

State of Florida



# Public Service Commission

CAPITAL CIRCLE OFFICE CENTER • 2540 SHUMARD OAK BOULEVARD  
TALLAHASSEE, FLORIDA 32399-0850

**-M-E-M-O-R-A-N-D-U-M-**

RECEIVED-FPSC  
MAY 22 AM 10:02  
COMMISSION  
CLERK

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**DATE:** May 22, 2009  
**TO:** Dorothy E. Menasco, Chief Deputy Commission Clerk, Office of Commission Clerk  
**FROM:** Robert Simpson, Engineering Specialist II, Division of Economic Regulation  
**RE:** Docket No. 090230-WU; Application for staff-assisted rate case in St. Johns County by Camachee Cove Yacht Harbor Utility.

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Please add the attached e-mail from Ms. Joni Petri, Florida Department of Environmental Protection (FDEP), to Robert Simpson, Commission staff. The e-mail attaches FDEP's current correspondence with the above referenced utility regarding environmental compliance issues. Thank you.

DOCUMENT NUMBER-DATE

05095 MAY 22 8

FPSC-COMMISSION CLERK



# Department of Environmental Protection

Northeast District  
7825 Baymeadows Way, Suite B-200  
Jacksonville Florida 32256-7590

Colleen M. Castille  
Secretary

December 11, 2006

SENT VIA MAIL

Mr. Sean McKenna  
Camachee Island Water Works  
3070 Harbor Drive  
St. Augustine, Florida 32095

St. Johns County – Potable Water  
Follow-Up Inspection 2006  
Camachee Island Water Works// PWS ID: 2554166

Dear Mr. McKenna:

On December 7, 2006, a Follow-up Inspection of the above referenced Community water system was conducted. The plant was in excellent condition and the minor deficiencies noted in the October 17, 2006 inspection have been satisfactorily corrected.

Thank you for your prompt attention regarding the previous deficiencies. Your cooperation in complying with the Florida Safe Drinking Water Act, Section 403, Florida Statutes (FS), and the Florida Administrative Code (FAC) Title 62 is appreciated.

**Please submit the following chemical results as soon as possible: All Inorganic Contaminants, including Nitrate and Nitrite, Synthetic Organic Contaminants, Volatile Organic Contaminants, Secondaries, Disinfection Byproducts (TTHMs and HAA5s), Lead & Copper (between June and September), Bacteriologicals (monthly), and Disinfectant Residual Levels (monthly with Bacti's).**

Please contact me at (904) 807-3317 or [Amber.Otto@dep.state.fl.us](mailto:Amber.Otto@dep.state.fl.us) if you have any questions.

Sincerely,

Amber Otto  
Environmental Specialist

BRR:AMO:ao

cc: Mr. William Young, Operator ([byoung@co.st-johns.fl.us](mailto:byoung@co.st-johns.fl.us))

DOCUMENT NUMBER-DATE

05095 MAY 22 8

FPSC-COMMISSION CLERK



# Department of Environmental Protection

Jeb Bush  
Governor

Northeast District  
7825 Baymeadows Way, Suite B-200  
Jacksonville Florida 32256-7590

Colleen M. Castille  
Secretary

October 23, 2006

SENT VIA MAIL

Mr. Sean McKenna  
Camachee Island Water Works  
3070 Harbor Drive  
St. Augustine, Florida 32095

St. Johns County – Potable Water  
Sanitary Survey 2006  
**Camachee Island Water Works// PWS ID: 2554166**

Dear Mr. McKenna:

On October 17, 2006, a Sanitary Survey of the above referenced Community water system was conducted. The following deficiencies were noted as requiring action to bring this system into compliance with Chapter 62 of the Florida Administrative Code:

1. Ensure that all threaded taps at the water treatment plant are downward facing and provide hose bib vacuum breakers (HBVBs) or remove the threads on all taps to prevent any possible contamination of the water supply. Rule 62-555.360
2. Both high-service pumps in the hydro/ground storage tank room were rusty and corroded. Please sand and, if possible, paint the pumps to prevent possible equipment malfunction. Rule 62-55.350(1)
3. High service pump 1 was also leaking at the time of inspection. Please repair the pump and ensure that it is functioning properly. Rule 62-55.350(1)

