3



Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

25

Client: UTILITIES, INC. (UTL-A)	Project name: GREATER GROVES
---------------------------------	------------------------------

Date/Time Rcvd: 5/11/05 14.50 Log-in request number: A051651

Received by: RPG

# Completed by: RPG

## **Cooler/Shipping Information:**

Courier: 🖾 AEL 🗆 Client 🗇 UPS 🗆 Pony Express 🗇 FedEx 🗇 Other (describe): \_\_\_\_\_\_

Type: 🔀 Cooler 🗆 Box 🗖 Other (describe) \_\_\_\_\_

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	1				
Temp (°C)	2				
Temp taken from	Temp blank Cooler	Temp blank Cooler	Temp blank     Cooler	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	Temp blank Cooler
Temp measured with	IR gun Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):

#### Other Information:

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?			
3.	Were custody papers properly filled out (ink, signed, match labels)?			
4.	Did all bottles arrive in good condition (unbroken)?	1		
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?			
6.	Did the sample labels agree with the chain of custody?			
7.	Were correct bottles used for the tests indicated?			
8.	Were proper sample preservation techniques indicated on the label?			
9.	Were samples received within holding times?			
10.	Were all VOA vials checked for the presence of air bubbles?			1
11.	Were there air bubbles present in the VOA vials?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE			
13.	Was the cooler temperature less than 6°C?			
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.	L (		•
15.	Were the sample containers provided by AEL?			
16.	Were samples accepted into the laboratory?			
	Was it necessary to split samples into other bottles?		1	

## <u>Kit ID</u>

<u>Comments:</u>

# Chain-of-Custody for AEL Olando to Florida Radiochemistry

Lab Code A051651-01	Client Sample ID	Gross Alpha	Drinking Water	5/11/2005	10:10	5/11/05 14:50	5/25/2005	1L Amber	
Lab Code	Client Sample ID	lest	mauix	vonect Date	1 1 1110	Vecelae Dale		# Domes Dome Type	rres.
		<u> </u>	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles Bottle Type	
						[	Che	eck if Rush	
Project	<b>#: A0</b> 51651					E	Department:	FloridaRad	
Contact Persor	i: Myrna Santiago						Cont	tact Person: Sample Receiv	ng
								ndo, FL 32812-2517 382-7733	
Altamonte Spri	ngs EL 32701							•	
520 500011 14010	h Lake Blvd, S							6 Hoffner Ave., Suite 201	
528 South Nort								da Radiochemistry	

Orlando Relinquisher:	74-	Shipping Receiver:	Att cum	Date/Time:	5/12/2005 8:01:28 AM
Shipping Relinquisher:	At L Came	Florida Radiochemistry Receiver: _	KWads	Date/Time: _	5/12/05 9:00

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ند هر Page 1 of 1

Chain-of-Custody for AEL Orlando to AEL Jax

AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701

Contact Person: Myrna Santiago

 $\sim$ 

Project #: A051651 CustomerName: Utilities, Inc. Collector: Bill Coates

AEL Jax 6601 Southpoint Parkway Jacksonville, Fl 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde

**Check if Rush** 

	Lab Code	Client Sample ID	Test	Matrix	<b>Collect Date</b>	/ Time	Receive Date	Due Date	# Bottles	Bottle Type (Pres.)	_
_	A051651-02	2	Nitrate (J)-DW	Drinking Water	5/11/2005	10:10	5/11/05 14:50	5/13/2005		250mL Poly	
	A051651-02	2	Nitrite (J)-DW	Drinking Water	5/11/2005	10:10	5/11/05 14:50	5/13/2005		250mL Poly	

					11	
Orlando Relinquisher:		Shipping Receiver:	AEL Courier	Date/Time:	3/4/05	mw
Shipping Relinquisher:	AEL Courier		AM	Date/Time:	5/12/05	1045
Suipping Keunduisner.		Jacksonville Receiver:				-

Page 1 of 1

	Advanced		CHAI	N OF CUS		ECORD	)	-	r				
	LAVISONMENTA U Jacksonville: U Tampa:	6601 Southpoint Parkway, Jacks	onville, FL 32216 • (90	4) 363-9350 Fax	(904) 363-9354				LAE	3 NUM <sup>-</sup>			~
	Gainesville: Orlando:	9610 Princess Palm Avenue, Ta 2106 NW 67th Place, Suite 7, G 528 S. North Lake Blvd., Suite 1	iainesville, FL 32606 • (	352) 367-1500 F	ax (352) 367-00	50 ((407) 937-1	1597				A	05	651
CLIENT NAME:			PROJECT NAM					BOTTLE					
Vtilit	ies I	NC	GREA	TER (-	ROUES	WJ	T P	SIZE & TYPE					
ADDRESS:	00 Wpath	ners field Ave	P.O. NUMBER /		UMBER:	675.	- w						
			PROJECT LOC	ATION:		<u> </u>		A R N E A Q					
Altama PHONE:		FAX:	-					LU YI					
CONTACT		352-242-0565	SAMPLED BY:					S R I E S D	2	S			U M
	TIME	BEMARKE (ODE		Bill	Coate	S	<u> </u>		65	NO			B E B
	S TIME.	REMARKS / SPE	CIAL INSTRUCTION	DNS:					$\mathcal{T}$	+			
🗹 STANDARD									350	4			
🗅 RUSH									¢ S	0			
									$ \mathcal{V} $	N			
WW= waste water	SW≃surface wa	ater GW=ground water	DW=drinking water	OIL A=	air SO=	soil <b>SL</b>	_=sludge	Preserv					
SAMPLE ID	SA	MPLE DESCRIPTION	Grab Composit	SAM DATE	PLING TIME	MATRIX	NO.						
	LK Grou	es POE	G	5-11-05		DW	)		x				
		ues POE	G	5-11-05	1010	DW	1			X			2
							<u>├</u>			~			
	· · · · · · · · · · · · · · · · · · ·					+							
I = Ice H = (HC					<u></u>								
	I) $S = (H_2SO_4)$ Method Sam	N = (HNO <sub>3</sub> ) T = (Sodi N = Kit Cooler t	um Thiosulfate)	Relin	quished by:		Date	Time		Hech	eived by:	- At P	ate Time
Out: 1/ / Vi	a: RB	D/T	2	First	ente		11-05	_	101		≺	- 5/11 k	5 1350
	a: AB, Trip	BL D/T	3	194		$\rightarrow \uparrow$	<del>"/~s</del>	1450		«×/	/		5 1450
		و ، د	4						+	/		<u> </u>	





John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

> Page 3 of 27

#### THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code: FL00949

Laboratory Scope of Accreditation

(904) 363-9350

E82574 Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, FL 32216 Matrix: **Drinking Water** 

Analyte	Method/Tech	Category	Certification Type	Effective Date
Endothall	EPA 548.1	Synthetic Organic Contaminants	NELAP	1/21/2005
Endrin	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Ethylbenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Ethylbenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
gamma-BHC (Lindane, gamma-Hexachlorocyclohexane)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heptachlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heptachlor epoxide	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heterotrophic plate count	SM 9215 B	Microbiology	NELAP	1/21/2005
Hexachlorobenzene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Hexachlorocyclopentadiene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
ron	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
.ead	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
.ead	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Magnesium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
langanese	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Aercury	EPA 245.1	Primary Inorganic Contaminants	NELAP	4/4/2002
Aercury	SM 3112 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Aethoxychlor	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
lickel	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
litrate	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
litrate-nitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
litrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
litrite as N	SM 4500-NO2 B	Primary Inorganic Contaminants	NELAP	1/21/2005
dor	SM 2150 B	Secondary Inorganic Contaminants	NELAP	2/13/2003
orthophosphate as P	EPA 365.1	Primary Inorganic Contaminants	NELAP	2/13/2003
orthophosphate as P	SM 4500-P E	Primary Inorganic Contaminants	NELAP	1/21/2005
lxamyl	EPA 531.1	Synthetic Organic Contaminants	NELAP	4/19/2005
CBs	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
entachlorophenol	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
Н	EPA 150.1	Primary Inorganic Contaminants,Secondary Inorganic Contaminants	NELAP	4/4/2002
icloram	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
otassium	EPA 200.7	Secondary Inorganic Contaminants	NELAP	1/21/2005
esidue-filterable (TDS)	EPA 160.1	Secondary Inorganic Contaminants	NELAP	4/4/2002
elenium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/17/2002
elenium	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.

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John O. Agwunobi, M.D.,M.B.A. Secretary

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Laboratory Scope of Accreditation

Page 1 of 2

#### THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

#### EPA Lab Code: FL00012

(407) 382-7733

E83033 Florida Radiochemistry Services, Inc. 5456 Hoffner Rd. Suite 201 Orlando, FL 32812

State Laboratory ID: E83033

Matrix: Drinking Water Analyte	Method/Tech	Category	Certification Type	Effective Date
Gross-alpha	EPA 900	Radiochemistry	NELAP	6/28/2001
Gross-beta	EPA 900	Radiochemistry	NELAP	6/28/2001
latural uranium	EPA 908	Radiochemistry	NELAP	6/28/2001
adium-226	EPA 903	Radiochemistry	NELAP	12/15/2003
adium-226	EPA 903.1	Radiochemistry	NELAP	6/28/2001
Radium-228	EPA Ra-05	Radiochemistry	NELAP	6/28/2001

NON-TRANSFERABLE 06/01/2004-E83033

~x·`

#### LAKE UTILITY SERVICES, INC.

AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440 Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 E-Mail: uif@iag.net

July 15, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. - Suite 232 Orlando, FL 32803

RE: Triennial Monitoring Chapter 62-550 FAC Synthetic Organics Greater Groves PWS ID# 3354881-1

Dear Mr. Morrison:

Enclosed please find the results of samples taken June 10, 2005 for the above referenced analysis and system. Please note that the herbicide analysis under this testing requirement is void due to a preservative problem by the supplier of the sample containers. This parameter is required to be sampled over. The results of which will be submitted to the Department upon receipt.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, ext. 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Buyer A. Bir

Bryan K. Gongre Assistant Operations Manager

Enclosures: Sample Results

Cc: Bill Coates, Area Manager, UIOF

Page 1 of ! \\100.0.4.10\Operations\675\3\ 2\2005\Triennial LkGroves SOC6.05.doc

**CASE NARRATIVE** Environmental Laboratories, Inc. **Organic Analysis** 

528 S. North Lake Blvd. • Suite 1016 Altamonte Springs, Florida 32701 407.937.1594 Fax: 407.937.1597

#### Client/Project: A052009

#### I. RECEIPT

All acceptance criteria were met.

Advanced

#### II. **HOLDING TIMES**

- Α. Sample Preparation: All holding times were met.
- Β. Sample Analysis: All holding times were met.

#### III. **METHOD**

Analysis: 515.3

#### IV. PREPARATION

Sample preparation proceeded normally.

#### V. ANALYSIS

- Calibration: All acceptance criteria were met. Α.
- Β. Blanks: All acceptance criteria were met.
- С. Spikes: All acceptance criteria were met.

Other: For this project, it was requested that sample A052009-01 be analyzed for herbicides by EPA method 515.3. AEL utilized containers for that parameter that were pre-preserved by the container supplier with Sodium Thiosulfate as per the method requirements. However the amount of preservative contained in the pre-preserved bottle caused a matrix interference that resulted in unacceptable detection levels. Therefore AEL has rejected the data and requested the client to re-sample for that parameter."

I certify that this data package is in compliance with the terms and conditions agreed to by Advanced Environmental Laboratories, Inc. and by the client, both technically and for completeness, except for the conditions detailed above. The Laboratory Manager or his designee, as verified by the following signature, has authorized release of the data contained in this hard copy data package and in the computer-readable data submitted on diskette:

Signed:

