

100104-WU

CLASS A
WATER AND/OR WASTEWATER UTILITIES

FINANCIAL, RATE
AND ENGINEERING
MINIMUM FILING
REQUIREMENTS

OF
Water Management Services, Inc.

Docket No. 100104-WU

VOLUME III



ADDITIONAL ENGINEERING INFORMATION
FOR THE

Test Year Ended: December 31, 2009

COM 5
APA
ECR 7
GCL 2
RAD
SSC
ADM
OPC
CLK CF. RPR

WATER MANAGEMENT SERVICES, INC.
DOCKET NO. 100104-WU
ADDITIONAL ENGINEERING INFORMATION

TABLE OF CONTENTS

Maps (under separate cover)

Chemicals Used

Chemical Analyses

Plant Operating Reports

Sanitary Survey

Operating Permit

Notices

Field Employees

Vehicles

Customer Complaints

SYSTEM MAPS
(under separate cover)

CHEMICALS USED

Water Management Services, Inc.
 Chemicals Used in Water Treatment - 2009

	Chlorine Gas	Calcium Hypochlorite
Number of Cylinders	106	1
Pounds per Cylinder	250	150
Pounds of Chemicals Used	26,500	150
Cost of Chemicals	\$ 13,353.08	\$ 212.34
(000) Gallons Pumped	189,900	189,900
(000) Gallons Sold	151,136	151,136
Average cost per pound	\$ 0.5039	\$ 1.4156
Average cost per (000) gals pumped	\$ 0.0703	\$ 0.0011
Average cost per (000) gals sold	\$ 0.0884	\$ 0.0014
Average Dosage rate, lbs per (000)s gals pumped	0.1395	0.0008
Average Dosage rate, lbs per (000)s gals sold	0.1753	0.0010

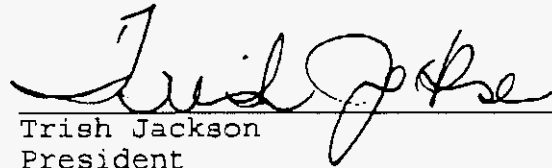
CHEMICAL ANALYSES

CERTIFICATE OF ANALYSIS

REPORT SERIAL NUMBER: 022410-20 Page 1
REPORT DATE: 02/24/10
REPORT TYPE: Original
Water Management Service, Inc.
CLIENT NO. 43
139 West Gulf Beach Dr.
St. George Island, FL 32328-
Attn: Hank Garrett

CONTENTS OF REPORT
CERTIFICATE OF ANALYSIS

2 Pages



Trish Jackson
President

These test results meet all NELAC requirements for those parameters which require accreditation. Any exceptions or deviations from NELAC protocol are noted in this report. Any samples collected by Water Spigot personnel are done according to the latest revision of SOP-001/01. Any questions concerning this report should be directed to the person signing this report at (850) 871-1900, The Water Spigot, Inc., 5806 East Highway 22, Panama City, FL 32404. The test results in this report relate only to those specific samples listed.

A statement of estimated uncertainty of test results is available on request. Analyses performed in the field are not regulated by the NELAC standards.

This report may not be reproduced except in full with written approval from the laboratory.

DRINKING WATER BACTERIOLOGICAL SAMPLE COLLECTION AND LABORATORY REPORTING FORMAT

THE WATER SPIGOT
5806 E. HWY 22
PANAMA CITY, FL 32404
E81105
850-871-1900 Report Number:022410-20

Sub_Contract Lab ID: _____

Analyses Requested: (please check all that apply)
Standard Coliform Test
X_Other: MMO-MUG

Relinquished by: L.Bunch
Lab Receipt Date & Time 02/23/10 1245CST
Analysis Date and Time 02/23/10 1440CST
Sample Acceptance Criteria:
Sample Preservation: X On Ice No on ice
Disinfectant check : X Yes No
The sample does not meet the following NELAC requirements

System Name: Water Management Services, Inc.
System Address: 139 W. Gulf Beach Dr.
System or Owner's Phone # 850-927-2648 Fax #
Collector: Brenda M. Molsbee Collector's Phone # 850-524-1905
Type of Supply: (check only one)

PWS I.D. : 1190789
City: St George Islnd

X Community Water System Noncommunity Water System Nontransient Noncommunity Water System Limited Use System
Private Well Swimming Pool Bottled Water Other

Reason for Sampling: (check only one) X Routine Compliance Repeat Replacement Main Clearance Well Survey Other
Sample Collection Date: 02/23/10

Total Coliform Analytical Method SM 9223 B
Fecal or E. coli Analytical Method

Table with columns: Sample Number, Sampling Point, Collection Time, Sample Type, Disinfectant Rec'd mg/l, pH, Non Coliform, Total Coliform, Fecal or E. coli, Data Qualifier, Lab Sample Number. Rows 1-4.

Average of disinfectant residuals for routine and repeat samples. (Complete for community and nontransient noncommunity systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.)

Defined in Florida Administrative Code Rule 62-100, Table 1
All tests are performed in accordance with NELAC standards

Disinfectant Residual Analysis Method: X DPD Colorimetric Other

Date PWS notified by lab of positive results:
Date State notified by lab of positive results:

Person performing analysis is:
X_A certified operator (#15121) Employed by a certified lab
Supervised by a cert operator (#) Employed by DEP or DOH

Lab Signature: [Signature]
Title: President

Water Management Services, Inc.
139 W. Gulf Beach Dr.
St George Islnd

Satisfactory DEP/DOH USE ONLY
Incomplete Collection Information
Repeat Samples Required
Replacement Samples Required
Date Reviewed by DEP/DOH:
DEP/DOH Reviewing Official:

DEP Sample Type Codes: D=Distribution(Routine Compliance), C=Repeat or Check, R=Raw, N=Entry to Distribution, P=Plant Tap, S=Special (clearance, etc)

Analysis Methods: MF-SM9222B & D, MFT-9221B & EC/MUG, MMO/MUG-SM9223B, HPC-SM9215B

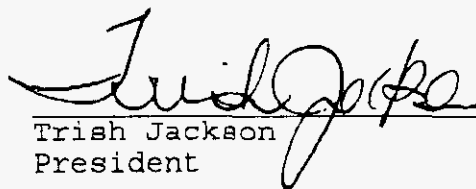
Results: A-coliforms are absent, F-coliforms are present, C=Confluent growth, TNTC=too numerous to count
Temperature, pH, chlorine tests were performed by the Client and not the Laboratory.

CERTIFICATE OF ANALYSIS

REPORT SERIAL NUMBER: 022410-21 Page 1
REPORT DATE: 02/24/10
REPORT TYPE: Original
Water Management Service, Inc.
CLIENT NO. 43
139 West Gulf Beach Dr.
St. George Island, FL 32328-
Attn: Hank Garrett

CONTENTS OF REPORT
CERTIFICATE OF ANALYSIS

2 Pages



Trish Jackson
President

These test results meet all NELAC requirements for those parameters which require accreditation. Any exceptions or deviations from NELAC protocol are noted in this report. Any samples collected by Water Spigot personnel are done according to the latest revision of SOP-001/01. Any questions concerning this report should be directed to the person signing this report at (850) 871-1900, The Water Spigot, Inc., 5806 East Highway 22, Panama City, FL 32404. The test results in this report relate only to those specific samples listed.

A statement of estimated uncertainty of test results is available on request. Analyses performed in the field are not regulated by the NELAC standards.

This report may not be reproduced except in full with written approval from the laboratory.

DRINKING WATER BACTERIOLOGICAL SAMPLE COLLECTION AND LABORATORY REPORTING FORMAT

THE WATER SPIGOT
5806 E. HWY 22
PANAMA CITY, FL 32404
E81105
850-871-1900 Report Number:022410-21

Sub_Contract Lab ID: _____

Analyses Requested: (please check all that apply)
Standard Coliform Test
Other: MMO-MUG

Relinquished by: L.Bunch
Lab Receipt Date & Time 02/23/10 1245CST
Analysis Date and Time 02/23/10 1440CST
Sample Acceptance Criteria:
Sample Preservation: X On Ice Not on ice
Disinfectant check : X Yes No
The sample does not meet the following NELAC requirements

System Name: Water Management Services, Inc.
System Address: 139 W. Gulf Beach Dr.
System or Owner's Phone # 850-927-2648 Fax #
Collector: Brenda M. Molsbee Collector's Phone # 850-524-1905
Type of Supply: (check only one)

PWS I.D. : 1190789
City: St George Islnd

X Community Water System Noncommunity Water System Nontransient Noncommunity Water System Limited Use System
Private Well Swimming Pool Bottled Water Other

Reason for Sampling: (check only one) X Routine Compliance Repeat Replacement Main Clearance Well Survey Other
Sample Collection Date: 02/22/10

Total Coliform Analytical Method SM 9223 B
Fecal or E. coli Analytical Method

Table with columns: Sample Number, Sampling Point, Collection Time, Sample Type, Disinfect Rec'd mg/l, pH, Non Coliform, Total Coliform, Fecal or E. coli, Data Qualifier, Lab Sample Number. Rows 1-9.

Average of disinfectant residuals for routine and repeat samples. (Complete for community and nontransient noncommunity systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.)

Defined in Florida Administrative Code Rule 62-100, Table 1
All tests are performed in accordance with NELAC standards

Disinfectant Residual Analysis Method: X DPD Colorimetric Other
Person performing analysis is:
X A certified operator(115121) Employed by a certified lab
Supervised by a cert operator(1) Employed by DEP or DOH

Date PWS notified by lab of positive results:
Date State notified by lab of positive results:

Lab Signature: [Handwritten Signature]
Title: President

Water Management Services, Inc.
139 W. Gulf Beach Dr.
St George Islnd

Satisfactory DEP/DOH USE ONLY
Incomplete Collection Information
Repeat Samples Required
Replacement Samples Required
Date Reviewed by DEP/DOH:
DEP/DOH Reviewing Official:

DEP Sample Type Codes: D-Distribution(Routine Compliance), C-Repeat or Check, R-Raw, N-Entry to Distribution, P=Plant Tap, S=Special(clearance.etc)

Analysis Methods: MF-SM9222B & D, MPT-9221B & EC/MUG, MMO/MUG-SM9223B, HPC-SM9215B

Results: A-coliforms are absent, P-coliforms are present, C=Confluent growth, TNTC-too numerous to count

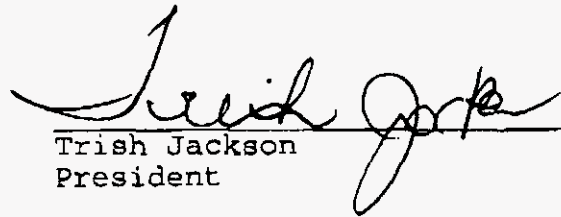
Temperature, pH, chlorine tests were performed by the Client and not the Laboratory.

CERTIFICATE OF ANALYSIS

REPORT SERIAL NUMBER: 091109-73 Page 1
REPORT DATE: 09/11/09
REPORT TYPE: Original
Water Management Service, Inc.
CLIENT NO. 43
139 West Gulf Beach Dr.
St. George Island, FL 32328-
Attn: Hank Garrett

CONTENTS OF REPORT

CERTIFICATE OF ANALYSIS	4 Pages
CHAIN OF CUSTODY	1 Pages
DEP FORMS	2 Pages


Trish Jackson
President

These test results meet all NELAC requirements for those parameters which require accreditation. Any exceptions or deviations from NELAC protocol are noted in this report. Any samples collected by Water Spigot personnel are done according to the latest revision of SOP-001/01. Any questions concerning this report should be directed to the person signing this report at (850) 871-1900, The Water Spigot, Inc., 5806 East Highway 22, Panama City, FL 32404. The test results in this report relate only to those specific samples listed.

A statement of estimated uncertainty of test results is available on request. Analyses performed in the field are not regulated by the NELAC standards.

This report may not be reproduced except in full with written approval from the laboratory.

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

PUBLIC WATER SYSTEM INFORMATION (to be completed by sampler - Please type or print legibly)

System Name: Water Management Services, Inc. PWS I.D. #:

1	1	9	0	7	8	9
---	---	---	---	---	---	---

System Type (check one): Community Nontransient Noncommunity Transient Noncommunity

Address: 139 W. Gulf Beach Dr.

City: St. George Island State: FL ZIP Code: 32328

Phone #: 850-927-2648 Fax #: 850-927-3395

E-Mail Address: water2nm@yahoo.com

SAMPLE INFORMATION (to be completed by sampler)

Sample Number: 08090949 & 08090948 Location Code (if known): Leisure Lane

Sample Date: 08/17/09 Sample Time: 5:00 AM PM (Circle One)

Sample Location (be specific): Leisure Lane

Disinfectant Residual (Required when reporting results for trihalomethanes and haloacetic acids): 3.4 mg/L Field pH: _____

Sample Type (Check Only One)

- Distribution
- Entry Point (to Distribution)
- Plant Tap (not for compliance with 62-550)
- Raw (at well or intake)
- Max Residence Time
- Ave Residence Time
- Near First Customer

Reason(s) for Sample (Check all that apply)

- Routine Compliance (with 62-550) Quarterly (Which Quarter? _____)
- Confirmation of MCL Exceedance*
- Composite of Multiple Sites**
- Clearance (permitting)
- Other: _____
- Special (not for compliance with 62-550)
- Violation Resolution
- Replacement (of Invalidated Sample)

Sampling Procedure Used or Other Comments: _____

*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.

Sampler's Name: Brenda M. Molsbee

Sampler's Phone #: 850-927-2648 Sampler's Fax #: 850-927-3395

Sampler's E-Mail Address: water2nm@yahoo.com

CERTIFICATION (to be completed by sampler)

I, Brenda M. Molsbee
(Print Name)

Licensed Operator
(Print Title)

do HEREBY CERTIFY that the above public water system and sample collection information is complete and correct.

Signature: Brenda M. Molsbee

Date: 08/17/09

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

LABORATORY CERTIFICATION INFORMATION
Attach Current DOH Analyte Sheet*

Lab Name: THE WATER SPIGOT, INC Florida Certification #: E81105
Address: 5806 E. HWY 22 Certification Expiration Date: 06-30-10
PANAMA CITY, FL 32404 Phone # 850-871-1900
ANALYSIS INFORMATION (to be completed by lab) Date Sample(s) Received: 08/18/09
PWSID: 1190789 Sample Number: 424300
Lab Assigned Report Number or Job ID: 091109-73
System Name: Water Management Services, Inc. Sample Location: Leisure Lane
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
- All 17 - All 30 - All 21 - Trihalomethanes
- Partial - All Except Dioxin - Partial - Haloacetic Acids
X Nitrate - Partial - Bromate
X Nitrite - Dioxin Only Radionuclides - Chlorite
- Asbestos Only - EDB - Single Sample
- Qtrly Composite** Secondaries

Were any analyses subcontracted? YES X NO
If yes, please provide DOH certification numbers:
ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB*

CERTIFICATION

I, Trish Jackson, President

do HEREBY CERTIFY that all attached analytical data are correct and unless otherwise noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).

Signature: [Handwritten Signature] Date: 9-11-09

* Failure to provide a valid and current 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 supply 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)

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 Analyte(s) Unsatisfactory
Other:

Person Notified: Date Notified:

Comments:

Date Reviewed: DEP/DOH Reviewing Official:

Page 4 of REPORT # 091109-73

INORGANIC ANALYSES

62-550.310(1)

(PWS030)

Parameter ID	Name	MCL (mg/l)	Sample Number	Analysis Result (mg/l)	Data Qual	Analysis Time	Analysis Method	Analysis Date	MDL	Lab ID
1005	ARSENIC	0.01	424300							
1010	BARIUM	2	424300							
1015	CADMIUM	0.005	424300							
1020	CHROMIUM	0.1	424300							
1024	CYANIDE	0.2	424300							
1025	FLUORIDE	4	424300							
1030	LEAD	0.015	424300							
1035	MERCURY	0.002	424300							
1036	NICKEL	0.1	424300							
1040	NITRATE	10	424300	0.10U	U	1037cdt	353.2	08/19/09	0.10	E81105
1041	NITRITE	1	424300	0.1U	U	1037cdt	EPA 353.2	08/19/09	0.1	E81105
1045	SELENIUM	0.05	424300							
1052	SODIUM	160	424300							
1074	ANTIMONY	0.006	424300							
1075	BERYLLIUM	0.004	424300							
1085	THALLIUM	0.002	424300							
1094	ASBESTOS	7 MFL	424300							

Temperature, pH, chlorine tests were performed by the Client and not the Laboratory.

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

LABORATORY CERTIFICATION INFORMATION (to be completed by lab - Please type or print legibly)

ATTACH CURRENT DOH ANALYTE SHEET*

Lab Name: _____ Florida Certification #: E

Address: _____ Certification Expiration Date: _____

Phone #: _____

ANALYSIS INFORMATION (to be completed by lab)

Date Sample(s) Received: _____

PWS ID (From Page 1): _____

Sample Number (From Page 1): _____

Lab Assigned Report Number or Job ID: _____

Group(s) Analyzed & Results attached for compliance with Chapter 62-550, F.A.C. (Check all that apply):

Inorganics

- All 17
- Partial
- Nitrate
- Nitrite
- Asbestos Only

Synthetic Organics

- All 30
- All Except Dioxin
- Partial
- Dioxin Only

Volatile Organics

- All 21
- Partial

Radionuclides

- Single Sample
- Qtrly Composite**

Disinfection Byproducts

- Trihalomethanes
- Haloacetic Acids
- Bromate
- Chlorite

Secondaries

- All 14
- Partial

Were any analyses subcontracted? Yes No

If yes, please provide DOH certification numbers: _____

ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB*

CERTIFICATION

I, _____, _____
(Print Name) (Print Title)

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: _____ Date: _____

* 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 & 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) 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: _____

Person Notified: _____ Date Notified: _____

Comments: _____

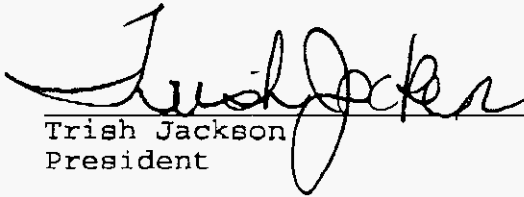
Date Reviewed: _____ DEP/DOH Reviewing Official: _____

CERTIFICATE OF ANALYSIS

REPORT SERIAL NUMBER: 010810-55 Page 1
REPORT DATE: 01/08/10
REPORT TYPE: Original
Water Management Service, Inc.
CLIENT NO. 43
139 West Gulf Beach Dr.
St. George Island, FL 32328-
Attn: Hank Garrett

CONTENTS OF REPORT

CERTIFICATE OF ANALYSIS	4 Pages
CHAIN OF CUSTODY	1 Pages
DEP FORMS	2 Pages
DATA QUALIFIER	1 Pages



Trish Jackson
President

These test results meet all NELAC requirements for those parameters which require accreditation. Any exceptions or deviations from NELAC protocol are noted in this report. Any samples collected by Water Spigot personnel are done according to the latest revision of SOP-001/01. Any questions concerning this report should be directed to the person signing this report at (850) 871-1900, The Water Spigot, Inc., 5806 East Highway 22, Panama City, FL 32404. The test results in this report relate only to those specific samples listed.

A statement of estimated uncertainty of test results is available on request. Analyses performed in the field are not regulated by the NELAC standards.

This report may not be reproduced except in full with written approval from the laboratory.

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

PUBLIC WATER SYSTEM INFORMATION (to be completed by sampler - Please type or print legibly)

System Name: Water Management Services, Inc. PWS I.D. #:

1	1	9	0	7	8	9
---	---	---	---	---	---	---

System Type (check one): Community Nontransient Noncommunity Transient Noncommunity

Address: 139 W. Gulf Beach Dr.

City: St. George Island, State: Fl ZIP Code: 32328

Phone #: 850-927-2648 Fax #: 850-927-3395

E-Mail Address: water2nm@yahoo.com

SAMPLE INFORMATION (to be completed by sampler)

Sample Number: 10092671 & 10092672 & 10092673 & 11093230 Location Code (if known): Leisure Lane

Sample Date: 12/14/09 Sample Time: 5:00 AM PM (Circle One)

Sample Location (be specific): Leisure Lane

* Disinfectant Residual (Required when reporting results for trihalomethanes and haloacetic acids): 2.6 mg/L Field pH: _____

Sample Type (Check Only One)

- Distribution
- Entry Point (to Distribution)
- Plant Tap (not for compliance with 62-550)
- Raw (at well or intake)
- Max Residence Time
- Ave Residence Time
- Near First Customer

Reason(s) for Sample (Check all that apply)

- Routine Compliance (with 62-550)
- Quarterly (Which Quarter? 4th)
- Confirmation of MCL Exceedance*
- Special (not for compliance with 62-550)
- Composite of Multiple Sites**
- Violation Resolution
- Clearance (permitting)
- Replacement (of Invalidated Sample)
- Other: _____

Sampling Procedure Used or Other Comments: _____

*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

Sampler's Name: Brenda M. Molsbee

Sampler's Phone #: 850-927-2648 Sampler's Fax #: 850-927-3395

Sampler's E-Mail Address: water2nm@yahoo.com

CERTIFICATION (to be completed by sampler)

I, Brenda M. Molsbee, Licensed Operator
(Print Name) (Print Title)

do HEREBY CERTIFY that the above public water system and sample collection information is complete and correct.

Signature: Brenda M. Molsbee Date: 12/14/09

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

LABORATORY CERTIFICATION INFORMATION
Attach Current DOH Analyte Sheet*

Lab Name: THE WATER SPIGOT, INC Florida Certification #: E81105
Address: 5806 E. HWY 22 Certification Expiration Date: 06-30-10
PANAMA CITY, FL 32404 Phone # 850-871-1900
ANALYSIS INFORMATION (to be completed by lab) Date Sample(s) Received: 12/15/09
PWSID: 1190789 Sample Number: 435595
Lab Assigned Report Number or Job ID: 010810-55
System Name: Water Management Services, Inc. Sample Location: Leisure Lane
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
All 17 All 30 All 21 X Trihalomethanes
Partial All Except Dioxin Partial X Haloacetic Acids
Nitrate Partial Bromate
Nitrite Dioxin Only Radionuclides Chlorite
Asbestos Only EDB Single Sample
Qtrly Composite** Secondaries
All 14
Partial

Were any analyses subcontracted? YES X NO
If yes, please provide DOH certification numbers:
ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB*

CERTIFICATION

I, Trish Jackson, President

do HEREBY CERTIFY that all attached analytical data are correct and unless otherwise noted meet all requirements of the
National Environmental Laboratory Accreditation Conference (NELAC).