**As a reminder, this system is required to monitor for the following remaining parameters during 2006: All Inorganic Contaminants, including Nitrate and Nitrite, Synthetic Organic Contaminants, Volatile Organic Contaminants, Secondaries, Disinfection Byproducts (TTHMs and HAA5s), Lead & Copper (between June and September), Bacteriologicals (monthly), and Disinfectant Residual Levels (monthly with Bacti's).**

Please provide a written response within **15 days of receipt** of this letter detailing how all deficiencies will be addressed within the next 30 days. Please contact me at (904) 807-3317 or Amber.Otto@dep.state.fl.us if you have any questions.

Sincerely,

A handwritten signature in black ink that reads "Amber M. Otto".

Amber Otto  
Environmental Specialist I

BRR:AMO:ao

cc: Mr. Bill Young, Operator (via email: [byoung@co.st-johns.fl.us](mailto:byoung@co.st-johns.fl.us))

State of Florida  
Department of Environmental Protection  
Northeast District  
**SANITARY SURVEY REPORT**

Plant Name Camachee Cove County St. Johns PWS ID # 2554166  
Plant Location 3070 Harbor Drive; St. Augustine, Florida 32095 Phone 904-829-5676  
Owner Name Mr. Sean McKenna, Camachee Island Water Works Phone 904-501-8709  
Owner Address 3070 Harbor Drive; St. Augustine, Florida 32095  
Designated Rep. Mr. William Young Title Operator Phone 904-669-7476 x11  
Facility Contact Mr. Sean McKenna Title President Phone 904-501-8709  
This Survey Date 10/17/2006 Last Survey Date 10/29/2002 Last C.I. Date 2/9/04

**PWS TYPE & CLASS:** Community - (2C)

**SERVICE AREA CHARACTERISTICS**

Yacht Harbor, Restaurant, Apartments and  
Homes  
Food Service:  Yes  No  N/A

**GENERAL INFORMATION**

Number of Service Connections 86  
Population Served 100 Basis MOR  
Plant Design Capacity 70,977 gpd  
Basis DEP Rated Capacity Worksheet  
Average Day (from MORs) 30,874 gpd  
Max. Day (from MORs) 46,100 gpd  
Total Storage Capacity 12,350 gpd  
Comments Data from August 2006 MOR

**LOCATION**

Latitude 29° 55' 01.00" North  
Longitude 81° 18' 33.00" West  
GPS: Yes Date: 7/1997  
Directions From St. Augustine, take A1A N TOWARD Vilano  
Beach, Facility is on LEFT side before crossing the bridge to  
Vilano. Go thru gate and facility is on Left across from the  
Harbor Office. Well 1 is there, Well two is outside that fencing.

**OPERATION & MAINTENANCE**

Certified Operator:  Yes  No  Not required  
Operator(s) & Certification Class-Number  
Mr. Bill Young C-5835

O & M Log:  Yes  No  Not required  
Operator Visitation Frequency  
Hrs/day: Required 1 Actual ?  
Days/wk: Required 5+2 Actual 5+2  
Non-consecutive Days?  Yes  No  N/A  
MORs submitted regularly?  Yes  No  N/A  
Data missing from MORs?  No  Yes  N/A

**RAW WATER SOURCE**

GROUND; Number of Wells 2  
 SURFACE/UDI; Source \_\_\_\_\_  
 PURCHASED from PWS ID # \_\_\_\_\_  
 Emergency Water Source \_\_\_\_\_  
Emergency Water Capacity \_\_\_\_\_

**AUXILIARY POWER SOURCE**

Yes  None  Not Required  
Source Generator  
Capacity of Standby (kW) 175 kW  
Switchover:  Automatic  Manual  
Standby Plan:  Yes  No  
Hrs Operated Under Load 1x/month  
What equipment does it operate?  
 Well pumps \_\_\_\_\_  
 High Service Pumps \_\_\_\_\_  
 Treatment Equipment \_\_\_\_\_  
Satisfy 1/2 max-day demand?  Yes  No  Unk  
Comments \_\_\_\_\_