Untrag

\_\_\_\_Date: \_\_\_\_7-11-05

Myrna Santiago, Laboratory Manager

System Name:       Loke Groves/ata Greeder Groves       PWS I.D. # 3 3 5 + 3 1         System Type (check one):       I/2 Community       INontransient Noncommunity       ITransient Noncommunity         Address:       Loke Uf if ith Service 3, Trac.       2DD Useaffier 2 field A venue       Iterasient Noncommunity       ITransient Noncommunity         City:       Atwanett Springs       State:       EL_       ZIP Code:       32.714-         Phone #:       407.864.1919       Fax #:       407.861.6961       GMP         Sample Number:       AGE 2007       Location Code (if known):	PUBLIC WATER SYSTEM INFORMATI	ON (to be completed by sampler – Please ty	/pe or print legibly)
System Type (check one):	System Name: Lake Groves/a	a Greater Groves PWSI.	D. #: 3 3 5 4 8 8 1
Address:       LoteUtility Services, Inc.         2DD Weathersfield, Avenue         City:       Atamonte Springs         Phone #:       407.364.1919         Fax #:       407.364.1919         Fax #:       407.364.1919         Sample Number:       Action Code (if known):         Sample INFORMATION (to be completed by sampler)       Sample Time:       7:40         Sample Date:       610105       Sample Time:       7:40         Sample Location (to specific):       Point of entrop to Listribudics. System       mg/L       Field pH:         Sample Type (Check Only One)       Reason(s) for Sample Check all that spoh)       []         Distribution       []       Routine Compliance (with 62-550)       []       Composite of Multiple Sites**       []       []         Ploint tap (not for compliance with 62-550)       []       Composite of Multiple Sites**       []       []       []         Invariance Time       []       []       []       []       Sample's Comments and restrictions.       *See 62-550.550(4) for requirements and satech a result page for each site.         Invariance or nitrite or nitrite or nitrite or nitrite or nitrite or nitrite or nitrite or nitrite or nitrite MCL exceedances.       *See 62-550.550(4) for requirements and satech a result page for each site.         Invare Sis eace 550.500(6) f			
2DD Weathersfield, Avenue         City:       Altanont: Springs       State:       EL       ZIP Code:       32.719         Phone #:       407.3641.4919       Fax #:       407.3641.4961         E-Mail Address:		• —	• • •
City:       Atamont. Springs       State:       FL       ZIP Code:       32714         Phone #:       407.961.691.       Fax #:       407.961.6961       401.         E-Mail Address:		-	
Schone #:       407.541.491.4         Fax #:       407.561.694.6961         Sample Number:       Address:         Sample Number:       Address:         Sample Number:       Address:         Sample Date:       6110105         Sample Date:       7:40         Sample Date:       7:40         Sample Date:       6110105         Sample Cocation (be specific):       Point of entry of distribution.         Sample Type (Check Only One)       Reason(s) for Sample (Check all that spoty)         Distribution       IdRoutine Compliance (with 82-550)         Clearance (semitting)       Quarterly (Which Quarter?         Plent Tap (not for compliance with 82-550)       Composite of Multiple Sites**         Ave Residence Time       Other:         Ave Residence Time       Sampling Procedure Used or Other Comments:         Ave Residence Time       Sampling Procedure Used or Other Comments:         Sampler's Name:       Lillion H. Coodes S         ampler's Phone #:       407.561.1914         Sampler's Phone #:       407.561.1914         Sampler's Fax#:       407.561.6961         Sampler's Fax#:       407.561.6961         More set (Solution)       Clearance (semitting)         Residence Time       Sample			
E-Mail Address:			
SAMPLE INFORMATION (to be completed by sampler)         Sample Number: AS209         Sample Number: AS209         Sample Date: L[]DLD5         Sample Date: Distribution         Sample Type (Check Only One)         Reason(s) for Sample (Check all that soply)         Distribution         Distribution         Confirmation of MCL Exceedance*         Sample Type (Check Only One)         Reason(s) for Sample (Check all that soply)         Distribution         Confirmation of MCL Exceedance*         Plant Tap (not for compliance with 62-550)         Composite of Multiple Sites**         Violation Resolution         Raw (at well or intake)         Clearance (permitting)         Replacement (of Invalidated Sample)         Max Residence Time         Sampler's Name:         Wolf: See 82-550.500(%) for requirements and restrictions.         **See 82-550.500(%) for requirements for nitrate or nitrite MCL exceedances.         ampler's Name:         Wolf: See 82-550.500(%) for requirements and restrictions.         **See 82-550.500(%) for requirements and restrictions. </td <td></td> <td></td> <td></td>			
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Sample Date:		• • • •	nown):
transference       Point of entry to distribution. System.         pisinfectant Residual (Required when reporting results for trihalomethanes and haloacetic acids):       mg/L       Field pH:         ample Type (Check Only One)       Reason(s) for Sample (Check all that apply)         Distribution       If Routine Compliance (with 62-550)       Quarterly (Which Quarter?         Intry Point (to Distribution)       Confirmation of MCL Exceedance*       Special (not for compliance with 62-550)         Plant Tap (not for compliance with 62-550)       Composite of Multiple Sites**       Utolation Resolution         Rew (at well or intake)       Clearance (permitting)       Replacement (of Invalidated Sample)         Max Residence Time       Other:       Sampling Procedure Used or Other Comments:         Near First Customer       **See 62-550.550(4) for requirements and restrictions.       **See 62-550.550(4) for requirements and attach a results page for each site.         Informate or nitrike MCL exceedances.       attach a results page for each site.       ************************************	-		
isinfectant Residual (Required when reporting results for trihalomethanes and haloacetic acids):       mg/L       Field pH:			
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Plant Tap (not for compliance with 62-550)       Composite of Multiple Sites**       Violation Resolution         Raw (at well or Intake)       Clearance (permitting)       Replacement (of Invalidated Sample)         Max Residence Time       Other:	-	•	<u>.</u>
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Max Residence Time       Other:         JAve Residence Time       Sampling Procedure Used or Other Comments:         JNear First Customer       "See 62-550.550(4) for requirements and restrictions. NOTE: See 62-550.550(4) for requirements and attach a results page for each site.         Max Residence Time       "See 62-550.550(4) for requirements and attach a results page for each site.         Max Residence Time       "See 62-550.550(4) for requirements and attach a results page for each site.         Mott:       See 62-550.550(4) for requirements and attach a results page for each site.         Max Residence Time       Sampler's Phone #:         #mpler's Phone #:       #07.869.1919         Sampler's Fax #:       407.869.6961         ampler's E-Mail Address:       Sampler)         William H. Coortes       Arco-Manager         (Print Name)       (Print Title)         DHEREBY CERTIFY that the above public water system and sample collection information is omplete and correct.		Clearance (permitting)	Replacement (of Invalidated Sample)
Ave Residence Time       Sampling Procedure Used or Other Comments:         ]Near First Customer       **See 62-550.500(6) for requirements and restrictions. NOTE: See 62-550.512(3) for additional requirements for nitrate or nitrite MCL exceedances.       **See 62-550.550(4) for requirements and attach a results page for each site.         ampler's Name:		Other:	
*See 62-550.500(6) for requirements and restrictions. NOTE: See 62-550.512(3) for additional requirements for nitrate or nitrite MCL exceedances. ampler's Name: <u>UIIIion H. Coates</u> ampler's Phone #: <u>407.869.6961</u> Sampler's Fax #: <u>407.869.6961</u> ERTIFICATION (to be completed by sampler) <u>UIII: on H. Coates</u> (Print Name) O HEREBY CERTIFY that the above public water system and sample collection information is pomplete and correct.	_ ]Ave Residence Time		
NOTE: See 62-550.512(3) for additional requirements for nitrate or nitrite MCL exceedances.       attach a results page for each site.         ampler's Name:	]Near First Customer	<u> </u>	· · · · · · · · · · · · · · · · · · ·
ampler's Phone #: <u>407.869.6961</u> ampler's E-Mail Address:	NOTE: See 62-550.512(3) for a	dditional requirements attac	
ERTIFICATION (to be completed by sampler)         William H. Coches         (Print Name)         (Print Title)         O HEREBY CERTIFY that the above public water system and sample collection information is complete and correct.	ampler's Name:	odes	
ERTIFICATION (to be completed by sampler)	ampler's Phone #:	Sampler's Fax #:	407.869.6961
William H. Coarts Arca Manager (Print Name) (Print Title) D HEREBY CERTIFY that the above public water system and sample collection information is complete and correct.	ampler's E-Mail Address:		· · · · · · · · · · · · · · · · · · ·
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o HEREBY CERTIFY that the above public water system and sample collection information is omplete and correct.	William H. Coartss	Arca	manager
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		Page 1 of <b>\$</b> 14	
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		Repo	orting Format			
LABORA	TORY CERTIFICATI	ON INFORMATION (to be co	ompleted by lab - Please type of	or print legibly)		
ATTACH	CURRENT DOH AN	ALYTE SHEET*				
LabName	Advanced Environ	mental Labs - Orlando	Florida Certification #: E53076			
Address:	528 S. North Lake	Blvd., Suite 1016	Certification	n Expiration Date: 6/30/2005		
	Altamonte Springs	, FL 32701		Telephone #: (407) 937-1594		
		· · · · · · · · · · · · · · · · · · ·				
ANALYSI	S INFORMATION (to	be completed by lab				
PWS ID (1	from page 1):		Date Samp	e(s) Received: 6/10/2005 3:30:00		
Lab Assig	ned Report Number	or Job ID A052009	Sample Number	(From page 1)		
Group(s)	Analyzed Results att	ached for compliance with ch	napter 62-550, F.A.C. (check a	ll that apply):		
	Inorganics	Synthetic Organics	Volatile Organics	<b>Disinfection Byproducts</b>		
[	All 17	All 30	All 21	Trihalomethanes		
[	Partial	All Except Dioxin	Partial	Haloacetic Acids		
[	Nitrate	Partial	Radionuclides	Bromate		
ĺ	Nitrite	Dioxin Only		Chlorite		
C	Asbestos Only	-	Single Sample	Secondaries		
			Qtrly Composite**			
lere anv i	analyses subcontract	ted? 🔽 Yes 🗌 No		Partial		
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, Myrna S		, Laboratory Manager	'			
•	Print Name)	stached onclutical data are a	orrest and uplans noted wast.			
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ignature:	numa	antrago	Date:	7-11-05		
Failure to	sults will result in reje	current Florida DOH lab certil oction of the report, possible e the DOH Bureau of Laborator	enforcement against the public	Analyte Sheet for the attached water system for failure to sample,		
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nd may re	rovide radiological sa	imple dates and locations for	r each quarter.			
nd may re Please p	rovide radiological sa					
nd may re Please pl OMPLIAN		DN (to be completed by DE		Satisfactory: 🗔 Yes 🗋 No		
nd may re Please p OMPLIAN ample Col	ICE DETERMINATIO	DN (to be completed by DE	EP or DOH) Sample Analysis Info S			
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Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Client:	Utilities, Inc.
Project Name:	Greater Groves
Project Number:	
PWS ID#:	

Attention: Kathy Sillitoe

Phone Number: 8002721919

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

 Report No.:
 A052009

 Date Sampled:
 6/10/2005

 Date Received:
 6/10/05 15:30

 Date Reported:
 7/11/2005

#### **Project Description**

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

Project Name: Greater Groves

Approved By:

Myroa Santiago, Laboratory Manager

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages =

# Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Utilities, Inc.

Project Name: Greater Groves

Matrix: Drinking Water

#### PWS ID#:

**Client Sample ID:** 

Site: WTP POE Sample Number: A052009-01

### Report No.: A052009

 Date/Time Sampled:
 06/10/05
 7:40

 Date/Time Received:
 6/10/05
 15:30

Sampled By: Bill Coates
Shipping Method: AEL Courier

Syntheti	c Organics										
Contam ID	Contam Name	MCL	Units	Analysis <u>Results</u>	Qualifier	Analytical Method	Lab MDL	RDL	Analysis Date	Analysis Time	DOH Lab Cert. #
2274	Hexachlorbenzene	1.0	ug/L	0.0028	U	E508	0.0028	0.10	6/17/2005	14:21	E82574
2005	Endrin	2.0	ug/L	0.0016	U	E508	0.0016	0.010	6/17/2005	14:21	E82574
2010	Lindane	0.20	ug/L	0.0034	U	E508	0.0034	0.020	6/17/2005	14:21	E82574
2015	Methoxychlor	40	ug/L	0.011	U	E508	0.011	0.10	6/17/2005	14:21	E82574
2020	Toxaphene	3.0	ug/L	0.094	U	E508	0.094	1.0	6/17/2005	14:21	E82574
2032	Diquat	20	u <b>g/L</b>	2.5	U	E549.2	2.5	0	6/16/2005	10:00	E82574
2033	Endothall	100	ug/L	7.2	U	E548.1	7.2	9.0	6/15/2005	14:33	E82574
2035	B(s(2-ethylhexyl) Adipate	400	ug/L	0.28	U	E525.2	0.28	0.60	6/14/2005	14:22	E82574
2036	Oxamyi (Vydate)	200	ug/L	0.61	U	E531.1	0.61	0	6/20/2005	13:27	E82574
2037	Simazine	4.0	ug/L	0.20	U	E525.2	0.20	0.070	6/14/2005	14:22	E82574
2039	Bis(2-ethylhexyl)phthalate	6.0	սց/Լ	0.80	U	E525.2	0.80	0.60	6/14/2005	14:22	E82574
2042	Hexachiorocyclopentadiene	50	ug/L	0.015	U	E508	0.015	0.10	6/17/2005	14:21	E82574
2046	Carbofuran	40	ug/L	1.1	U	E531.1	1.1	0	6/20/2005	13:27	E82574
2050	Atrazine	3.0	ug/L	0.16	U	E525.2	0.16	0.10	6/14/2005	14:22	E82574
2051	Alachior	2.0	ug/L	0.27	U	E525.2	0.27	0.20	6/14/2005	14:22	E82574
2065	Heptachlor	0.40	ug/L	0.0065	U	E508	0.0065	0.040	6/17/2005	14:21	E82574
2067	Heptachlor Epoxide	0.20	ug/L	0.0029	U	E508	0.0029	0.020	6/17/2005	14:21	E82574
2306	Benzo(a)pyrene	0.20	ug/L	0.17	υ	E525.2	0.17	0.020	6/14/2005	14:22	E82574
2383	PCB screen as Arochlors	0.50	ug/L	0.32	U	E508	0.32	0.10	6/17/2005	14:21	E82574
2931	1,2-Dibromo-3-chloropropan	0.20	ug/L	0.0034	U	E504.1	0.0034	0	6/18/2005	10:31	E82574
2946	Ethylene Dibromide	0.020	ug/L	0.0069	U	E504.1	0.0069	0	6/18/2005	10:31	E82574
2959	Chlordane	2.0	ug/L	0.049	U	E508	0.049	0.20	6/17/2005	14:21	E82574

U The compound was analyzed for but not detected.

MDL Method Reporting Limit

For all Results qualified with an I, the PQL is defined to be 4 times the MDL.

9

06/29/2005 13:12 3055921224

KAPPA LABORATORIES

PAGE 05



# KAPPA LABORATORIES, INC.

2577 N.W. 74th Avenue, Mlami, Fiorida 33122 Phone (305) 599-0199 • Fax (305) 592-1224

#### LABORATORY REPORT

CLIENT:	Advanced Environmental Labs,Inc 528 S Northlake Blvd Altamonte Springs, Fl. 32701	REPORT DATE:	6/27 <i>/</i> 2005
SOURCE: SAMPLE DATE: SAMPLE RECEIVED: SAMPLE BY:	Drinking Water 0655 08/10/2005 1030 05/16/2005 Client		
JOB #: SAMPLE LOG #: SAMPLE I.D.	220037-8 F964 A052009		

PARAMETER	RESULT	UNITS	Method	DETECTION LIMIT	DATE Ext.	DATE Analy,	ANALYST
Glyphosate	Ų	µg/l	547	40	06/16/05	06/16/05	IF

#### U: Undetected

#### 

Kappa Laboratories has been inspected and is currently certified by the U. S. Department of Agriculture (USDA Microbiology-#0093); The Florida Dept of Health, Drinking Water, including Microbiology, Perticides and PCB's:

Environmental certification as Basic Environmental Laboratory (DOH #E86515) (FDEP CompQAP #940109); Registered with the U.S. Food and Drug Administration (FDA-#1039389) and is an FDA Accepted Laboratory for Import Testing. Kappa Laboratory is currently a Contract Laboratory to the U.S. Centers for Discuss Control (CDC), Atlanta, Georgia; Vessel Sanitation Program. Test results meet all requirements of NELAC requirements.

signed:

Denise Kmieck Manager, Kappa Laboratories, Inc.