Signature: [Handwritten Signature] Date: 1-11-10

* Failure to provide a valid and current 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 supply 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)

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:

Person Notified: Date Notified:

Comments:

Date Reviewed: DEP/DOH Reviewing Official:

Page 4 of REPORT # 010810-55

Disinfection Byproducts
62-550.310(3)

Contam	Sample	Analysis	Analytical	Analysis	Analysis	DOH Lab					
<u>Id</u>	<u>Contam Name</u>	<u>Number</u>	<u>MCL</u>	<u>Units</u>	<u>Result</u>	<u>Qual.</u>	<u>Method</u>	<u>Lab MDL</u>	<u>Date</u>	<u>Time</u>	<u>Cert. #</u>
2450	Monochloroacetic Acid	435595	N/A	ug/L	0.63	I	EPA 552.2	0.5	01/07/10	1200CDT	EB1105
2451	Dichloroacetic Acid	435595	N/A	ug/L	11		EPA 552.2	0.5	01/07/10	1200CDT	EB1105
2452	Trichloroacetic Acid	435595	N/A	ug/L	11		EPA 552.2	0.5	01/07/10	1200CDT	EB1105
2453	Monobromoacetic Acid	435595	N/A	ug/L	0.50	U	EPA 552.2	0.5	01/07/10	1200CDT	EB1105
2454	Dibromoacetic Acid	435595	N/A	ug/L	2.2	I	EPA 552.2	0.5	01/07/10	1200CDT	EB1105
2456	Total Haloacetic Acids(HAA5)	435595	60	ug/L	24.83		EPA 552.2	0.5	01/07/10	1200CDT	EB1105

Contam	Sample	Analysis	Analytical	Analysis	Analysis	DOH Lab					
<u>Id</u>	<u>Contam Name</u>	<u>Number</u>	<u>MCL</u>	<u>Units</u>	<u>Result</u>	<u>Qual.</u>	<u>Method</u>	<u>Lab MDL</u>	<u>Date</u>	<u>Time</u>	<u>Cert. #</u>
2941	Chloroform	435595	N/A	ug/L	14.6		EPA 502.2	1.0	12/23/09	1300CST	EB1105
2942	Bromoform	435595	N/A	ug/L	1.00		EPA 502.2	1.0	12/23/09	1300CST	EB1105
2943	Bromodichloromethane	435595	N/A	ug/L	6.9		EPA 502.2	1.0	12/23/09	1300CST	EB1105
2944	Dibromochloromethane	435595	N/A	ug/L	2.3	I	EPA 502.2	1.0	12/23/09	1300CST	EB1105
2950	Total Trihalomethanes	435595	80	ug/L	23.8		EPA 502.2	1.0	12/23/09	1300CST	EB1105

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

LABORATORY CERTIFICATION INFORMATION (to be completed by lab - Please type or print legibly)

ATTACH CURRENT DOH ANALYTE SHEET*

Lab Name: _____ Florida Certification #: E
Address: _____ Certification Expiration Date: _____
Phone #: _____

ANALYSIS INFORMATION (to be completed by lab)

Date Sample(s) Received: _____

PWS ID (From Page 1): _____

Sample Number (From Page 1): _____

Lab Assigned Report Number or Job ID: _____

Group(s) Analyzed & Results attached for compliance with Chapter 62-550, F.A.C. (Check all that apply):

Inorganics

- All 17
- Partial
- Nitrate
- Nitrite
- Asbestos Only

Synthetic Organics

- All 30
- All Except Dioxin
- Partial
- Dioxin Only

Volatile Organics

- All 21
- Partial

Radionuclides

- Single Sample
- Qtrly Composite**

Disinfection Byproducts

- Trihalomethanes
- Haloacetic Acids
- Bromate
- Chlorite

Secondaries

- All 14
- Partial

Were any analyses subcontracted? Yes No

If yes, please provide DOH certification numbers: _____
ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB*

CERTIFICATION

I, _____ (Print Name) _____ (Print Title)

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: _____ Date: _____

- * 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 & 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) 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: _____

Person Notified: _____ Date Notified: _____

Comments: _____

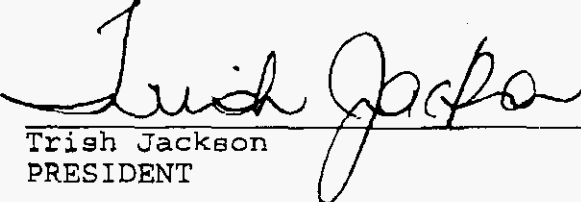
Date Reviewed: _____ DEP/DOH Reviewing Official: _____

CERTIFICATE OF ANALYSIS

REPORT SERIAL NUMBER: 103108-3 Page 1
REPORT DATE: 10/31/08
REPORT TYPE: Original
Water Management Service, Inc.
CLIENT NO. 43
139 West Gulf Beach Dr.
St. George Island, FL 32328-
Attn: Hank Garrett

CONTENTS OF REPORT

CERTIFICATE OF ANALYSIS	8 Pages
CHAIN OF CUSTODY	1 Pages
DEP FORMS	2 Pages
DATA QUALIFIER	1 Pages


Trish Jackson
PRESIDENT

These test results meet all NELAC requirements for those parameters which require accreditation. Any exceptions or deviations from NELAC protocol are noted in this report. Any samples collected by Water Spigot personnel are done according to the latest revision of SOP-001/01. Any questions concerning this report should be directed to the person signing this report at (850) 871-1900, The Water Spigot, Inc., 5806 East Highway 22, Panama City, FL 32404. The test results in this report relate only to those specific samples listed.

A statement of estimated uncertainty of test results is available on request. Analyses performed in the field are not regulated by the NELAC standards.

This report may not be reproduced except in full with written approval from the laboratory.

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

PUBLIC WATER SYSTEM INFORMATION (to be completed by sampler - Please type or print legibly)

System Name: Water Management Services, Inc. PWS I.D. #:

1	1	9	0	7	8	9
---	---	---	---	---	---	---

System Type (check one): Community Nontransient Noncommunity Transient Noncommunity
Address: 139 W. Gulf Beach Dr.

City: St. George Island, State: Fl ZIP Code: 32328
Phone #: 850-927-2648 Fax #: 850-927-3395
E-Mail Address: water2nm@yahoo.com

SAMPLE INFORMATION (to be completed by sampler)

Sample Number: _____ Location Code (if known): Beside Bldg
Sample Date: 9-29-08 Sample Time: 5:15 AM PM (Circle One)
Sample Location (be specific): 139 W. Gulf Beach Dr. Beside Bldg
Disinfectant Residual (Required when reporting results for trihalomethanes and haloacetic acids): _____ mg/L Field pH: _____

Sample Type (Check Only One)

- Distribution
- Entry Point (to Distribution)
- Plant Tap (not for compliance with 62-550)
- Raw (at well or intake)
- Max Residence Time
- Ave Residence Time
- Near First Customer

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)
- Composite of Multiple Sites** Violation Resolution
- Clearance (permitting) Replacement (of Invalidated Sample)
- Other: _____

Sampling Procedure Used or Other Comments: _____

*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.

Sampler's Name: Brenda M. Molsbee
Sampler's Phone #: 850-927-2648 Sampler's Fax #: 850-927-3395
Sampler's E-Mail Address: water2nm@yahoo.com

CERTIFICATION (to be completed by sampler)

I, Brenda M. Molsbee, Operator
(Print Name) (Print Title)

do HEREBY CERTIFY that the above public water system and sample collection information is complete and correct.

Signature: Brenda M. Molsbee Date: 9/29/08

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

LABORATORY CERTIFICATION INFORMATION
Attach Current DOH Analyte Sheet*

Lab Name: THE WATER SPIGOT, INC Florida Certification #: E81105
Address: 5806 E. HWY 22 Certification Expiration Date: 06-30-09
PANAMA CITY, FL 32404 Phone # 850-871-1900

ANALYSIS INFORMATION (to be completed by lab) Date Sample(s) Received: 09/30/08
PWSID: 1190789 Sample Number: 394407

Lab Assigned Report Number or Job ID: 103108-3
System Name: Water Management Services, Inc. Sample Location: 139 W. Gulf Bch
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
X All 17 All 30 X All 21 Trihalomethanes
Partial X All Except Dioxin Partial Haloacetic Acids
Nitrate Partial Bromate
Nitrite Dioxin Only Radionuclides Chlorite
Asbestos Only EDB X Single Sample Qtrly Composite** Secondaries
X All 14

Were any analyses subcontracted? X YES NO Partial
If yes, please provide DOH certification numbers: E83033
ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB*

CERTIFICATION

I, Trish Jackson, President

do HEREBY CERTIFY that all attached analytical data are correct and unless otherwise noted meet all requirements of the
National Environmental Laboratory Accreditation Conference (NELAC).

Signature: [Handwritten Signature] Date: 11-30-08

* Failure to provide a valid and current 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 supply 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)

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:

Person Notified: Date Notified:

Comments:

Date Reviewed: DEP/DOH Reviewing Official:

Page 4 of REPORT # 103108-3

INORGANIC ANALYSES

62-550.310(1)

(PWS030)

Parameter ID	Name	MCL(mg/l)	Sample Number	Analysis Result(mg/l)	Data Qual	Analysis Time	Analysis Method	Analysis Date	MDL	Lab ID
1005	ARSENIC	0.01	394407	0.001U	U	1500CST	EPA 200.9	10/09/08	0.001	E81105
1010	BARIUM	2	394407	0.016		1300CST	200.7	10/06/08	0.001	E81105
1015	CADMIUM	0.005	394407	0.0001U	U	1100CST	EPA 200.9	10/07/08	0.0001	E81105
1020	CHROMIUM	0.1	394407	0.001U	U	1300CST	EPA 200.7	10/06/08	0.001	E81105
1024	CYANIDE	0.2	394407	0.005U	U	1641CST	335.4	10/07/08	0.005	E81105
1025	FLUORIDE	4	394407	0.4	I	1300CST	SM4500F-C	10/23/08	0.1	E81105
1030	LEAD	0.015	394407	0.001U	U	0800CST	EPA 200.9	10/01/08	0.001	E81105
1035	MERCURY	0.002	394407	0.0002U	U	1430CST	EPA 245.1	10/10/08	0.0002	E81105
1036	NICKEL	0.1	394407	0.002U	U	1300CST	200.7	10/06/08	0.002	E81105
1040	NITRATE	10	394407	0.10U	U	1001CDT	353.2	10/01/08	0.10	E81105
1041	NITRITE	1	394407	0.1U	U	1001CDT	EPA 353.2	10/01/08	0.1	E81105
1045	SELENIUM	0.05	394407	0.002U	U	1500CST	EPA 200.9	10/08/08	0.002	E81105
1052	SODIUM	160	394407	12		1100CST	SM 3111 B	10/09/08	1	E81105
1074	ANTIMONY	0.006	394407	0.002U	U	1000CST	EPA 200.9	10/08/08	0.002	E81105
1075	BERYLLIUM	0.004	394407	0.0001U	U	1400CST	EPA 200.9	10/07/08	0.0001	E81105
1085	THALLIUM	0.002	394407	0.001U	U	1300CST	EPA 200.9	10/08/08	0.001	E81105
1094	ASBESTOS	7 MFL	394407							

Page 5 of REPORT # 103108-3

SYNTHETIC ORGANICS
62-550.310(2) (c)
(PWS029)

Parameter ID	Name	MCL ug/l	Sample Number	Analysis Result (ug/l)	Data Qual	Analysis Time	Analysis Method	Analysis Date	MDL (ug/l)	Lab ID
2005	ENDRIN	2	394407	0.0021U	U	2040CST	EPA 508	10/07/08	0.0021	E83079
2010	LINDANE	0.2	394407	0.0021U	U	2040CST	EPA 508	10/07/08	0.0021	E83079
2015	METHOXYCHLOR	40	394407	0.015U	U	2040CST	EPA 508	10/07/08	0.015	E83079
2020	TOXAPHENE	3	394407	0.24U	U	2040CST	EPA 508	10/07/08	0.24	E83079
2031	DALAFON	200	394407	0.60U	U	2040CST	EPA 515.1	10/07/08	0.60	E83079
2032	DIQUAT	20	394407	0.21U	U	2040CST	EPA 549.2	10/07/08	0.21	E83079
2033	ENDOTHALL	100	394407	0.28U	U	2040CST	EPA 548.1	10/07/08	0.28	E83079
2034	OLYPHOSATE	700	394407	0.99U	U	2040CST	EPA 509	10/07/08	0.99	E83079
2035	DI (2-ETHYLHEXYL)ADIPATE	400	394407	0.23U	U	2040CST	EPA 508	10/07/08	0.23	E83079
2036	OXAMYL (VYDATE)	200	394407	0.16U	U	2040CST	EPA 531.1	10/07/08	0.16	E83079
2037	SIMAZINE	4	394407	0.020U	U	2040CST	EPA 507	10/07/08	0.020	E83079
2039	DI (2-ETHYLHEXYL) PHTHALATE	6	394407	0.51U	U	2040CST	EPA 508	10/07/08	0.51	E83079
2040	PICLORAM	500	394407	0.037U	U	2040CST	EPA 515.1	10/07/08	0.037	E83079
2041	DINOSEB	7	394407	0.096U	U	2040CST	EPA 515.1	10/07/08	0.096	E83079
2042	HEXACHLOROCYCLOPENTADIENE	50	394407	0.015U	U	2040CST	EPA 508	10/07/08	0.015	E83079
2046	CARBOFURAN	40	394407	0.13U	U	2040CST	EPA 531.1	10/07/08	0.13	E83079
2050	ATRAZINE	3	394407	0.0073U	U	2040CST	EPA 507	10/07/08	0.0073	E83079
2051	ALACHOR	2	394407	0.030U	U	2040CST	EPA 507	10/07/08	0.030	E83079
2063	2,3,7,8-TCDD (DIOXIN)	.00003	394407	-----		2040CST	EPA 513	10/07/08	----	E83079
2065	HEPTACHLOR	0.1	394407	0.0062U	U	2040CST	EPA 508	10/07/08	0.0062	E83079
2067	HEPTACHLOR EPOXIDE	0.2	394407	0.0010U	U	2040CST	EPA 508	10/07/08	0.0010	E83079
2105	2,4-D	70	394407	0.054U	U	2040CST	EPA 515.1	10/07/08	0.054	E83079
2110	2,4,5-TP (SILVEX)	50	394407	0.038U	U	2040CST	EPA 515.1	10/07/08	0.038	E83079
2274	HEXACHLOROBENZENE	1	394407	0.012U	U	2040CST	EPA 508	10/07/08	0.012	E83079
2306	BENZO (A) PYRENE	0.2	394407	0.037U	U	2040CST	EPA 508	10/07/08	0.037	E83079
2326	PENTACHLOROPHENOL	1	394407	0.0040U	U	2040CST	EPA 515.1	10/07/08	0.0040	E83079
2383	PCB	0.5	394407	0.10U	U	2040CST	EPA 508	10/07/08	0.10	E83079
2911	DIBROMOCHLOROPROPHANE	0.2	394407	0.0041U	U	2040CST	EPA 504.1	10/07/08	0.0041	E83079
2946	ETHYLENE DIBROMIDE	0.02	394407	0.0064U	U	2040CST	EPA 504.1	10/07/08	0.0064	E83079
2959	CHLORDANE	2	394407	0.020U	U	2040CST	EPA 508	10/07/08	0.020	E83079
2946	ETHYLENE DIBROMIDE (EDB)	0.02	394407							

Page 6 of REPORT # 103108-3

VOLATILE ORGANIC ANALYSIS
62-550.310 (2) (b)
(PWS028)

Parameter ID	Name	MCL ug/l	Sample Number	Analysis Result(ug/l)	Data Qual	Analysis Time	Analysis Method	Analysis Date	MDL (ug/l)	Lab ID
2378	1,2,4 TRICHLOROBENZENE	70	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2380	CIS-1,2 DICHLOROETHYLENE	70	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2955	XYLENES (TOTAL)	10,000	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2964	DICHLOROMETHANE	5	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2968	O-DICHLOROBENZENE	600	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2969	PARA-DICHLOROBENZENE	75	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2976	VINYL CHLORIDE	1	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2977	1,1-DICHLOROETHYLENE	7	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2979	TRANS-1,2-DICHLOROETHYLENE	100	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2980	1,2-DICHLOROETHANE	3	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2981	1,1,1-TRICHLOROETHANE	200	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2982	CARBON TETRACHLORIDE	3	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2983	1,2-DICHLOROPROPANE	5	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2984	TRICHLOROETHYLENE	3	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2985	1,1,2-TRICHLOROETHANE	5	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2987	TETRACHLOROETHYLENE	3	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2989	MONOCHLOROBENZENE	100	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2990	BENZENE	1	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2991	TOLUENE	1,000	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2992	ETHYLBENZENE	700	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105
2996	STYRENE	100	394407	0.5U	U	1000CST	EPA 502.2	10/07/08	0.5	E81105

Page 7 of REPORT # 103108-3

RADIOCHEMICAL ANALYSIS

62-550.310(5)

(PWS033)

<u>Parameter</u> <u>ID</u> <u>Name</u>	<u>Sample</u> <u>Number</u>	<u>Analysis</u> <u>Result (pCi/l)</u>	<u>Data</u> <u>Qual</u>	<u>Analysis</u> <u>Time</u>	<u>Analysis</u> <u>Method</u>	<u>Analysis</u> <u>Date</u>	<u>MDL</u>	<u>Lab</u> <u>ID</u>
4000 GROSS ALPHA	394407	2.6+-1.1		1522EST	EPA 900.0	10/08/08	1.5	E83033
4012 PHOTON EMITTERS	394407							
4020 RADIUM-226	394407	1.1+-0.2		1047EST	EPA 903.1	10/16/08	0.1	E83033
4030 RADIUM-228	394407	0.9+-0.6	U	1115EST	B&B Ra-05	10/16/08	0.9	E83033
4101 MAN-MADE BETA	394407							

SECONDARY CHEMICAL ANALYSES
62-550.320
(PWS031)

Parameter ID	Name	MCL(mg/l)	Sample Number	Analysis Result(mg/l)	Analysis Qual	Analysis Time	Analysis Method	Analysis Date	MDL (mg/l)	Lab ID
1002	ALUMINUM	0.2	394407	0.05U	U	1300CST	EPA 200.7	10/06/08	0.05	E81105
1017	CHLORIDE	250	394407	41.7		0900CDT	SM4500CL-E	10/10/08	1.0	E81105
1022	COPPER	1	394407	0.01	I	1415CST	SM 3111 B	10/15/08	0.01	E81105
1025	FLUORIDE	2.0	394407	0.4	I	1300CST	SM4500F-C	10/23/08	0.1	E81105
1026	IRON	0.3	394407	0.052	I	1300CST	200.7	10/06/08	0.040	E81105
1032	MANGANESE	0.05	394407	0.001	I	1300CST	200.7	10/06/08	0.001	E81105
1050	SILVER	0.1	394407	0.004U	U	1414CST	SM3111B	10/17/08	0.004	E81105
1055	SULFATE	250	394407	7.5	I	1100CST	EPA 375.4	10/22/08	3	E81105
1095	ZINC	5	394407	0.004U	U	1300CST	200.7	10/06/08	0.004	E81105
1905	COLOR	15 CU	394407	5U	U	1430CDT	SM2120B	10/01/08	5	E81105
1920	ODOR	3 TON	394407	NO ODOR		1315CDT	SM2150B	10/01/08	0	E81105
1925	pH	6.5 8.5	394407							
1930	TOTAL DISSOLVED SOLIDS	500	394407	317		1000CDT	SM2540C	10/03/08	1	E81105
2905	FOAMING AGENTS	0.5	394407	0.05U	U	1550CST	SM5540C	10/01/08	0.05	E81105

Results in mg/l LAS with a molecular weight of 318.

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

LABORATORY CERTIFICATION INFORMATION (to be completed by lab - Please type or print legibly)

ATTACH CURRENT DOH ANALYTE SHEET*

Lab Name: _____ Florida Certification #: E
 Address: _____ Certification Expiration Date: _____
 Phone #: _____

ANALYSIS INFORMATION (to be completed by lab)

Date Sample(s) Received: _____

PWS ID (From Page 1): _____

Sample Number (From Page 1): _____

Lab Assigned Report Number or Job ID: _____

Group(s) Analyzed & Results attached for compliance with Chapter 62-550, F.A.C. (Check all that apply):

Inorganics

- All 17
- Partial
- Nitrate
- Nitrite
- Asbestos Only

Synthetic Organics

- All 30
- All Except Dioxin
- Partial
- Dioxin Only

Volatile Organics

- All 21
- Partial

Radionuclides

- Single Sample
- Qtrly Composite**

Disinfection Byproducts

- Trihalomethanes
- Haloacetic Acids
- Bromate
- Chlorite

Secondaries

- All 14
- Partial

Were any analyses subcontracted? Yes No

If yes, please provide DOH certification numbers: _____

ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB*

CERTIFICATION

I, _____ (Print Name) _____ (Print Title)

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: _____ Date: _____

* 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 & 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)

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: _____

Person Notified: _____ Date Notified: _____

Comments: _____

Date Reviewed: _____ DEP/DOH Reviewing Official: _____

PLANT OPERATING REPORTS, 2008-9



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

See page 4 for instructions.

I. General Information for the Month/Year of: JANUARY 2008 AMENDED

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648	
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):	

Name	License No.	License Class	Hours per Week
Hank Garrett	A	7102	1 hr per day 6 days per week
Earl Coulter			Trainee
Bobby Garrett			Trainee
Nita Molsbee			

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. ~~I further certify that I will provide these additional operations records to the Department of Environmental Protection upon request.~~

	Hank Garrett	7102
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: JANUARY 2008 AMENDED

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

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

Day of Month	Plant	Volume (gallons)	Free Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Ozone (mg/L)	Combined Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Free Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Ozone (mg/L)	Combined Chlorine (mg/L)	Chlorine Dioxide (mg/L)
X	24	531,000										0.50
X	24	433,000										0.50
X	24	590,000										0.50
X	24	702,000										0.50
X	24	477,000										0.50
X	24	489,000										0.50
X	24	392,000										0.50
X	24	377,000										0.50
X	24	355,000										0.50
X	24	375,000										0.50
X	24	342,000										0.50
X	24	376,000										0.50
X	24	381,000										0.50
X	24	377,000										0.50
X	24	374,000										0.50
X	24	363,000										0.50
X	24	363,000										0.50
X	24	414,000										0.50
X	24	380,000										0.50
X	24	459,000										0.50
X	24	357,000										0.50
X	24	367,000										0.50
X	24	305,000										0.50
X	24	329,000										0.50
X	24	323,000										0.50
X	24	401,000										0.50
X	24	280,000										0.50
X	24	344,000										0.50
X	24	343,000										0.50
X	24	337,000										0.50
	24	341,000										0.50
		12,277,000										
		396,032										
		702,000										

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

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH January 08

1-2-3

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL DAILY PROD	FLUSH	LEAKS
	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD			
BEGIN	114727	88	176521	80	256842	201	381719	162	531		
1	114815	88	176601	80	257045	203	381879	160	531		371 ✓
2	114879	64	1766160	59	257226	181	382008	129	433		304 ✓
3	114972	93	176745	85	257444	218	382202	194	590		396 ✓
4	115086	114	176847	102	257722	278	382410	208	702		494 ✓
5	115158	72	176912	65	257910	188	382562	152	477		325 ✓
6	115236	78	176984	72	258097	187	382714	152	489		337 ✓
7	115314	78	177054	70	258221	124	382834	120	392		272 ✓
8	115316	52	177101	47	258407	186	382926	92	377		285 ✓
9	115424	58	177154	53	258538	131	383039	113	355		242 ✓
10	115473	49	177197	43	258644	106	383216	177	375		198 ✓
11	115565	92	177280	83	258742	98	383285	69	342		273 ✓
12	115626	61	177335	55	258862	120	383425	140	376		236 ✓
13	115699	73	177401	66	258986	124	383543	118	381		263 ✓
14	115761	62	177457	56	259127	141	383661	118	377		259 ✓
15	115826	65	177515	58	259256	129	383783	122	374		252 ✓
16	115887	61	177570	55	259382	126	383904	121	363		242 ✓
17	115948	61	177624	54	259503	121	384031	127	363		236 ✓
18	116024	76	177693	69	259632	129	384171	140	414		274 ✓
19	116084	60	177746	53	259783	151	384287	116	380		264 ✓
20	116160	76	177815	69	259950	167	384434	143	459		312 ✓
21	116228	68	177877	62	260051	101	384560	126	357		231 ✓
22	116299	71	177941	64	260171	120	384692	112	367		255 ✓
23	116344	45	177981	40	260282	111	384781	109	305		196 ✓
24	116403	59	178034	53	260398	116	384882	101	329		228 ✓
25	116462	59	178087	53	260512	114	384979	97	323		226 ✓
26	116532	70	178151	64	260643	131	385115	136	401		265 ✓
27	116580	48	178193	42	260736	93	385212	97	280		183 ✓
28	116641	61	178248	55	260852	116	385324	112	344		232 ✓
29	116699	58	178300	52	260967	115	385442	118	343		225 ✓
30	116759	60	178355	55	261084	117	385547	105	337		232 ✓
31	116818	59	178408	53	261200	116	385660	113	341		228 ✓
TOTALS									12,277,000		

~~396,032~~ average
 396,032, ~~000~~
 average
 702,000 MAX



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

See page 4 for instructions.

I. General Information for the Month/Year of: FEBRUARY 2008 AMENDED

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc. PWS Identification Number: 1190789

PWS Type: Community Non-Transient Non-Community Transient Non-Community Consecutive

Number of Service Connections at End of Month: Total Population Served at End of Month:

PWS Owner: WATER MANAGEMENT SERVICES, INC.