**TREATMENT PROCESSES IN USE**

Reverse Osmosis, Aeration, Chlorination  
What additional treatment is needed?  
None  
For control of what deficiencies?  
N/A

**DISTRIBUTION SYSTEM**

Flow Measuring Device Flow Meter  
Meter Size & Type ABB Water Meters (2)  
Backflow Prevention Devices:  Yes  No  
Cross-connections One at tap outside tank  
Written Cross-connection Control Program: Yes  
Coliform Sampling Plan:  Yes  No  N/A  
Comments \_\_\_\_\_

**GROUND WATER SOURCE**

Well Number (PWS Identification)	1	2	
Well Name (System Identification)	2554166	Fire Well	Irrigation Well
Year Drilled	1981	1992	
Depth Drilled	200'	201'	
Latitude	29 55' 01.00" N	29 55' 01.00" N	
Longitude	81 18' 33.00" W	81 18' 33.00" W	
GPS (Y or N) / Date (if applicable)	Y: 7/1997	Y: 7/1997	
Florida Well ID	AAC1824	ACC1825	
Static Water Level	Artesian	Artesian	
Actual Yield (if different than rated capacity)	Unknown	Unknown	
Strainer	Unknown	Unknown	
Length (outside casing)	110'	180'	
Diameter (outside casing)	4"	10" x 6"	
Material (outside casing)	Steel	Steel	
Well Contamination History	OK	OK	
Is inundation of well possible?	Not likely	Not likely	
6' X 6' X 4" Concrete Pad	Good	Good	
SET BACKS	Septic Tank	No	No
	Reuse Water	No	No
	WW Plumbing	No	No
	Other Sanitary Hazard	None noted	Marsh nearby, Ok
PUMP	Type	Centrifugal	Vertical Turbine
	Manufacturer Name	Sta-Rite	Peerless
	Model Number	Unknown	10MA-1
	Rated Capacity (gpm)	Unknown	Unknown
	Motor Horsepower	Unknown	10
Well casing 12" above grade?	OK	OK	
Well Casing Sanitary Seal	OK	OK	
Raw Water Sampling Tap	OK	OK	
Above Ground Check Valve	OK	OK	
Fence/Housing	OK	Concrete wall	
Well Vent Protection	N/A	N/A	

**COMMENTS**


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**CHLORINATION (Disinfection)**

Type: Hypo-Chlorination  
 Make Stenner Capacity 10 gpd  
 Chlorine Feed Rate 2 gpd  
 Avg. Amount of Cl<sub>2</sub> gas used N/A  
 Chlorine Residuals: Plant N/A Remote 1.09  
 Remote tap location Boat facility  
 DPD Test Kit:  On-site  With operator  
 None  Not Used Daily  
 Injection Points Ground Storage Tank  
 Booster Pump Info \_\_\_\_\_  
 Comments \_\_\_\_\_

**STORAGE FACILITIES**

(B) Bladder (CW) Clearwell (C) Contact (E) Elevated  
 (G) Ground (H) Hydropneumatic (S.C.) See Comments

Tank Type/Number	G	H	
Capacity (gal)	12K	700	
Material	Steel	Steel	
Gravity Drain	Yes	Yes	
By-pass Piping	Yes	Yes	
Pressure Gauge	N/A	Yes	
Sight Glass or Level Indicator	S.G.	S.G.	
Fittings for Sight Glass	Yes	Yes	
Protected Openings	Yes	Yes	
PRV/ARV	N/A	N/A	
On/Off Pressure	N/A	60psi	
Access Padlocked	Yes	Yes	
Height to Bottom of Elevated Tank	N/A	N/A	
Height to Max. Water Level	N/A	N/A	

Comments \_\_\_\_\_  
 \_\_\_\_\_  
Ground storage/hydro repainted 10/16/06  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**HIGH SERVICE PUMPS**

Pump Number	1	2	
Type	Centrifugal	Centrifugal	
Make	Baldor	Baldor	
Model	JHH3312T	JHH3312T	
Capacity (gpm)			
Motor HP	10	10	
Date Installed			
Maintenance	S.C.	S.C.	

