

State of Florida



Public Service Commission

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

RECEIVED-FPSC

AUG 24 AM 9:48

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

COMMISSION
CLERK

DATE: August 24, 2011
TO: Ann Cole, Commission Clerk, Office of Commission Clerk
FROM: Robert Simpson, Engineering Specialist II, Division of Economic Regulation *RS*
RE: Docket No. 110165-SU; Application for staff-assisted rate case in Highlands
 County by Utility Corporation of Florida, Inc.

Attached are responses from the Utility regarding the July 11, 2011 letter which requested engineering information from Utility Corporation of Florida, Inc. Please place the attached documents in the docket file.

Should you have any questions, regarding this matter, please contact me.

Attachments

DOCUMENT NUMBER-DATE

06081 AUG 24 =

FPSC-COMMISSION CLERK

Date: August 11, 2011

To: Robert Simpson, FPSC

Re: Utility Corporation of Florida, Inc.

5. The only customer complaints we have had are in reference to the solid waste holding tanks on customers' properties. Our facility treats **wastewater** only. Solids are collected in small tanks to break down and become wastewater, which is then pumped to our collection line. Customers have had the misconception that the collection tanks were part of the UCF system. When tank pumps have needed repair, they have been distressed to find that they need to pay for the repairs. The Homeowners' Associations have begun deducting the cost of repairs from their monthly wastewater treatment bills. Enclosed is a letter to an individual homeowner, and a letter from a Homeowners' Association. This issue is on-going.

6. I don't know how much detail you want here, but you should be able to find what you need in the engineering report excerpts enclosed.

7. As you will see on the enclosed map, we have planned for future expansion of high density development in Spring Lake. However, there has been no new construction for several years, and we do not expect to see any soon.

9. The enclosed spread sheet gives information on capital improvements to the plant. There have been repairs, as well. I will work on getting more information about them.

11. The only commercial customer we have is Spring Lake Club, a golf resort. The clubhouse and cart barn are charged for 4 ECU's.

11 AUG 24 11 58 AM '11

DOCUMENT NUMBER-DATE

06081 AUG 24 =

FPSC-COMMISSION CLERK

January 12, 2011

Utility Corporation of Florida

100 Healthy Way

Sebring, FL 33876

RE: WATERWAY PATIO HOMES I

Gentlemen:

You will please find our check made payable to your utility, in the amount of \$ 459⁰⁰ representing payment of the April monthly statement received by our Association from your company.

Please be advised that it has been and remains our position, that the maintenance of the STEP sewer system within our development is the responsibility of your utility. In order to assure the proper treatment of waste water generated by our Development, we have paid maintenance for the foregoing STEP System including payment of cost of the electricity for said system. We have been forced to do so because your company has defaulted in its obligations to maintain said STEP System.

Please be advised that the enclosed payment is made under protest until this matter can be resolved either administratively or judicially.

Very truly yours,

Jim Foote
PRESIDENT

Board of Directors

Waterway Patio Homes Condominium Association, Inc

Utility Corporation of Florida, Inc

200 Healthy Way
Sebring, FL 33876

Invoice

Date	Invoice #
3/1/2011	894

Bill To
Waterway Patio Homes I C/O Bob Frederick P.O. Box 94 Lorida, FL 33857

P.O. No.	Terms	Project
	Net 30	

Quantity	Description	Rate	Amount
42	March wastewater service	32.00	1,344.00
42	April wastewater service - <i>885-pump replacements.</i>	32.00	1,344.00
Total			\$2,688.00

Utility Corporation of Florida, Inc.

100 Clubhouse Lane, Sebring, FL 33876

November 2, 2010

Jeffrey Klingbiel
1117 Dogwood Terrace
Sebring, FL 33876

Dear Mr. Klingbiel,

You have recently had repairs made to your septic collection tank , and you would now like the Utility Corporation of Florida, Inc. to pay for those repairs. As I explained to you in person, we are a regulated public utility, and we are not permitted to repair homeowners' tanks.

The Florida Public Service Commission has granted the Utility Corporation of Florida certificate # SU916-09-S-R to operate as a public utility, and has set our fee at \$32 per unit. A review of the approved tariff (available on-line or in our office) will show that the \$32 fee does not include maintenance or repair of customers' collection tanks or pumps. We are licensed to treat effluent delivered to our collection system only, and our fee structure has been set accordingly.