Contact Person: Brenda Molsbee Contact Person's Title: OPERATOR

Contact Person's Mailing Address: 139 W. Gulf Beach Dr. City: St. George Island State: FL Zip Code: 32328

Contact Person's Telephone Number: 850-927-2648 Contact Person's Fax Number: 850-927-3395

Contact Person's E-Mail Address: water2nm@yahoo.com

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC. Plant Telephone Number: 850-927-2648

Plant Address: 139 W. Gulf Beach Dr. City: St. George Island State: FL Zip Code: 32328

Type of Water Treated by Plant: Raw Ground Water Purchased Finished Water


Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000

Plant Category (per subsection 62-699.310(4), F.A.C.): IV Plant Class (per subsection 62-699.310(4), F.A.C.):

Hank Garrett	B	7102	1 hr per day 6 days per week
Earl Coulter			Trainee
Bobby Garrett			Trainee
Nita Molsbee			

II. Certification by Lead/Chief Operator

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


Hank Garrett
7102
 Signature and Date Printed or Typed Name License Number

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: FEBRUARY 2008 AMENDED

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

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

Day	Plant	Volume	Free Chlorine	Chlorine Dioxide	Ozone	Combined Chlorine (Chloramines)	Chlorine Dioxide
X	24	342,000					0.05
X	24	373,000					0.50
X	24	370,000					0.50
X	24	377,000					0.50
X	24	370,000					0.50
X	24	383,000					0.50
X	24	354,000					0.50
X	24	447,000					0.50
X	24	390,000					0.50
X	24	446,000					0.50
X	24	324,000					0.50
X	24	362,000					0.50
X	24	362,000					0.50
X	24	358,000					0.50
X	24	378,000					0.50
X	24	398,000					0.50
X	24	450,000					0.50
X	24	449,000					0.50
X	24	377,000					0.50
X	24	375,000					0.50
X	24	386,000					0.50
X	24	384,000					0.50
X	24	483,000					0.50
X	24	413,000					0.50
X	24	400,000					0.50
X	24	463,000					0.50
X	24	359,000					0.50
X	24	329,000					0.50
X	24	392,000					0.50
X	24						
X	24						
		11,294,000					
		389,448					
		483,000					

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

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH February 08

1-2-3

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL	FLUSH	LEAKS
	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	DAILY PROD		
BEGIN	116818	59	178408	53	2161200	116	3851610	113	341		
1	116878	60	178462	54	2161315	115	385773	113	342		229 ✓
2	116939	61	178518	56	2161434	119	385910	137	373		236 ✓
3	117011	72	178581	63	2161558	124	386021	111	350		259 ✓
4	117068	57	178635	54	2161692	134	386153	132	377		245 ✓
5	117131	63	178692	57	2161811	119	386284	131	370		239 ✓
6	117265	74	178759	67	2161935	124	386402	118	383		265 ✓
7	117265	60	178813	54	2162062	127	386515	113	354		241 ✓
8	117343	78	178879	66	2162253	191	386627	112	447		335 ✓
9	117415	72	178950	71	2162373	120	386754	127	390		263 ✓
10	117490	75	179019	69	2162528	155	386901	147	446		299 ✓
11	117538	48	179061	42	2162648	120	387015	114	324		210 ✓
12	117633	95	179149	88	2162751	103	387091	76	362		286 ✓
13	117681	48	179192	43	2162858	107	387255	164	362		198 ✓
14	117740	59	179246	54	2163014	156	387344	89	358		269 ✓
15	117800	60	179300	54	2163164	150	387458	114	378		264 ✓
16	117864	64	179360	60	2163288	124	387608	150	398		248 ✓
17	117937	73	179425	65	2163476	188	387732	124	450		326 ✓
18	118010	73	179492	67	2163615	139	387902	170	449		279 ✓
19	118078	68	179553	61	2163747	130	388018	116	377		261 ✓
20	118138	60	179607	54	2163892	145	388134	116	375		259 ✓
21	118197	59	179661	54	2164047	155	388252	118	386		268 ✓
22	118265	68	179722	61	2164181	134	388373	121	384		263 ✓
23	118347	82	179797	75	2164349	168	388531	158	483		325 ✓
24	118469	122	179814	17	2164491	142	388663	132	413		281 ✓
25	118635	166	179814	0	2164613	122	388775	112	400		288 ✓
26	118824	189	179814	0	2164659	46	389003	228	463		235 ✓
27	118916	92	179814	0	2164659	0	389270	267	359		92 ✓
28	118991	75	179814	0	2164659	0	389524	254	329		75 ✓
29	118991	0	179814	0	2164659	0	389916	392	392		-0- ✓
30											
31											
	TOTALS										

11,294,000

389,448 ave
483,000 max



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

See page 4 for instructions.

I. General Information for the Month/Year of: MARCH 2008 AMENDED

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648	
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):	
Hank Garrett	B	7102	1 hr per day 6 days per week
Earl Coulter			Trainee
Bobby Garrett			Trainee
Nita Molsbee			Trainee

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. ~~I also certify that I have provided these additional operations records to the Florida Department of Environmental Protection upon request.~~

Signature and Date	Hank Garrett Printed or Typed Name	7102 License Number
--------------------	---------------------------------------	------------------------

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: MARCH 2008 AMENDED

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

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

Days Plant Started This Month	Days in Month	Volume Treated (Gallons)	Volume of Disinfectant Added (Gallons)	Volume of Disinfectant Residual Maintained (Gallons)	Volume of Disinfectant Residual Maintained (mg/L)	Volume of Disinfectant Residual Maintained (ppm)	Volume of Disinfectant Residual Maintained (ppm)	Volume of Disinfectant Residual Maintained (ppm)	Volume of Disinfectant Residual Maintained (ppm)	Volume of Disinfectant Residual Maintained (ppm)	Volume of Disinfectant Residual Maintained (ppm)	Volume of Disinfectant Residual Maintained (ppm)	Volume of Disinfectant Residual Maintained (ppm)	Volume of Disinfectant Residual Maintained (ppm)
X	24	444,000												0.05
X	24	548,000												0.50
X	24	475,000												0.50
X	24	354,000												0.50
X	24	393,000												0.50
X	24	358,000												0.50
X	24	384,000												0.50
X	24	332,000												0.50
X	24	385,000												0.50
X	24	356,000												0.50
X	24	394,000												0.50
X	24	377,000												0.50
X	24	359,000												0.50
X	24	413,000												0.50
X	24	370,000												0.50
X	24	429,000												0.50
X	24	430,000												0.50
X	24	412,000												0.50
X	24	453,000												0.50
X	24	430,000												0.50
X	24	476,000												0.50
X	24	488,000												0.50
X	24	532,000												0.50
X	24	495,000												0.50
X	24	488,000												0.50
X	24	501,000												0.50
X	24	529,000												0.50
X	24	569,000												0.50
X	24	610,000												0.50
X	24	633,000												0.50
X	24	571,000												0.50
		13,988,000												
		451,225												
		633,000												

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

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH March 08

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL	FLUSH	Total 1-2-3 LEAKS
	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	DAILY PROD		
BEGIN	118991	0	179814	0	264659	0	389916	392	392		
1	118991	0	179814	0	264659	0	390320	444	444		0
2	119084	33	179814	0	264659	0	390875	515	548		33
3	119084	0	179814	0	264659	0	391350	475	475		0
4	119075	51	179814	0	264659	0	391653	303	354		51
5	119156	81	179814	0	264767	108	391857	204	393		189
6	119250	94	179846	32	264885	118	391971	114	358		244
7	119320	70	179909	63	265016	131	392091	120	384		264
8	119378	58	179961	52	265124	108	392205	114	332		218
9	119438	60	180015	54	265272	148	392328	123	385		262
10	119499	61	180070	55	265394	122	392446	118	356		238
11	119564	65	180128	58	265521	126	392591	145	394		249
12	119636	72	180194	66	265642	122	392708	117	377		260
13	119700	64	180252	58	265759	117	392828	120	359		239
14	119799	99	180342	90	265816	107	392945	117	413		296
15	119875	76	180410	68	265992	126	393045	100	370		270
16	119939	64	180467	57	266174	182	393171	126	429		303
17	120007	68	180529	62	266311	137	393334	163	430		267
18	120084	77	180601	72	266453	142	393455	121	412		291
19	120157	73	180665	64	266625	172	393599	144	453		309
20	120239	82	180739	74	266764	139	393734	135	430		295
21	120305	66	180799	60	266959	195	393889	155	476		321
22	120391	86	180877	78	267146	187	394026	137	488		351
23	120463	72	180942	65	267365	219	394202	176	532		356
24	120549	86	181021	79	267564	199	394333	131	495		364
25	120634	85	181097	76	267721	157	394503	170	488		318
26	120710	76	181165	68	267904	185	394675	172	501		329
27	120788	78	181238	73	268150	244	394809	134	529		395
28	120885	97	181326	88	268344	194	394999	190	569		379
29	120977	92	181410	84	268539	245	395188	189	610		421
30	121055	78	181481	71	268874	285	395387	199	633		434
31	121153	98	181570	89	269112	238	395533	146	571		425
	TOTALS								13,988,000		

451, 225 ave.
433,000 max



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

See page 4 for instructions.

I. General Information for the Month/Year of: APRIL 2008 AMENDED

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648	
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):	
OPERATORS			
	Hank Garrett	B	7102 1 hr per day 6 days per week
	Earl Coulter		Trainee
	Bobby Garrett		Trainee
	Nita Molsbee		Trainee

II. Certification by Lead/Chief Operator

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

	Hank Garrett	7102
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: APRIL 2008 AMENDED

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

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

Day	Plant	Volume (MGD)	Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Ozone (mg/L)	Combined Chlorine (mg/L)	Free Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Ozone (mg/L)	Combined Chlorine (mg/L)	Free Chlorine (mg/L)
X	24	590,000									0.05
X	24	579,000									0.50
X	24	519,000									0.50
X	24	579,000									0.50
X	24	544,000									0.50
X	24	569,000									0.50
X	24	536,000									0.50
X	24	552,000									0.50
X	24	549,000									0.50
X	24	598,000									0.50
X	24	653,000									0.50
X	24	645,000									0.50
X	24	512,000									0.50
X	24	443,000									0.50
X	24	353,000									0.50
X	24	426,000									0.50
X	24	404,000									0.50
X	24	521,000									0.50
X	24	489,000									0.50
X	24	472,000									0.50
X	24	535,000									0.50
X	24	480,000									0.50
X	24	450,000									0.50
X	24	396,000									0.50
X	24	470,000									0.50
X	24	501,000									0.50
X	24	554,000									0.50
X	24	493,000									0.50
X	24	399,000									0.50
X	24	419,000									0.50
		15,230,000									
		507,666									
		653,000									

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

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH April 2008

Total
1-2-3

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL	FLUSH	LEAKS
	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	DAILY PROD		
BEGIN	121153	98	181570	89	269112	238	395533	146	571		
1	121245	92	181656	86	269339	227	395718	185	590		405 ✓
2	121344	99	181746	90	269541	202	395906	188	579		391 ✓
3	121399	55	181796	50	269834	293	396027	121	519		398 ✓
4	121494	95	181882	86	270072	238	396187	160	579		419 ✓
5	121579	85	181957	75	270266	194	396377	190	544		354 ✓
6	121656	77	182027	70	270499	233	396566	189	569		380 ✓
7	121741	85	182105	78	270499	0	396939	373	536		163 ✓
8	121822	81	182175	70	270503	9	397336	397	552		155 ✓
9	121919	97	182263	88	270503	0	397700	364	549		185 ✓
10	122004	85	182339	76	270503	0	398137	457	598		161 ✓
11	122105	101	182431	92	270503	0	398597	460	653		193 ✓
12	122216	121	182538	107	270503	0	399014	417	645		228 ✓
13	122285	59	182591	53	270611	108	399306	292	512		220 ✓
14	122361	76	182659	68	270788	177	399428	122	443		321 ✓
15	122427	66	182718	59	270900	112	399544	116	353		237 ✓
16	122505	78	182789	71	271027	127	399694	150	426		276 ✓
17	122565	60	182843	54	271202	175	399809	115	404		289 ✓
18	122653	88	182923	80	271394	192	399970	161	521		360 ✓
19	122735	82	182996	73	271567	173	400131	161	489		328 ✓
20	122801	66	183057	61	271785	218	400258	127	472		345 ✓
21	122867	66	183116	59	272016	231	400437	179	535		356 ✓
22	122947	80	183188	72	272206	190	400575	138	480		342 ✓
23	123029	82	183261	73	272340	134	400736	116	450		289 ✓
24	123092	63	183318	57	272491	151	400861	125	396		271 ✓
25	123171	79	183389	71	272652	161	401020	159	470		311 ✓
26	123238	67	183449	60	272760	208	401186	166	501		335 ✓
27	123334	96	183536	87	273087	227	401330	144	554		410 ✓
28	123421	87	183615	79	273248	116	401496	166	493		327 ✓
29	123485	64	183673	58	273406	158	401615	119	399		280 ✓
30	123545	60	183727	54	273556	150	401770	155	419		264 ✓
31											
	TOTALS								15,230,000		

507, 667
653, 000 max



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

See page 4 for instructions.

I. General Information for the Month/Year of: MAY 2008 AMENDED

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc. PWS Identification Number: 1190789

PWS Type: Community Non-Transient Non-Community Transient Non-Community Consecutive

Number of Service Connections at End of Month: _____ Total Population Served at End of Month: _____

PWS Owner: WATER MANAGEMENT SERVICES, INC.

Contact Person: Brenda Molsbee Contact Person's Title: OPERATOR

Contact Person's Mailing Address: 139 W. Gulf Beach Dr. City: St. George Island State: FL Zip Code: 32328

Contact Person's Telephone Number: 850-927-2648 Contact Person's Fax Number: 850-927-3395

Contact Person's E-Mail Address: water2nm@yahoo.com

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC. Plant Telephone Number: 850-927-2648

Plant Address: 139 W. Gulf Beach Dr. City: St. George Island State: FL Zip Code: 32328

Type of Water Treated by Plant: Raw Ground Water Purchased Finished Water

Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000

Plant Category (per subsection 62-699.310(4), F.A.C.): IV Plant Class (per subsection 62-699.310(4), F.A.C.):

Name	License No.	City	State	Shift
Brenda M. Molsbee	C	15121		1 shift per day x 5/1 hr weekend
Earl Coulter				Trainee
Bobby Garrett				Trainee
Reed Brown				Trainee

II. Certification by Lead/Chief Operator

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

Brenda M. Molsbee 4-21-10 Brenda M. Molsbee 15121
 Signature and Date Printed or Typed Name License Number

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: MAY 2008 AMENDED

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

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

Day of Month	Plant Status	Volume (Gallons)	Free Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Ozone (mg/L)	Combined Chlorine (mg/L)	Chlorine Dioxide (mg/L)
X	24	444,000					1.00
X	24	489,000					0.60
	24	511,000					1.00
X	24	610,000					1.00
X	24	618,000					1.40
X	24	560,000					0.8
X	24	500,000					1.00
X	24	524,000					1.00
X	24	608,000					0.50
X	24	555,000					0.40
X	24	632,000					0.40
X	24	547,000					0.30
X	24	558,000					0.20
X	24	582,000					0.3
X	24	581,000					2.60
X	24	607,000					1.40
X	24	590,000					1.50
X	24	729,000					1.40
X	24	573,000					1.30
X	24	730,000					1.0
X	24	672,000					1.00
X	24	631,000					0.70
X	24	569,000					1.60
X	24	673,000					0.60
X	24	836,000					0.40
X	24	814,000					0.30
X	24	790,000					0.60
X	24	717,000					1.00
X	24	694,000					0.80
X	24	660,000					1.00
X	24	679,000					0.8
		19,283,000					
		622,032					
		836,000					

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

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH May 08

	READINGS		READINGS		READINGS		READINGS		TOTAL		
DATE	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	DAILY PROD	FLUSH	LEAKS
BEGIN	123545	60	183727	54	273556	150	401770	155	419		
1	123626	81	183800	73	273718	162	401898	128	444	✓	316
2	123705	79	183872	72	273893	175	402061	163	489	✓	326
3	123775	70	183935	63	274113	220	402219	158	511	✓	353
4	123876	101	184027	92	274369	256	402380	161	610	✓	449
5	123977	101	184119	92	274604	235	402570	190	618	✓	428
6	124071	94	184204	85	274798	194	402757	187	560	✓	373
7	124126	55	184254	50	275068	270	402882	125	500	✓	375
8	124238	112	184356	102	275242	174	403018	136	524	✓	388
9	124317	79	184428	72	275389	147	403328	310	608	✓	298
10	124570	253	184428	0	275578	189	403441	113	555	✓	442
11	124869	299	184428	0	275752	174	403600	159	632	✓	473
12	125114	245	184428	0	275945	193	403709	109	547	✓	438
13	125402	292	184428	0	276076	131	403841	135	558	✓	423
14	125636	230	184428	0	276271	195	404001	157	582	✓	423
15	125793	157	184490	62	276496	225	404138	137	581	✓	444
16	125892	99	184578	88	276703	207	404351	213	607	✓	394
17	125992	100	184668	90	276863	160	404591	240	590	✓	350
18	126080	88	184745	77	276863	0	405155	564	729	✓	165
19	126187	107	184841	96	276863	0	405525	370	573	✓	203
20	126228	91	184880	39	276863	0	405875	650	730	✓	80
21	126305	77	184947	67	277090	227	406476	301	672	✓	371
22	126405	100	185039	92	277308	218	406697	221	631	✓	410
23	126485	80	185107	68	277518	211	406907	210	569	✓	359
24	126774	889	185107	0	277725	206	407055	178	673	✓	495
25	127081	307	185107	0	278107	382	407222	147	836	✓	689
26	127405	324	185107	0	278437	330	407392	160	814	✓	654
27	127726	321	185107	0	278730	293	407568	176	790	✓	614
28	128052	326	185107	0	278997	267	407692	124	717	✓	593
29	128324	272	185107	0	279248	251	407863	171	694	✓	523
30	128654	330	185107	0	279424	176	408017	154	660	✓	506
31	128951	297	185107	0	279661	237	408162	145	679	✓	534
	TOTALS								19,283,000		

622,000 ave.
836,000 max



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

See page 4 for instructions.

I. General Information for the Month/Year of: JUNE 2008

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648	
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):	

Licensed Operator	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator	Brenda M. Molsbee	C	15121	1 shift per day x 5/1 hr weekend
Other Operators	Earl Coulter			Trainee
	Bobby Garrett			Trainee
	Reed Brown			Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
--------------------	--	-------------------------

7-10-08



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

See page 4 for instructions.

I. General Information for the Month/Year of: JUNE 2008 AMENDED

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648	
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):	
	Brenda M. Molsbee	C	15121
	Earl Coulter		Trainee
	Bobby Garrett		Trainee
	Reed Brown		Trainee

II. Certification by Lead/Chief Operator

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

4-21-10	Brenda M. Molsbee	15121
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: JUNE 2008 AMENDED

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

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

Days in Month	Days in Year	Operator	Plant Flow (mgd)	Free Chlorine (mg/L)	Chlorine Dioxide (mg/L)	Ozone (mg/L)	Combined Chlorine (mg/L)	Chlorine Dioxide (mg/L)
X	24		765,000					0.60
X	24		763,000					0.90
X	24		880,000					0.60
X	24		844,000					0.40
X	24		800,000					0.50
X	24		778,000					1.00
X	24		762,000					0.40
X	24		837,000					0.20
X	24		799,000					0.40
X	24		865,000					0.40
X	24		880,000					0.20
X	24		831,000					0.40
X	24		907,000					0.20
X	24		843,000					0.40
X	24		944,000					0.40
X	24		841,000					0.40
X	24		840,000					0.20
X	24		831,000					0.40
X	24		807,000					0.40
X	24		878,000					0.40
X	24		940,000					0.20
X	24		874,000					0.20
X	24		820,000					0.40
X	24		832,000					1.40
X	24		892,000					0.60
X	24		876,000					0.40
X	24		964,000					0.50
X	24		978,000					0.50
X	24		843,000					0.20
X	24		874,000					0.40
			25,588,000					
			852,933					
			978,000					

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

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH June 08

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL	FLUSH	LEAKS
	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	DAILY PROD		
BEGIN	128951	247	185107	0	279161	237	408162	145	679		
1	129307	356	185107	0	279930	269	408302	140	765	✓	625
2	129632	325	185107	0	280223	293	408447	145	763	✓	618
3	129958	326	185107	0	280656	433	408568	121	880	✓	759
4	130368	410	185107	0	280812	156	408846	278	844	✓	566
5	130591	223	185107	0	281262	450	408973	127	800	✓	673
6	130928	237	185107	0	281570	308	409106	133	778	✓	645
7	131271	343	185107	0	281812	242	409283	177	762	✓	585
8	131586	315	185107	0	282174	362	409443	110	837	✓	677
9	131875	289	185107	0	282432	308	409645	202	799	✓	597
10	132218	343	185107	0	282837	355	409812	167	865	✓	698
11	132559	341	185107	0	283222	385	409966	154	880	✓	726
12	132832	273	185107	0	283512	290	410234	268	831	✓	563
13	133148	316	185107	0	283937	425	410400	166	907	✓	741
14	133381	233	185107	0	284460	523	410487	87	843	✓	756
15	133734	353	185107	0	284788	328	410750	263	944	✓	681
16	134017	283	185107	0	285171	383	410925	175	841	✓	666
17	134381	364	185107	0	285516	345	411056	131	840	✓	709
18	134628	247	185107	0	285795	279	411361	305	831	✓	526
19	134991	363	185107	0	286149	354	411451	90	807	✓	717
20	135304	313	185107	0	286438	289	411727	276	878	✓	602
21	135611	307	185107	0	286897	459	411901	174	940	✓	766
22	135772	161	185220	113	287328	431	412070	169	774	✓	705
23	135876	109	185316	96	287729	401	412289	219	820	✓	601
24	136000	124	185430	114	288125	396	412487	198	832	✓	634
25	136126	126	185547	117	288562	437	412699	212	892	✓	680
26	136246	120	185657	110	288999	433	412912	213	876	✓	663
27	136374	128	185773	116	289497	502	413130	218	964	✓	746
28	136494	120	185884	111	289871	374	413503	373	978	✓	605
29	136591	97	185973	89	290361	490	413670	167	843	✓	676
30	136685	94	186057	84	290767	401	413965	295	874	✓	579
31											
	TOTALS								25,588,000		

852,933 avg
978,000 max.
Ⓜ



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

See page 4 for instructions.