Comments Both pumps are rusty and corroded at base, pump 1 (left side) also is leaking.  
 \_\_\_\_\_  
 \_\_\_\_\_

Chlorine Gas Use Requirements	Chlorine Gas Use		Comments N/A
	YES	NO	
Dual System	<input type="checkbox"/>	<input type="checkbox"/>	
Auto-switchover	<input type="checkbox"/>	<input type="checkbox"/>	
Alarms:			
Loss of Cl <sub>2</sub> capability	<input type="checkbox"/>	<input type="checkbox"/>	
Loss of Cl <sub>2</sub> residual	<input type="checkbox"/>	<input type="checkbox"/>	
Cl <sub>2</sub> leak detection	<input type="checkbox"/>	<input type="checkbox"/>	
Scale	<input type="checkbox"/>	<input type="checkbox"/>	
Chained Cylinders	<input type="checkbox"/>	<input type="checkbox"/>	
Reserve Supply	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate Air-pak	<input type="checkbox"/>	<input type="checkbox"/>	
Sign of Leaks	<input type="checkbox"/>	<input type="checkbox"/>	
Fresh Ammonia	<input type="checkbox"/>	<input type="checkbox"/>	
Ventilation	<input type="checkbox"/>	<input type="checkbox"/>	
Room Lighting	<input type="checkbox"/>	<input type="checkbox"/>	
Warning Signs	<input type="checkbox"/>	<input type="checkbox"/>	
Repair Kits	<input type="checkbox"/>	<input type="checkbox"/>	
Fitted Wrench	<input type="checkbox"/>	<input type="checkbox"/>	
Housing/Protection	<input type="checkbox"/>	<input type="checkbox"/>	

**AERATION (Gases, Fe, & Mn Removal)**

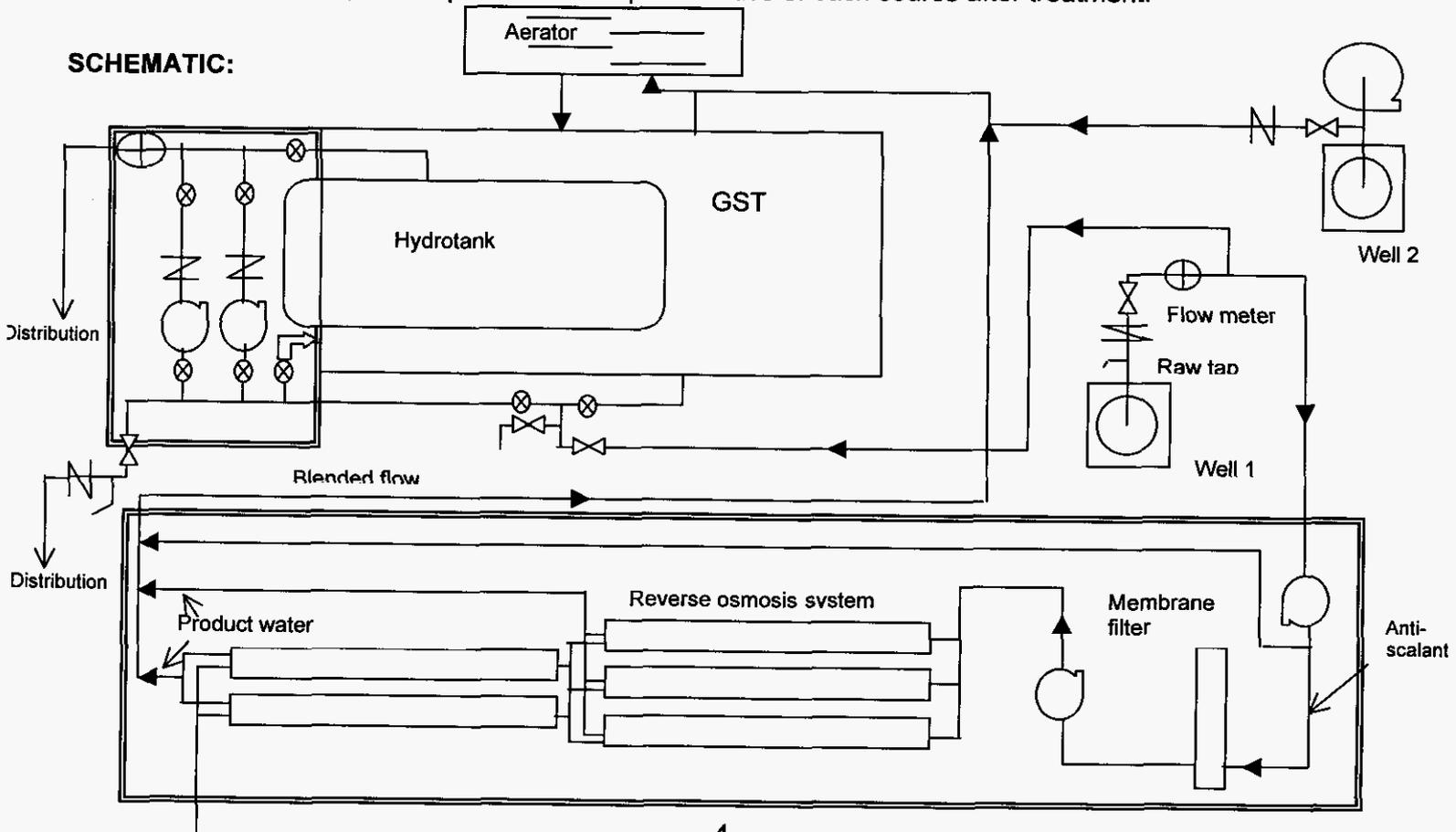
Type Tray Capacity \_\_\_\_\_  
 Aerator Condition Very good  
 Bloodworm Presence No  
 Visible Algae Growth No  
 Protective Screen Condition Excellent  
 Comments Aerator cleaned 1x/month, had just been cleaned and repainted at time of inspection  
 \_\_\_\_\_  
 \_\_\_\_\_