Page 5 of 9

Ð	Advanced Environmental Laboratories, Inc.	6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354
Laboratory Project No	./SDG#: A052009	Analytical Batch ID: SV061705C-ECD
Clien	t Name: Utilities, Inc.	
Pro	oject ID: Greater Groves	
I. RECEIPT	No Exceptions were encountered.	
II. HOLDING TIMES		
Preparation:	There were varying volumes received in the collection bottlet these volume discrepancies must be accounted for, the dilut accordingly.	
Analysis:	All holding times were met.	
III. METHOD		
Analysis:	E508	
Preparation:	METHOD	
IV. PREPARATION		
	Sample preparation proceeded normally.	
V. ANALYSIS		
A. Calibration:	All acceptance criteria were met.	
8. Blanks:	All acceptance criteria were met.	
C. Surrogates:	All acceptance criteria were met.	
D. Spikes:	The upper control criterion was exceeded for the following an ecd: Hexachlorocyclopentadiene and Heptachlor epoxide. The associated client samples. The error associated with elevate data is not affected. No further corrective action is required.	he analytes in question were not detected in the
E. Internal Standar	d: All acceptance criteria were met.	
F. Samples:	Sample analyses proceeded normally.	

G. Other:

I certify that this data package is in compliance with the terms and conditions agreed to by Advanced Environmental Laboratories, Inc. and by the client, both technically and for completeness, except for the conditions detailed above. The Quality Assurance Officer, or designee, as verified by the following signature, has authorized release of the data contained in this data package:

NYU

Myrna Santiago, Laboratory Manager

Ð	Advanced Environmental Laboratories, Inc.	6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354
Laboratory Project No.	/SDG#: <b>A052009</b>	Analytical Batch ID: SV061405L
Client	Name: Utilities, Inc.	
Pro	ject ID: Greater Groves	
I. RECEIPT		
	No Exceptions were encountered.	
II. HOLDING TIMES		
Preparation:	All holding times were met.	
Analysis:	All holding times were met.	
III. METHOD		
Analysis:	E525.2	
Preparation:	METHOD	
IV. PREPARATION		
	Sample preparation proceeded normally.	
V. ANALYSIS		
A. Calibration:	All acceptance criteria were met.	
B. Blanks:	All acceptance criteria were met.	
C. Surrogates:	The control criterion were exceeded for 2-Fluorobiphenyl in J0 Terphenyl-d14 in sample A052008-01 'Sample Number' due to presence of non-target background components that prevente quantitation was not possible. The affected surrogates are qu	o matrix interferences: 'list surrogates'. Due to the d adequate resolution of the surrogate, accurate
D. Spíkes:	The matrix spike recovery of Simazine for J053857-01 was ou The chromatogram indicated the presence of non-target back of the target analytes. As a result, accurate quantitation was interference.	ground components that prevented adequate resolution
E. Internal Standard	d: All acceptance criteria were met.	
F. Samples:	Sample analyses proceeded normally.	

G. Other:

I certify that this data package is in compliance with the terms and conditions agreed to by Advanced Environmental Laboratories, Inc. and by the client, both technically and for completeness, except for the conditions detailed above. The Quality Assurance Officer, or designee, as verified by the following signature, has authorized release of the data contained in this data package:

f

WW

Myrna Santiago, Laboratory Manager



Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

.

#### Client: UTILITIES, INC. (UTL-A)

Project name: GREATER GROVES

Date/Time Rcvd: 6/10/05 15:30 Log-In request number: A052009

Received by: MS

Completed by: MS

#### **Cooler/Shipping Information:**

Courier: 🖾 AEL 🗇 Client 🗇 UPS 🗖 Pony Express 🗇 FedEx 🗇 Other (describe): \_\_\_\_\_

Type: 🖾 Cooler 🗆 Box 🖾 Other (describe) \_\_\_\_\_

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	1				
Temp (°C)	2				
Temp taken from	Temp blank Cooler	<ul> <li>Temp blank</li> <li>Cooler</li> </ul>	Temp blank     Cooler	Temp blank     Cooler	Temp blank Cooler
Temp measured with	IR gun Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	D IR gun Thermometer (enter ID):

#### **Other Information:**

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?	1		
3.	Were custody papers properly filled out (ink, signed, match labels)?	1		
4.	Did all bottles arrive in good condition (unbroken)?	1		
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?	1		
6.	Did the sample labels agree with the chain of custody?			
7.	Were correct bottles used for the tests indicated?			
8.	Were proper sample preservation techniques indicated on the label?	1	· · · · · · · · · · · · · · · · · · ·	
9.	Were samples received within holding times?			
10.	Were all VOA vials checked for the presence of air bubbles?			1
11.	Were there air bubbles present in the VOA vials?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE	1		
13.	Was the cooler temperature less than 6°C?			
14.	Were sample pHs checked and recorded by Sample control?			
	NOTE: VOA samples are checked by laboratory analysts.			~
15.	Were the sample containers provided by AEL?	11		
16.	Were samples accepted into the laboratory?	11		
17.	Was it necessary to split samples into other bottles?		1	

Kit ID

Comments:

Chain-of-Custody for AEL Orlando to AEL Jax

AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701

Contact Person: Myrna Santiago

Project #: A052009 CustomerName: Utilities, Inc. **Collector:** Bill Coates

AEL Jax 6601 Southpoint Parkway Jacksonville, FI 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde



Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	<b>Receive Date</b>	Due Date	# Bottles	Bottle Type (Pre	es.)
A052009-01		62-550 508 Pests (J)	Drinking Water	6/10/2005	7:40	6/10/05 15:30	6/17/2005		1L Amber glass	
A052009-01		62-550 531.1 SOCs (J)	Drinking Water	6/10/2005	7:40	6/10/05 15:30	6/24/2005			
A052009-01		62-550 Herbicides (J)-515.3	Drinking Water	6/10/2005	7:40	6/10/05 15:30	6/24/2005		40mL Vial	
A052009-01		62-550 SVOCs (J)-525.2	Drinking Water	6/10/2005	7:40	6/10/05 15:30	6/24/2005		1L Amber glass	
A052009-01		62-550 SVOCs (J)-548.1	Drinking Water	6/10/2005	7:40	6/10/05 15:30	6/17/2005		1L Amber glass	
A052009-01		Diquat	Drinking Water	6/10/2005	7:40	6/10/05 15:30	6/17/2005		1L Amber glass	
A052009-01		Ethylene Dibromide (EDB)	Drinking Water	6/10/2005	7:40	6/10/05 15:30	6/24/2005		40mL VOC vial	
- A052009-01		Glyphosate	Drinking Water	6/10/2005	-7:40	0/10/05-15.30	-0/21/2005-		11. Amber glass	

Orlando Relinquisher:

Shipping Relinquisher: AEL Courier

Shipping Receiver: AEL Ceurie

Jacksonville Receiver:

Date/Time: Date/Time:

Page 1 of 1

	9610 Princess Palm Ave. = 2106 NW 67th Place, Ste. 7	inc. cksenville, FL 32216 - 904.363 Tampe, FL 33619 - 813,630,90 - Gainesville, FL 32608 - 352, - 1014 - Alamonie Springa, F	516 • Fax 8 .367.1500 •	13.630.4327 Fax 352.38	' • <b>E84589</b> 7.0050 • E8	2620	E53078	:				Page _	<u> </u>	f	<u> </u>	 
CLIENT NAME:	AEL - Orlando	PROJECT NAME:			phosa			BOTTLE								
ADDRESS	528 S. Northlake Blvd	P.O. NUMBERATROJECT HUND	ER:		•			& TYPE	40 mL Vials					1		
Altamo	nte Springs, FL 32701	PROJECT LOCATION:		··· ·												-
PHONE:	407-937-1594	FAX	4	07-937	-1597			a								
CONTACT:	Myrna Santiago	SAMPLED BY.						Ц Ц			:					
	TURN AROUND TIME:	RE	MARKS/SPE	CIAL INSTRU	CTIONS			л Л								
STANDARD								RE								AB
								S	547		• •			i		
								ANALYSIS REQUIRED								NUMBER
WW=waste wit	ler SW3surface water GW-goos	al water EWAndsirking unter		OIL	Annie	SQ=soil	SL-skd( +	Ž	Ш С	-						- ÎĤ
SAMPLE	SAMPLE DES		Grab	F	LING	MATRIX	NO.	Preserv	<u> </u>							龗
ID			Сопр	DATE	TIME	MAIRIA	COUNT					4				
1	A0520	32	G	8/14/05	7:25	DW	1		X							
2	A0520	35	G	6714/05	9:02	DW	1		Х							
3	A0520	36	G	6/14/05	9:38	DW	1		X							
4	A0520	008	G	6/10/05	7:40	DW	· 1		·X			1	<b> </b>			
5	A0520	)09	G	6/10/05	6:55	DW	1		Х			1	ţ			
6	A0520	)42	G	ar14/05	8:30	DW	1		X	1	ţ					
7	A0520	)43	G	e/14/05	8:45	DW	1		Х							
8	T0556	335	G	6/9/05	7:45	DW	1		X	1						
Hice	H=(HCI) S=(H2SO4 N=(HNC	3) T=(Sodium Thiosuliain)	<u> </u>				Rek	nquinh by:		Dade	Time	la'	teceived by:	0	Are	Time
Shipmeni		Semple Xil Cooler #			1	Run	P. 14	it to a		6/14/05	1700	B	nu	6/	(CAC)	10
Dul		0/7		i	2	<u> </u>				- <b> </b>	<b></b>	<u> </u>				
Ret		<u>.9</u> D/T Trip Bl.		<del></del>	3	╂───					<u> </u>	4			+	
Received on Ic		ac I sent	<u> </u>	eceived					·					ravies	d 8/01	<u></u>

J

	' 🖵 lampa: 5810-	Southpoint Parkway, Jacks D Breckenridge Parkway, 1	[ampa, FL 33610 • (81	3) 630-9616 Eax /	813) 630-4337				!	<b>A(</b>	52	00	9	
CLIENT NAME:	J Gainesville: 2106	NW 67th Place, Suite 7, G	ainesville, FL 32606 •	(352) 367-1500 F	ax (352) 367-005	50			_					
	-							Bottle Size					1	
ADDRESS:	ies Inc.	or rig						& TYPE						
	New theys Field	ld Ave	P.O. NUMBER	PROJECT N	UMBER:			AR						
			PROJECT LOC	ATION:				NE						
PHONE:	onte Spri 669-1919	X:	2 nd	Questo	S S	DC								
CONTACT.			214	Gunrie	-y	00		SR						
B	ill Coafes		2 nd SAMPLED BY:	Bill C	pates			SD						
TURN AROUNE		REMARKS / SPE	CIAL INSTRUCT	ONS:				<b>i</b> İ	2					
									-					
G STANDARD									U					
LI RUSH									D					
									S					
WW= waste water	SW=surface water													
	OT -Sullace Wald	GW=ground water	DW=drinking water	OIL A=	air SO=s	soil <b>S</b> I	L=sludge	Preserv						
SAMPLE ID	T	GW=ground water	DW=drinking water Grab Compos	SAM	PLING		-	1 1				+		
	SAMPLI	E DESCRIPTION	Grab Compos	te DATE	PLING TIME	MATRIX	CONT.	1 1	v					
	T	E DESCRIPTION	Grab	te DATE	PLING	MATRIX	CONT.	1 1	×					
	SAMPLI	E DESCRIPTION	Grab Compos	te DATE	PLING TIME	MATRIX	CONT.	1 1	X					
	SAMPLI	E DESCRIPTION	Grab Compos	te DATE	PLING TIME	MATRIX	CONT.	1 1	×					
	SAMPLI	E DESCRIPTION	Grab Compos	te DATE	PLING TIME	MATRIX	CONT.	1 1	X					
	SAMPLI	E DESCRIPTION	Grab Compos	te DATE	PLING TIME	MATRIX	CONT.	1 1	X					
	SAMPLI	E DESCRIPTION	Grab Compos	te DATE	PLING TIME	MATRIX	CONT.		×					
	SAMPLI	E DESCRIPTION	Grab Compos	te DATE	PLING TIME	MATRIX	CONT.		×					
	SAMPLI	E DESCRIPTION	Grab Compos	te DATE	PLING TIME	MATRIX	CONT.		×					
	SAMPLI	E DESCRIPTION	Grab Compos	te DATE	PLING TIME	MATRIX	CONT.		×					
SAMPLE ID	SAMPLI WTP P	E DESCRIPTION	Grab Compos	SAM DATE 6-10-05	PLING TIME 0140		NO. CONT. 13		×					
SAMPLE ID	SAMPLI	E DESCRIPTION P () E = (HNO <sub>3</sub> ) T = (Sodi	Grab Compos	SAM DATE 6-10-05	PLING TIME		NO. CONT. 13				ceived by:		Date	
SAMPLE ID	SAMPLI W = P P V = P P P P P P P P	E DESCRIPTION 2 () E = (HNO <sub>3</sub> ) T = (Sodi it Cooler #	Grab Compos	Belin	PLING TIME 0140			Time 1210		nore	ur St	ae	Date V Hol	05
SAMPLE ID           I = Ice         H = (HC           Shipment         Vi           Out:         /         Vi	SAMPLI W = P V = P P P P P P P P	E DESCRIPTION 2 () E = (HNO <sub>3</sub> ) T = (Sodi it <b>Cooler #</b>	Grab Compos	Belin	PLING TIME 0140		NO. CONT. 13	Time 1210		nore	ceived by:	ae	Pate 6/10	05