I. General Information for the Month/Year of: JULY 2008

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648	
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):	

Licensed Operators	Name	License Class	License Number	Day(s) Shift(s) Worked
Lead/Chief Operator:	Brenda M. Molsbee	C	15121	1 shift per day x 5/1 hr weekend
Other Operators:	Earl Coulter			Trainee
	Bobby Garrett			Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
--------------------	--	-------------------------

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: JULY 2008

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24	854,000											0.40	
2	X	24	944,000											0.60	
3	X	24	917,000											0.80	
4	X	24	963,000											0.80	
5	X	24	1,060,000											1.10	
6	X	24	1,059,000											0.03	
7	X	24	872,000											0.40	
8	X	24	826,000											0.60	
9	X	24	878,000											0.60	
10	X	24	861,000											0.80	
11	X	24	901,000											0.60	
12	X	24	932,000											0.60	
13	X	24	806,000											0.40	
14	X	24	748,000											0.80	
15	X	24	738,000											0.80	
16	X	24	780,000											0.60	
17	X	24	837,000											1.00	
18	X	24	863,000											0.80	
19	X	24	889,000											0.30	
20	X	24	870,000											0.20	
21	X	24	800,000											0.20	
22	X	24	844,000											0.20	
23	X	24	853,000											0.20	
24	X	24	864,000											0.20	
25	X	24	869,000											0.40	
26	X	24	862,000											0.20	
27	X	24	845,000											0.50	
28	X	24	764,000											0.40	
29	X	24	771,000											0.20	
30	X	24	798,000											0.20	
31	X	24	775,000											0.20	
Total			26,643,000												
Average			859,451												
Maximum			1,060,000												

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

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH July 08

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL	FLUSH	LEAKS
	WELL #1	#1 PROD	WELL #2	#2 PROD	WELL #3	#3 PROD	WELL #4	#4 PROD	DAILY PROD		
BEGIN	136685	94	186057	84	290762	401	413965	295	874		
1	136804	119	186170	113	291204	442	414145	180	854	✓	674
2	136908	104	186266	96	291550	346	414543	398	944	✓	546
3	136994	86	186345	79	291974	424	414871	328	917	✓	589
4	137120	126	186462	117	292433	459	415132	261	963	✓	702
5	137273	153	186604	142	292822	389	415508	376	1060	✓	684
6	137371	98	186693	89	293183	361	416019	511	1059	✓	548
7	137454	83	186769	76	293588	405	416327	308	872	✓	564
8	137541	87	186849	80	294059	471	416515	188	826	✓	638
9	137753	212	187046	197	294379	320	416664	149	878	✓	729
10	137876	123	187159	113	294768	389	416900	236	861	✓	625
11	137963	87	187239	80	295140	372	417262	362	901	✓	539
12	138067	104	187333	94	295513	373	417623	361	932	✓	571
13	138155	88	187416	83	295903	390	417868	245	806	✓	561
14	138266	111	187516	106	296282	379	418026	158	748	✓	590
15	138406	140	187646	130	296607	325	418169	143	738	✓	595
16	138515	109	187746	100	296979	372	418368	199	780	✓	581
17	138616	101	187838	92	297381	402	418610	242	837	✓	595
18	138734	118	187946	108	297708	327	418920	310	863	✓	553
19	138855	121	188047	101	298134	426	419161	241	889	✓	648
20	138961	106	188154	107	298620	486	419332	171	870	✓	699
21	139060	99	188246	92	299085	465	419476	144	800	✓	656
22	139173	113	188349	103	299477	392	419712	236	844	✓	608
23	139287	114	188455	106	299883	406	419939	227	853	✓	626
24	139418	131	188566	111	300263	380	420181	242	864	✓	622
25	139543	125	188681	115	300708	445	420365	184	869	✓	685
26	139652	109	188781	106	301159	451	420567	202	862	✓	660
27	139754	102	188875	94	301505	346	420870	303	845	✓	542
28	139847	93	188960	85	301887	382	421074	204	764	✓	560
29	139953	106	189055	95	302284	397	421247	173	771	✓	598
30	140049	96	189144	89	302751	467	421393	146	798	✓	652
31	140176	127	189262	118	303074	323	421600	207	775	✓	568
	TOTALS										

26,643,000
859,452 acc
1,060,000 max



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

See page 4 for instructions.

I. General Information for the Month/Year of: AUGUST 2008

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648		
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328	
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):		
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Brenda M. Molsbee	C	15121	1 shift per day x 5/1 hr weekend
Other Operators:	Earl Coulter			Trainee
	Bobby Garrett			Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
--------------------	--	-------------------------

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: **AUGUST 2008**

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				Peak Flow Rate, gpd	CT Calculations			UV Dose				Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
					Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		Minimum UV Dose Required, mW-sec/cm ²		
1	X	24	761,000										0.20		
2	X	24	799,000										0.20		
3	X	24	738,000										0.20		
4	X	24	671,000										0.20		
5	X	24	707,000										0.04		
6	X	24	765,000										0.20		
7	X	24	734,000										0.40		
8	X	24	784,000										0.20		
9	X	24	804,000										0.20		
10	X	24	824,000										0.20		
11	X	24	820,000										0.20		
12	X	24	785,000										0.20		
13	X	24	674,000										0.20		
14	X	24	574,000										0.20		
15	X	24	522,000										0.20		
16	X	24	676,000										0.40		
17	X	24	593,000										0.20		
18	X	24	576,000										0.80		
19	X	24	545,000										0.30		
20	X	24	536,000										0.20		
21	X	24	525,000										0.30		
22	X	24	551,000										0.20		
23	X	24	461,000										0.40		
24	X	24	438,000										0.20		
25	X	24	473,000										0.20		
26	X	24	484,000										0.20		
27	X	24	472,000										0.20		
28	X	24	446,000										0.20		
29	X	24	486,000										0.20		
30	X	24	608,000										0.40		
31	X	24	658,000										0.20		
Total			19,490,000												
Average			628,709												
Maximum			824,000												

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

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH Aug. 08

67 we changed dial on #2 on 7-31-08
↓

	READINGS		READINGS		READINGS		READINGS		TOTAL		
DATE	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	DAILY PROD	FLUSH	LEAKS
BEGIN	140176	127	189262	118	303074	323	421600	207	775		1+2+3
1	140272	96	189283 ⁶⁷	88	303472	398	421779	179	7161	✓	582
2	140378	106	1165	98	303891	419	421955	176	799	✓	623
3	140481	103	259	94	304221	330	422166	211	738	✓	527
4	140585	104	355	96	304494	273	422364	198	671	✓	473
5	140658	73	421	66	304928	434	422498	134	707	✓	573
6	140738	80	494	73	305177	249	422861	363	765	✓	402
7	140834	96	582	88	305574	397	423014	153	734	✓	581
8	141001	167	735	153	305832	258	423220	206	784	✓	578
9	141096	95	822	87	306317	485	423357	137	804	✓	667
10	141205	109	923	101	306746	429	423542	185	824	✓	639
11	141309	104	1018	95	307207	461	423702	160	820	✓	660
12	141414	105	1115	97	307583	376	423909	207	785	✓	578
13	141504	90	1197	82	307954	371	424040	131	674	✓	543
14	141583	79	1268	71	308111	157	424307	267	574	✓	307
15	141664	81	1342	74	308313	202	424472	165	522	✓	357
16	141768	104	1437	95	308597	284	424665	193	676	✓	483
17	141865	97	1524	87	308837	240	424834	169	593	✓	424
18	141963	98	1614	90	309050	213	425009	175	576	✓	401
19	142053	90	1695	81	309258	208	425175	166	545	✓	379
20	142151	98	1785	90	309457	199	425324	149	536	✓	387
21	142235	84	1861	76	309651	194	425495	171	525	✓	354
22	142309	74	1927	66	309891	240	425666	171	551	✓	380
23	142385	76	1997	70	310053	162	425819	153	461	✓	308
24	142460	75	2064	67	310200	147	425968	149	438	✓	289
25	142536	76	2131	67	310370	170	426128	160	473	✓	313
26	142616	80	2203	72	310549	179	426281	153	484	✓	331
27	142677	61	2261	58	310622	73	426561	280	472	✓	192
28	142749	72	2324	63	310761	139	426733	172	446	✓	274
29	142826	77	2396	72	310953	192	426878	145	486	✓	341
30	142926	100	2488	92	311217	264	427030	152	608	✓	456
31	143023	97	2567	79	311523	306	427205	176	658	✓	482
TOTALS											

19,490,000
628,709.68 ave
824,080 mqr



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

See page 4 for instructions.

I. General Information for the Month/Year of: SEPTEMBER 2008

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648	
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):	

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator	Brenda M. Molsbee	C	15121	1 shift per day x 5/1 hr weekend
Other Operators	Earl Coulter			Trainee
	Bobby Garrett			Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
--------------------	--	-------------------------

10-21-08

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: SEPTEMBER 2008

Means of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe):

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²			
1	X	24	684,000											0.40	
2	X	24	589,000											0.40	
3	X	24	581,000											0.20	
4	X	24	544,000											0.20	
5	X	24	588,000											0.30	
6	X	24	599,000											0.20	
7	X	24	575,000											0.20	
8	X	24	553,000											0.30	
9	X	24	577,000											0.20	
10	X	24	619,000											0.40	
11	X	24	659,000											0.20	
12	X	24	566,000											0.20	
13	X	24	624,000											0.20	
14	X	24	683,000											0.40	
15	X	24	594,000											0.20	
16	X	24	608,000											0.40	
17	X	24	611,000											0.20	
18	X	24	571,000											0.40	
19	X	24	545,000											0.20	
20	X	24	659,000											0.20	
21	X	24	593,000											0.20	
22	X	24	494,000											0.40	
23	X	24	491,000											0.20	
24	X	24	448,000											0.40	
25	X	24	455,000											0.40	
26	X	24	480,000											0.50	
27	X	24	534,000											0.20	
28	X	24	582,000											0.20	
29	X	24	536,000											0.20	
30	X	24	498,000											0.20	
31															
Total			17,140,000												
Average			571,333												
Maximum			684,000												

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

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH Sept 08

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL	FLUSH	LEAKS
	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	DAILY PROD		
BEGIN	143023	97	2567	79	311523	3016	427206	176	658		
1	143112	93	2661	94	311816	343	427312	154	684	✓	530
2	143211	95	2747	816	312109	243	427525	165	589	✓	424
3	143298	87	2827	80	312346	237	427702	177	581	✓	404
4	143378	80	2898	71	312573	227	427868	166	544	✓	378
5	143468	90	2980	82	312802	229	428055	187	588	✓	401
6	143558	90	3063	83	313057	255	428226	171	599	✓	428
7	143646	88	3142	79	313296	239	428395	169	575	✓	406
8	143729	83	3218	76	313521	225	428564	169	553	✓	384
9	143811	82	3294	76	313817	296	428687	123	577	✓	454
10	143892	81	3367	73	314097	280	428872	185	619	✓	434
11	144033	141	3495	128	314319	222	429040	168	659	✓	491
12	144121	88	3575	80	314569	250	429188	148	566	✓	418
13	144229	106	3674	99	314773	204	429401	213	624	✓	411
14	144338	109	3773	99	315051	278	429598	197	683	✓	486
15	144437	99	3863	90	315307	256	429747	149	594	✓	445
16	144531	94	3949	86	315486	179	429996	249	608	✓	359
17	144743	212	4144	195	315658	172	430028	32	611	✓	579
18	144945	202	4328	184	315843	185	430028	0	571	✓	571
19	145135	190	4503	175	316023	180	430028	0	545	✓	545
20	145371	236	4718	215	316231	208	430028	0	659	✓	659
21	145601	230	4930	212	316382	151	430028	0	593	✓	593
22	145785	184	5098	168	316524	142	430028	0	494	✓	494
23	145963	178	5262	164	316673	149	430028	0	491	✓	491
24	146123	160	5409	147	316814	171	430028	0	448	✓	448
25	146287	164	5558	149	316956	142	430028	0	455	✓	455
26	146474	187	5730	172	317077	121	430028	0	480	✓	480
27	146600	126	5845	115	317249	172	430149	121	534	✓	413
28	146675	75	5913	68	317491	242	430342	197	582	✓	385
29	146758	83	5987	74	317688	197	430528	182	536	✓	354
30	146836	78	6060	73	317896	208	430667	139	498	✓	359
31											
	TOTALS										

17,140,000
571,300 ave
684,000 max



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

See page 4 for instructions.

I. General Information for the Month/Year of: OCTOBER 2008

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648		
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328	
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):		
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator	Brenda M. Molsbee	C	15121	1 shift per day x 5/1 hr weekend
Other Operators	Earl Coulter			Trainee
	Bobby Garrett			Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
11-4-08		

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: **OCTOBER 2008**

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

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

Day of the Month	Dnys Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24	478,000											0.20		
2	X	24	526,000											0.20		
3	X	24	572,000											0.20		
4	X	24	598,000											0.20		
5	X	24	630,000											0.20		
6	X	24	571,000											0.40		
7	X	24	573,000											0.50		
8	X	24	579,000											0.40		
9	X	24	544,000											0.20		
10	X	24	542,000											0.20		
11	X	24	611,000											0.40		
12	X	24	594,000											0.20		
13	X	24	591,000											0.20		
14	X	24	573,000											0.20		
15	X	24	557,000											0.20		
16	X	24	556,000											0.20		
17	X	24	574,000											0.20		
18	X	24	686,000											0.20		
19	X	24	538,000											0.40		
20	X	24	524,000											0.20		
21	X	24	488,000											0.40		
22	X	24	507,000											0.20		
23	X	24	493,000											0.20		
24	X	24	464,000											0.40		
25	X	24	502,000											0.20		
26	X	24	516,000											0.40		
27	X	24	453,000											0.40		
28	X	24	415,000											0.20		
29	X	24	444,000											0.40		
30	X	24	434,000											0.30		
31	X	24	468,000											0.4		
Total			16,601,000													
Average			535,516													
Maximum			686,000													

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

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH Jan 09

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL		
	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	DAILY PROD	1-2-3 FLUSH	LEAKS
BEGIN	153851	87	12358	78	333942	192	443870	165	522		
1	153939	88	12438	80	334139	197	444045	175	540	363	✓
2	154038	89	12513	80	334336	197	444212	167	533	366	✓
3	154123	95	12605	87	334542	206	444333	171	559	388	✓
4	154204	81	12678	73	334704	162	444561	178	494	366	✓
5	154275	71	12741	63	334858	154	444695	134	422	288	✓
6	154357	82	12814	73	335005	147	444802	107	409	302	✓
7	154414	62	12871	57	335122	117	444919	117	353	236	✓
8	154447	78	12917	46	335255	133	445044	125	382	257	✓
9	154521	64	12975	43	335382	127	445187	143	392	244	✓
10	154603	72	13039	64	335540	158	445284	97	391	244	✓
11	154704	71	13102	63	335671	131	445431	147	412	265	✓
12	154776	72	13168	66	335807	136	445548	117	391	274	✓
13	154858	82	13243	75	335923	116	445656	108	381	273	✓
14	154908	50	13288	45	336056	132	445783	127	354	227	✓
15	154976	68	13346	58	336178	123	445920	137	386	249	✓
16	155054	78	13420	74	336354	176	446015	155	483	328	✓
17	155154	100	13510	90	336607	253	446267	192	635	443	✓
18	155246	92	13593	83	336826	219	446427	160	554	394	✓
19	155335	77	13666	73	337022	196	446557	130	478	348	✓
20	155398	73	13730	64	337155	133	446714	157	427	270	✓
21	155484	86	13809	79	337343	193	446836	172	530	358	✓
22	155564	80	13880	71	337528	180	447039	153	484	331	✓
23	155628	64	13939	59	337690	162	447171	132	417	285	✓
24	155705	77	14008	69	337941	251	447299	128	525	397	✓
25	155792	87	14085	77	338153	212	447464	166	542	376	✓
26	155863	71	14148	63	338353	200	447629	160	494	334	✓
27	155938	75	14218	70	338518	165	447751	126	436	310	✓
28	156021	83	14292	74	338672	154	447904	153	464	311	✓
29	156083	62	14349	57	338813	141	448049	145	405	260	✓
30	156160	77	14418	69	338964	151	448170	121	418	297	✓
31	156239	79	14490	72	339128	164	448324	154	469	315	✓
TOTALS											

14,160,000

456,774 Ave

~~559,000~~

12 K ARR MAN



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

See page 4 for instructions.

I. General Information for the Month/Year of: FEBRUARY 2009

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648		
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328	
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):		
Licensed Operators:	Name	License Class	License Number	Days/Shift(s) Worked
Lead/Chief Operator:	Brenda M. Molsbee	C	15121	1 shift per day x 5/1 hr weekend
Other Operators:	Earl Coulter			Trainee
	Bobby Garrett			Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
--------------------	--	-------------------------

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: FEBRUARY 2009

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				Peak Flow Rate, gpd	CT Calculations				UV Dose						
					Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²			
1	X	24	510,000											1.40	
2	X	24	504,000											1.00	
3	X	24	492,000											1.00	
4	X	24	508,000											2.10	
5	X	24	664,000											1.40	
6	X	24	675,000											2.30	
7	X	24	557,000											1.50	
8	X	24	545,000											0.60	
9	X	24	585,000											1.20	
10	X	24	539,000											0.80	
11	X	24	545,000											1.00	
12	X	24	567,000											0.60	
13	X	24	608,000											0.40	
14	X	24	519,000											0.40	
15	X	24	470,000											0.20	
16	X	24	412,000											0.20	
17	X	24	422,000											0.80	
18	X	24	376,000											1.60	
19	X	24	377,000											2.40	
20	X	24	385,000											2.20	
21	X	24	401,000											2.00	
22	X	24	393,000											1.50	
23	X	24	398,000											1.20	
24	X	24	356,000											1.00	
25	X	24	397,000											0.80	
26	X	24	391,000											2.00	
27	X	24	392,000											2.00	
28	X	24	378,000												
29	X														
30	X														
31	X														
Total			13,366,000												
Average			477,357												
Maximum			675,000												

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

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * FEBRUARY 2009

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? No Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, % [†] =
---------------------	------------------------------------

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, % [†] =
---------------------	---

C. Is any iron or manganese sequestrant used at the water treatment plant? No Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):

Sequestrant Dose, mg/L of phosphate as PO₄ or mg/L of silicate as SiO₂ =

If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO₂ =

* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

[†] Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH Feb 09

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL	1-2-3	LEAKS
	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	DAILY PROD		
BEGIN	156239	79	14490	72	339128	164	448324	154	4169		
1	156324	85	14566	76	339313	185	448488	164	510	346	✓
2	156408	84	14642	76	339491	178	448654	166	504	338	✓
3	156497	79	14712	70	339670	185	448812	158	492	334	✓
4	156554	67	14774	62	339887	211	448980	168	508	340	✓
5	156656	102	14864	90	340150	263	449189	209	664	455	✓
6	156758	102	14997	93	340438	288	449381	192	675	483	✓
7	156846	88	15039	82	340657	219	449549	168	557	389	✓
8	156933	87	15118	79	340899	242	449686	137	545	408	✓
9	157025	92	15202	84	341129	230	449869	179	585	406	✓
10	157089	64	15258	56	341349	270	450014	149	539	390	✓
11	157147	59	15310	52	341526	127	450322	308	545	237	✓
12	157214	67	15372	62	341679	153	450607	285	567	282	✓
13	157359	145	15505	133	341871	192	450745	138	608	470	✓
14	157462	103	15596	88	342067	197	450873	128	519	391	✓
15	157534	72	15662	66	342237	179	451026	153	470	317	✓
16	157613	79	15734	72	342390	143	451144	118	412	294	✓
17	157675	62	15790	56	342568	178	451270	126	422	296	✓
18	157737	62	15845	55	342699	131	451398	128	376	248	✓
19	157801	64	15902	57	342823	124	451530	132	377	245	✓
20	157873	72	15967	65	342954	131	451647	117	385	268	✓
21	157933	60	16021	54	343121	167	451767	120	401	281	✓
22	157997	64	16079	58	343244	123	451915	148	393	245	✓
23	158072	75	16146	67	343386	142	452029	114	398	284	✓
24	158132	60	16200	54	343513	127	452144	115	356	241	✓
25	158196	64	16258	58	343669	156	452263	119	397	278	✓
26	158261	65	16315	57	343795	126	452406	143	391	248	✓
27	158338	77	16383	68	343926	131	452522	116	392	276	✓
28	158400	62	16440	57	344066	140	452641	119	378	259	✓
29											
30											
31											
										13, 3160, 000	
										477, 357	ave
										1675, 000	max
	TOTALS	2,161		1950		4938		4317			



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

See page 4 for instructions.

I. General Information for the Month/Year of: MARCH 2009

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648		
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328	
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):		
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Brenda M. Molsbee	C	0015121	1 shift per day x 5/1 hr weekend
Other Operators:	Earl Coulter			Trainee
	Bobby Garrett			Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
--------------------	--	-------------------------

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: MARCH 2009

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place 'X')	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²			
1	X	24	432,000											2.50	
2	X	24	356,000											2.50	
3	X	24	342,000											2.00	
4	X	24	362,000											1.20	
5	X	24	370,000											1.00	
6	X	24	384,000											0.80	
7	X	24	506,000											0.80	
8	X	24	533,000											0.80	
9	X	24	471,000											3.00	
10	X	24	428,000											3.00	
11	X	24	410,000											2.80	
12	X	24	410,000											2.60	
13	X	24	392,000											2.50	
14	X	24	446,000											2.00	
15	X	24	494,000											1.60	
16	X	24	447,000											1.50	
17	X	24	468,000											1.20	
18	X	24	486,000											1.60	
19	X	24	508,000											0.80	
20	X	24	480,000											1.00	
21	X	24	481,000											0.80	
22	X	24	545,000											0.70	Cleaned ground storage tank.
23	X	24	473,000											2.00	
24	X	24	548,000											1.50	
25	X	24	458,000											1.20	
26	X	24	441,000											1.00	
27	X	24	442,000											0.60	
28	X	24	447,000											1.00	
29	X	24	457,000											2.00	
30	X	24	462,000											1.50	
31	X	24	506,000											1.50	
Total			13,985,000												
Average			451,129												
Maximum			548,000												

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

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

PWS Identification Number: 1190789	Plant Name: WATER MANAGEMENT SERVICES, INC.
------------------------------------	---

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * MARCH 2009

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? No Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, % [†] =
---------------------	------------------------------------

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, % [†] =
---------------------	---

C. Is any iron or manganese sequestrant used at the water treatment plant? No Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):

Sequestrant Dose, mg/L of phosphate as PO ₄ or mg/L of silicate as SiO ₂ =
--

If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO ₂ =
--

* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

† Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH Oct - 08

Tot.
1-2-3

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL	FLUSH	LEAKS
	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	DAILY PROD		
BEGIN	146836	78	6060	73	317896	208	430667	139	498		
1	146903	67	6122	62	318084	188	430828	161	478	✓	317
2	146991	88	6199	77	318285	201	430988	160	526	✓	366
3	147074	83	6275	76	318525	240	431161	173	572	✓	399
4	147183	109	6373	98	318741	216	431336	175	598	✓	423
5	147268	85	6453	80	319035	294	431507	171	630	✓	459
6	147362	94	6538	85	319272	237	431662	155	571	✓	416
7	147483	121	6649	111	319454	182	431821	159	573	✓	414
8	147566	83	6725	76	319607	153	432088	267	579	✓	312
9	147637	71	6790	65	319891	284	432212	124	544	✓	420
10	147729	92	6873	83	320103	212	432367	155	542	✓	387
11	147820	91	6952	79	320341	238	432570	203	611	✓	408
12	147911	91	7038	86	320588	247	432740	170	594	✓	424
13	148005	94	7125	87	320850	262	432888	148	591	✓	443
14	148098	93	7210	85	321082	232	433051	163	573	✓	410
15	148187	89	7291	81	321291	209	433229	178	557	✓	379
16	148274	87	7368	77	321507	216	433405	176	556	✓	380
17	148361	87	7448	80	321755	248	433564	159	574	✓	415
18	148471	110	7549	101	322049	294	433745	181	686	✓	505
19	148552	81	7622	73	322276	221	433908	163	538	✓	375
20	148623	71	7684	62	322501	231	434068	160	524	✓	364
21	148708	85	7763	79	322698	197	434195	127	488	✓	361
22	148792	84	7839	76	322880	182	434360	165	507	✓	342
23	148873	81	7912	73	323058	178	434521	161	493	✓	332
24	148951	78	7980	68	323234	176	434663	142	464	✓	322
25	149043	92	8064	84	323416	182	434807	144	502	✓	358
26	149125	82	8140	76	323622	206	434959	152	516	✓	364
27	149188	63	8197	57	323807	185	435107	148	453	✓	305
28	149261	73	8263	66	323962	155	435228	121	415	✓	294
29	149336	75	8330	67	324113	151	435379	151	444	✓	293
30	149411	75	8395	65	324262	149	435524	145	434	✓	289
31	149480	69	8458	63	324450	188	435672	148	468	✓	320
TOTALS									16,601,000		

535,516 ave.
686,000 max



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

See page 4 for instructions.