## COMPLIANCE MONITORING COMMUNITY PUBLIC WATER SYSTEMS

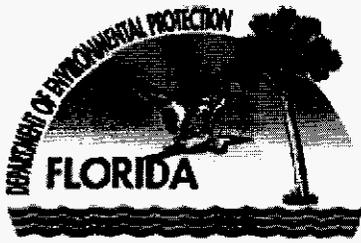
CONTAMINANT	Last Sampled	Due Date	COMMENTS
Microbiological (Bacteria)	xxxxxxx	Monthly	2 distribution samples + 1 from <u>each</u> raw source (distribution number based upon the population served)
Disinfectant Levels	xxxxxxx	Monthly	field readings (i.e. one taken with each microbiological sample that is taken from the distribution system). <b>Only report the quarterly averages of the monthly readings.</b>
Disinfection Byproducts (DBPs)	2003	2006	Total Trihalomethanes (TTHMs) & Haloacetic Acids (HAA5s) taken in accordance with your D/DBPR Monitoring Plan.
Nitrate & Nitrite (as N)	2005	2006	Taken from <u>each</u> Point of Entry to the distribution system (i.e. from each plant's effluent)
Inorganic Contaminants	2003	2006	Taken from <u>each</u> Point of Entry to the distribution system (i.e. from each plant's effluent)
Volatile Organic Contaminants	2003	2006	Taken from <u>each</u> Point of Entry to the distribution system (i.e. from each plant's effluent)
Synthetic Organic Contaminants	2003	2006	Taken from <u>each</u> Point of Entry to the distribution system (i.e. from each plant's effluent). <b>2 quarterly samples required if &gt;3,300 people served.</b>
Radionuclides	2003	2010	Taken from each Point of Entry to the distribution system (i.e. from each plant's effluent)
Secondary Standards	2003	2006	Taken from <u>each</u> Point of Entry to the distribution system (i.e. from each plant's effluent)
Lead and Copper	2003	2006	<b>Samples taken from pre-approved sample plan sites.</b>
Asbestos	Waiver	2010	<b>Samples taken from distribution.</b> Waiver available if there is no asbestos pipe in the distribution system.

Unless otherwise noted, all samples shall be representative of each source after treatment.