Please note that we are specifically excluded from the "maintenance and operation of the Customer's pipes and facilities" in Sections 7.0 and 19.0 of the approved tariff. The "Customer's Installation" is defined in section 7.0 of original sheet 5.0 of the tariff: "all pipes, shut-offs, valves, fixtures and appliances or apparatus of every kind and nature used in connection with or forming a part of the installation for disposing of wastewater located on the Customer's side of the Service Connection whether such installation is owned by the Customer or used by the Customer under lease or other agreement."

Pursuant to FPSC ruling 25-30.125, the Utility Corporation of Florida Inc. has on file "maps, drawings and/or records of its system and facilities" which clearly show that homeowners' collection tanks are NOT a part of our system. These drawings are also a matter of public record as a part of our application to the Public Service Commission, docket # 080079-SU.

While we have the right to inspect homeowners' tanks and pumps, and to refuse service to properties having substandard systems, we have neither the authority nor the fee structure to make repairs. (see original sheet number 19.0, item 1).

I hope this clarification is helpful.

Sincerely,

Lois Schlabach, Secretary/Treasurer

CC: Florida Public Service Commission

Phone: 863-414-2586

Fax: 863-655-0600

January 31, 2011

Utility Corporation of Florida, Inc., II
200 Healthy Way
Sebring, FL 33876

**RE: WATERWAY PATIO HOMES CONDOMINIUM ASSOCIATION
PHASE II**

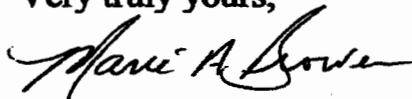
To Whom It May Concern:

Please find the Association check enclosed in the amount \$1,024.00 (one thousand and twenty-four dollars.) The check made payable to your utility for payment of the statement received by our Association from your utility company.

Please be advised that it has been and remains our position, that the maintenance of the STEP System within our development is the responsibility of your utility. In order to assure the proper treatment of wastewater generated by our Development, we have paid maintenance for the foregoing STEP system including payment of cost of the electricity for said system. We have been forced to do so because your company has defaulted in its obligations to maintain said STEP System.

Please be advised that the enclosed payment is made under protest until this matter can be resolved either administratively or judicially.

**On behalf of the Board of Directors,
Very truly yours,**



**Marie A Brower
CAM**



Florida Department of Environmental Protection

South District
P.O. Box 2549
Fort Myers, Florida 33902-2549

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Mimi A. Drew
Secretary

December 15, 2010

Mr. Michael A. Tellschow
100 Clubhouse Lane
Sebring, FL 33876-8300

Mr. J. Timothy Sheehan
Sheehan & Celaya
300 Dal Hall Boulevard
Lake Placid, FL 33852

RE: Highlands County - DW
Responsibility for STEP Systems

Dear Mr. Tellschow and Mr. Sheehan:

The purpose of this letter is to address recent questions regarding the responsibility of operation and maintenance of the Septic Tank Effluent Pumping (STEP) sewer systems at several subdivisions, to wit, Country Club Villas and Waterway Patio I & II. Ultimately, the owner of the STEP sewer systems is responsible for their operation and maintenance. However, there appears to be a question as to who owns the STEP sewer systems.

Mr. Tellschow, on behalf of Spring Lake Club, Inc., provided to the Department a deed purporting to show the transfer of ownership of all the common areas and appurtenances to the Country Club Villas I of Spring Lake Homeowners' Association, Inc (homeowners association). The Department understands that it is Mr. Tellschow's position that this transfer of ownership included the STEP sewer systems to the various subdivision associations as an "appurtenances" to the common areas. However, the Department also understands that it is the homeowners' associations' position that the STEP sewer systems were not transferred as "appurtenances" and that they never accepted ownership of the STEP sewer systems. The deed submitted to the Department is silent on whether the STEP systems are included as "appurtenances."

It is clear that the responsibility to maintain and operate the STEP systems falls to the owner of the systems however; the Department does not have the authority or jurisdiction to determine the property rights of individuals, this is instead the province of the circuit courts of Florida. See Art. V, Sec. 20(c)(3), Florida Constitution; see also § 26.012(2)(g), Florida Statutes. It is also clear that the STEP systems are owned by either the homeowners association or the wastewater facility and that it is vital to both parties

that the STEP systems be maintained regularly to avoid spills and potential upsets at the wastewater plant.