I. General Information for the Month/Year of: NOVEMBER 2008

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648	
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):	

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator	Brenda M. Molsbee	C	15121	1 shift per day x 5/1 hr weekend
Other Operators	Earl Coulter			Trainee
	Bobby Garrett			Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
--------------------	--	-------------------------

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: **NOVEMBER 2008**

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24	504,000											0.20	
2	X	24	569,000											0.20	
3	X	24	517,000											0.40	
4	X	24	458,000											0.20	
5	X	24	624,000											0.40	
6	X	24	446,000											0.40	
7	X	24	470,000											0.50	
8	X	24	480,000											0.60	
9	X	24	520,000											0.60	
10	X	24	456,000											0.20	
11	X	24	427,000											0.30	
12	X	24	458,000											0.50	
13	X	24	446,000											0.70	
14	X	24	458,000											0.40	
15	X	24	407,000											0.40	
16	X	24	440,000											0.50	
17	X	24	460,000											0.50	
18	X	24	384,000											0.60	
19	X	24	422,000											0.80	
20	X	24	373,000											0.20	
21	X	24	421,000											0.20	
22	X	24	438,000											1.20	
23	X	24	461,000											1.00	
24	X	24	452,000											1.00	
25	X	24	437,000											1.20	
26	X	24	448,000											1.40	
27	X	24	494,000											1.20	
28	X	24	543,000											2.00	
29	X	24	575,000											1.70	
30	X	24	481,000											1.60	
31															
Total			14,069,000												
Average			468,966												
Maximum			624,000												

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

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH November - 08

	READINGS		READINGS		READINGS		READINGS		TOTAL	TH	
DATE	WELL #1	#1 PROD	WELL #2	#2 PROD	WELL #3	#3 PROD	WELL #4	#4 PROD	DAILY PROD	1-2-3 FLUSH	LEAKS
BEGIN	149480	69	8458	63	324450	188	435672	148	468		
1	149570	90	8539	81	324635	185	435820	148	504	356	✓
2	149653	83	8615	76	324888	253	435977	157	569	412	✓
3	149731	78	8686	71	325085	197	436148	171	517	346	✓
4	149808	77	8756	70	325249	164	436295	147	458	311	✓
5	149891	83	8830	74	325536	287	436475	180	624	444	✓
6	149947	56	8880	50	325691	155	436660	185	446	261	✓
7	150054	107	8978	98	325838	147	436798	118	470	352	✓
8	150128	74	9045	67	326034	196	436921	143	480	337	✓
9	150206	78	9116	71	326254	220	437072	151	520	369	✓
10	150283	77	9186	70	326412	158	437223	151	456	305	✓
11	150352	69	9247	61	326572	160	437360	137	429	290	✓
12	150424	72	9312	65	326741	169	437512	152	458	306	✓
13	150493	69	9374	62	326913	172	437655	143	446	303	✓
14	150563	70	9437	63	327086	173	437807	152	458	306	✓
15	150637	74	9505	68	327232	146	437926	119	407	288	✓
16	150710	73	9570	65	327396	164	438064	138	440	302	✓
17	150786	76	9639	69	327565	169	438210	146	460	314	✓
18	150867	81	9711	72	327703	138	438303	93	384	291	✓
19	150933	66	9773	62	327856	153	438444	141	422	281	✓
20	151001	68	9832	59	327988	132	438558	114	373	259	✓
21	151067	66	9892	60	328140	152	438701	143	421	278	✓
22	151141	74	9959	67	328299	159	438839	138	438	300	✓
23	151220	79	10029	70	328465	166	438985	146	461	315	✓
24	151300	80	10101	72	328619	154	439131	146	452	306	✓
25	151374	74	10166	65	328773	154	439275	144	437	293	✓
26	151446	72	10234	68	328931	158	439425	150	448	298	✓
27	151536	90	10311	77	329104	173	439579	154	494	340	✓
28	151628	92	10389	78	329317	213	439735	160	543	383	✓
29	151722	94	10483	94	329536	219	439907	168	575	407	✓
30	151792	69	10544	61	329751	215	440043	136	481	345	✓
31											
	TOTALS										

14,069,000
468,967 avg
575,000 max



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

See page 4 for instructions.

I. General Information for the Month/Year of: DECEMBER 2008

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648		
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328	
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):		
Licensed Operators	Name	License/Class	License Number	Days/Shifts Worked
Lead/Chief Operator	Brenda M. Molsbee	C	15121	1 shift per day x 5/1 hr weekend
Other Operator	Earl Coulter			Trainee
	Bobby Garrett			Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
--------------------	--	-------------------------

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: DECEMBER 2008

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

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

Day of the Month	Days Plant Staffed for Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	CT Calculations for UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable							Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
					Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24	400,000									1.80		
2	X	24	343,000									1.60		
3	X	24	322,000									1.40		
4	X	24	387,000									1.50		
5	X	24	394,000									1.60		
6	X	24	341,000									1.00		
7	X	24	333,000									0.80		
8	X	24	338,000									0.40		
9	X	24	320,000									1.00		
10	X	24	317,000									0.20		
11	X	24	291,000									1.50		
12	X	24	332,000									1.50		
13	X	24	351,000									1.50		
14	X	24	324,000									1.60		
15	X	24	348,000									2.60		
16	X	24	327,000									2.70		
17	X	24	350,000									2.40		
18	X	24	315,000									2.00		
19	X	24	329,000									2.40		
20	X	24	332,000									2.60		
21	X	24	344,000									3.50		
22	X	24	382,000									3.10		
23	X	24	404,000									2.80		
24	X	24	418,000									2.00		
25	X	24	459,000									2.40		
26	X	24	472,000									2.50		
27	X	24	490,000									2.00		
28	X	24	533,000									2.00		
29	X	24	553,000									2.00		
30	X	24	521,000									1.80		
31	X	24	522,000									2.5		
Total			11,892,000											
Average			383,612											
Maximum			553,000											

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

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH December - 08
2008

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL	DAILY PROD	1-2-3 FLUSH	LEAKS
	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD				
BEGIN	151791	69	10544	61	329751	215	440043	136	481			
1	151865	74	10608	64	329888	137	440168	125	400	275	✓	
2	151923	58	10661	53	330011	123	440277	109	343	234	✓	
3	151971	48	10703	42	330134	123	440386	109	322	213	✓	
4	152042	71	10768	65	330261	127	440510	124	387	263	✓	
5	152106	64	10825	57	330400	139	440644	134	394	260	✓	
6	152164	58	10878	53	330522	122	440752	108	341	233	✓	
7	152222	58	10930	52	330637	115	440860	108	333	225	✓	
8	152281	59	10981	51	330756	119	440969	109	338	229	✓	
9	152348	67	11042	61	330858	102	441059	90	320	230	✓	
10	152394	46	11084	42	330954	96	441192	133	317	184	✓	
11	152457	63	11141	57	331043	89	441274	82	291	209	✓	
12	152516	59	11193	52	331149	106	441389	115	332	217	✓	
13	152576	60	11248	55	331269	120	441505	116	351	235	✓	
14	152635	59	11300	52	331364	95	441623	118	324	206	✓	
15	152694	59	11353	53	331482	118	441741	118	348	230	✓	
16	152753	59	11405	52	331587	105	441852	111	327	216	✓	
17	152812	59	11458	53	331710	123	441967	115	350	235	✓	
18	152858	46	11500	42	331827	117	442077	110	315	205	✓	
19	152948	90	11546	41	331952	125	442145	68	389	261	✓	
20	153007	59	11597	51	332059	107	442260	115	332	217	✓	
21	153066	59	11650	53	332176	117	442375	115	344	229	✓	
22	153127	61	11705	55	332281	145	442496	121	382	261	✓	
23	153197	70	11769	64	332449	128	442638	142	404	262	✓	
24	153269	72	11833	64	332609	160	442760	122	418	296	✓	
25	153352	82	11908	75	332760	151	442910	150	459	309	✓	
26	153427	75	11974	66	332935	175	443066	156	472	316	✓	
27	153499	72	12041	67	333128	193	443224	158	490	332	✓	
28	153585	86	12119	78	333338	210	443383	159	533	374	✓	
29	153678	93	12201	82	333550	212	443549	166	553	387	✓	
30	153764	86	12280	79	333750	200	443705	156	521	365	✓	
31	153851	87	12358	78	333942	192	443870	165	522	357	✓	
	TOTALS	2,060		1,814		4,191						

11,892,000 tot
383,613 ave
553,000 max



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

See page 4 for instructions.

I. General Information for the Month/Year of: JANUARY 2009

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648	
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):	

Licensee Operator	Name	License Class	License Number	Day(s) Shift(s) Worked
Lead/Chief Operator	Brenda M. Molsbee	C	15121	1 shift per day x 5/1 hr weekend
Other Operator	Earl Coulter			Trainee
	Bobby Garrett			Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
--------------------	--	-------------------------

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: JANUARY 2009

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24	540,000											2.30	
2	X	24	533,000											2.30	
3	X	24	559,000											0.40	
4	X	24	494,000											0.40	
5	X	24	422,000											0.50	
6	X	24	409,000											0.80	
7	X	24	353,000											0.50	
8	X	24	382,000											0.80	
9	X	24	392,000											0.40	
10	X	24	391,000											0.20	
11	X	24	412,000											0.50	
12	X	24	391,000											0.20	
13	X	24	381,000											0.20	
14	X	24	354,000											1.00	
15	X	24	386,000											1.50	
16	X	24	483,000											1.50	
17	X	24	635,000											0.20	
18	X	24	554,000											0.20	
19	X	24	478,000											3.00	
20	X	24	427,000											3.00	
21	X	24	530,000											2.00	
22	X	24	484,000											3.00	
23	X	24	417,000											1.40	
24	X	24	525,000											2.50	
25	X	24	542,000											3.00	
26	X	24	494,000											2.60	
27	X	24	436,000											2.00	
28	X	24	464,000											1.80	
29	X	24	405,000											1.00	
30	X	24	418,000											1.50	
31	X	24	469,000											0.80	
Total			14,160,000												
Average			456,774												
Maximum			635,000												

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

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * JANUARY 2009

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? No Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, % [†] =
---------------------	------------------------------------

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, % [†] =
---------------------	---

C. Is any iron or manganese sequestrant used at the water treatment plant? No Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):

Sequestrant Dose, mg/L of phosphate as PO ₄ or mg/L of silicate as SiO ₂ =
--

If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO ₂ =
--

* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

† Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH March 09

~~03/01/09~~

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL	FLUSH	LEAKS
	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	DAILY PROD		
BEGIN	158400	62	16440	59	344066	140	452641	119	378		
1	158466	66	16497	57	344224	158	452792	151	432	✓	281
2	158524	58	16551	54	344354	130	452906	114	356	✓	242
3	158582	58	16604	53	344475	121	453016	115	342	✓	232
4	158647	65	16661	57	344601	126	453130	114	362	✓	148
5	158713	66	16721	60	344728	127	453247	117	370	✓	257
6	158776	63	16777	56	344878	150	453362	115	384	✓	269
7	158858	82	16850	73	345070	192	453521	159	506	✓	347
8	158950	92	16934	84	345232	162	453716	195	533	✓	338
9	159017	67	16995	61	345445	213	453846	130	471	✓	311
10	159071	54	17042	47	345672	227	453946	100	428	✓	328
11	159194	123	17151	109	345749	73	454051	105	410	✓	305
12	159231	37	17187	36	345858	113	454275	224	410	✓	186
13	159306	75	17254	67	345984	126	454399	124	392	✓	268
14	159373	67	17315	61	346171	137	454530	131	446	✓	315
15	159456	83	17390	75	346343	172	454614	114	494	✓	370
16	159522	66	17449	59	346518	175	454841	147	447	✓	300
17	159607	85	17525	76	346692	174	454974	133	468	✓	335
18	159692	85	17602	77	346850	158	455140	166	486	✓	320
19	159776	84	17678	76	347034	184	455304	164	508	✓	344
20	159843	67	17739	61	347216	226	455430	126	480	✓	354
21	159927	84	17814	75	347418	158	455594	164	481	✓	317
22	160018	91	17895	81	347611	193	455774	180	545	✓	365
23	160124	106	17994	99	347778	167	455875	101	473	✓	352
24	160225	101	18084	90	347982	204	456028	153	548	✓	345
25	160291	66	18143	59	348160	178	456183	155	458	✓	303
26	160371	80	18209	66	348321	161	456317	134	441	✓	307
27	160441	70	18272	63	348498	177	456449	132	442	✓	310
28	160519	78	18342	70	348657	159	456589	140	447	✓	307
29	160600	81	18414	72	348802	145	456748	159	457	✓	298
30	160669	69	18477	63	348999	197	456831	133	462	✓	329
31	160756	87	18556	79	349186	187	457034	153	506	✓	353
TOTALS											

13,985,000
451,129 ac
548,000 m



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

See page 4 for instructions.

I. General Information for the Month/Year of: APRIL 2009

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648	
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):	

Licensed Operators	Name	License Class	License Number	Days/Shifts Worked
Lead/Chief Operator	Brenda M. Molsbee	C	0015121	1 shift per day x 5/1 hr weekend
Other Operators	Earl Coulter			Trainee
	Bobby Garrett			Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
--------------------	--	-------------------------

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: APRIL 2009

Means of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe):

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations for UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Point During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer Point During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1	X	24	497,000												2.60	
2	X	24	443,000												2.50	
3	X	24	446,000												2.20	
4	X	24	538,000												2.00	
5	X	24	606,000												2.00	
6	X	24	616,000												2.40	
7	X	24	627,000												2.10	
8	X	24	533,000												2.00	
9	X	24	659,000												1.50	
10	X	24	646,000												1.80	
11	X	24	661,000												0.90	
12	X	24	574,000												1.20	
13	X	24	446,000												1.20	
14	X	24	417,000												1.00	
15	X	24	404,000												0.70	
16	X	24	404,000												1.50	
17	X	24	440,000												2.10	
18	X	24	461,000												2.20	
19	X	24	487,000												1.80	
20	X	24	434,000												2.50	
21	X	24	408,000												1.80	
22	X	24	372,000												2.20	
23	X	24	437,000												1.80	
24	X	24	455,000												2.00	
25	X	24	522,000												1.90	
26	X	24	542,000												2.20	
27	X	24	477,000												2.50	
28	X	24	500,000												2.50	
29	X	24	455,000												2.20	
30	X	24	463,000												1.80	
31	X	24														
Total			14,970,000													
Average			499,000													
Maximum			661,000													

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

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

PWS Identification Number: 1190789	Plant Name: WATER MANAGEMENT SERVICES, INC.
------------------------------------	---

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * APRIL 2009

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? No Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, % [†] =
---------------------	------------------------------------

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, % [†] =
---------------------	---

C. Is any iron or manganese sequestrant used at the water treatment plant? No Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):

Sequestrant Dose, mg/L of phosphate as PO ₄ or mg/L of silicate as SiO ₂ =
--

If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO ₂ =
--

* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

[†] Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH April -09

	READINGS		READINGS		READINGS		READINGS		TOTAL		
DATE	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	DAILY PROD	FLUSH	LEAKS
BEGIN	160756	87	18556	79	349186	187	457034	153	506		
1	160887	131	18639	83	349324	138	457179	145	497	✓	352
2	160966	79	18710	71	349463	139	457333	154	443	✓	289
3	161032	66	18769	59	349646	183	457471	138	446	✓	308
4	161118	86	18847	78	349859	213	457632	161	538	✓	377
5	161234	116	18941	94	350071	212	457816	184	606	✓	422
6	161313	79	19013	72	350406	335	457946	130	616	✓	486
7	161443	130	19131	118	350590	184	458141	195	627	✓	432
8	161499	56	19181	50	350759	169	458399	258	533	✓	275
9	161562	63	19239	58	351183	424	458513	114	659	✓	545
10	161644	82	19313	74	351443	260	458743	230	646	✓	416
11	161751	107	19411	98	351731	288	458911	168	661	✓	493
12	161827	76	19481	70	352007	276	459063	152	574	✓	422
13	161903	76	19547	66	352155	178	459219	156	446	✓	290
14	161965	62	19606	59	352233	78	459437	218	417	✓	199
15	162030	65	19664	58	352371	138	459580	143	404	✓	261
16	162095	65	19721	57	352528	157	459705	125	404	✓	279
17	162160	65	19780	59	352681	153	459868	163	440	✓	277
18	162240	80	19853	73	352864	183	459993	125	461	✓	336
19	162331	91	19935	82	353013	149	460158	165	487	✓	322
20	162396	65	19994	59	353182	169	460299	141	434	✓	293
21	162459	63	20051	57	353315	133	460454	155	408	✓	253
22	162524	65	20107	56	353444	129	460576	122	372	✓	250
23	162599	75	20176	69	353607	173	460696	120	437	✓	317
24	162668	69	20236	60	353776	159	460863	167	455	✓	288
25	162752	84	20314	78	353925	199	461024	161	522	✓	361
26	162840	88	20394	80	354008	233	461165	141	542	✓	401
27	162932	92	20477	83	354343	135	461332	167	477	✓	310
28	163015	83	20541	64	354532	189	461496	164	500	✓	336
29	163081	66	20611	70	354727	195	461620	124	455	✓	331
30	163167	86	20689	78	354872	145	461774	154	463	✓	309
31											
	TOTALS										

14,970,000
499,000 ave
661,000 max



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

See page 4 for instructions.

I. General Information for the Month/Year of: MAY 2009

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648		
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328	
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):		
Licensed Operators	Name	License Class	License Number	Days/Shift(s) Worked
Lead/Chief Operator	Brenda M. Molsbee	C	0015121	1 shift per day x 5/1 hr weekend
Other Operators	Earl Coulter			Trainee
	Bobby Garrett			Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
--------------------	--	-------------------------

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: **MAY 2009**

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1	X	24	537,000											2.50		
2	X	24	528,000											2.50		
3	X	24	580,000											2.50		
4	X	24	503,000											0.50		
5	X	24	515,000											0.60		
6	X	24	539,000											0.50		
7	X	24	529,000											0.50		
8	X	24	543,000											0.20		
9	X	24	551,000											0.40		
10	X	24	658,000											0.40		
11	X	24	521,000											0.40		
12	X	24	583,000											0.40		
13	X	24	587,000											0.20		
14	X	24	551,000											0.40		
15	X	24	585,000											0.40		
16	X	24	655,000											0.40		
17	X	24	721,000											0.40		
18	X	24	566,000											0.60		
19	X	24	474,000											0.40		
20	X	24	505,000											0.20		
21	X	24	530,000											0.60		
22	X	24	544,000											0.20		
23	X	24	544,000											0.60		
24	X	24	670,000											2.10		
25	X	24	638,000											1.10		
26	X	24	623,000											1.00		
27	X	24	480,000											0.60		
28	X	24	487,000											0.40		
29	X	24	490,000											0.20		
30	X	24	538,000											0.40		
31	X	24	553,000											0.9		
Total			17,328,000													
Average			558,967													
Maximum			721,000													

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

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * MAY 2009

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? No Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, % [†] =
---------------------	------------------------------------

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, % [†] =
---------------------	---

C. Is any iron or manganese sequestrant used at the water treatment plant? No Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):

Sequestrant Dose, mg/L of phosphate as PO ₄ or mg/L of silicate as SiO ₂ =
--

If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO ₂ =
--

* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

† Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH May 09

1-2-3

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL	FLUSH	LEAKS
	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	DAILY PROD		
BEGIN	163167	86	20689	78	354872	145	461774	154	463		
1	163246	79	20761	72	355072	200	461960	186	537	✓	351
2	163333	87	20839	78	355298	226	462097	137	528	✓	391
3	163423	90	20921	82	355532	234	462271	174	580	✓	406
4	163511	88	21001	80	355687	155	462451	180	503	✓	323
5	163582	71	21064	63	355896	209	462623	172	515	✓	343
6	163654	72	21130	66	356155	259	462765	142	539	✓	397
7	163740	86	21207	77	356333	178	462953	188	529	✓	341
8	163844	104	21301	94	356545	212	463086	133	543	✓	410
9	163942	98	21389	88	356721	176	463275	189	551	✓	362
10	164042	100	21480	91	356913	272	463470	195	658	✓	463
11	164166	74	21547	67	357236	243	463607	137	521	✓	384
12	164193	77	21616	69	357434	248	463716	189	583	✓	394
13	164295	102	21709	92	357821	237	463952	156	587	✓	431
14	164387	92	21791	83	357928	207	464121	169	551	✓	382
15	164483	96	21879	88	358153	225	464297	176	585	✓	409
16	164583	100	21969	90	358413	260	464502	205	655	✓	450
17	164670	87	22048	79	358773	360	464647	195	721	✓	526
18	164755	85	22124	76	359000	227	464875	178	566	✓	388
19	164824	69	22188	64	359193	193	465023	148	474	✓	326
20	164911	87	22266	78	359391	198	465165	142	505	✓	363
21	164992	81	22338	72	359581	198	465344	179	530	✓	351
22	165037	95	22419	81	359772	183	465524	185	544	✓	359
23	165171	84	22502	81	359971	199	465709	180	544	✓	364
24	165247	76	22596	96	360273	302	465903	196	670	✓	474
25	165330	83	22774	178	360538	265	466071	112	638	✓	526
26	165406	76	22843	69	360823	285	466216	193	623	✓	430
27	165488	82	22917	74	361213	190	466344	134	480	✓	346
28	165572	84	22992	75	361178	165	466507	163	487	✓	324
29	165639	67	23053	61	361372	194	466675	168	490	✓	322
30	165726	87	23133	80	361583	211	466833	160	538	✓	378
31	165822	96	23219	86	361813	230	466976	141	553	✓	412
	TOTALS										

17,328,000 Tot
558,968 ave
721,000 max



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

See page 4 for instructions.

I. General Information for the Month/Year of: JUNE 2009

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648		
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328	
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):		
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Brenda M. Molsbee	C	0015121	1 shift per day x 5/1 hr weekend
Other Operators:	Earl Coulter			Trainee
	Bobby Garrett			Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
--------------------	--	-------------------------

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: JUNE 2009

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose					
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	
1	X	24	614,000										0.90	
2	X	24	634,000										0.50	
3	X	24	646,000										0.40	
4	X	24	538,000										0.20	
5	X	24	588,000										0.20	
6	X	24	603,000										0.40	
7	X	24	674,000										1.20	
8	X	24	651,000										0.40	
9	X	24	659,000										0.20	
10	X	24	704,000										0.40	
11	X	24	691,000										0.20	
12	X	24	776,000										0.20	
13	X	24	920,000										0.30	
14	X	24	904,000										1.80	
15	X	24	669,000										0.20	
16	X	24	762,000										0.20	
17	X	24	795,000										0.40	
18	X	24	767,000										1.80	
19	X	24	826,000										1.90	
20	X	24	852,000										1.60	
21	X	24	811,000										1.50	
22	X	24	817,000										0.40	
23	X	24	839,000										0.40	
24	X	24	816,000										0.40	
25	X	24	816,000										0.20	
26	X	24	815,000										0.20	
27	X	24	860,000										0.20	
28	X	24	851,000										1.80	
29	X	24	789,000										0.20	
30	X	24	784,000										0.20	
31	X													
Total			22,471,000											
Average			749,033											
Maximum			920,000											

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

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * JUNE 2009

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? No Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =

Acrylamide Level, %[†] =

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =

Epichlorohydrin Level, %[†] =

C. Is any iron or manganese sequestrant used at the water treatment plant? No Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):

Sequestrant Dose, mg/L of phosphate as PO₄ or mg/L of silicate as SiO₂ =

If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO₂ =

* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

† Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH June 09

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL	FLUSH	TEST 1-2-3 LEAKS
	WELL #1	#1 PROD	WELL #2	#2 PROD	WELL #3	#3 PROD	WELL #4	#4 PROD	DAILY PROD		
BEGIN	165822	96	23219	86	361813	230	466976	141	553		
1	165928	106	23315	96	362038	225	467163	187	614	✓	427
2	166029	101	23407	92	362267	229	467375	212	634	✓	422
3	166107	78	23478	71	362600	333	467539	164	646	✓	482
4	166199	92	23561	83	362832	232	467670	131	538	✓	407
5	166291	92	23644	83	363069	237	467846	176	588	✓	412
6	166391	100	23736	92	363281	212	468045	199	603	✓	404
7	166491	100	23825	87	363554	273	468257	212	674	✓	462
8	166572	31	23799	74	363876	322	468431	174	651	✓	477
9	166735	163	24042	149	364102	226	468552	121	659	✓	538
10	166824	85	24129	81	364352	256	468836	284	698	✓	420
11	166894	70	24192	65	364743	391	469003	167	691	✓	524
12	166988	99	24278	86	365158	415	469184	181	776	✓	595
13	167094	106	24374	96	365583	425	469477	293	920	✓	627
14	167239	145	24503	134	366012	429	469673	196	904	✓	708
15	167330	91	24591	83	366350	338	469830	157	669	✓	512
16	167431	101	24681	90	366724	374	470027	147	762	✓	565
17	167551	120	24791	110	367163	441	470151	124	795	✓	671
18	167642	91	24874	83	367542	377	470367	216	767	✓	551
19	167741	99	24967	93	367975	433	470563	201	826	✓	625
20	167853	117	25072	105	368377	402	470746	228	852	✓	624
21	167918	60	25127	55	368673	296	471196	400	811	✓	411
22	168029	111	25229	102	369078	405	471398	199	817	✓	618
23	168145	116	25336	107	369529	451	471560	165	839	✓	674
24	168223	78	25409	72	369948	419	471807	247	816	✓	589
25	168330	107	25506	98	370368	420	471998	191	816	✓	625
26	168417	87	25586	80	370622	254	472392	394	815	✓	421
27	168531	114	25690	104	371014	342	472642	250	860	✓	610
28	168639	108	25738	98	371448	434	472833	211	851	✓	640
29	168742	103	25883	95	371764	316	473128	275	789	✓	514
30	168832	90	25964	81	372114	350	473391	263	784	✓	521
31											
TOTALS											

22,471,000
749,033 ave
920,000 max



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

See page 4 for instructions.