**SCHEMATIC:**







# Florida Department of Environmental Protection

Northeast District  
7825 Baymeadows Way, Suite B200  
Jacksonville, Florida 32256-7590  
Phone: 904/807-3300 ♦ Fax: 904/448-4366

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

March 28, 2008

SENT BY EMAIL: [sailsean@comcast.net](mailto:sailsean@comcast.net)

Mr. Sean McKenna  
Camachee Island Water Works  
3070 Harbor Drive  
St. Augustine, FL 32095

St. Johns County - Potable Water  
Compliance Inspection 2008  
Camachee Cove Yacht Harbor // PWS ID: 2554166

Dear Mr. McKenna:

On February 21, 2008, a Compliance Inspection was completed at the Camachee Cove Yacht Harbor water system. The following deficiencies were found. Please take action to fix these deficiencies and return the system to compliance with Chapter 62 of the Florida Administrative Code (F.A.C.):

1. Well number two is about 20 feet from the marsh. Minimum setback distances are established to prevent wells from being installed too close to sanitary hazards. No action is required at this time; however, adjustments may be necessary if the well should show signs of contamination in the future. Rule 62-555.312, F.A.C.
2. There are some threaded taps without backflow prevention. These taps are potential 'cross connections', meaning surface water and other contaminants can get sucked in if the pressure in the system drops below the pressure outside of the system. Hose bib vacuum breakers prevent cross connections, while still leaving the tap available for use. Please install hose bib vacuum breakers on all threaded taps. Rule 62-555.360, F.A.C.
3. The reverse osmosis pre-filter has algae and minerals on top near the sample tap. It appears that this is from a leak at that joint and not just from collecting samples. Leaks provide an entrance point for bacteria and contaminants. Please repair or replace the equipment needed to eliminate the leak, if necessary. If there is no leak and the water is from taking samples, please clean off the algae and be sure to wipe off any water that spills while the tap is in use. Rule 62-555.350, F.A.C.

4. Algae are growing on the piping at well number one. Please clean the piping and monitor the area to prevent further algal growth and possible contamination of the system. Rule 62-555.350, F.A.C.
5. There is no security around well number two. Lockable fences, houses, or enclosures are required around the wellhead and the treatment and pumping facilities in order to prevent tampering, vandalism, and sabotage. Please keep the water plant locked at all times and install a fence or housing with a lockable gate or door around the second well. Rule 62-555.315(1) & .320(5), F.A.C.
6. There is no Operation and Maintenance logbook. A hardbound operation and maintenance log is required in a location accessible to 24-hour inspection and current to the last operation and maintenance performed. Please provide a logbook and a weatherproof on-site location in which to store the logbook. Additionally, please ensure that the operator is recording all visits, repairs, and maintenance actions in the log. Confirmation that the operator is meeting visit requirements is not possible without checking the log. Rule 62-555.350(12), and Rule 62-555.350(8), F.A.C.
7. Only one raw bacteriological sample is being collected every month. Both wells feed into the plant; therefore both wells must be sampled monthly. Please adjust the sampling plan and begin monthly sampling of both wells in April. Rule 62-550.518, F.A.C.
8. Monthly Operation Reports (MORs) are not complete. All sections of the MOR must be completed, including the Plant Category, which is II, and Plant Class, which is C. Please add the plant category and class to all future MORs. Rule 62-550.730(1)(d), F.A.C.

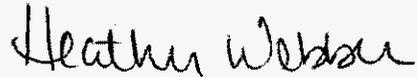
**As a reminder, the following sampling is due in 2008: lead and copper; nitrate and nitrite; quarterly disinfection byproducts, and monthly total coliform bacteria.**

Also, per Rule 62-555.350(2), F.A.C., finished-drinking-water storage tanks shall be cleaned at least once every five years to remove bio-growths, calcium or iron/manganese deposits, and sludge from inside the tanks. Finished-drinking-water storage tanks shall be inspected for structural and coating integrity at least once every five years by personnel under the responsible charge of a professional engineer licensed in Florida. Please ensure the proper disinfection and bacteriological evaluations are completed following the cleaning per Rule 62-555.340, F.A.C.