Given this situation, it is in the best interest of all parties' to amicably resolve the issue of operating and maintaining the STEP systems. If the parties cannot come to an agreement as to how the STEP systems will be operated and maintained, it is within the Department's authority to pursue legal action and hold both parties jointly and severally liable pursuant to section 403.141, Florida Statutes, for any violations of Department rules or statutes related to the STEP sewer systems.

The Department expects the parties to come to an agreement and inform the Department as to how the STEP sewer systems will be operated and maintained in the future. Please feel free to contact Gary Maier at (239) 332-6975 ext 165 if you have any questions.

Sincerely,



Jon M. Iglehart
Director of
District Management

JMI/GM/jl

Copies furnished to:

Keith Kleinmann, DEP - Ft. Myers

Capital Improvements

Date	Job Description	Materials	Labor--Tom Quinn	Labor--Rusty Dean	Labor--other
Jan-08	pocket clmtr II nitrate system	\$ 316.80			
Mar-08	30 GPD 100 psi chlorine pump, main plant	\$ 242.27	2 hours		
Mar-08	Surge tank pump and fittings		6 hours	5.5 hours	Pugh Utilities \$1876.80
Apr-08	New blower motor & starter, main lift station	\$ 664.49	6 hours	6 hours	Pugh Utilities \$ 1,542.58
May-08	Zoeller N267 Sewage pump, reject pond	\$ 310.00	3 hours	3 hours	
Jun-08	Automatic valve switch actuator --DEP requirement		22 hours	20 hours	Somers \$1280.74
Jun-08	CI 17 stirrer	\$ 129.47	5.5 hours		
Jul-08	CI 17 analyzer & related parts	\$ 3,380.38	9.5 hours	5.5 hours	
Aug-08	Reset switch for reject pond valve		2.5 hours		Amp Check \$863.00
Sep-08	Container for stablecal	\$ 141.00			
Oct-08	CI 17 and turbidity recorder from CI 17 analyzer (DEP req)	\$ 1,362.74	9 hours		
Feb-09	Connect 5hp pump to control panel, install circuit breakers		4 hours		Amp Check \$170.00
Mar-09	Pump #1 circuit breaker for lift station	UCF supplied	4 hours		Amp Check \$187.50
Mar-09	20 amp breaker, main lift station	\$ 423.72	5 hours		
Apr-09	100 psi pump to turbidity meter	\$ 695.35	5 hours		
May-09	#1 Surge tank welding		4 hours		TNT 350.00
May-09	Back-up pump for main lift station	\$ 2,632.20	5 hours		
Jun-09	Master lift station rail (dep req)	2-20' alum pipe 208.62	3 hours		
Jun-09	Surge tank blower	\$ 1,338.57	3 hours		
Jul-09	Rails on main lift station (dep req)	2-12' pipe, 2" diam 417.24	6 hours	3 hours	
Jul-09	Rails on main lift station (dep req)	2"alum pipe 3/8" diam 208.62			
Oct-09	30 GPD chlorine pump at plant	\$ 502.53	2 hours		
Nov-09	15 core water sampler	\$ 96.99			
Dec-09	Champion sewer pump and related parts	\$ 908.97			
Jan-10	Starter for sewer plant	\$ 475.00	1 hour		Amp Check \$85
Feb-10	Two pumps in wet well, main plant	\$ 606.69	3 hours	3 hours	
Feb-10	Warning horn, strobe light, waterproof box	\$ 297.89	4 hours		Seth--4 hours
Mar-10	Main lift station push button	\$ 35.56	1 hour		
Apr-10	Two-phase monitors and related parts	\$ 663.20	6.5 hours		
May-10	CI 17 pump	\$ 688.57	1 hour		
Jul-10	CI 17 pump	\$ 257.52			
Sep-10	2 champion pumps	\$ 606.69	8 hours	6 hours	
Oct-10	Cord for Zoeller pump	\$ 61.83	2 hours	2 hours	
Nov-10	CI 17 analyzer & related parts	\$ 296.90	3 hours	2 hours	
Dec-10	30 GPD 100 psi chlorine pump, main plant	\$ 257.74	3 hours		
Feb-11	Circuit board for Oak Leaf lift station	\$ 309.99	5 hours		Seth--2 hours
Feb-11	turbidity meter and related parts	\$ 2,845.40	6 hours	3 hours	
Mar-11	1/4"-1/2" adaptor, turbidity pump line to sensor	\$ 17.38	5 hours	2 hours	
Apr-11	Zoeller N267 Sewage pump, reject pond	\$ 372.59			
Apr-11	Defuser header	\$ 96.96	6 hours		
May-11	Corroseal rust inhibitor, railings	\$ 68.87	3 hours		
May-11	4 fernco couplings, west clarifier to sand filter	\$ 296.00	2.34 hours	.45 hours	
May-11	10" full circle clamp, pipe to reject pond	\$ 250.00	1.5 hours	1.5 hours	