I. General Information for the Month/Year of: JULY 2009

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648		
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328	
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):		
Licensed Operator's	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator	Brenda M. Molsbee	C	0015121	1 shift per day x 5/1 hr weekend
Other Operators	Earl Coulter			Trainee
	Bobby Garrett			Trainee
	Jesse Page			Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
--------------------	--	-------------------------

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: JULY 2009

Means of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe):

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Point During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer Point During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1	X	24	716,000											0.20		
2	X	24	779,000											0.20		
3	X	24	886,000											2.30		
4	X	24	986,000											0.60		
5	X	24	1,029,000											1.40		
6	X	24	883,000											0.20		
7	X	24	795,000											0.40		
8	X	24	755,000											0.20		
9	X	24	732,000											0.40		
10	X	24	822,000											0.40		
11	X	24	894,000											0.60		
12	X	24	859,000											0.60		
13	X	24	815,000											0.20		
14	X	24	812,000											0.20		
15	X	24	855,000											0.20		
16	X	24	836,000											0.60		
17	X	24	859,000											0.20		
18	X	24	901,000											0.40		
19	X	24	786,000											3.30		
20	X	24	804,000											2.20		
21	X	24	785,000											0.40		
22	X	24	839,000											0.40		
23	X	24	822,000											0.20		
24	X	24	886,000											0.20		
25	X	24	900,000											0.20		
26	X	24	746,000											0.90		
27	X	24	718,000											0.40		
28	X	24	717,000											0.20		
29	X	24	757,000											0.40		
30	X	24	768,000											0.40		
31	X	24	765,000											0.2		
Total			25,507,000													
Average			822,806													
Maximum			1,029,000													

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

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * JULY 2009

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? No Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, % [†] =
---------------------	------------------------------------

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, % [†] =
---------------------	---

C. Is any iron or manganese sequestrant used at the water treatment plant? No Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):

Sequestrant Dose, mg/L of phosphate as PO₄ or mg/L of silicate as SiO₂ =

If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO₂ =

* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

† Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH July 09

1-2-3

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL	FLUSH	LEAKS
	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	DAILY PROD		
BEGIN	163332	90	259164	81	372114	350	473391	2163	784		544
1	168930	98	26054	90	372470	351	473563	172	716	✓	544
2	169023	93	26140	81	372829	359	473204	241	779	✓	538
3	169132	109	26240	100	373243	414	474067	263	886	✓	623
4	169182	50	26285	45	373712	469	474489	422	981	✓	564
5	169305	123	26399	114	374071	379	474902	413	1029	✓	616
6	169397	92	26482	83	374493	402	475208	306	883	✓	577
7	169501	104	26578	96	374969	471	475327	119	795	✓	676
8	169584	83	26654	76	375238	259	475664	337	755	✓	418
9	169676	92	26741	87	375584	356	475861	197	732	✓	535
10	169789	113	26840	99	375921	337	476134	273	822	✓	549
11	169871	82	26916	76	376390	469	476401	267	894	✓	627
12	169981	110	27017	101	376758	368	476681	280	859	✓	579
13	170088	107	27115	98	377175	417	476874	193	815	✓	622
14	170199	111	27217	102	377534	359	477114	240	812	✓	572
15	170335	136	27342	125	377826	292	477416	302	855	✓	533
16	170418	83	27418	76	378245	419	477674	258	836	✓	578
17	170539	121	27528	110	378683	438	477864	190	859	✓	669
18	170669	130	27647	119	379084	401	478115	251	901	✓	650
19	170778	109	27748	101	379459	375	478316	201	781	✓	585
20	170888	110	27847	99	379836	377	478534	218	801	✓	586
21	171030	132	27963	121	380224	388	478678	144	785	✓	641
22	171128	108	28067	99	380650	426	478884	206	839	✓	633
23	171234	106	28163	96	381050	400	479104	220	822	✓	602
24	171331	97	28251	88	381511	461	479344	240	886	✓	646
25	171454	123	28364	113	381928	417	479591	247	900	✓	653
26	171576	122	28476	112	382296	368	479735	144	746	✓	602
27	171664	88	28556	80	382643	347	479938	203	718	✓	515
28	171781	117	28662	106	382919	276	480156	218	717	✓	499
29	171877	91	28750	88	383327	408	480321	165	757	✓	592
30	171978	101	28842	92	383696	319	480527	206	768	✓	562
31	172034	106	28939	97	384156	460	480629	162	765	✓	663
TOTALS											
=====											

Total 25, 507, 000
Ave 822, 806
Max 1,029,000



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

See page 4 for instructions.

I. General Information for the Month/Year of: AUGUST 2009

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648	
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):	
Operator	Name	License No.	Shift
Brenda M. Molsbee	C	0015121	1 shift per day x 5/1 hr weekend
Earl Coulter			Trainee
Bobby Garrett			Trainee
Jesse Page			Trainee

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. ~~I, the undersigned, agree to provide these additional operations records to the PWSs within 30 days of the end of the month indicated above. I agree to provide these additional operations records to the PWSs within 30 days of the end of the month indicated above.~~

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
9-10-09		

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: AUGUST 2009

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

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

Day of Month	Volume (gallons)	Free Chlorine Residual (mg/L)	Chlorine Dioxide Residual (mg/L)	Ozone Residual (mg/L)	Combined Chlorine Residual (mg/L)
X	24	790,000			0.20
X	24	698,000			1.10
X	24	525,000			0.40
X	24	722,000			0.20
X	24	808,000			0.20
X	24	688,000			0.20
X	24	689,000			0.20
X	24	757,000			0.50
X	24	722,000			1.80
X	24	776,000			0.60
X	24	700,000			0.20
X	24	746,000			0.20
X	24	717,000			0.20
X	24	709,000			0.30
X	24	749,000			0.20
X	24	674,000			1.90
X	24	650,000			1.50
X	24	611,000			0.20
X	24	628,000			0.20
X	24	597,000			0.20
X	24	635,000			0.20
X	24	621,000			0.20
X	24	650,000			2.30
X	24	571,000			0.40
X	24	483,000			0.40
X	24	481,000			0.40
X	24	405,000			0.40
X	24	413,000			0.20
X	24	476,000			0.20
X	24	484,000			1.30
X	24	443,000			1.8
		19,618,000			
		632,838			
		808,000			

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

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * AUGUST 2009

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? No Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, % [†] =
---------------------	------------------------------------

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, % [†] =
---------------------	---

C. Is any iron or manganese sequestrant used at the water treatment plant? No Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):
Sequestrant Dose, mg/L of phosphate as PO ₄ or mg/L of silicate as SiO ₂ =
If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO ₂ =

* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

† Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH Aug 09

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL		
	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	PROD	FLUSH	LEAKS
BEGIN	172084	106	29939	97	384156	460	480639	102	765		
1	172113	79	29010	71	384465	249	481630	391	790		
2	172272	109	29109	99	384729	324	481186	166	698		
3	172394	122	29227	118	384864	135	481336	150	525		
4	172561	167	29382	155	385162	298	481438	102	722		
5	172646	105	29478	96	385583	421	481624	186	808		
6	172774	108	29573	95	385883	300	481809	185	688		
7	172860	86	29655	82	386223	340	481990	181	689		
8	173026	166	29803	148	386475	252	482181	191	757		
9	173121	95	29889	86	386823	348	482374	193	722		
10	173241	120	30002	113	387173	350	482567	193	776		
11	173311	70	30065	63	387599	421	482713	146	700		
12	173464	153	30205	140	387886	292	482874	161	746		
13	173531	67	30267	62	388195	309	483153	279	717		
14	173643	162 162	30368	101	388530	335	483314	161	709		
15	173758	115	30473	105	388839	309	483534	220	749		
16	173842	84	30550	77	389185	346	483701	167	674		
17	173953	111	30652	102	389418	233	483905	204	650		
18	174049	96	30732	80	389732	314	484026	121	611		
19	174154	105	30827	95	389959	227	484227	201	628		
20	174220	66	30948	121	390301	242	484395	168	597		
21	174221	1	31309	361	390360	159	484509	119	635		
22	174221	0	31588	279	390547	187	484664	155	621		
23	174221	0	31969	381	390668	122	484811	147	650		
24	174221	0	32276	307	390809	140	484935	124	571		
25	174221	0	32500	224	390920	111	485083	148	483		
26	174221	0	32722	222	391035	115	485227	144	481		
27	174221	0	32856	134	391180	145	485353	126	405		
28	174221	0	33045	189	391311	131	485446	93	413		
29	174221	0	33262	217	391425	114	485591	145	476		
30	174221	0	33477	215	391565	140	485720	129	484		
31	174221	0	33648	171	391709	144	485848	128	443		
	TOTALS										
		=====		=====		=====		=====	=====		=====



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

See page 4 for instructions.

I. General Information for the Month/Year of: SEPTEMBER 2009

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648		
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328	
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):		
Licensed Operator	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator	Brenda M. Molsbee	C	0015121	1 shift per day x 5/1 hr weekend
Other Operators	Earl Coulter			Trainee
	Bobby Garrett			Trainee
	Jesse Page			Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee	15121
	Printed or Typed Name	License Number

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: **SEPTEMBER 2009**

Means of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe):

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24	412,000												2.00	
2	X	24	398,000												2.50	
3	X	24	403,000												0.40	
4	X	24	401,000												0.40	
5	X	24	494,000												0.50	
6	X	24	667,000												1.60	
7	X	24	700,000												1.40	
8	X	24	545,000												0.80	
9	X	24	420,000												1.00	
10	X	24	436,000												1.00	
11	X	24	473,000												0.60	
12	X	24	459,000												1.10	
13	X	24	453,000												1.30	
14	X	24	429,000												1.20	
15	X	24	434,000												1.50	
16	X	24	481,000												1.50	
17	X	24	510,000												0.80	
18	X	24	509,000												0.60	
19	X	24	526,000												0.40	
20	X	24	504,000												1.60	
21	X	24	467,000												1.50	
22	X	24	400,000												1.00	
23	X	24	426,000												0.60	
24	X	24	429,000												0.20	
25	X	24	484,000												0.20	
26	X	24	480,000												0.40	
27	X	24	511,000												0.80	
28	X	24	445,000												0.20	
29	X	24	414,000												0.20	
30	X	24	391,000												1.3	
31	X	24														
Total			14,101,000													
Average			470,033													
Maximum			700,000													

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

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * SEPTEMBER

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? No Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =

Acrylamide Level, %[†] =

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =

Epichlorohydrin Level, %[†] =

C. Is any iron or manganese sequestrant used at the water treatment plant? No Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):

Sequestrant Dose, mg/L of phosphate as PO₄ or mg/L of silicate as SiO₂ =

If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO₂ =

* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

[†] Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH Sept 09

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL	FLUSH	LEAKS
	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	DAILY PROD		
BEGIN	174221	0	33648	171	391709	144	485248	128	443	✓	315
1	174221	0	33802	154	391841	132	485974	126	412	✓	286
2	174221	0	33942	140	391978	137	486095	121	398	✓	277
3	174221	0	34089	147	393138	160	486191	96	403	✓	307
4	174221	0	34258	169	392250	112	486211	120	401	✓	281
5	174263	42	34393	135	392411	161	486467	156	494	✓	338
6	174264	1	34736	343	392586	175	486615	148	667	✓	519
7	174264	0	35031	295	392876	290	486730	115	700	✓	585
8	174264	0	35224	193	393106	230	486852	122	545	✓	334
9	174264	0	35408	184	393210	104	486984	132	420	✓	288
10	174264	0	35653	245	393333	123	487052	68	436	✓	368
11	174264	0	35834	181	393438	105	487239	187	473	✓	286
12	174264	0	36084	250	393549	111	487337	98	459	✓	361
13	174264	0	36306	222	393651	102	487466	129	453	✓	324
14	174264	0	36474	168	393786	135	487592	126	429	✓	303
15	174264	0	36640	166	393925	139	487721	129	434	✓	305
16	174264	0	36839	199	394080	155	487848	127	481	✓	354
17	174264	0	37069	230	394231	151	487977	129	510	✓	381
18	174264	0	37348	279	394344	113	488094	117	509	✓	392
19	174264	0	37570	227	394508	164	488234	140	526	✓	386
20	174264	0	37817	297	394636	128	488363	129	504	✓	372
21	174264	0	38047	230	394774	138	488462	99	467	✓	326
22	174264	0	38193	176	394874	100	488616	154	400	✓	286
23	174264	0	38367	174	395010	136	488732	116	426	✓	310
24	174264	0	38575	208	395138	128	488825	93	429	✓	336
25	174264	0	38798	213	395276	138	488958	133	489	✓	351
26	174264	0	39003	215	395411	135	489088	130	480	✓	350
27	174264	0	39264	261	395515	104	489224	146	511	✓	365
28	174264	0	39427	163	395657	142	489374	140	445	✓	305
29	174264	0	39576	149	395799	142	489497	123	414	✓	291
30	174281	17	39608	32	396043	244	489595	98	391	✓	293
31											
TOTALS											

14,101,000 Total
470,033 Ave
7150.050 Max



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

See page 4 for instructions.

I. General Information for the Month/Year of: OCTOBER 2009

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648		
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328	
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):		
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator	Brenda M. Molsbee	C	0015121	1 shift per day x 5/1 hr weekend
Other Operators	Earl Coulter			Trainee
	Bobby Garrett			Trainee
				Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
--------------------	--	-------------------------

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: **OCTOBER 2009**

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations for UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Point During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer Point During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1	X	24	380,000												1.60	
2	X	24	427,000												1.60	
3	X	24	441,000												0.70	
4	X	24	470,000												1.40	
5	X	24	492,000												0.40	
6	X	24	459,000												0.20	
7	X	24	436,000												0.20	
8	X	24	475,000												0.40	
9	X	24	491,000												0.80	
10	X	24	629,000												0.70	
11	X	24	581,000												1.10	
12	X	24	531,000												0.20	
13	X	24	457,000												0.20	
14	X	24	474,000												0.40	
15	X	24	514,000												0.20	
16	X	24	555,000												0.60	
17	X	24	564,000												0.20	
18	X	24	557,000												1.60	
19	X	24	512,000												0.40	
20	X	24	491,000												0.40	
21	X	24	461,000												0.20	
22	X	24	624,000												0.40	
23	X	24	523,000												0.70	
24	X	24	517,000												0.30	
25	X	24	488,000												1.00	
26	X	24	478,000												1.50	
27	X	24	429,000												0.40	
28	X	24	381,000												0.40	
29	X	24	432,000												0.40	
30	X	24	419,000												0.60	
31	X	24	431,000												0.2	
Total			15,115,000													
Average			487,580													
Maximum			629,000													

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

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * OCTOBER 2009

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? No Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, % [†] =
---------------------	------------------------------------

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, % [†] =
---------------------	---

C. Is any iron or manganese sequestrant used at the water treatment plant? No Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):
Sequestrant Dose, mg/L of phosphate as PO ₄ or mg/L of silicate as SiO ₂ =
If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO ₂ =

* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

† Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH Oct. 2009

	READINGS		READINGS		READINGS		READINGS		TOTAL		1-2-3
DATE	WELL #1	#1 PROD	WELL #2	#2 PROD	WELL #3	#3 PROD	WELL #4	#4 PROD	DAILY PROD	FLUSH	LEAKS
BEGIN	174281	17	39608	32	396043	244	489595	98	391		
1	174305	24	39608	0	396301	258	489693	98	380		282
2	174325	20	39611	3	396574	273	489824	131	427		296
3	174325	0	39737	126	396749	175	489964	140	441		301
4	174325	0	39948	211	396881	132	490091	127	470		343
5	174325	0	40157	209	397019	138	490236	145	492		347
6	174325	0	40440	283	397159	140	490272	36	459		423
7	174331	6	40762	322	397267	108	490272	0	436		436
8	174331	0	41135	373	397369	102	490272	0	475		475
9	174331	0	41487	352	397508	139	490272	0	491		491
10	174358	27	41897	410	397700	192	490272	0	629		629
11	174369	11	42286	389	397881	181	490272	0	581		581
12	174382	13	42699	413	397986	105	490272	0	531		531
13	174382	0	42993	294	398149	163	490272	0	457		457
14	174382	0	43365	372	398251	102	490272	0	474		474
15	101	101	43565	200	398464	213	490272	0	514		514
16	310	209	43756	191	398619	155	490272	0	555		555
17	499	189	43931	175	398819	200	490272	0	564		564
18	735	236	44132	201	398939	120	490272	0	557		557
19	997	262	44382	250	398939	0	490272	0	512		512
20	1187	190	44554	172	399068	129	490272	0	491		491
21	1324	137	44738	184	399208	140	490272	0	461		461
22	1598	274	44935	197	399361	153	490272	0	624		624
23	1785	187	45108	173	399524	163	490272	0	523		523
24	1973	188	45280	172	399681	157	490272	0	517		517
25	2152	179	45444	164	399826	145	490272	0	488		488
26	2328	176	45605	161	399967	141	490272	099	478		478
27	2436	108	45705	160	400088	121	490371	100	429	428	329
28	2497	61	45760	55	400102	14	490622	251	381		130
29	2561	64	45817	57	400268	166	490767	145	432		287
30	2627	66	45878	61	400357	89	490966	199	415		216
31	2678	51	45925	47	400548	191	491108	142	431		289
	TOTALS	2779		6317		4505					

15,116,000
487,612 ave
629,000 max



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

See page 4 for instructions.

I. General Information for the Month/Year of: NOVEMBER 2009

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648		
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328	
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):		
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Brenda M. Molsbee	C	0015121	1 shift per day x 5/1 hr weekend
Other Operators:	Earl Coulter			Trainee
	Bobby Garrett			Trainee
	Cary Abbott			Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
--------------------	--	-------------------------

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: **NOVEMBER 2009**

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations for UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24	467,000											0.70	
2	X	24	464,000											0.80	
3	X	24	393,000											0.40	
4	X	24	424,000											0.50	
5	X	24	435,000											0.70	
6	X	24	425,000											0.60	
7	X	24	442,000											1.60	
8	X	24	518,000											1.10	
9	X	24	438,000											1.00	
10	X	24	379,000											0.80	
11	X	24	394,000											0.40	
12	X	24	437,000											0.40	
13	X	24	444,000											0.60	
14	X	24	473,000											0.80	
15	X	24	456,000											1.00	
16	X	24	423,000											0.20	
17	X	24	373,000											2.00	
18	X	24	397,000											1.60	
19	X	24	401,000											1.00	
20	X	24	439,000											0.60	
21	X	24	390,000											0.40	
22	X	24	420,000											0.90	
23	X	24	446,000											1.60	
24	X	24	399,000											0.60	
25	X	24	402,000											0.50	
26	X	24	482,000											0.40	
27	X	24	474,000											0.50	
28	X	24	534,000											0.70	
29	X	24	527,000											1.60	
30	X	24	439,000											1.00	
31	X	24													
Total			13,135,000												
Average			437,833												
Maximum			534,000												

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

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * NOVEMBER

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? No Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, % [†] =
---------------------	------------------------------------

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, % [†] =
---------------------	---

C. Is any iron or manganese sequestrant used at the water treatment plant? No Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):

Sequestrant Dose, mg/L of phosphate as PO ₄ or mg/L of silicate as SiO ₂ =
--

If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO ₂ =
--

* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

[†] Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH November of 09

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL		
	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	PROD	FLUSH	LEAKS
BEGIN	2678	51	45925	47	400548	191	491108	142	431		
1	2730	52	45972	47	400754	206	491270	162	467		
2	2801	71	46038	66	400954	200	491397	127	464		
3	2864	63	46095	57	401083	129	491541	144	393		
4	2899	35	46127	32	401250	167	491731	190	424		
5	2951	51 ⁵²	46176	49	401403	153	491912	181	434	439	
6	3009	58	46235	59	401578	172	492048	136	425		
7	3085	76	46315	80	401716	141	492193	145	442		
8	3169	84	46410	95	401882	116	492366	173	518		
9	3249	80	46494	84	402053	141	492499	133	438		
10	3316	67	46567	73	402150	127	492611	112	379		
11	3385	69	46633	66	402298	148	492722	111	394		
12	3443	58	46684	51	402483	185	492869	143	437		
13	3521	78	46757	73	402664	181	492977	112	444		
14	3600	79	46833	76	402803	139	493156	179	473		
15	3669	69	46905	72	402977	174	493297	141	456		
18	3762	93	46998	93	403120	143	493391	94	423		
17	3829	67	47076	78	403261	141	493478	87	373		
18	3877	48	47129	53	403477	216	493558	80	397		
19	3931	54	47198	69	403551	94	493742	184	401		
20	3931	0	47212	84	403731	110	493937	195	439		
21	3931	0	47397	115	403792	61	494181	214	390		
22	3931	0	47537	140	403956	164	494267	116	420		
23	3931	0	47663	126	404226	270	494317	50	446		
24	3931	0	47790	127	404435	209	494380	63	399		
25	3931	0	47914	124	404534	99	494559	179	402		
26	3931	0	48014	100	404740	206	494735	176	482		
27	3931	0	48110	96	405028	288	494825	90	474		
28	3931	0	48210	100	405308	280	494979	154	534		
29	3931	0	48257	47	405646	338	495121	142	527		
30	3931	0	48380	123	405858	212	495225	104	439		
31											
	TOTALS								13,134		
		=====		=====		=====		=====		=====	=====

13,135



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

See page 4 for instructions.

I. General Information for the Month/Year of: DECEMBER 2009

A. Public Water System (PWS) Information

PWS Name: Water Management Services, Inc.		PWS Identification Number: 1190789	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:		Total Population Served at End of Month:	
PWS Owner: WATER MANAGEMENT SERVICES, INC.			
Contact Person: Brenda Molsbee		Contact Person's Title: OPERATOR	
Contact Person's Mailing Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328
Contact Person's Telephone Number: 850-927-2648		Contact Person's Fax Number: 850-927-3395	
Contact Person's E-Mail Address: water2nm@yahoo.com			

B. Water Treatment Plant Information

Plant Name: WATER MANAGEMENT SERVICES, INC.		Plant Telephone Number: 850-927-2648		
Plant Address: 139 W. Gulf Beach Dr.		City: St. George Island	State: FL Zip Code: 32328	
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,080,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		Plant Class (per subsection 62-699.310(4), F.A.C.):		
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator	Brenda M. Molsbee	C	0015121	1 shift per day x 5/1 hr weekend
Other Operators	Earl Coulter			Trainee
	Bobby Garrett			Trainee
	Cary Abbott			Trainee

II. Certification by Lead/Chief Operator

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

Signature and Date	Brenda M. Molsbee Printed or Typed Name	15121 License Number
--------------------	--	-------------------------

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

PWS Identification Number: 1190789

Plant Name: WATER MANAGEMENT SERVICES, INC.