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John O. Agwunobi, M.D., M.B.A., M.P.H. Socretary

Page 1 of 2

#### THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

Laboratory Scope of Accreditation

State Laboratory ID: E86515

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EPA Lab Code: \_\_\_\_\_ FL00229

(305) 535-6125

E86515 Kappa Laboratories 4300 Alton Road Miami, FL 33140 Matrix: Drinking Water

Matrix: Drinking Water Analyte	Method/Tech	Category	Certification Type	Effective Date
3-Hydroxycarbofuran	EPA 531.1	Group I Unregulated Contaminanta	NELAP	3/28/2002
Aldicarb (Temik)	EPA 531.1	Group I Unregulated Contaminants	NELAP	7/15/2002
Aldicarb sulfane	EPA 531.1	Group [ Unregulated Contaminants	NELAP	7/15/2002
Aldicarb sulfoxide	EPA 531.1	Group I Unregulated Contaminants	NELAP	7/15/2002
Carbaryl (Sevin)	EPA 531.1	Group I Unregulated Contaminants	NELAP	7/15/2002
Carbofuran (Furaden)	EPA 531.1	Synthetic Organic Contaminants	NELAP	7/15/2002
Diguat	EPA 549.2	Synthetic Organic Contaminants	NELAP	9/15/2004
Endothall	EPA 548.1	Synthetic Organic Contaminants	NELAP	3/27/2002
Feesl coliforms	SM 9221 E	Microbiology	NELAP	3/27/2002
Fecal coliforms	SM 9222 D	Microbiology	NELAP	3/28/2002
Slyphosate	EPA 547	Synthetic Organic Contaminants	NELAP	3/27/2002
leterotrophic plate count	SM 9215 B	Microbiology	NELAP	7/15/2002
Acthomyl (Lannate)	EPA 531.1	Group I Unregulated Contaminants	NELAP	3/28/2002
Dxamyt	ÉPA 531.1	Synthetic Organic Contaminants	NELAP	7/15/2002
lotal coliforms	SM 9221 B	Microbiology	NELAP	3/27/2002
Total coliforms	SM 9222 B	Microbiology	NELAP	3/27/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.

NON-TRANSFERABLE 06/22/2005-E86515

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Laboratory Scope of Accreditation

Secretary

of 27 Page 1

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#### THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code: FL00949 (904) 363-9350

E82574

EGES/4
Advanced Environmental Laboratories, Inc.
6601 Southpoint Parkway
Jacksonville, FL 32216

Matrix: Drinking Water

Analyte	Method/Tech	Category	Certification Type	Effective Date
1,1,1-Trichloroethane	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
1,1,1-Trichloroethane	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
1,1,2-Trichloroethane	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
1,1,2-Trichloroethane	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
1,1-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
1, I-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
1,2,4-Trichlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
1,2,4-Trichlorobenzene	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
1,2-Dibromo-3-chloropropane (DBCP)	EPA 504.1	Synthetic Organic Contaminants	NELAP	4/4/2002
1,2-Dibromoethane (EDB, Ethylene dibromide)	EPA '504.1	Synthetic Organic Contaminants	NELAP	4/4/2002
1,2-Dichlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
,2-Dichlorobenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
,2-Dichloroethane	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
,2-Dichloroethane	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
,2-Dichloropropane	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
,2-Dichloropropane	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
,4-Dichlorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
,4-Dichlorobenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
,4-D	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
lachlor	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/24/2005
Alkalinity as CaCO3	SM 2320 B	Primary Inorganic Contaminants	NELAP	1/21/2005
luminum	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
ntimony	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
ntimony	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002
rsenic	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
trazine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/24/2005
arium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
enzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
enzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
enzo(a)pyrene	EPA 525.2	Synthetic Organic Contaminants	NELAP	1/21/2005
eryllium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
s(2-Ethylhexyl) phthalate (DEHP)	EPA 525.2	Synthetic Organic Contaminants	NELAP	1/21/2005
romoacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
romochloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
romodichloromethane	EPA 502.2	Other Regulated Contaminants, Group II Unregulated Contaminants	NELAP	4/4/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.



John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

> Page 2 of 27

#### THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code: FL00949 (904) 363-9350

#### E82574

DODUTA
Advanced Environmental Laboratories, Inc.
6601 Southpoint Parkway
Jacksonville, FL 32216

- - -

Matrix: Drinking Water Analyte	Method/Tech	Category	Certification Type	Effective Date
Bromodichloromethane	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
Bromoform	EPA 502.2	Other Regulated Contaminants, Group II Unregulated Contaminants	NELAP	4/4/2002
Bromoform	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
Cadmium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Calcium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Carbofuran (Furaden)	EPA 531.1	Synthetic Organic Contaminants	NELAP	4/19/2005
Carbon tetrachloride	EPA,502.2	Other Regulated Contaminants	NELAP	4/4/2002
Carbon tetrachloride	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Chiordane (tech.)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Chloride	EPA 325.3	Secondary Inorganic Contaminants	NELAP	1/21/2005
Chloride	SM 4500 CI- E	Secondary Inorganic Contaminants	NELAP	2/13/2003
Chloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
Chiorobenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Chlorobenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Chloroform	EPA 502.2	Other Regulated Contaminants,Group II Unregulated Contaminants	NELAP	4/4/2002
Chloroform	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
Chromium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
is-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
is-1,2-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
Color	EPA 110.2	Secondary Inorganic Contaminants	NELAP	2/13/2003
opper	EPA 200.7	Primary Inorganic Contaminants, Secondary Inorganic Contaminants	NELAP	4/4/2002
alapon	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
i(2-ethylhexyl)adipate	EPA 525.2	Synthetic Organic Contaminants	NELAP	1/21/2005
ibromoacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
ibromochloromethane	EPA 502.2	Other Regulated Contaminants,Group II Unregulated Contaminants	NELAP	4/4/2002
ibromochloromethane	EPA 524.2	Group II Unregulated Contaminants	NELAP	1/21/2005
icamba	EPA 515.3	Group I Unregulated Contaminants	NELAP	1/21/2005
ichloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	3/24/2005
ichloromethane (DCM, Methylene chloride)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
ichloromethane (DCM, Methylene chloride)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
noseb (2-sec-butyl-4,6-dinitrophenol, DNBP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
quat	EPA 549.2	Synthetic Organic Contaminants	NELAP	4/19/2005

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.





John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

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#### THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

Laboratory Scope of Accreditation

State Laboratory ID: E82574

EPA Lab Code: FL00949 (904) 363-9350

E82574 Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, FL 32216

Matrix: Drinking Water Analyte	Method/Tech	Category	Certification Type	Effective Date
Endothall	EPA 548.1	Synthetic Organic Contaminants	NELAP	1/21/2005
Endrin	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Ethylbenzene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
Ethylbenzene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
gamma-BHC (Lindane, gamma-Hexachlorocyclohexane)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heptachlor .	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heptachlor epoxide	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Heterotrophic plate count	SM 9215 B	Microbiology	NELAP	1/21/2005
Hexachlorobenzene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
Hexachlorocyclopentadiene	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
ron	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Lead	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
Lead	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002
Aagnesium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
Aanganese	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
Легсигу	EPA 245.1	Primary Inorganic Contaminants	NELAP	4/4/2002
Aercury .	SM 3112 B	Primary Inorganic Contaminants	NELAP	4/4/2002
<i>Aethoxychlor</i>	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
lickel	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
litrate	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
litrate-nitrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
litrite	SM 4500-NO3 F	Primary Inorganic Contaminants	NELAP	2/13/2003
litrite as N	SM 4500-NO2 B	Primary Inorganic Contaminants	NELAP	1/21/2005
dor	SM 2150 B	Secondary Inorganic Contaminants	NELAP	2/13/2003
erthophosphate as P	EPA 365.1	Primary Inorganic Contaminants	NELAP	2/13/2003
rthophosphate as P	SM 4500-P E	Primary Inorganic Contaminants	NELAP	1/21/2005
xamyl	EPA 531.1	Synthetic Organic Contaminants	NELAP	4/19/2005
CBs	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
entachlorophenol	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
н	EPA 150.1	Primary Inorganic Contaminants,Secondary Inorganic Contaminants	NELAP	4/4/2002
cloram	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
otassium	EPA 200.7	Secondary Inorganic Contaminants	NELAP	1/21/2005
esidue-filterable (TDS)	EPA 160.1	Secondary Inorganic Contaminants	NELAP	4/4/2002
ienium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/17/2002
lenium	SM 3113 B	Primary Inorganic Contaminants	NELAP	4/4/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.





John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

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Laboratory Scope of Accreditation

#### THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code: FL00949

(904) 363-9350

E82574 Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, FL 32216

Matrix: Drinking Water

StyreneEPA 502.2Other Regulated ContaminantsNELAP4/4/2002StyreneEPA 524.2Other Regulated ContaminantsNELAP1/21/2005SulfataEPA 375.4Secondary Inorganic ContaminantsNELAP2/13/2003Surfactants - MBASEPA 425.1Secondary Inorganic ContaminantsNELAP1/21/2005Tetrachloroethylene (Perchloroethylene)EPA 502.2Other Regulated ContaminantsNELAP1/21/2005ThalliumEPA 200.9Primary Inorganic ContaminantsNELAP1/21/2005TolueneEPA 502.2Other Regulated ContaminantsNELAP4/4/2002TolueneEPA 502.2Other Regulated ContaminantsNELAP4/4/2002TolueneEPA 502.2Other Regulated ContaminantsNELAP4/4/2002TolueneEPA 502.2Other Regulated ContaminantsNELAP4/4/2002Tolat coliforms & E. coliSM 922.3 BMicrobiologyNELAP1/21/2005Total coliforms & E. coliSM 922.3 BMicrobiologyNELAP1/21/2005Total haloacetic acidsEPA 502.2Other Regulated ContaminantsNELAP1/21/2005Total trihalomethanesEPA 502.2Other Regulated ContaminantsNELAP1/21/2005Total trihalomethanesEPA 502.2Other Regulated ContaminantsNELAP1/21/2005Total trihalomethanesEPA 502.2Other Regulated ContaminantsNELAP1/21/2005Total trihalomethanesEPA 502.2Other Regulated ContaminantsNELAP1/21/2005	Analyte	Method/Tech	Category	Certification Type	Effective Date
Silvex (2,4,5-TF) EPA 515.3 Synthetic Organic Contaminants NELAP 1/21/2005 Simazine EPA 525.2 Synthetic Organic Contaminants NELAP 3/24/2002 Sodium EPA 200.7 Primary Inorganic Contaminants NELAP 4/4/2002 Styrene EPA 502.2 Other Regulated Contaminants NELAP 4/4/2002 Styrene EPA 524.2 Other Regulated Contaminants NELAP 1/21/2005 Sufata EPA 375.4 Secondary Inorganic Contaminants NELAP 1/21/2005 Sufata EPA 375.4 Secondary Inorganic Contaminants NELAP 1/21/2005 Tetrachloroethylene (Perchloroethylene) EPA 502.2 Other Regulated Contaminants NELAP 1/21/2005 Tetrachloroethylene (Perchloroethylene) EPA 502.2 Other Regulated Contaminants NELAP 1/21/2005 Tetrachloroethylene (Perchloroethylene) EPA 502.2 Other Regulated Contaminants NELAP 1/21/2005 Thallium EPA 200.9 Primary Inorganic Contaminants NELAP 1/21/2005 Thallium EPA 200.9 Primary Inorganic Contaminants NELAP 1/21/2005 Toluene EPA 524.2 Other Regulated Contaminants NELAP 1/21/2005 Toluene EPA 524.2 Other Regulated Contaminants NELAP 1/21/2005 Toluene EPA 524.2 Other Regulated Contaminants NELAP 1/21/2005 Total coliforms & SM 9223 B Microbiology NELAP 1/21/2005 Total haloacetic acids EPA 552.2 Synthetic Organic Contaminants NELAP 1/21/2005 Total haloacetic acids EPA 552.2 Synthetic Organic Contaminants NELAP 1/21/2005 Total trihalomethanes EPA 502.2 Other Regulated Contaminants NELAP 1/21/2005 Total trihalomethanes EPA 502.2 Other Regulated Contaminants NELAP 1/21/2005 Total trihalomethanes EPA 502.2 Other Regulated Contaminants NELAP 1/21/2005 Total trihalomethanes EPA 502.2 Other Regulated Contaminants NELAP 1/21/2005 Total trihalomethanes EPA 502.2 Other Regulated Contaminants NELAP 1/21/2005 Total trihalomethanes EPA 502.2 Other Regulated Contaminants NELAP 1/21/2005 Trichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 1/21/2005 Trichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 1/21/2005 Trichloroethylene EPA 502.2 Other Regulated Contaminants NELAP 1/21/2005 Trichloroethylene EPA 502.2 Other Regulated Contaminan	Silica as SiO2	EPA 200.7	Primary Inorganic Contaminants	NELAP	1/21/2005
SimulationEPA 525.2Synthetic Organic ContaminantsNELAP3/24/2005SodiumEPA 200.7Primary Inorganic ContaminantsNELAP4/4/2002SyrteneEPA 502.2Other Regulated ContaminantsNELAP4/4/2002StyreneEPA 524.2Other Regulated ContaminantsNELAP1/21/2005SulfateEPA 575.4Secondary Inorganic ContaminantsNELAP2/13/2003SulfateEPA 502.2Other Regulated ContaminantsNELAP1/21/2005Tetrachloroethylene (Perchloroethylene)EPA 502.2Other Regulated ContaminantsNELAP1/21/2005Tatachloroethylene (Perchloroethylene)EPA 502.2Other Regulated ContaminantsNELAP1/21/2005ThailiumEPA 502.2Other Regulated ContaminantsNELAP1/21/2005TolueneEPA 524.2Other Regulated ContaminantsNELAP1/21/2005Total coliformsSM 922.2 BMicrobiologyNELAP1/21/2005Total acliforms & E. coliSM 922.3 BMicrobiologyNELAP1/21/2005Total haloacetic acldsEPA 522.2Synthetic Organic ContaminantsNELAP1/21/2005Total haloacetic acldsEPA 522.2Synthetic Organic ContaminantsNELAP1/21/2005Total haloacetic acldsEPA 522.2Synthetic Organic ContaminantsNELAP1/21/2005Total haloacetic acldsEPA 522.2Other Regulated ContaminantsNELAP1/21/2005Total haloacetic acldsEPA 524.2Other Regulated ContaminantsNELAP1/21	Silver	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
SoldumEPA 200.7Primary Inorganic ContaminantsNELAP4/4/2002StyreneEPA 502.2Other Regulated ContaminantsNELAP4/4/2002StyreneEPA 375.4Secondary Inorganic ContaminantsNELAP1/21/2005SufataEPA 375.4Secondary Inorganic ContaminantsNELAP2/13/2003Surfactants - MBASEPA 425.1Secondary Inorganic ContaminantsNELAP1/21/2005Tetrachloroethylene (Perchloroethylene)EPA 502.2Other Regulated ContaminantsNELAP1/21/2005ThalliumEPA 200.9Primary Inorganic ContaminantsNELAP4/4/2002TolueneEPA 512.2Other Regulated ContaminantsNELAP4/4/2002TolueneEPA 524.2Other Regulated ContaminantsNELAP4/4/2002Total coliformsSM 922.2 BMicrobiologyNELAP4/4/2002Total coliforms & E. coliSM 922.2 BMicrobiologyNELAP4/4/2002Total coliforms & E. coliSM 922.2 BMicrobiologyNELAP4/4/2002Total coliforms & E. coliSM 922.2 BMicrobiologyNELAP1/21/2005Total trihalomethanesEPA 502.2Other Regulated ContaminantsNELAP1/21/2005Total trihalomethanesEPA 502.2Other Regulated ContaminantsNELAP1/21/2005Total trihalomethanesEPA 502.2Other Regulated ContaminantsNELAP1/21/2005Total trihalomethanesEPA 502.2Other Regulated ContaminantsNELAP1/21/2005Total trihalometha	Silvex (2,4,5-TP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
StyreneEPA 502.2Other Regulated ContaminantsNELAP4/4/2002StyreneEPA 524.2Other Regulated ContaminantsNELAP1/21/2005SulfateEPA 375.4Secondary Inorganic ContaminantsNELAP2/13/2003Surfactans - MBASEPA 423.1Secondary Inorganic ContaminantsNELAP1/21/2005Tetrachloroethylene (Perchloroethylene)EPA 502.2Other Regulated ContaminantsNELAP1/21/2005Tetrachloroethylene (Perchloroethylene)EPA 502.2Other Regulated ContaminantsNELAP1/21/2005ThalliumEPA 200.9Primary Inorganic ContaminantsNELAP4/4/2002TolueneEPA 502.2Other Regulated ContaminantsNELAP4/4/2002TolueneEPA 502.2Other Regulated ContaminantsNELAP4/4/2002Total coliforms & SM 9222 BMicrobiologyNELAP9/5/2002Total acloiforms & E.coliSM 9223 BMicrobiologyNELAP1/21/2005Total acloiforms & E.ph 502.2Other Regulated ContaminantsNELAP1/21/2005Total trihalomethanesEPA 502.2Other Regulated ContaminantsNELAP1/21/2005Total trihalomethanesEPA 502.2Other Regulated ContaminantsNELAP1/21/2005Total trihalomethanesEPA 502.2Other Regulated ContaminantsNELAP1/21/2005Total trihalomethanesEPA 502.2Other Regulated ContaminantsNELAP1/21/2005Total trihalomethanesEPA 502.2Other Regulated ContaminantsNELAP1/21/2005 </td <td>Simazine</td> <td>EPA 525.2</td> <td>Synthetic Organic Contaminants</td> <td>NELAP</td> <td>3/24/2005</td>	Simazine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/24/2005
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Vinyl chloride     EPA 524.2     Other Regulated Contaminants     NELAP     1/21/2005       (ylene (total)     EPA 502.2     Other Regulated Contaminants     NELAP     4/4/2002       (ylene (total)     EPA 524.2     Other Regulated Contaminants     NELAP     1/21/2005       (ylene (total)     EPA 524.2     Other Regulated Contaminants     NELAP     1/21/2005	Turbidity	EPA 180.1	Secondary Inorganic Contaminants	NELAP	7/17/2002
Kylene (total)     EPA 502.2     Other Regulated Contaminants     NELAP     4/4/2002       Kylene (total)     EPA 524.2     Other Regulated Contaminants     NELAP     1/21/2005	/inyl chloride	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
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	(ylene (total)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
inc EPA 200.7 Secondary Inorganic Contaminants NELAP 4/4/2002	(yiene (total)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
	Line	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.

#### LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440

Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 florida@utilitiesinc-usa.com

September 23, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd., Suite 232 Orlando, FL 32803-3767

RE: Total Trihalomethane / Haloacetic Acids Annual Monitoring Greater Groves - PWS ID 3354881

Dear Mr. Morrison:

Please find the enclosed sample results as specified above for the 2005 monitoring period.

If you should have any questions, please call 407.869.8588, extension 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Buguil. Donze

Bryan K. Gongre Assistant Operations Manager

Enclosures

cc: Bill Coates, A.M., UIOF

# Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

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PUBLIC WATER SYSTEM INFORMATIO	ON (to be completed by sampler – Please type or print legibly)
System Name: <u>Giveater</u>	GIVOVES PWSID. # 3354881-
System Type (check one):	ty INontransient Noncommunity ITransient Noncommunity
Address: Lake Utility	Services, Inc.
200 weather	
City:Attamoute Sor	cings State: <u>FL</u> ZIP Code: <u>327/4</u>
E-Mail Address:	
SAMPLE INFORMATION (to be completed	d by sampler)
Sample Number	
Sample Date: 8/10/05	
• • •	U.S. Huny 27 clorment, FL
	ng results for trihalomethanes and haloacetic acids): 0,5 mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for Sample (Check all that apply)
	Routine Compliance (with 62-550)
Entry Point (to Distribution)	Confirmation of MCL Exceedance* Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**
Raw (at well or Intake)	Clearance (permitting)
Max Residence Time	☐Other;
Ave Residence Time	Sampling Procedure Used or Other Comments:
□Near First Customer	
*See 62-550.500(6) for require NOTE: See 62-550.512(3) for for nitrate or nitrite MCI	additional requirements attach a results page for each site.
Sampler's Name: Charles Sch	wates
Sampler's Phone #: 407.96A. 191	
Sampler's E-Mail Address:	
CERTIFICATION (to be completed by	y sampler)
1 Charles Subserver	Operative
I, <u>Charles Schwades</u> (Print Name)	, Operator (Print Title)
do HEREBY CERTIFY that the ab	ove public water system and sample collection information is
complete and correct.	
Signature:	Date: 9/19/05
-	
Reporting Format 62-550.730	Page 1 of B

Reporting Format 62-550.730 Effective January 1995 Deviced January 2004

Florida Department of Environme	ntal Protection Safe Drinking \ Reporting Format	Water Program Laboratory					
LABORATORY CERTIFICATION INFORMATION ATTACH CURRENT DOH ANALYTE SHEET*	(to be completed by lab - Please type of	or print legibly)					
LabName: Advanced Environmental Labs - Orlan	do Florid	da Certification #: E53076					
Address: 528 S. North Lake Blvd., Suite 1016	Certification	n Expiration Date: 6/30/2006					
Altamonte Springs, FL 32701	Altamonte Springs, FL 32701 Telephone #: (407) 937-1594						
ANALYSIS INFORMATION (to be completed by la	ıb .						
PWS ID (from page 1):	Date Samp	ole(s) Received: 8/11/2005 1:10:00					
Lab Assigned Report Number or Job ID A052850	Sample Number	(From page 1) A052850-01					
Group(s) Analyzed Results attached for compliant	ce with chapter 62-550, F.A.C. (check a	ll that apply):					
Inorganics       Synthetic Orga         All 17       All 30         Partial       All Except D         Nitrate       Partial         Nitrite       Dioxin Only         Asbestos Only	Dioxin Dioxin Radionuclides	Disinfection Byproducts Trihalomethanes Haloacetic Acids Bromate Chlorite Secondaries					
Were any analyses subcontracted? Yes I If yes, please provide DOH certification number E ATTACH DOH ANALYTE SHEET FOR EACH SUB	BCONTRACTED LAB CERTIFICATION	Partial					
do HEREBY CERTIFY that all attached analytical of National Environmental Laboratory Accreditation C	onference (NELAC).	all requirements of the $912105$					
Signature: <u><u>WWW</u> <u>Uto</u><u>W</u><u>W</u><u>W</u><u>W</u><u>W</u><u>W</u><u>W</u><u>W</u><u>W</u><u>W</u><u>W</u><u>W</u><u>W</u></u>	H lab certification number and a current possible enforcement against the publi f Laboratory Services.	Analyte Sheet for the attached					
COMPLIANCE DETERMINATION (to be completed)	eted by DEP or DOH)						
Sample Collection Info Satisfactory (2) Yes (2) Replacement Sample(s) Requested (circle or highlight (2) Additional Monitoring Required (circle or highlight)	No Sample Analysis Info group(s) above) 🗃 Revised Report Re	Satisfactory: 🗃 Yes 📓 No quested (circle or highlight group(s) above)					
Reason(s): 💼 MCL(s) Exceeded	Detection(s)	Incomplete Report					
<ul> <li>Missing Analyte Sheet(s)</li> <li>Other:</li> </ul>	Location Unsatisfactory	Analysis Unsatisfactory					
Person Notified: Date Notified:							
Comments							
Date Reviewed:	DEP/DOH Reviewing Official:						

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6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

A052850

8/10/2005

8/11/05 13:10 9/2/2005

Client:	Utilities, Inc.	Report No.:
Project Name:	Greater Groves	Date Sampled:
Project Number:		Date Received:
PWS ID#:		Date Reported:
Attention:	William Coates	
Phone Number:	8002721919	
Address:	200 Weathersfield Ave.	

Altamonte Springs, FL 32714

#### **Project Description**

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

Project Name: Greater Groves

Approved By:

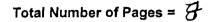
Mynalantiago

\* Myanos militariu partin 74. http://

If there are any questions involving this report, the above named should be contacted.

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.



## Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Utilities, Inc.

Project Name: Greater Groves

Matrix: Drinking Water

#### PWS ID#:

Client Sample ID: 1

Site: 1635 US 27

Sample Number: A052850-01

#### **Disinfection Byproducts**

 Report No.:
 A052850

 Date/Time Sampled:
 08/10/05
 14:05

 Date/Time Received:
 8/11/05
 13:10

Sampled By: Client Shipping Method: AEL Courier

1

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Cert. #
2450	Chloroacetic Acid		ug/L	0.81	υ	E552.2	0.81	8/19/2005	8:55	E82574
2451	Dichloroacetic Acid		ug/L	4.8		E552.2	0.56	8/19/2005	8:55	E82574
2452	Trichloroacetic Acid		ug/L	2.9		E552.2	0.60	8/19/2005	8:55	E82574
2453	Bromoacetic Acid		ug/L	0.34	U	E552.2	0.34	8/19/2005	8:55	E82574
2454	Dibromoacetic Acid		ug/t	1.3	1	E552.2	0.45	8/19/2005	8:55	E82574
2941	Chloroform		ug/L	12		E502.2	0.31	8/15/2005	14:26	E82574
2942	Bromoform		ug/L	0.36	U	E502.2	0.36	8/15/2005	14:26	E82574
2943	Bromodichloromethane		ug/L	5.9		E502.2	0.38	8/15/2005	14:26	E82574
2944	Dibromochloromethane		ug/L	3.3		E502.2	0.28	8/15/2005	14:26	E82574

The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.

U The compound was analyzed for but not detected.