Mr. Sean McKenna  
March 28, 2008  
Page 3

Please provide a written response describing how all of these deficiencies will be fixed. Please contact me at 904-807-3319 or [Heather.Webber@dep.state.fl.us](mailto:Heather.Webber@dep.state.fl.us) if you have any questions. We appreciate your cooperation with the Florida Safe Drinking Water Act.

Sincerely,



Heather Webber  
Environmental Specialist

BRR:HAW:hw

Enclosure: Inspection Report

cc: Mr. Perry Fitzgerald, [camacheeisland@comcast.net](mailto:camacheeisland@comcast.net)

**State of Florida**  
**Department of Environmental Protection**

**PUBLIC WATER SYSTEM INSPECTION REPORT**

System Name: Camachee Cove Yacht Harbor Inspection Date: 02/21/08  
 Location: 3070 Harbor Drive, St. Augustine, FL 32095 PWS ID: 2554166  
 Owner: Camachee Island Water Works Attn: Mr. Sean McKenna Phone No.: 904-829-5676  
 Address 3070 Harbor Drive, St. Augustine, FL Zip Code: 32095 County: St. Johns  
 Certified Operator: Mr. William Young Level & No.: C-5835

Type of System: Community Type of Inspection: Compliance

**INSPECTION RESULTS**

Selections marked with an X are unsatisfactory. Selections marked with an I are in need of improvement.  
 Referenced sections are from Title 62, Florida Administrative Code

OK	Wells, Number of	555.315(2)	<u>AAC1824 - into RO train AAC1825 - main source &amp; fire well</u>
OK	Well, Concrete Apron	532.500(3)(c)	
OK	Well, Sanitary Seal	555.330(3)	
OK	Well, Raw Sample Tap	555.320(8)(b)2	
OK	Well, Vent	555.320(8)(c)	<u>none - artesian wells</u>
X	Well Set Backs	555.312	<u>AAC1825 is about 20' from marsh</u>
OK	Check Valve	555.330(3)	
OK	Chlorination (Disinfection)	555.320(12)(d)&.350(6)	
	Plant <u>n/a</u> Remote <u>2.03</u> mg/l		<u>remote taken at tap outside First Mate store</u>
N/A	Chlorination, Gas	555.320(13)(a)	<u>hypochlorination</u>
OK	Chlorine Test Kit - DPD	555.330(3)	<u>with operator</u>
OK	Other Treatment Processes	555	<u>RO, aeration</u>
OK	System Pressure	555.320(15)(a)2	<u>59 psi</u>
OK	Flow Meter	555.320(16)	<u>31252(00) gallons off RO line (finished meter not accessible due to height off ground)</u>
OK	Tanks	555	
OK	Aeration	555.350	<u>clean screens; in good condition</u>
OK	Auxiliary Power	555.320(14)	<u>exercised ~ monthly</u>
X	Cross Connection	555.360	<u>two threaded taps without backflow prevention</u>
OK	Plant Design	555.330	
X	Maintenance of Facilities	555.350	<u>pre-filter to RO appears to be leaking; algae on AAC1824 piping</u>
X	Security of Water System	555.315(1) & .320(5)	<u>none at AAC1825</u>
OK	Operator Staffing	699	<u>couldn't verify - no log book; 1 hr/day, 5 days/wk &amp; 1 visit each weekend day required</u>
X	O&M Logs & Manuals, on-site	555.350(12) & .350(13)	<u>no bound logbook on site</u>
OK	Monitoring: Well Clearance	555.315(6)(b)	
X	Monitoring: Bacteriological	550.518	<u>only collecting 1 raw sample per month but 2 wells are in use</u>
OK	Monitoring: Chemical	550.500-521	<u>lead and copper, nitrate and nitrite, quarterly disinfection byproduct due in 2008</u>
X	Monthly Operation Reports	550.730(1)(d)	<u>plant category and class are missing</u>

Comments: \_\_\_\_\_

It is required that a written response be provided to this office within fifteen days of receipt of this report regarding any unsatisfactory results listed above.

Inspector: Heather Webber

Date: March 28, 2008

Heather Webber, (904) 807-3319

or e-mail address:

Heather.Webber@DEP.STATE.FL.US