III. Daily Data for the Month/Year of: **DECEMBER 2009**

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

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

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24	394,000											1.10		
2	X	24	455,000											1.00		
3	X	24	298,000											2.00		
4	X	24	329,000											1.00		
5	X	24	373,000											1.30		
6	X	24	323,000											2.20		
7	X	24	319,000											2.40		
8	X	24	380,000											1.80		
9	X	24	361,000											2.00		
10	X	24	327,000											2.80		
11	X	24	299,000											2.20		
12	X	24	322,000											3.50		
13	X	24	335,000											2.90		
14	X	24	318,000											2.60		
15	X	24	342,000											1.80		
16	X	24	296,000											1.60		
17	X	24	307,000											1.20		
18	X	24	343,000											0.80		
19	X	24	284,000											2.20		
20	X	24	384,000											1.90		
21	X	24	316,000											0.40		
22	X	24	325,000											0.20		
23	X	24	309,000											0.80		
24	X	24	342,000											1.00		
25	X	24	334,000											0.80		
26	X	24	357,000											1.00		
27	X	24	358,000											1.90		
28	X	24	389,000											1.20		
29	X	24	406,000											1.00		
30	X	24	399,000											0.80		
31	X	24	425,000											1.90		
Total			10,749,000													
Average			346,741													
Maximum			455,000													

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

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

PWS Identification Number: I190789	Plant Name: WATER MANAGEMENT SERVICES, INC.
------------------------------------	---

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * DECEMBER

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? No Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose, ppm =	Acrylamide Level, % [†] =
---------------------	------------------------------------

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose, ppm =	Epichlorohydrin Level, % [†] =
---------------------	---

C. Is any iron or manganese sequestrant used at the water treatment plant? No Yes, and the type of sequestrant, sequestrant dose, etc., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):

Sequestrant Dose, mg/L of phosphate as PO ₄ or mg/L of silicate as SiO ₂ =
--

If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO ₂ =
--

* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

[†] Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.

WATER MANAGEMENT SERVICE PUMPING LOG

MONTH December 09

DATE	READINGS		READINGS		READINGS		READINGS		TOTAL	FLUSH	LEAKS
	WELL # 1	#1 PROD	WELL # 2	#2 PROD	WELL # 3	#3 PROD	WELL # 4	#4 PROD	DAILY PROD		
BEGIN	3931	0	48380	123	405858	212	495225	104	439		
1	3931	0	48508	128	406028	170	495321	96	394		
2	3931	0	48630	122	406238	210	495444	123	455		
3	3931	0	48755	125	406312	74	495543	99	298		
4	3931	0	48881	126	406430	118	495628	85	329		
5	3931	0	49007	126	406557	127	495748	120	373		
6	3931	0	49141	134	406666	109	495828	80	323		
7	3931	0	49300	159	406750	84	495904	76	319		
8	3931	0	49461	161	406886	136	495987	83	380		
9	3931	0	49615	154	407021	135	496059	73	72 362	361	
10	3931	0	49732	117	407114	98	496171	112	327		
11	3931	0	49828	96	407224	105	496269	98	299		
12	3931	0	49917	89	407298	74	496428	159	322		
13	3931	0	50041	124	407428	130	496509	81	335		
14	3931	0	50182	141	407531	103	496583	74	318		
15	3931	0	50291	109	407584	53	496763	180	342		
16	3931	0	50415	124	407665	81	496854	91	296		
17	3931	0	50509	94	407796	131	496936	82	307		
18	3931	0	50629	120	407943	147	497012	76	343		
19	3931	0	50769	140	407985	42	497114	102	284		
20	3931	0	50905	136	408161	176	497186	72	384		
21	3931	0	51043	138	408269	108	497256	70	316		
22	3931	0	51167	124	408398	129	497328	72	325		
23	3931	0	51295	128	408464	66	497443	115	309		
24	3931	0	51456	161	408591	127	497497	54	342		
25	3931	0	51580	124	408723	132	497525	78	334		
26	3931	0	51712	132	408844	121	497679	164	357		
27	3931	0	51844	132	408979	135	497770	91	358		
28	3931	0	51952	108	409163	184	497867	97	389		
29	3931	0	52093	141	409345	182	497960	83	406		
30	3931	0	52201	108	409551	206	498035	85	399		
31	3931	0	52314	113	409781	230	498117	82	425		
TOTALS		- 0 ~			3934		3923				
		=====			=====		=====		=====	=====	=====

SANITARY SURVEY



Florida Department of Environmental Protection

Tallahassee Branch Office
630-3 Capital Circle Northeast
Tallahassee, Florida 32301

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

March 15, 2010

Sent via email
(water2nm@yahoo.com)

Ms. Nita Molsbee
250 John Knox Road
Tallahassee, Florida 32303

Dear Ms. Molsbee:

An annual compliance inspection of St. George Island Water System (PWS ID No. 1190789) was completed on March 5, 2010, by Cliff McKeown, Engineering Specialist. Your assistance during the inspection was most helpful.

The purpose of this inspection was to evaluate the capability of the water system to continually produce safe drinking water. Public water systems in this state are regulated by the Department under the Florida Safe Drinking Water Act as promulgated by Florida Administrative Code Chapters 62-550, 555 and 560. The Department determines compliance with these regulations.

No major deficiencies were identified during the inspection. My congratulations to you and your staff on the condition of this system. Please note the section titled Outstanding Permits we would appreciate a written response within 15 days advising us of the status of these permits. Please address the response to me.

If you have any questions regarding the report and/or deficiencies, please contact Cliff McKeown at 850/488-3704 or e-mail (cliff.mckeown@dep.state.fl.us)

Sincerely,

Marlane Castellanos

Marlane Castellanos
Branch Manager

MC:cm
Enclosures
Compliance Inspection Report

cc: Franklin County Department of Health (jason_flowersi@doh.state.fl.us)
Scott Grubbs, (Scott.Grubbs@dep.state.fl.us)
Angela Chelette, NFWFMD (Angela.Chelette@nfwfmd.state.fl.us)
Cliff McKeown (cliff.mckeown@dep.state.fl.us)

"More Protection. Less Process"
www.dep.state.fl.us

Compliance Inspection Form

BASE INSPECTION AND SYSTEM INFO

Water system: ST. GEORGE ISLAND UTILITIES System PWS # 1190789 Date of inspection: 3/5/2010

System address: 250 JOHN KNOX ROAD - SUITE #4 City TALLAHASSEE State FL Zip 32303

System phone: 850/668-0440 Cell: 850/697-2836

Fax number: 850/927-3395 Email: water2nm@yahoo.com

Owner name: GENE BROWN Owner title: _____

Owner address: 250 JOHN KNOX ROAD - SUITE #4 City: TALLAHASSEE State FL Zip 32303

Owner phone: 850-668-0440 Cell: 850/519-7685

Fax number: _____ Email: gdb5@comcast.net

Operator required? Yes No (# "No", Operator sections not applicable) Operator name: MS. NITA MOLSBBE

Operator Email WATER2NM@YAHOO.COM Phone 850/927-2648 Fax: 850/927-3395

S=Satisfactory U=Unsatisfactory --Not Applicable **See comment below

SOURCE-WEIR/INTEGRITY

Well Number	1	2	3	4	
Well head sealed? (Pad/conduit/openings)	S	S	S	S	
Well casing 12" above grade?	S	S	S	S	
Casing vent compliant? (2003)	S	S	S	S	
Check valve compliant?	S	S	S	S	
Tap Compliant? (Smooth/12" high/pre-check)	S	S	S	S	
Flow measurable?	S	S	S	S	
Security measures compliant?	S	S	S	S	
O & M manual compliant?	S	S	S	S	
Cl storage compliant (no organics/acid/sun)	S	S	S	S	
Spare chlorinator compliant?	S	S	S	S	
Loss of chlorine alarm compliant?	S	S	S	S	
Treated sample tap provided?	S	S	S	S	
Security measures compliant?	S	S	S	S	
HYPO	Cl solution NSF approved?	S	S	S	S
	Solution vat compliant?(covered/etc)	S	S	S	S
	Safety: (Gloves/Apron/Eyewash/etc)	S	S	S	S
GAS	Cl room compliant?(separate/ventilation)	S	S	S	S
	Scales compliant?	S	S	S	S
	Auto switchover provided?	S	S	S	S
Safety: (SCBA/Gloves/Ammonia/Panic HW)	S	S	S	S	

Water system map compliant?	Yes CAD
Flushing of dead ends compliant?	Yes daily
Valve maintenance compliant?	Yes
Chlorine residual > 0.2 mg/L	Yes
Number of high service pumps?	3
High service pumps functional?	Yes
CCC devices tested annually?	Yes
Flow meter accuracy checked?	Yes
Emergency Preparedness Plan?	Yes
In use permits have clearance?	Yes
Operator visits compliant?	Yes
Plant checked 5 times per week?	Yes
MORs submittal compliant?	Yes

LAST INSPECTION FULLY COMPLIANT OR SUBWAY

Last inspection fully compliant? Yes No (see below)

Number of deficiencies last cited? N/A

Were any of the deficiencies "repeat"? N/A

Response from system submitted? N/A

Have deficiencies been addressed? _____

MONITORING SCHEDULE

CHEMICAL	ANALYSIS DATE	NEXT DUE
Nitrate/Nitrite	8-09	2010
Inorganics	9-08	2011
Secondaries	9-06	2011
VOCs	9-08	2011
Rads	9-08	see below
SOCs	9-08/waiver	2011
UOCs	7-97	susp
Asbestos	waiver	2011
TTHM/HAA5(qtrs)	8,12-09	3-10
Pb/Cu (tri)	2008	2011

Tank Number	1	2
Inspections compliant? (annual/5yr)	S	S
Overflow/Vents compliant? (elevated)	S	S
Pressure relief valve provided? (hydro)		
Security measures compliant?	S	S

FIELD SAMPLING RESULTS	Plant Cl (mg/L)	S	S	A	A	Plant=3.5	Distribution Cl (mg/L) / pH	State Park=2.5 West End=0.7
	Plant pH							

COMMENTS: HANK GARRETT WMSHG2000@YAHOO.COM



Florida Department of Environmental Protection

Tallahassee Branch Office
630-3 Capital Circle Northeast
Tallahassee, Florida 32301

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

April 23, 2009

Sent via email
(water2nm@yahoo.com)

Ms. Nita Molsbee
250 John Knox Road
Tallahassee, Florida 32303

Dear Ms. Molsbee:

A sanitary survey of the St. George Island Water System (PWS ID No. 1190789) was completed on April 22, 2009, by Cliff McKeown, Engineering Specialist. Your assistance during the inspection was greatly appreciated.

The purpose of this survey is to evaluate the capability of the water system to continually produce safe drinking water. Public water systems in this state are regulated by the Department under the Florida Safe Drinking Water Act as promulgated by Florida Administrative Code Chapters 62-550, 555 and 560. The Department determines compliance with these regulations.

No major deficiencies were identified during the survey. My thanks to you and your staff for their hard work and dedication.

Although no response to this report is required we would like to draw your attention to the remarks and recommendations section, and urge you to follow the actions recommended therein.

If you have any questions regarding the report and/or deficiencies, please contact Cliff McKeown at (850) 488-3704 or e-mail (cliff.mckeown@dep.state.fl.us).

Sincerely,

Marlane Castellanos

Marlane Castellanos
Branch Manager

MC:cm
Enclosures

Noted Enclosures

cc: Franklin County Department of Health (jason_flowersi@doh.state.fl.us)
John Pope, Potable Water Section Supervisor (john.pope@dep.state.fl.us)
Angela Chellette, NFWFMD (Angela.Chelette@nfwfmd.state.fl.us)
Cliff McKeown, (cliff.mckeown@dep.state.fl.us)

"More Protection, Less Process"
www.dep.state.fl.us



STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
SANITARY SURVEY REPORT
 COMMUNITY SYSTEMS

SYSTEM AND OWNER INFORMATION

System St. George Island Utilities County Franklin PWS ID # 1190789
 Address 250 John Knox Road - suite #4 City Tallahassee State/Zip Fl. 32303
 Phone 850-668-0440 Fax (850) 927-3395 E-mail water2nm@yahoo.com
 Owner Gene Brown Phone (850) 668-0440
 Address 250 John Knox Road, St. #4, Tallahassee, Fl. 32303

INSPECTION AND CONTACT INFORMATION

Date of this inspection 4-22-09 Date of last inspection 7-2-08
 DEP Representative(s) Cliff McKeown
 Person(s) Contacted Ms. Nita Molsbee
 Emergency Number (850) 524-1905 Cell (850) 697-2836 Office (850) 927-2648 Other _____

CERTIFIED OPERATORS AND CERTIFICATION NUMBER

Hank Garrett, B-7102
 Brenda M. Molsbee, C-15121 Cell (850) 524-1905

DIRECTIONS TO PLANT OR OFFICE (provide general directions to the office and/or plant)

SERVICE AREA

Service Area Characteristics Municipal System
 Population Served 4167 Basis 2.3/conn
 Service Connections 1976/1812* % Metered 100
 Design Capacity (gallons) 1,440,000
 Design Capacity without best well 1,440,000
 Storage Capacity 442,000 Ave. Day 702,602
 Max. Day (GPD) 1,060,000 % Design Capacity 42
 25% Max. Day 265,000 % Storage Capacity 60

EMERGENCY MEDIA CONTACT NUMBERS

NAME	PHONE NUMBER
WCTV	893-6666
WTXL	893-1313
Cumulus	201-3000
Tall. Democrat	599-2151

STANDBY POWER REQUIREMENTS

Emergency Preparedness Plan On file: Yes No Not Required
 Does plan include the following:
 Communication Chart Written Agreements Disaster Plan
 Standby Power Info Inventories Other
 Ave. Day Percentage of Auxiliary Supply 36
 Auxiliary equipment operated at least monthly? Yes No
 Any interconnects Yes No
 If yes, which systems: _____
 Comments: 351 plant

PERMANENT SOURCES OF RAW WATER:

Ground* How Many Wells 4
 Surface** Source _____
 Purchased*** PWS No. _____

TREATMENT IN USE AT THIS PLANT: (CHECK ALL THAT APPLY)

Number of Plants 1

<input checked="" type="checkbox"/> Aeration	<input type="checkbox"/> E.D.	<input type="checkbox"/> Iron Removal	<input type="checkbox"/> pH Adjustment	<input checked="" type="checkbox"/> Chlorination
<input type="checkbox"/> Filtration	<input type="checkbox"/> Lime Softening	<input type="checkbox"/> T&O Control	<input type="checkbox"/> Chlorination-Pre	<input type="checkbox"/> Filtr. Hi-Rate
<input type="checkbox"/> Recarbonation	<input type="checkbox"/> Settling	<input type="checkbox"/> Chlorination-Post	<input type="checkbox"/> Fluoridation	<input type="checkbox"/> Reverse Osmosis
<input type="checkbox"/> Zeolite Softener	<input type="checkbox"/> Coagulation	<input type="checkbox"/> Orthophosphate	<input type="checkbox"/> Aqua Mag	<input type="checkbox"/> Other-Specify

Any additional treatment is needed? _____ For control of what deficiencies? _____

OPERATOR STAFFING REQUIREMENTS

Number of Licensed Operators 2 Staffing comply with FAC 62-699? Yes No Visits per week: 6

*Total Connections/Active Connections

SOURCE: WELL AND PUMP INFORMATION

Well Number (or name)					
	Street location of well (street name)	139 Creamer St.	9 Adams St.	99 Island Dr.	203 Patty Lane
	Year Drilled	1975	1985	1993	2000
W	Depth Drilled (feet)	263	300	311	329
E	Drilling Method	Rotary	Cable Tool	Rotary	Rotary
L	Length, Outside Casing (feet)	170	190	185	190
L	Diameter, Outside Casing (inches)	8	8	12	12
	Material, Outside Casing	BI	BI	BI	BI
D	Type of Strainer	SS	Unknown	Galv. cone	Cone
A	Depth to Top of Strainer	63	38	115	116
T	Type of Grout	Neat Cement	Neat Cement	Neat Cement	Neat Cement
A	Depth to Static Water Level (feet)	3	9	0	13
	Normal Suction Lift (working level-ft)	60	38	32	39
P	Pump Type	Submersible	Submersible	Vertical Turbine	Vertical Turbine
U	Horse Power	50	50	50	75
M	Normal Yield, GPM / Test Yield (GPM)	500	500	800	1050
P	Capacity(GPM)	250	250	500	750
R	Protection From Surface Water	Yes	Yes	Yes	Yes
O	Is Inundation of Well Possible?	No	No	No	No
U	Well Ever Been Contaminated?	No	No	No	No
T	Check Valve Present in Line?	Yes	Yes	Yes	Yes
I	Proper Venting?	Yes	Yes	Yes	Yes
N	Date meter was last calibrated?	3-09	3-09	3-09	3-09
E	Meter diameter	4"	8"	8"	8"
	Accuracy %(+/-)	+3.0	-1.0	+3.0	+4.0
A	Auxiliary Capability (if yes, list type)	None	None	Gen.	Gen
D	Manual or Automatic?			Auto	Auto
C	Capacity (GPM)			600	750
G	Florida Unique ID# (GPS well tag)	AAA5300	AAA5299	AAA5297	
P	GPS latitude N (accuracy≈1m)	29°44'07.404"	29°44'13.121"	29°44'45.707"	
S	GPS longitude W (accuracy≈1m)	84°53'13.496"	84°53'06.381"	84°53'18.351"	

Comments:

● CHLORINATOR				
PLANT NUMBER (OR NAME)	1	2	3	4
Type of chlorination (if hypo list strength)	Gas	Gas	Hypo	Gas Under Const.
Condition of Chlorination Equipment	Good	Good	Good	Good
Capacity (PPD, GPD)	100	100	22gpd	100
Chlorine Feed Rate (PPD, GPD)	60	40	50%	40
Max Day Chlorine Usage (GPD)	Unknown	Unknown	Unknown	Unknown
Low Flow Switch?	N/A	N/A	N/A	N/A
Adequate Housing and Security?	Yes	Yes	Yes	Yes
Associated Well(s) (if any)	all	all	all	all
Auxiliary Power Capability?	Yes	Yes	No	Yes
O & M Log/Manual Onsite?	Yes	Yes	Yes	Yes
Chlorine Residual / pH				3.5
G Loss of Vacuum Alarm Telemetry?	Yes	Yes	N/A	No
Loss of Chlorine Alarm?	Yes	Yes	N/A	No
G Auto Switchover	Yes	Yes	N/A	No
Dual System	Yes	Yes	N/A	No
Evidence of Leaks	No	No	No	No
A Air-Pack Respirator Adequate?	Yes	Yes	N/A	No
Ammonia Smells Fresh	Yes	Yes	N/A	No
Chained Cylinders	Yes	Yes	N/A	No
S Fitted Wrench	Yes	Yes	Yes	No
Proper Ventilation	Yes	Yes	N/A	No
Scale Condition	Good	Good	N/A	No
Spare Parts/Backup Machine Operative? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No Spare Parts Retained/Required More capacity needed? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Comments: Booster Chlorinator is not used at this time. Due to increased population on the west end travel time has been greatly reduced.				

AERATOR

Type of Aerator Gravity - East

Tray Area or Weir Length 37 square feet

Condition of Screens Some minor repairs needed

Bloodworms None Condition of aerator Good

Adequate for Fe, H2S control Yes w/addition of cl2

AERATOR

Type of Aerator Gravity - West

Tray Area or Weir Length 50 square feet

Condition of Screens Some minor repairs needed

Bloodworms None Condition of aerator Good

Adequate for Fe, H2S control Yes w/addition of cl2

LIME SOFTENING

Quicklime or hydrated

Name of unit

Size and type

Any auxiliary chemicals used

Points of application (in unit)

Nature and abundance of flux

Appearance of sludge blanket

Is settling good? Excessive carry over

Any filter cementation

Effluent stability

Turbidity in clear well Secondary precipitation

Recarbonation type

Sludge recirculation Used

FLUORIDATION

Chemical Used as Dilution

Strength of Acid Use of acid

Corrosion Noted Feeder

Gelling or Plugging

Make and Model

Split Sample Agreement

Sufficient Analysis

Feeder Condition

STABILIZATION

pH Control Practiced?

Chemicals used

FILTERS & FILTRATION

Type of filters

Size and number

Length of filter runs

Can you see filter media? Clean after backwash?

Are mudballs visible? Binding?

What is the normal filter rate

What is the usual backwash rate

Capacity of filters Filters overloaded?

Loss in head gauge present?

At what head loss is BW done?

Cracks and channeling? Cementation ever occurred?

Where in relation to filtration is stabilization done?

High rate what is turbidity at interface Range of turbidity in effluent

Can you observe algae in filters?

Distance from top of media to trough overflow

REVERSE OSMOSIS

Make and type of units

Pressure required

Auxiliary chemicals

Proportion of waste used to product streams

Quality of effluent Stabilization

Type of Pretreatment Booster pump

Type of membranes

ZEOLITE SOFTENING

Unit (g & model)

Resin capacity Disinfection of beds

Grade of salt for regen

PUMPS AND PUMP CONTROLS						
PUMP CATEGORY	Jockey, High Service					
PUMP NUMBER →	1	2	3	4		
PUMP TYPE	centrifugal	centrifugal	centrifugal	centrifugal		
MOTOR HP	50	50	50	7.5		
DATE INSTALLED	1975	2002	2002	2002		
CAPACITY (GPM)	500 Gpm	850 Gpm	500 Gpm	100 Gpm		
AUXILIARY CAPACITY?	Yes	Yes	Yes	Yes		
PROPER SECURITY?	Yes	Yes	Yes	Yes		
CONDITION OF PUMP	Good	Good	Good	Good		
MAINT. SCHEDULE	annual	annual	annual	annual		
DATE LAST SERVICED	8/08	8/08	8/08	3/08		
Pump 4 no longer in use						

STORAGE FACILITIES:			
TANK NUMBER →	1	2	Comments
TYPE (GROUND, ELEVATED, HYPO)	Ground	Elevated	
YEAR OF CONSTRUCTION	1975	1998	
CAPACITY (GALLONS)	292,000	150,000	
MATERIAL	Concrete	Steel	
GRAVITY DRAIN CAPACITY/DIAMETER	10 hrs.	Unknown	
OVERFLOW STRUCTURES PROPER?	Yes	Yes to GST	
BYPASS CAPACITY	100%	100%	
COVERED/SCREENED OPENINGS	Yes	Yes	
PRESSURE GAUGE	N/A	N/A	
ON/OFF PRESSURE (PSI)	N/A	N/A	
HGT. TO BOTTOM OF EL. TANK (FT)	N/A	82.5	
HGT. TO MAX. WTR. LEVEL (FT)	11	114.5	
DATE OF LAST ANNUAL INSPECTION	4-09	3-09	
YEAR OF LAST 5-YEAR INSPECTION	1-06	3-09	
YEAR OF LAST WASHOUT	1-06	3-09	
Does system provide fire protection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Security Adequate? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Low Level Alarm? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Does current storage capacity comply with requirements in FAC 62-555? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
COMMENTS :			

DISTRIBUTION SYSTEM

Material of mains? PVC System looped? Partially How many hydrants? 116
 Any fire hydrants < 6" lines? Yes No Unknown Max. pipe diameter 8" Min. pipe diameter 2"
 General operation pressure 80 PSI Lowest pressures >50 Location of low pressure East End
 Number of dead ends 84 How many without flush hydrants? 0 Flushing program? Monthly
 Number of line valves 424 How often exercised With repairs Properly Mapped? Yes Properly Marked? Yes
 System Maps Adequate? Yes Any uncleared permits? 2 Any uncleared and in use? No
 Percent water loss 8% Does the system have reuse? No Comments _____

CROSS CONNECTION CONTROL

Cross Connection Control Program Meet Requirements? Yes No Comment: _____
 Testing Frequency? Annually Tracking: Hard Copy CPU # of BFDs: 604 Hydrant Meters Lift Stations WWTP
 Date of Last Audit (commercial or residential): 2009 Name of Certified BFD Tester: Various testers used

Chlorine & pH	Remote 1	Remote 2	Remote 3	Remote 4
Chlorine Residual	2.5 mg/l	3.5 mg/l		
pH				
Location	West End	East End		

COMPLIANCE MONITORING

Compliance Schedule: The following parameters are due during the year shown:

Inorganics	2011	Secondaries	2011	VOCs	2011	Radiologicals	2014-17
SOCs	2011	Asbestos	2011	TTHMs/HAA5	2009	Pb & Cu	2011

System out of compliance with any of the above parameters? TTHM's
 Testing Equipment & Reagents Adequate Inadequate Comment: _____
 Bacteriological Sampling Plan: Adequate Inadequate Comment: _____
 Disinfection Byproducts Plan: Adequate Inadequate Comment: _____

MANAGERIAL/FINANCIAL

How is the system structured? (investor) Yes No Does the system follow a budget? Yes No
 Preventative Maintenance Program in place? Yes No Is adequate training provided to water system personnel? Yes No
 Comment: Uses Work Orders

In the space below, give a rough sketch of the flow diagram of the plant, showing all important parts of the plant (not to scale):

INSPECTOR'S SIGNATURE *Cliff McKeown* TITLE ENGINEER SPECIALIST DATE: April 23, 2009
 CLIFF MCKEOWN

APPROVED BY *Marlane Castellanos* TITLE BRANCH MANAGER DATE: April 23, 2009
 MARLANE CASTELLANOS

SCHEDULE OF DEFICIENCIES

St. George Island Utilities PWS I.D. No. 1190789

Survey of April 22, 2009

NO MAJOR DEFICIENCIES NOTED

REMARKS AND RECOMENDATIONS

St. George Island Utilities PWS I.D. No. 1190789

Survey of April 22, 2009

TTHM'S remain slightly high although they are reported to be in compliance. Some questions exist regarding the accuracy of test results due to improper preservation of samples. This should be investigated thoroughly. Also in the future make sure all sample containers are properly prepared prior to sampling. This should be completed well in advance of any date in Stage II Disinfection Byproducts Rules requiring compliance.