MDL Method Reporting Limit

For all Results qualified with an I, the PQL is defined to be 4 times the MDL



Advanced Environmental Labs Inc

Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

Client:	UTILITIES, INC. (	UTL-A)	Project name:	GREATER GROVES
Date/Time Rcvd:	8/11/05	13.10	Log-In request number: A	A052850

13.10 Log-In request number: A052850

Received by: RPG

Completed by: RPG

#### **Cooler/Shipping Information:**

Courier: 🛛 AEL 🗖 Client 🗆 UPS 🗆 Pony Express 🗆 FedEx 🗇 Other (describe): \_\_\_\_\_

\_\_\_\_\_

Type: 🖾 Cooler 🗖 Box 🗇 Other (describe) \_\_\_\_

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	1				
Temp (°C)	2				
Temp taken from	Temp blank     Cooler	Temp blank     Cooler	Temp blank     Cooler	Temp blank     Cooler	Temp blank Cooler
Temp measured with	IR gun Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	D IR gun Thermometer (enter ID):

#### Other Information:

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?	1		
3.	Were custody papers properly filled out (ink, signed, match labels)?	1		
4.	Did all bottles arrive in good condition (unbroken)?	1		
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?	1		
6.	Did the sample labels agree with the chain of custody?	1		
7.	Were correct bottles used for the tests indicated?	1		
8.	Were proper sample preservation techniques indicated on the label?	1		
9.	Were samples received within holding times?	1		
10.	Were all VOA vials checked for the presence of air bubbles?			1
11.	Were there air bubbles present in the VOA vials?			1
12.	Were samples in direct contact with wet ice? If "No," check one: D NO ICE D BLUE ICE	1		
	Was the cooler temperature less than 6°C?	1		
14.	Were sample pHs checked and recorded by Sample control?			1
	NOTE: VOA samples are checked by laboratory analysts.			
15.	Were the sample containers provided by AEL?			
16.	Were samples accepted into the laboratory?			
17.	Was it necessary to split samples into other bottles?		1	

### Kit ID

## Comments:

## Chain-of-Custody for AEL Orlando to AEL Jax

AEL Jax 6601 Southpoint Parkway Jacksonville, FI 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde

**Check if Rush** 

AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701

Contact Person: Myrna Santiago

Project #: A052850 CustomerName: Utilities, Inc. Collector: Client

Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles	Bottle Type (Pres.)
A052850-01	1	550 Haloacetic Acids (J)-55	Drinking Water	8/10/2005	14:05	8/11/05 13:10	8/24/2005	····-	40mL Vial Amber
A052850-01	1	THMs (DW)	Drinking Water	8/10/2005	14:05	8/11/05 13:10	8/24/2005		40ml, VOC vial

Orlando Relinguisher:

Shipping Relinquisher: AEL Courier

R

Shipping Receiver: AEL Opurier Jacksonville Receiver:

Date/Time:

8/11/05 Date/Time:

Page 1 of 1

Advanced	CHAIN OF CUSTODY RECORD	LAE	3 NUN	BER:	ì				
Tampa: 5810-D Breckenridge Parkway,	sonville, FL 32216 • (904) 363-9350 Fax (904) 363-9354 Fampa, FL 33610 • (813) 630-9616 Fax (813) 630-4327 sainesville, FL 32606 • (352) 367-1500 Fax (352) 367-0050	<u></u>			Pa	nge	1	_of	2
CLIENT NAME:	PROJECT NAME: BOTTLE SIZE								
UTILITIES INC	* TYPE								
ADDRESS: 200 WEATHERS FIELD AUE	P.O. NUMBER / PROJECT NUMBER:							1.	L
	PROJECT LOCATION:	TT	THI	MS	+	HI	PA.	5,2	A B
ALTA MONTE SPRINGS R 32714 PHONE: FAX:	     U   Y     S R								NU
407-569-1919 407-569-6961 CONTACT:	SAMPLED BY:								MB
CONTACT: COATES	CIAL INSTRUCTIONS: GERGUES - C/2 0,5								E R
DRANGES -	Ch = CR.WEST - C/2								
STANDARD	LK. RIPSE-C12								
$\Box RUSH = USH  12 ANB. HILL - C12									
CR. WEST - L	12	SRI	APC	S	bn	1	66		<u> -</u>
WW= waste water SW=surface water GW=ground water	DW=drinking water OIL A=air SO=soil SL=sludge Presen	X	X	X	X	X	$\lambda$	X	X
SAMPLE ID SAMPLE DESCRIPTION	Grab SAMPLING MATRIX NO. CONT.								
AD52850 1635 US 27- (7-1)		Х							
AOSZ851 ORANGES-10001 CRENSHAR			Х						
ABSTSST Highland PT 11410 CAPPESS				X					
	$C g/\rho I = 1 + E p = 1$				X				
						Х			
AUS2854 LK. CR. H. 16 - 10351 Thomps HOS2855 CR WEST - 10731 PRIEL				+	1	1	X		
								X	1
AUS2856 /15 RIDGE CLUB - 12134 OUTCO	K DR 6 9/1405 1525 DW 6			┼──					X
A651857 AMB $H_1LL - 12647$ LACE 1= Ice H=(HCI) S=(H_2SO4) N=(HNO2) T=(SO	$\frac{w_n}{Dr} = 6 \frac{99_{05}}{1210} \frac{1210}{Dw} = 5$				red by:	<u> </u>	<u></u> г	)ate	Time
$\cdot \cdot \cdot = \cdot \cdot \cdot \cdot \cdot \cdot \cdot \cdot \cdot \cdot \cdot \cdot \cdot \cdot \cdot \cdot$			2	Heceiv		}	8		930
Out: / / Via: RBD/T	8 1 1 05 BIC	1	21		$\sum$		lu	1/25	(310
AB         D/T           Trip BI.         Trip SI.	3	$\downarrow \downarrow$	J		<u> </u>				

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John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

Page 4 of 27

1

# Laboratory Scope of Accreditation

#### THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code: FL00949

(904) 363-9350

E82574 Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, FL 32216

Aatrix: Drinking Water	Method/Tech	Catagory	Certification	Effective Date
nalyte	EPA 200,7	Category	Type NELAP	1/21/2005
ilica as SiO2		Primary Inorganic Contaminants		
ilver	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002
ilvex (2,4,5-TP)	EPA 515.3	Synthetic Organic Contaminants	NELAP	1/21/2005
imazine	EPA 525.2	Synthetic Organic Contaminants	NELAP	3/24/2005
odium	EPA 200.7	Primary Inorganic Contaminants	NELAP	4/4/2002
tyrene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
tyrene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
ulfate	EPA 375.4	Secondary Inorganic Contaminants	NELAP	2/13/2003
urfactants - MBAS	EPA 425.1	Secondary Inorganic Contaminants	NELAP	1/21/2005
etrachloroethylene (Perchloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
etrachloroethylene (Perchloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
hallium	EPA 200.9	Primary Inorganic Contaminants	NELAP	4/4/2002
oluene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
oluene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
otal coliforms	SM 9222 B	Microbiology	NELAP	4/4/2002
otal coliforms & E. coli	SM 9223 B	Microbiology	NELAP	9/5/2002
otal haloacetic acids	EPA 552.2	Synthetic Organic Contaminants	NELAP	1/21/2005
otal trihalomethanes	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
otal trihalomethanes	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
oxaphene (Chlorinated camphene)	EPA 508	Synthetic Organic Contaminants	NELAP	3/24/2005
ans-1,2-Dichloroethylene	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
ans-1,2-Dichloroethylene	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
richloroacetic acid	EPA 552.2	Group I Unregulated Contaminants	NELAP	1/21/2005
richloroethene (Trichloroethylene)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
richloroethene (Trichloroethylene)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
urbidity	EPA 180.1	Secondary Inorganic Contaminants	NELAP	7/17/2002
inyl chloride	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
inyl chloride	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
ylene (total)	EPA 502.2	Other Regulated Contaminants	NELAP	4/4/2002
(ylene (total)	EPA 524.2	Other Regulated Contaminants	NELAP	1/21/2005
inc	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.

NON-TRANSFERABLE 04/24/2005-E82574

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TTHMHAA5 REPORTING COMPLIANCE SUMMARY FOR PWS. MONITORING ANNUALLY								
TTHM COMPLIANCE SUMMARY		HAAS COMPLIANCE SUMMARY						
Provide the number of TTHM samples taken during the last year*	1	Provide the number of HAA5 samples taken during the last year*	1					
Calculate the arithmetic average of all TTHM samples taken over the last year	21.2	Calculate the arithmetic average all HAA5s samples taken over the last , year	9.0					
Does the arithmetic average of the TTHM samples exceed the Maximum Contaminant Level of 0.060 mg/L for TTHMs? (YES(40)**	NO	Does the arithmetic average of the HAA5 samples exceed the Maximum Contaminant Level of 0.060 mg/L for HAA5s? (YES(NO)**	NO					

\*Also, for each sample taken during the last year, provide the information requested in the tables on pages 3 and 4 of this format.

\*\*If the TTHM or HAA5 sample (or average of the samples, if more than one sample is taken) exceeds the Maximum Contaminant Level, the system must increase monitoring to one TTHM and one HAA5 sample per treatment plant per quarter, taken at a point in the distribution system reflecting the maximum residence time, until the system meets the criteria in 40 CFR 131.132(b)(1)(iv). Please see 40 CFR 141.132 (b)(1) for complete details.

OTAL TRIHALOMETHAN			Disinfectant		the state of the s	and the second s		She water in a said
Sample Lôcatión	Sample Location In the Distribution System (Average or Maximum Residence Time)	Date of Sample Collection (inc/da/yr)	Residual (mg/L) at Time of Sample Collection	Name of Person Collecting Sample	Date of Analysis (mo/da/yt)	Analyticat Method	Leboritory Name & Certification Number	TTHM Analysis Result (ug/L
1635U.S.HW427	MRT	8/10/05	0.5	C.Schwedes	8/15/05	E502.2	AEL E 53076	21.2
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Page 3 of 5

Sample Location	Semple Location In the Distribution System (Average or Maximum Residence Time)	Date of Sample Collection (mo/da/yr)	Disinfectant Residual (mg/L) at Time of Sample Collection	Name of Person Collecting Sample	Dete of Analysis (mo/da/yr)	Analytical Method	Laboratory Name & Certification Number	HAA5 Analysis Result (ug/L)
1635ULS.HWY27	MRT	8/10/05	0,5	CSchwades	8/19/05	E552.2	AEL E53076	9.0
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							<u></u>	

Page 4 of 5

Effective January 2004

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C.M.

#### LAKE UTILITY SERVICES, INC. AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440 Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961 florida@utilitiesinc-usa.com

October 12, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd., Suite 232 Orlando, FL 32803-3767

RE: Total Trihalomethane / Haloacetic Acids Annual Monitoring LAKE LOUISA Greater Groves - PWS ID 3354881-2

Dear Mr. Morrison:

Please find the enclosed sample results as specified above for the 2005 monitoring period.

If you should have any questions, please call 407.869.8588, extension 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Bugand By

Bryan K. Gongre Assistant Operations Manager

Enclosures

cc: Bill Coates, A.M., UIOF

TTHMHAAS REPORTING COMPLIANCE SUMMARY FOR PWSe MONITORING ANNUALLY							
TTHM COMPLIANCE SUMMARY		HAAS COMPLIANCE SUMMARY	ية تلغي يتأثر من يو				
Provide the number of TTHM samples taken during the last year*	1	Provide the number of HAA5 samples taken during the last year*	1				
Calculate the arithmetic average of all TTHM samples taken over the last year	18.9	Celculate the arithmetic average all HAA5s samples taken over the last year	3.8				
Does the arithmetic average of the TTHM samples exceed the Maximum Contaminant Level of 0.080 mg/L for TTHMs? (YES/NO)**	NO	Does the arithmetic average of the HAA5 samples exceed the Maximum Contaminant Level of 0.050 mg/L for HAA5s? (YES/NO)**	NO				

\*Also, for each sample taken during the last year, provide the information requested in the tables on pages 3 and 4 of this format. \*\*If the TTHM or HAA5 sample (or average of the samples, if more than one sample is taken) exceeds the Maximum Contaminant Level, the system must increase monitoring to one TTHM and one HAA5 sample per treatment plant per quarter, taken at a point in the distribution system reflecting the maximum residence time, until the system meets the criteria in 40 CFR 131.132(b)(1)(iv). Please see 40 CFR 141.132 (b)(1) for complete details.

TOTAL TRIHALOMETHANE (TTHM) ANALYSIS RESULTS FOR REPORTING PERIOD									
Sample Location	Sample Location in the Distribution System (Average or Maximum Residence Time)	Date of Sample Collection (molda/yr)	Diskriectant Residual (mg/L) at Time of Sample Collection	Name of Person Collecting Semple	Date of Analysis (molda/yt)	Analytical Hethod	Laboritory Niline & Certification Number	TTHM Anelysis Result (ug/t	
2333 Roper Blud.	MRT	8/31/05	1.6	C.Schwades	913105	E502.2	AEL/E82574	18.9	
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ALOACETIC ACIDS 5 (F	Serbole Location		Disinfectant	1	1	·		5
Sample Location	in the Distribution System (Average or Maximum Residence Time)	Date of Sample Collection (mo/da/yr)	Residual (mg/L) at Time of Sample Collection	Name of Person Collecting Sample	Date of Analysis (mo/da/yr)	Analytical Method	Laboratory Name & Certification Number	HAA5 Analysis Result (ug/
12333 Roper Blue.	MRT	8/31/05	1.6	C.Schwades	9/15/05	E552.2	AEL/E92514	3.8
					}			<b> </b>
						<u> </u>		
	+							
					•			

Effective January 2004

Page 4 of 5

# Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

	N (to be completed by sampler – Please type or print legibly)
System Name: <u>Lake Louisa</u>	oves-lakebrares PWSID. # 3354881-
System Type (check one):	Nontransient Noncommunity
Address: Lake Utility 5	ervices, Inc.
200 Weathers	field Avenue
City:Attamente Spring	State: FL ZIP Code: 32714
Phone #: 407.869.1919	Fax #: 40.869.6961
E-Mail Address:	
SAMPLE INFORMATION (to be completed I	by sampler)
Sample Number:	
Sample Date: \$\31/05	Sample Time: 3D AM PM (Circle One)
	oper Boulevard Clermont, FL
Disinfectant Residual (Required when reporting i	results for trihalomethanes and haloacetic acids): <u>1.6</u> mg/L Field pH;
Sample Type (Check Only One)	Reason(s) for Sample (Check all that apply)
Distribution	Routine Compliance (with 62-550)
	Confirmation of MCL Exceedance* Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**
Raw (at well or intake)	Clearance (permitting)
Max Residence Time	Other:
Ave Residence Time	Sampling Procedure Used or Other Comments:
Near First Customer	
*See 62-550.500(6) for requireme NOTE: See 62-550.512(3) for ad for nitrate or nitrite MCL e	ditional requirements attach a results page for each site.
Sampler's Name: Charles G.S.	numples
Sampler's Phone #:	<u>ລ</u> Sampler's Fax #: <u>407.869.6961</u>
Sampler's E-Mail Address:	
CERTIFICATION (to be completed by s	ampler)
	LeadOperator
l, <u>Churles G. Schwalles</u> (Print Name)	(Print Title)
	e public water system and sample collection information is
Signature:	Date: 10/6/05-

Reporting Format 62-550.730 Effective January 1995, Revised January 2004

## Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

	CURRENT DOH ANAL	YIE SHEE!"				
LabName	: Advanced Environme	ental Labs - Orlando	Florid	a Certification #: E53076		
Address:	528 S. North Lake Bl	vd., Suite 1016	Certification Expiration Date: 6/30/2006			
	Altamonte Springs, F	L 32701		Telephone #: (407) 937-1594		
ANALYSIS	S INFORMATION (to be	e completed by lab				
PWS ID (f	rom page 1):		Date Sampl	e(s) Received: 9/1/2005 1:50:00 P		
Lab Assign	ned Report Number or	Job ID A053215	Sample Number	(From page 1) A053215-01		
Group(s) A	Analyzed Results attac	hed for compliance with cha	apter 62-550, F.A.C. (check al	I that apply):		
	Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts		
- Г	☐ All 17		All 21	✓ Trihalomethanes		
ſ	] Partial	All Except Dioxin	Partial	Haloacetic Acids		
	Nitrate	Partial	Radionuclides	Bromate		
ſ	Nitrite	Dioxin Only		Chlorite		
Ē	Asbestos Only		Single Sample	Secondaries		
			Qtrly Composite**			
Nere anv a	analyses subcontracted	1? 🔽 Yes 🗍 No		Partial		
•		ation number E82574				
	•	FOR EACH SUBCONTRA				
	ON ANALITE SHEET					
		CER	TIFICATION			
·		Laboratory Manager	······································			
(	Print Name)		· · · · · · · · · · · · · · · · · · ·	ll sognisons and a fills		
(I	Print Name) Y &ERTIFY that all atte	iched analytical data are co	rrect and unless noted meet a	all requirements of the		
(I Io HEREB	Print Name) Y &ERTIFY that all atte		rrect and unless noted meet a (NELAC).	Il requirements of the		
(I Io HEREB National En	Print Name) Y CERTIFY that all after wirgoniental Laborator	iched analytical data are co	rrect and unless noted meet a (NELAC). Date: /	all requirements of the $10/$		
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do HEREB National En Signature: P Failure to analysis res and may res Please pr	Print Name) Y CERTIFY that all after wire inversion and call and cu- provide a valid and cu- sults will result in rejection suit in notification of the	Accreditation Conference Accreditation Conference WWW rrent Florida DOH lab certif on of the report, possible e b DOH Bureau of Laborator ple dates and locations for	(NELAC). Date: //	10 /		
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(I do HEREB) National En Bignature: Pailure to analysis res and may res Please pr COMPLIAN Sample Coll Replacem Replacem Additiona Reason(s):	Print Name) Y CERTIFY that all after invironmental Laborator provide a valid and cu- sults will result in rejection sults will result in rejection sult in notification of the rovide radiological sample ICE DETERMINATION lection Info Satisfactory nent Sample(s) Requested al Monitoring Required A MCL(s) Exceeded Missing Analyte Sh	rrent Florida DOH lab certif on of the report, possible e DOH Bureau of Laborator ple dates and locations for (to be completed by DE (incle or highlight group(s) abor (circle or highlight group(s) abor	(NELAC). Date:	Analyte Sheet for the attached water system for failure to sample satisfactory: Xes M No		
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(I do HEREB) National En Signature: Failure to inalysis res ind may res Please pr OMPLIAN ample Coll Replacem Additiona eason(s):	Print Name) Y CERTIFY that all after invironmental Laborator provide a valid and cu- sults will result in rejection sults will result in rejection sult in notification of the rovide radiological sample ICE DETERMINATION lection Info Satisfactory nent Sample(s) Requested al Monitoring Required MCL(s) Exceeded Missing Analyte Sh Other:	Inched analytical data are co Accreditation Conference WWW Internet Florida DOH lab certifi on of the report, possible e b DOH Bureau of Laborator ple dates and locations for (to be completed by DE (i) Yes 3 No (circle or highlight group(s) abor (circle or highlight group(s) abor (circle or highlight group(s) abor (circle or highlight group(s) i) Detected	(NELAC). Date:	Analyte Sheet for the attached water system for failure to sample satisfactory: I Yes I No uested (circle or highlight group(s) above		

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6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

Client:	Utilities, Inc.
Project Name:	Greater Groves
Project Number:	
PWS ID#:	
Attention:	Kathy Sillitoe
Phone Number:	8002721919

200 Weathersfield Ave. Address:

Altamonte Springs, FL 32714

**Report No.:** A053215 **Date Sampled:** 8/31/2005 **Date Received:** 9/1/05 13:50 **Date Reported:** 9/8/2005

#### **Project Description**

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

> **Project Name:** Greater Groves

Approved By:

If there are any questions involving this report, the above named should be contacted.

Myrna Santlago, Laboratory Manager

THIS REPORT SHALL NOT BE REPRODUCED, EXCEPT IN FULL, WITHOUT THE WRITTEN APPROVAL OF THE LABORATORY.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages =  $\delta$ 

# Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Utilities, Inc.

Project Name: Greater Groves

Matrix: Drinking Water

#### PWS ID#:

### Client Sample ID: 1

Site: 12333 Roper Bo

Sample Number: A053215-01

#### **Disinfection Byproducts**

Report No.: A053215 Date/Time Sampled: 08/31/05 12:30 Date/Time Received: 9/1/05 13:50

Sampled By: Client Shipping Method: AEL Courier

Rt

Contam ID	Contam Name	MCL	Units	Analysis Results	Qualifier	Analytical Method	Lab MDL	Analysis Date	Analysis <u>Time</u>	DOH Lab <u>Cert. #</u>
2450	Chloroacetic Acid		ug/L	0.81	U	E552.2	0.81	9/15/2005	12:24	E82574
2451	Dichloroacetic Acid		ug/L	2.4		E552.2	0.56	9/15/2005	12:24	E82574
2452	Trichloroacetic Acid		ug/L	0.60	U	E552.2	0.60	9/15/2005	12:24	E82574
2453	Bromoacetic Acid		ug/L	0.34	U	E552.2	0.34	9/15/2005	12:24	E82574
2454	Dibromoacetic Acid		ug/L	1.4	i	E552.2	0.45	9/15/2005	12:24	E82574
2941	Chloroform		ug/L	4.8		E502.2	0.31	9/3/2005	19:12	E82574
2942	Bromoform		ug/L	2.4		E502.2	0.36	9/3/2005	19:12	E82574
2943	Bromodichloromethane		ug/L	6.0		E502.2	0.38	9/3/2005	19:12	E82574
2944	Dibromochloromethane		ug/L	5.7		€502.2	0.28	9/3/2005	19:12	E82574

The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit. 1

The compound was analyzed for but not detected. U

MDL Method Reporting Limit For all Results qualified with an I, the PQL is defined to be 4 times the MDL



Client:	UTILITIES, INC. (UTL	A)	Project name:	GREATER GROVES
Date/Time Rcvd:	9/1/05	13.50	Log-in request number:	A053215
Received by:	RPG	······································	Completed by:	RPG
<u>Cooler/Shippi</u>	ng Information:			

Courier: 🛛 AEL 🗆 Client 🗆 UPS 🗆 Pony Express 🗆 FedEx 🗀 Other (describe): \_\_\_\_\_

Type: 🖾 Cooler 🗆 Box 🗖 Other (describe) \_

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	1				
Temp (°C)	2				
Temp taken from	Temp blank Cooler	Temp blank     Cooler	Temp blank Cooler	Temp blank Cooler	Temp blank Cooler
Temp measured with	IR gun Thermometer (enter ID):	IR gun Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	IR gun Thermometer (enter ID):

### Other Information:

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			
2.	Were custody papers properly included with samples?			
3.	Were custody papers properly filled out (ink, signed, match labels)?			
4.	Did all bottles arrive in good condition (unbroken)?			
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?			
6.	Did the sample labels agree with the chain of custody?			
7.	Were correct bottles used for the tests indicated?			
8.	Were proper sample preservation techniques indicated on the label?	1		
9.	Were samples received within holding times?	~		
10.	Were all VOA vials checked for the presence of air bubbles?			1
11.	Were there air bubbles present in the VOA vials?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE	<ul> <li>✓</li> </ul>		
13.	Was the cooler temperature less than 6°C?	1		
	Were sample pHs checked and recorded by Sample control?			1
	NOTE: VOA samples are checked by laboratory analysts.			•
15.	Were the sample containers provided by AEL?			
16.	Were samples accepted into the laboratory?			
	Was it necessary to split samples into other bottles?		1	

## <u>Kit ID</u>

Comments:

25

Chain-of-Custody for AEL Orlando to AEL Jax

AEL Orlando 528 South North Lake Blvd, S Altamonte Springs FL 32701

نېد ک Contact Person: Myrna Santiago

Project #: A053215 CustomerName: Utilities, Inc. Collector: Client AEL Jax 6601 Southpoint Parkway Jacksonville, Fl 32216 904-363-9350 Fax 904-363-9354 Contact Person: Sean Hyde

**Check if Rush** 

Lab Code	Client Sample ID	Test	Matrix	Collect Date / T	Time R	leceive Date	Due Date	# Bottles	Bottle Type (Pres.)
A053215-01	1	550 Haloacetic Acids (J)-55	Water	8/31/2005 12	2:30 9	9/1/05 13:50	9/7/2005		40mL Vial Amber
A053215-01	1	THMs (DW)	Water	8/31/2005 12	2:30 9	9/1/05 13:50	9/14/2005		40mL VOC Vial

Orlando Relinquisher: <u>AEL Courier</u> Shipping Receiver: <u>AEL Courier</u> Date/Time: <u>9</u>1165 Shipping Relinquisher: <u>AEL Courier</u> Jacksonville Receiver: <u>AEL Courier</u> Date/Time: <u>9</u>265

Page 1 of 1

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	U Tampa:	5810-	-D Breckenridge	Parkway, Tampa, F	L 33610 • (813) 6	30-9616 Fax (8	13) 630-4327		<u> </u>				Pag	e	of	
LIENT NAME:	Gaines	ville: 2106	NW 67th Place,	Suite 7, Gainesvill	e, FL 32606 • (35 JECT NAME:		x (352) 367-0050		в	OTTLE						T
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Jeb Bush Governor

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John O, Agwunobi, M.D., M.B.A., M.P.H. Secretary

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# Laboratory Scope of Accreditation

### THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E82574

EPA Lab Code: FL00949

(904) 363-9350

E82574 Advanced Environmental Laboratories, Inc. 6601 Southpoint Parkway Jacksonville, FL 32216 Matrix: Drinking Water

Nilca as SiO2EPA 200.7Primary Inorganic ContaminantsNELAP1/21/2005NilverEPA 200.7Secondary Inorganic ContaminantsNELAP4/4/2002Nilvex (2,4,5-TP)EPA 515.3Synthetic Organic ContaminantsNELAP1/21/2005SimazineEPA 252.2Synthetic Organic ContaminantsNELAP3/24/2005SignameEPA 252.2Other Regulated ContaminantsNELAP4/4/2002SignameEPA 502.2Other Regulated ContaminantsNELAP4/4/2002SignameEPA 375.4Secondary Inorganic ContaminantsNELAP2/13/2003SignameEPA 425.1Secondary Inorganic ContaminantsNELAP2/13/2003SignameEPA 425.1Secondary Inorganic ContaminantsNELAP2/13/2003SignameEPA 425.1Secondary Inorganic ContaminantsNELAP1/21/2005Starkataris - MBASEPA 425.1Secondary Inorganic ContaminantsNELAP1/21/2005Starkataris - MBASEPA 425.1Secondary Inorganic ContaminantsNELAP1/21/2005Cataroloreethylene (Perchloroethylene)EPA 52.2Other Regulated ContaminantsNELAP1/21/2005TeachloroethyleneEPA 52.2Other Regulated ContaminantsNELAP1/21/2005StallumEPA 52.2Other Regulated ContaminantsNELAP1/21/2005Total coliformsSM 922.2 BMicrobiologyNELAP4/4/2002Total coliformsSM 922.2 BMicrobiologyNELAP9/5/2002Total coliformsEPA 52.2 <th>Matrix: Drinking Water Analyte</th> <th>Method/Tech</th> <th>Category</th> <th>Certification Type</th> <th>Effective Date</th>	Matrix: Drinking Water Analyte	Method/Tech	Category	Certification Type	Effective Date
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ED & 200 T	•	EPA 524.2		NELAP	1/21/2005
	Zinc	EPA 200.7	Secondary Inorganic Contaminants	NELAP	4/4/2002

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards.

NON-TRANSFERABLE 04/24/2005-E82574

### LAKE UTILITY SERVICES, INC.

AN AFFILIATE OF UTILITIES, INC. 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: 2335 Sanders Road Northbrook, Illinois 60062 Telephone: 847-498-6440

Telephone: 407-869-1'919 Florida: 800-272-1919 Fax: 407-869-6961 E-Mail: uif@iag.net

November 8, 2005

Mr. Paul Morrison, Environmental Manager Drinking Water Program Florida Department of Environmental Protection 3319 Maguire Blvd. - Suite 232 Orlando, FL 32803

RE: Triennial Monitoring Chapter 62-550 FAC 4th Quarter GA & Ra-228 Greater Groves PWS ID# 3354881-1

Dear Mr. Morrison:

Enclosed please find the results of samples taken October 7, 2005 for the above referenced analysis and system.

If you have any questions or require additional information, please do not hesitate to contact me at (407) 869-8588, ext. 226.

Sincerely,

LAKE UTILITY SERVICES, INC.