OPERATING PERMIT (NWFWMMD)

**NORTHWEST FLORIDA WATER MANAGEMENT DISTRICT
INDIVIDUAL WATER USE PERMIT**
(NWFWMMD Form No. A2-E)

Permit granted to: Water Management Services, Inc. Permit No.: 20040013 Renewal/Modification
3200 Commonwealth Blvd. Date Permit Granted: June 22, 2006
Tallahassee, Florida 32303 Permit Expires On: July 1, 2011
(Legal Name and Address) Source Classification: Floridan Aquifer
Use Classification: Public Supply
County: Franklin Area: B Location: Section 30, 31 1/4 Section _____
Application No.: I06687 Township 8 South Range 6 West

Terms and standard conditions of this Permit are as follows:

1. That all statements in the application and in supporting data are true and accurate and based upon the best information available, and that all conditions set forth herein will be complied with. If any of the statements in the application and in the supporting data are found to be untrue and inaccurate, or if the Permittee fails to comply with all of the conditions set forth herein, then this Permit shall be revoked as provided by Chapter 373.243, Florida Statutes.
2. This Permit is predicated upon the assertion by the Permittee that the use of water applied for and granted is and continues to be a reasonable and beneficial use as defined in Section 373.019(4), Florida Statutes, is and continues to be consistent with the public interest, and will not interfere with any legal use of water existing on the date this Permit is granted.
3. This Permit is conditioned on the Permittee having obtained or obtaining all other necessary permit(s) to construct, operate and certify withdrawal facilities and the operation of water system.
4. This Permit is issued to the Permittee contingent upon continued ownership, lease or other present control of property rights in underlying, overlying, or adjacent lands. This Permit may be assigned to a subsequent owner as provided by Chapter 40A-2.351, Florida Administrative Code, and the acceptance by the transferee of all terms and conditions of the Permit.

5. This Permit authorizes the Permittee to make a combined average annual withdrawal of 714,000 gallons of water per day, a maximum combined withdrawal of 1,240,000 gallons during a single day, and a combined monthly withdrawal of 32,700,000 gallons. Withdrawals for the individual facilities are authorized as shown in the table below in paragraph six. However, the total combined amount of water withdrawn by all facilities listed in paragraph six shall not exceed the amounts identified above.
6. Individual Withdrawal Facility Authorization

WITHDRAWAL POINT ID NO.	LOCATION SEC,TWN,RNG	GALLONS/DAY AVERAGE	GALLONS/DAY MAXIMUM
WMS #1/AAA5300	Sec. 31, T8S, R6W		360,000
WMS #2/AAA5299	Sec. 31, T8S, R6W		360,000
WMS #3/AAA5297	Sec. 31, T8S, R6W		720,000
WMS #4/AAD9754	Sec. 30, T8S, R6W		720,000
WMS-MO #1/AAB0501	Sec. 31, T8S, R6W		-0-
WMS-MO #2/To Be Assigned	Sec. 30, T8S, R6W		-0-

7. The use of the permitted water withdrawal is restricted to the use classification set forth by the Permit. Any change in the use of said water shall require a modification of this Permit.
8. The District's staff, upon proper identification, will have permission to enter, inspect and observe permitted and related facilities in order to determine compliance with the approved plans, specifications and conditions of this Permit.
9. The District's staff, upon providing prior notice and proper identification, may request permission to collect water samples for analysis, measure static and/or pumping water levels and collect any other information deemed necessary to protect the water resources of the area.
10. The District reserves the right, at a future date, to require the Permittee to submit pumpage records for any or all withdrawal points(s) covered by this Permit.
11. Permittee shall mitigate any significant adverse impact caused by withdrawals permitted herein on the resource and legal water withdrawals and uses, and on adjacent land use, which existed at the time of permit application. The District reserves the right to curtail permitted withdrawal rates if the withdrawal causes significant adverse impact on the resource and legal uses of water, or adjacent land use, which existed at the time of permit application.
12. Permittee shall not cause significant saline water intrusion or increased chloride levels. The District reserves the right to curtail permitted withdrawal rates if withdrawals cause significant saline water intrusion or increased chloride levels.

13. The District, pursuant to Section 373.042, Florida Statutes, at a future date, may establish minimum and/or management water levels in the aquifer, aquifers, or surface water hydrologically associated with the permitted withdrawals; these water levels may require the Permittee to limit withdrawal from these water sources at times when water levels are below established levels.
14. Nothing in this Permit should be construed to limit the authority of the Northwest Florida Water Management District to declare water shortages and issue orders pursuant to Section 373.175, Florida Statutes, or to formulate and implement a plan during periods of water shortage pursuant to Section 373.246, Florida Statutes, or to declare Water Resource Caution Areas pursuant to Chapters 40A-2.801, and 62-40.41, Florida Administrative Code
 - (a) In the event of a declared water shortage, water withdrawal reductions shall be made as ordered by the District.
 - (b) In the event of a declared water shortage or an area as a Water Resource Caution Area, the District may alter, modify or inactivate all or parts of this permit.
15. The Permittee shall properly plug and abandon any well determined unsuitable for its intended use, not properly operated and maintained, or removed from service. The well(s) shall be plugged and abandoned to District Standards in accordance with Section 40A-3.531, Florida Administrative Code.
16. Any Specific Permit Condition(s) enumerated in Attachment A are herein made a part of this Permit.



Authorized Signature

Northwest Florida Water Management District

ATTACHMENT A
Water Management Services, Inc.

Individual Water Use Permit No. 20040013
Individual Water Use Application No. I06318

1. The Permittee shall reference the utility's production and monitoring wells by their Florida Unique Well Identification Number (FLUWID AAA####) when corresponding with the District. All water quality and water level data submitted shall clearly identify, by FLUWID #, the well associated with the data.
2. The Permittee shall maintain, in working order, in-line totaling flow meters on all production wells.
3. The Permittee shall limit the combined withdrawal amounts from wells WMS #1 (AAA5300), WMS #2 (AAA5299), and WMS #3 (AAA5297) to no more than 50 percent of its total annual withdrawal. The Permittee shall not withdraw at a rate of more than 250 gpm from either well WMS #1 (AAA5300) or WMS #2 (AAA5299), nor withdraw at a rate of more than 500 gpm from either well WMS #3 (AAA5297) or WMS #4 (AAD9754). The Permittee, by January 31 of each year, shall submit certification and documentation to the District that the utility has complied with this condition.
4. The Permittee, by January 31, April 30, July 31, and October 31 of each year, shall report the following information.
 - a. The data required on Water Use Summary Reporting Form NFWWMD A2-I for each production well for the preceding three months even if no water is used.
 - b. Static water level data for all all production and monitor wells during the first two weeks of each month. The Permittee shall use a District-approved method and shall not withdraw water from the wells for as long as possible (preferably 24 hours but at least four hours) prior to measuring the water level. All measurements shall be taken from the same measuring point. If the measuring point elevation is different from land surface, the Permittee shall provide the difference between these two elevations. All measurements shall reflect the depth to water from land surface elevation.

The Permittee, if preferred, may submit the report electronically by e-mailing it to compliance@nfwfwmnd.state.fl.us.

5. The Permittee, during the first two weeks of January, April, July and October, shall conduct water quality sampling from all production and monitor wells. The water-quality analyses shall test for the following parameters: chloride, sodium and total-dissolved solids. Prior to sampling, the Permittee shall purge a minimum of three to five well volumes from the wells, and shall report with each set of test results, the duration of

purging, purge volume, and purge rates used. The Permittee shall submit the results by the last day of the following month (e.g., data for samples collected in January are due by February 28). The Permittee, if preferred, may submit the report electronically by e-mailing it to compliance@nwfwmd.state.fl.us.

6. The Permittee, by July 31 of each year, shall report on the progress of implementation of the following water conservation/efficiency measures. The Permittee shall:
 - a. Provide an account of the amount of water withdrawn, the actual amount of water accounted for through the billing system, and an estimate of unaccounted for water by suspected cause (e.g., leaks, line breaks, inaccurate meters, unmetered users, line flushing, etc.). The Permittee shall also submit a progress report, including documentation, to the District of the unaccounted for totals and the actions taken to account for and reduce system water losses to less than ten percent of the water withdrawn during the previous year (amount withdrawn verses amount delivered).
 - b. Submit a copy of the present rate structure and tap fees.
 - c. Consider revising existing membership and/or tap fees (non-rate) fees to promote the installation of minimally sized connections/meters to meet non-discretionary water demand and discourage wasteful, discretionary use (e.g., irrigation, aesthetic use). The Permittee shall report to the District any recommended revisions and any actions undertaken as part of the required evaluation.
 - d. Provide documentation to the District that WMS have formally requested that Franklin County adopt a Florida Friendly Landscape Ordinance that, at a minimum, meets the provisions of Chapter 373.185, Florida Statutes, and an Irrigation Efficiency Ordinance that provides for year-round enhanced irrigation efficiency hours of before 10 a.m. and after 4 p.m. and irrigation for a maximum number of days each week (e.g. two days).
 - e. Provide updated status of its plumbing fixtures retrofit program designed to enhance water use efficiency. The Permittee, at a minimum, shall promote and make available to its customer's toilet tank displacement and faucet and showerhead aerators/flow-restrictors. The customers' kits shall provide sufficient units to retrofit all faucets and showerheads within a household or business establishment. The Permittee shall provide special assistance to hotels, motels and condominiums.
 - f. Provide updated status of a comprehensive public education and information campaign to promote water conservation and efficiency. The campaign shall consist of newspaper notices and articles, periodic radio and television announcements, periodic mail-outs to customers and the posting of signs and informational brochures in the rooms of hotels, motels and rental property. The campaign shall be oriented to emphasize the program being implemented and water conservation in general. The campaign shall be designed to regularly reach permanent and part-time residents and tourists.

7. The Permittee, by April 30 of each year, shall submit the following information for the previous year:
 - a. The total amount of water being billed to each type of customer (e.g., residential, commercial) within its service area and each total divided by the number of meters of each customer type. This analysis will be used to identify trends in total water use and water conservation/efficiency within the service area. The Permittee may submit additional analytical information in support of its water conservation and efficiency initiatives.
 - b. A summary of per-capita demands within its service area for each year and how the demands were calculated. The method utilized to estimate per capita demands shall be sufficiently documented that the calculated demands can be used to measure water efficiency/conservation progress within the WMS service area. The method of estimating the population served shall also be provided.
 - c. The number of active service connections.
8. The Permittee shall mitigate any adverse impact caused by withdrawals permitted herein on the water resources of the area or on domestic or other legal water withdrawals and uses. The Permittee shall report the occurrence of any such impacts to the District and shall identify the mitigation action undertaken to address the impacts or provide for the user to be connected to a water-supply system.

NOTICES OF VIOLATION, CONSENT ORDERS, LETTERS OF
NOTICE, WARNING NOTICES



Jeb Bush
Governor

Department of Environmental Protection

Northwest District
160 Governmental Center
Pensacola, Florida 32502-5794

Colleen M. Castille
Secretary

September 7, 2006

SENT VIA EMAIL
(gdb5@comcast.net)

Mr. Gene D. Brown
Water Management Services
3200 Commonwealth Boulevard
Tallahassee, Florida 32303

Dear Mr. Brown:

Enclosed, please find a copy of the executed short form Consent Order (OGC File No. 06-1298-19-PW) failure to sample four consecutive quarters for Total Trihalomethanes as required when the maximum contaminant level is exceeded.

All corrective actions have been completed, including the payment of \$2,100 in civil penalties and Department expenses.

If you have any questions, please call Karianne Pezdirtz at (850) 595-8300, extension 1142, or email at karianne.pezdirtz@dep.state.fl.us.

Sincerely,

David P. Morres, P.E.
Program Administrator
Water Facilities

DPM/kp
Enclosure

cc: Nita Molsbee, Water Management Services (water2nm@yahoo.com)
Hank Garrett, Water Management Services (wmsHG2000@yahoo.com)
Cliff McKeown, Tallahassee Branch Office (cliff.mckeown@dep.state.fl.us)
Gerry Neubauer, Tallahassee Branch Office (gerry.neubauer@dep.state.fl.us)
Jennifer Grant, Tallahassee Branch Office (jennifer.grant@dep.state.fl.us)
Lea Crandall, Office of General Counsel (lea.crandall@dep.state.fl.us)

"More Protection, Less Process"



Jeb Bush
Governor

Department of Environmental Protection

Northwest District
160 Governmental Center
Pensacola, Florida 32502-5794

Colleen M. Castille
Secretary

July 7, 2006

SENT VIA FAX/EMAIL

(8505770441@fax1.dep.state.fl.us)

Mr. Gene D. Brown
Water Management Services
3200 Commonwealth Boulevard
Tallahassee, Florida 32303

Dear Mr. Brown:

The purpose of this proposed settlement (OGC File No. 06-1298-19-PW) is to resolve the matter concerning Water Management Services (PWS #1190789), located in Franklin County, previously identified by the Department in the enclosed Warning Letter dated June 13. The Department found that you were in violation of Department rules and statutes for failing to sample four consecutive quarters for Total Trihalomethane as required when the maximum contaminant level is exceeded. In order to resolve this matter, you are assessed civil penalties in the amount of \$2,000, along with \$100 to reimburse the Department costs, for a total of \$2,100. The Department acknowledges that the payment of these civil penalties does not constitute an admission of liability. This payment must be made payable to the Department of Environmental Protection by cashier's check or money order and shall include OGC File Number 06-1298-19-PW and the notation "Ecosystems Management and Restoration Trust Fund." Payment shall be sent to the Department of Environmental Protection, 160 Governmental Center, Pensacola, Florida, 32502-5794, within 30 days of your signing this letter.

Your signature on this letter constitutes your acceptance of the Department's offer to resolve this matter on these terms. If you elect to sign this letter, please return it to the Department at the address indicated above. The Department will then countersign the letter and file it with the Clerk of the Department. When the signed letter is filed with the Clerk, the letter shall constitute final agency action of the Department which shall be enforceable pursuant to Sections 120.69 and 403.121, Florida Statutes.

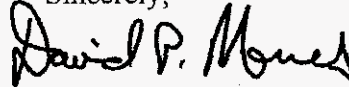
If you do not sign and return this letter to the Department at the District address within 30 days, the Department will assume that you are not interested in settling this matter on the above-described terms, and will proceed accordingly.

"More Protection, Less Process"

OGC FILE NO. 06-1298-19-PW
PAGE TWO

None of your rights or substantial interests are determined by this letter unless you sign it and it is filed with the Department Clerk.

Sincerely,



David P. Morres, P.E.
Program Administrator
Water Facilities

DPM/kp
Enclosure

cc: Nita Molsbee, Water Management Services (water2nm@yahoo.com)
Hank Garrett, Water Management Services (wmshg2000@yahoo.com)
Cliff McKeown, Tallahassee Branch Office (cliff.mckeown@dep.state.fl.us)
Gerry Neubauer, Tallahassee Branch Office (gerry.neubauer@dep.state.fl.us)
Jennifer Grant, Tallahassee Branch Office (jennifer.grant@dep.state.fl.us)

FOR THE RESPONDENT:

I, Gene Brown on behalf of Water Manag. Serv., HEREBY ACCEPT
THE TERMS OF THE SETTLEMENT OFFER IDENTIFIED ABOVE.

By: [Signature]

Date: 8-17-06

.....
FOR DEPARTMENT USE ONLY

DONE AND ENTERED this 7th day of SEPTEMBER, 2006.

STATE OF FLORIDA DEPARTMENT
OF ENVIRONMENTAL PROTECTION

[Signature]

David P. Morres, P.E.
Program Administrator
Water Facilities

FILING AND ACKNOWLEDGMENT filed, on this date, pursuant to §120.52, Florida Statutes, with the
designated Department clerk, receipt of which is hereby acknowledged

[Signature] 9/17/06
Clerk Date

FIELD EMPLOYEES

FIELD EMPLOYEES

CERTIFIED OPERATOR AND MANAGER

Brenda M. (Nita) Molsbee

Class C Drinking Water License No. 15121

FULL TIME MANAGEMENT OF OFFICE INCLUDING: Meet with customers in the office and in the field, answer phones (cell and office).

BILLING CLERK: Enter and process all meter readings; process bills; process payments daily; make bank deposits daily; enter customer account data.

PLANT MANAGER AND LICENSED OPERATOR: Inspect wells, aerators and plant daily; issue work orders; supervise and coordinate work for field technicians daily; order parts and supplies; schedule plant and well maintenance; supervise cross connection control program; responsible for valve program; responsible for emergency response program; responsible for dead-end flushing program; responsible for annual consumer confidence report; supervise, inspect and audit service locations; record daily pumping logs and report to state agencies; chlorine, bacteriological and other sampling daily, monthly and quarterly as required by DEP; attend state and county meetings relating to utility company issues.

CERTIFIED OPERATOR AND ASSISTANT MANAGER

Marvin H. (Hank) Garrett

Class B Drinking Water License No. 0007102

Class C Wastewater License No. 0007469

ASSISTANT PLANT OPERATOR AND ASSISTANT MANAGER: Assist certified operator and manager with emphasis in the field specifically supervision of field technicians; order parts and supplies; meet with customers; read meters; locate water lines for cable and electric companies; maintain wells and plant; inspect and audit service locations; measure wells; purge wells; flush system; hydrant maintenance; operate backhoe; maintain and repair electronic controls; install water lines; install new services; repair leaks.

FIELD TECHNICIANS

Earl Coulter, Bobby Garrett, 1/1/09-12/31/09

Reed Brown, 7/1/09-7/21/09

Jesse E. Page, 8/7/09-10/21/09

William C. Abbott, 11/18/09-12/31/09

FIELD TECHNICIAN DUTIES

DAILY

- INSPECT EACH OF FOUR WELLS
- READ AND RECORD IN LOG METERS AT FOUR WELLS
- READ PLANT METERS
- FLUSH LINES AT EACH END OF ST. GEO. ISL.
- CHECK CHLORINE RESIDUALS IN LOCATIONS THROUGHOUT ST. GEO. ISL.

WEEKLY

- REPLACE CHLORINE CYLINDERS 2-3 TIMES PER WEEK
- READ GENERATOR
- GREASE BACKHOE

MONTHLY

- READ EVERY CUSTOMER METER FOR BILLING

ROUTINE DUTIES

DAILY-WEEKLY-MONTHLY

- EXERCISE, LUBRICATE AND MAINTAIN HYDRANTS
- LOCATE AND MAINTAIN VALVES
- REPLACE AND REPAIR METER RISERS AND CUSTOMER METERS
- BUILD METER RISERS
- REPAIR LEAKS
- CLEAN WELL HOUSES, CLEAN AND MAINTAIN PROPERTY AT FOUR WELLS, PLANT AND ELEVATED TANK
- INSTALL NEW HYDRANTS
- INSTALL NEW METERS
- RELOCATING METERS
- RESPOND TO CUSTOMER CALLS
- MAINTENANCE OF CONTROL/MODEMS
- RESPOND TO SYSTEM ALARMS
- CLEAN AERATORS
- LOCATE AND MARK WATER LINES IN RESPONSE TO REQUESTS BY SUNSHINE ONE CALL
- GENERAL MAINTENANCE OF PLANT, WELLS AND EQUIPMENT
- TEST METERS

- INSPECTION OF ANY AND ALL SERVICE LOCATIONS FOR PURPOSES OF AUDIT, CROSS CONNECTION CONTROL PROGRAM, SHALLOW WELLS AND CHANGES IN CUSTOMER USE, i.e., CONVERSION TO COMMERCIAL, CONDOS, APARTMENTS, ETC.

EMERGENCIES 24/7 AS NEEDED

NOTE: 100% of WMSI employees carry a cell phone and beeper and are available to respond to emergencies 24/7.

SALARY ALLOCATIONS

FOR ALL FIELD EMPLOYEES, SALARY ALLOCATIONS TO EXPENSE OR CAPITAL, WHEN APPROPRIATE, ARE BASED ON TIME AND WORK DESCRIPTION.

VEHICLES

WATER MANAGEMENT SERVICES, INC.
VEHICLE LISTING

Description	VIN No.	Original Cost	Annual Lease Exp.	Assigned to	Utility Allocation	Allocation Method
2008 GMC Truck	1GTHK29KX8E132047	\$ 41,870	N/A	Gene D. Brown	50%	Use
2007 Chevrolet SUV	1GNFC13J47R156843	\$ 30,413	N/A	Sandra Chase	50%	Use
2008 GMC Truck	1GDHK29K68E145924	\$ 30,312	N/A	Field technician	100%	Use
2010 Toyota Truck	5TFUW5F18AX119260	Leased	\$ 7,940.64	Field Technician	100%	Use
2009 Chevrolet Truck	1GCEC19049Z260948	Leased	\$ 8,863.80	Brenda Molsbee	100%	Use

CUSTOMER COMPLAINTS

CUSTOMER COMPLAINTS
2009

CHOLLET RAMSEY
SERVICE LOCATION NO. 1583

Ms. Ramsey has been a customer for several years. Her initial deposit was refunded with interest. Because her monthly payments were delinquent on at least three occasions between October 2008 and October 2009, we sent her a letter requesting a new deposit of \$139 consistent with the PSC rules and our tariff. Ms. Ramsey called our office to protest. We refused to waive the deposit and she filed a complaint with the Florida Public Service Commission.

WMSI responded to the complaint and our customer subsequently paid the deposit.

PHILLIP BRIDGES
SERVICE LOCATION NO. 1663

Mr. Bridges paid a \$75 and became our customer in 2004. In March of 2005 his \$75 deposit was refunded with interest. Between July 2007 and January 2009, his payments were delinquent five times. Accordingly, we requested a new deposit of \$83. He filed a complaint with the PSC and we responded. Mr. Bridges subsequently paid the deposit.

These requests for new deposits is supported by FPSC Rule 25.30-311(7) and Section 24 of our tariff which allows us to collect a new or additional deposit upon reasonable written notice of not less than 30 days, in order to secure payment of current bills. It further provides that the total amount of the required deposit shall not exceed an amount equal to the average actual charge for water service for two monthly billing periods for the 12-month period immediately prior to the date of the notice. Water Management pays interest on customer deposits at the rate of 6% per annum. The payment of interest is made once each year as a credit on your regular monthly bill and on your final bill when service is discontinued. After a residential customer has established a satisfactory payment record and has had continuous service for a period of 12 months, we refund the deposit if the customer has not, in the preceding 12 months, made more than one late payment; paid with a check refused by a bank; been disconnected for non-payment; tampered with the meter; or used service in a fraudulent or unauthorized manner.

Company Name: Water Management Services, Inc.
Billing Complaints from 1/1/2009 to 2/24/2010
(2 complaints found)

Complaint Number	Date Received	General Status	Process Review	Reply Date	Date Closed
0912894	12/22/2009	Closed	No	1/5/2010	2/1/2010
0900757	10/30/2009	Closed	No	11/4/2009	12/8/2009