Bugen Dom

Bryan K. Gongre Assistant Operations Manager

Enclosures: Sample Results

Cc: Bill Coates, Area Manager, UIOF

# Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

PUBLIC WATER SYSTEM INFORMATIO	<b>DN</b> (to be completed by sampler – Please ty	pe or print legibly)
System Name: Greater Grov	<u>د</u> ے PWs ۱.۱	D. #: 3354881
System Type (check one): 🛛 🗶 Communit	y  Nontransient Noncommunit	y Transient Noncommunity
Address: Lake Utility 5	-	
200 weathersf	eld Avenue	
City: Altamonte Spring		
Phone #:		
E-Mail Address:K.gongre @	utiliticsinc-usa.com	
SAMPLE INFORMATION (to be completed	by sampler)	
Sample Number: <u>AD53905</u> -	• • •	nown):
Sample Date: /0/07/05		8:15 AM PM (Circle One)
Sample Location (be specific):		
Disinfectant Residual (Required when reporting		
Sample Type (Check Only One)	Reason(s) for Sa	ample (Check all that apply)
	Routine Compliance (with 62-550)	Quarterly (Which Quarter? 4th atr.
Entry Point (to Distribution)	Confirmation of MCL Exceedance*	
□ Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites**	Violation Resolution
Raw (at well or intake)	Clearance (permitting)	Replacement (of Invalidated Sample)
Max Residence Time	Other:	
Ave Residence Time		omments:
Near First Customer		
*See 62-550.500(6) for requirem NOTE: See 62-550.512(3) for ac for nitrate or nitrite MCL	ditional requirements attaci	32-550.550(4) for requirements and a results page for each site.
Sampler's Name:ilian Coste		
Sampler's Phone #: 4-07.869.1919		407.869.6961
Sampler's E-Mail Address:		
CERTIFICATION (to be completed by		
1, Nilliam H (pat (Print Name)	es, <u>Area</u>	(Print Title),
do HEREBY CERTIFY that the above complete and correct.	ve public water system and samp	le collection information is
Signature: William H Com	*	Date: 11-2-05
Reporting Format 62-550.730	Page 1 of X	

Effective January 1995, Revised January 2004

Page 1 of 占

Florida Department of Environmental Protection Safe Drinking Water Program Laboratory
Reporting Format

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	ital Labs - Orlando	Florida	Certification #: E53076			
Address: 528 S. North Lake Blvc		Certification Expiration Date: 6/30/2006				
Address: 528 S. North Lake Blvc Altamonte Springs, FL		Certification	Telephone #: (407) 937-1594			
Attainonte Springs, PL	52701		Telephone #. (407) 937-1594			
ANALYSIS INFORMATION (to be	completed by lab					
PWS ID (from page 1): 3354	881-1	Date Sample	(s) Received: 10/7/2005 3:50:00			
Lab Assigned Report Number or Jo	ob ID A053905	Sample Number (	From page 1) A053905-01			
Group(s) Analyzed Results attache	ed for compliance with cha	apter 62-550, F.A.C. (check all	that apply):			
Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts			
🔄 All 17	📋 All 30	🗌 All 21	Trihalomethanes			
Partial	All Except Dioxin	Partial	Haloacetic Acids			
Nitrate	Partial	Radionuclides	Bromate			
Nitrite	Dioxin Only	Single Sample	Chlorite			
Asbestos Only		Qtrly Composite**	Secondaries			
		Line server server	All 14			
			Partial			
Were any analyses subcontracted?	? 🔽 Yes 🗌 No		_			
lf yes, please provide DOH certifica	ation number E83033					
ATTACH DOH ANALYTE SHEET		CTED LAB				
	CER	FIFICATION				
	Laboratory Manager	1				
(Print Name)						
	shed analytical data are co	prrect and unless noted meet al	I requirements of the			
		(NELAC)	•			
		(NELAC).				
National Environmental Laboratory						
Signature:		Date:	10-28-05			
Signature:	Accreditation Conference	Date:	10 - 28 - 05 nalyte Sheet for the attached			
Signature:	Accreditation Conference	Date:	10 - 28 - 05 nalyte Sheet for the attached			
National Environmental Laboratory Signature: P Failure to provide a valid and curr analysis results will result in rejectio and may result in notification of the	Accreditation Conference rent Florida DOH lab certif on of the report, possible e DOH Bureau of Laborator	Date: ication number and a current A nforcement against the public v y Services.	10 - 28 - 05 nalyte Sheet for the attached			
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6601 Southpoint Parkway Jacksonville, Florida 32216 (904) 363-9350 FAX (904) 363-9354

23

Client:	Utilities, Inc.
Project Name:	Greater Groves
Project Number:	

Attention: William Coates

Phone Number: 8002721919

Address: 200 Weathersfield Ave.

Altamonte Springs, FL 32714

Report No.:	A053905
Date Sampled:	10/7/2005
Date Received:	10/7/05 15:50
Date Reported:	10/27/2005

### **Project Description**

The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody.

Project Name: Greater Groves

Approved By: Myrna Santlago, Laboratory Manager

If you have any questions, the above named should be contacted.

Advanced Environmental Laboratories certifies that the test results in this report meet all requirements of the NELAC standards, unless notated otherwise in the body of the report.

Total Number of Pages =

# Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

# RADIONUCLIDES 62-550.310(6)

#### Report Number / Job ID: A053905/A053905-01

PWS ID (From Page 1):\_\_

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	RDL	Analysis Error	Analysis Date	Analysis Time	DOH Lab Certification #
4000	Gross Alpha (Excl Uranium)	15**	pCi/L	3.6		900.0	0.9	3	1.2	10/14/05		E83033
4002	Gross Alpha (Incl Uranium)	***	pCi/L				<u> </u>	1				
4006	Combined Uranium	****	pCi/L					*****				
4000	(U-234, U-235, & U-238)	30	µg/L					*****				
4020	Radium-226	E						1				
4030	Radium-228	5	pCi/L	0.7	U	Ra-05	0.7	1	0.5	10/19/05		E83033

If the results exceed 5 pCi/L, a measurement for radium-226 is required.

\*\*\* If the results exceed 5 pCi/L, a measurement for radium-226 is required. If the results exceed 15 pCi/L, measurements for radium-226 and uranium are required.

\*\*\*\* If uranium (U) is reported as a measurement of activity (pCi/L) it will be converted to a mass measurement (µg/L) by multiplying the result by 1.5.

\*\*\*\*\* Reserved

Page

\*Results must be reported with appropriate qualifiers in accordance with Florida Administrative Code Rule 62-160, Table 1. Results qualified with A, F. H, N, O, T, Z, P, \*, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.



Advanced Environmental Labs Inc

Advanced Environmental Labs 528 S North Lake Blvd, Ste 1016 Altamonte Springs, FL 32701

2.5

Client: UTILITIES, INC. (U	TL-A)	Project name: GREATER GROVES
Date/Time Rcvd: 10/7/05	15.50	Log-in request number: A053905

Received by: RPG

Completed by: RPG

\_\_\_\_\_

### **Cooler/Shipping Information:**

Courier: 🛛 AEL 🗆 Client 🗇 UPS 🗆 Pony Express 🗇 FedEx 🗇 Other (describe): \_\_\_\_\_

Type: 🛛 Cooler 🗆 Box 🗖 Other (describe)

Cooler temperature: Identify the cooler and document the temperature blank or ice water measurement

Cooler ID	1				
Temp (°C)	2				
Temp taken from	Temp blank Cooler	Temp blank Cooler	Temp blank     Cooler	Temp blank Cooler	Temp blank     Cooler
Temp measured with	IR gun Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):	□ IR gun □ Thermometer (enter ID):	☐ IR gun ☐ Thermometer (enter ID):

### Other Information:

Any discrepancies should be explained in the "Comments" section below.

	CHECKLIST	YES	NO	NA
1.	Were custody seals on shipping container(s) intact?			1
2.	Were custody papers properly included with samples?			
3.	Were custody papers properly filled out (ink, signed, match labels)?			
4.	Did all bottles arrive in good condition (unbroken)?			
5.	Were all bottle labels complete (sample #, date, signed, analysis, preservatives)?			
6.	Did the sample labels agree with the chain of custody?			
7.	Were correct bottles used for the tests indicated?	1		
8.	Were proper sample preservation techniques indicated on the label?	1		
9.	Were samples received within holding times?			
10.	Were all VOA vials checked for the presence of air bubbles?			1
11.	Were there air bubbles present in the VOA vials?			1
12.	Were samples in direct contact with wet ice? If "No," check one: DNO ICE DBLUE ICE			
13.	Was the cooler temperature less than 6°C?			
14.	Were sample pHs checked and recorded by Sample control?			/
	NOTE: VOA samples are checked by laboratory analysts.			~
15.	Were the sample containers provided by AEL?			
16.	Were samples accepted into the laboratory?			
17.	Was it necessary to split samples into other bottles?		1	

### <u>Kit ID</u>

<u>Comments:</u>

		Chain-of-Cu	stody for AEL (	Olando to	Fio	rida Radio	chemistry		
AEL Orlando							Filorid	a Radiochemistry	
528 South North	h Lake Blvd, S						5456	Hoffiner Ave., Suite 201	
Altamonte Spri	ngs FL 32701						Orian	ido, FL 32812-2517	
							407-3	382-7733	
Contact Person	a: Myma Santiago						Cont	act Person: Sample Recei	iving
							Che	eck if Rush	
Lab Code	Client Sample ID	Test	Matrix	Collect Date	/ Time	Receive Date	Due Date	# Bottles Bottle Type	(Pres.)
A053905-01	1	Radium 228	Drinking Water	10/7/2005	8:15	10/7/05 15:50	10/21/2005	<u></u>	
A053905-01	1	Gross Alpha	<b>Drinking Water</b>	10/7/2005	8:15	10/7/05 15:50	10/21/2095		

Orlando Relinguisher:	Shipping Roceiver: ABU Cum	Date/Time:	10/10/2005 4:01:52 PM
Shipping Relinquisber: 487_e	Florida Radiochemistry Receiver: KW1000	Date/Time:	6/11/05 9:08

Page 1 of 1

OCT. 21. 2005 2:24PM

A.

F. 4/4

NO. 695

Ð	Gainesville: 2106 NW	hthpoint Parkway, Jacksor Icess Palm Avenue, Tamp 67th Place, Suite 7, Gain orth Lake Blvd., Suite 101	wille, FL 32216 • (904) a, FL 33619 • (813) 63 esville, FL 32606 • (35 5. Altamonte Springs, I	363-9350 Fax ( 0-9616 Fax (81) 2) 367-1500 Fa: 51, 32701 • (407	3) 630-4327 ( (352) 367-0050 ) 937-1594 Fax (4	07) 937-159	97		LAE	16	A	053	39(	)5	]
CLIENT NAME:	11 -1		PROJECT NAME		<b>~</b>			BOTTLE	100	۲ ۲					
	ulties INC		Gre	wher l	annes			& TYPE	1256	25					
ADDRESS: ZOU	Weathersfield,	Ale	P.O. NUMBER / F	PROJECT N	UMBER:			AR	~ ~	- 14					L
Hltownon PHONE: 407-	ulties INC Weathersfield, KSprings Fr 509-9098 M Coates TIME:	L 32701 407-819-6961	PROJECT LOCA	TION: Gvor	es W	ŢΡ		NE AQ LU YI SR IE							A B N U M
CONTACT: B.	4 Coastes		SAMPLED BY:	5/11	Contes	<i>•</i>		SD		とって					BE
	TIME:	REMARKS / SPEC	IAL INSTRUCTIO	NS:					ALTHA	Z422.					R
STANDARD									6 6055 A	- <del>59</del>					
□ RUSH									61	\$					Í
<b>WW</b> =waste water	SW=surface water G	W=ground water D	W=drinking water	OIL A	≖air SO=s	oil SL	=sludge	Preserv	/						
SAMPLE ID	SAMPLE D	DESCRIPTION	Grab Composite		PLING	MATRIX	NO. CONT.								
1	wip 20	E	6	DATE	TIME	DW	2			L					
	<b>`</b>					100				/					
															<u> </u>
							<b> </b>	and and and and and and and and and and	<u> </u>						
	- · · · · · · · · · · · · · · · · · · ·														
	$S = (H_2SO_4) N =$			-	nquished by:		Date	Time		2	eceived	by:	Dat	4	ime
	Method Sample Kit a: RB	Cooler # D/T	1	Bigg		i	7-7	H45		Ħ	K	$\supset$	<u> 10</u> 11	1.	445
Ret: / / Vi	AB Trip Bl.	D/T	3	A	$ \rightarrow $		ples	1550	2	$( \neq$			loph	צן צו	50
	a: 1rip Bl	ū	4	\_								<u> </u>			

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JUL. 27. 2005 11:50AM

Jeb Bush Governor





John O. Agwunobi, M.D., M.B.A., M.P.H. Secretary

Page 1 of 2

# Laboratory Scope of Accreditation

# THIS LISTING OF ACCREDITED ANALYTES SHOULD BE USED ONLY WHEN ASSOCIATED WITH A VALID CERTIFICATE

State Laboratory ID: E83033

EPA Lab Code: FL00012

(407) 382-7733

E83033 Florida Radiochemistry Services, Inc. 5456 Hoffner Rd. Suite 201 Orlando, FL 32812

Matrix: Drinking water Analyte	Method/Tech	Category	Certification Type	Effective Date
Gross-alpha	EPA 900	Radiochemistry	NELAP	6/28/2001
Gross-beta	EPA 900	Radiochemistry	NELAP	6/28/2001
Natural uranium	EPA 908	Radiochemistry	NELAP	6/28/2001
Radium-226	EPA 903	Radiochemistry	NELAP	12/15/2003
tadium-226	EPA 903.1	Radiochemistry	NELAP	6/28/2001
Radium-228	EPA Ra-05	Radiochemistry	NELAP	6/28/2001

"STATE" indicates certification for the analyte by the method specified. "NELAP" further indicates certification compliant with the NELAC Standards. NON-TRANSFERABLE 04/29/2005-E83033

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