2.0 DESCRIPTION AND CONDITION OF EXISTING FACILITIES

2.1 DESCRIPTION OF FACILITIES

Chastain-Skillman, Inc. personnel conducted a site visit on September 19, 2005 at the WWTP to interview the plant operator and determine the general condition of the facility. The Spring Lake Golf and Country Club WWTP is located within the Spring Lake Golf and Country Club at 525 Duane Palmer Lane, Sebring, Florida (Figure 1-1). The facility is operating under Permit Number FLA014315. The permit was issued on September 26, 2003 and expires September 25, 2008. The responsible authority/owner of the facility is listed in the permit as Mike Telescow, 100 Country Club Drive, Sebring, Florida 33870. The current licensed operator of the WWTP is Aaron Bruce (Class C Operator License No. 13435). The permitting authority is the Florida Department of Environmental Protection, South District, Post Office Box 2549, Fort Myers, Florida 33902-2549.

The WWTP is located within the grounds of the golf course and can be reached via a grass service road. The plant is enclosed with a 5-foot high mesh fence on wooden posts and is secured by a 5-foot high tubular locking gate.

On the premises, there is an abandoned aluminum portable office trailer and an air-conditioned plywood and aluminum siding shed that is currently being used as storage/office space.

The facility is permitted to operate at 0.140 million gallon per day (mgd) 3-month average daily flow. The WWTP is a modular ("blue tube"), dual-train, extended aeration treatment system (see enclosed site plan and Photo 1). The plant is permitted to discharge 0.050 mgd annual

average daily flow to a percolation pond (R001) or 0.140 mgd to the public access reuse system (R002).

The following process description and tank volumes are based on "As-Built" drawings prepared by Kennedy, Lynch, and Associates, Inc. in 1999 and the FDEP permit.

Raw wastewater is pumped from an off-site lift station through a manually-cleaned bar screen and to a surge tank. From the surge tank, the wastewater is pumped to each treatment train. The treatment process consists of extended aeration, secondary clarification, effluent filtration, chlorination, and aerobic digestion. The disinfected effluent flows by gravity to an effluent holding pond which is then pumped to a holding pond at the golf course. The effluent is used to augment ground water for use in irrigation. Effluent that fails to meet public access quality standards flows by gravity to a percolation/reject storage pond. Flow to the percolation/reject storage pond is controlled by a signal from the turbidity analyzer to a motorize reject valve located at the discharge piping of the chlorine contact chamber.

Reject water that does not percolate is pumped back to the headworks of the plant for re-treatment. In addition, the plant is placed into "reject mode" when the operator is not present. Plant alarm conditions are transmitted to the operator via autodialer.

Plant residuals are aerobically digested, lime stabilized, and transported by a private contractor to one of two permitted agricultural use sites (Palmer Simmons Site or Pagne Site) located in Highlands County.

Major plant equipment and structures are listed in Table 2-1.

Table 2-1. Major Plant Equipment and structures.

Description	Quantity
Bar Screen	1
Surge Tank	20,788 gal.
Surge Tank Pumps	2 pumps - 130 gpm @ 20' TDH
Aeration Tanks	2 tanks - 38,704 gal. each
	2 tanks - 54,302 gal. each
	2 tanks - 14,028 gal. each
	Total = 6 tanks - 214,068 gal.
Secondary Clarifier	2 clarifiers - 17,480 gal. each
	1 clarifier - 10,960 gal.
	Total = 3 clarifiers - 45,920 gal.
Sand Filter	Tertiary
Effluent Transfer Pump (to chlorine contact chamber)	2 pumps - Barnes ½ hp.
Chlorine Contact Chamber	2 tanks - 3,366 gal. each
	Total = 2 tanks - 6,732 gal.
Hypochlorite Storage	500 gal. HDPE tank
Hypochlorite Metering Pump	1
Turbidity Analyzer	1
Blowers	2 blowers - 20 hp each, Hoffman Model #4106C, Toshiba Motor (3470 rpm)
	1 blower - No name plate visible
Reject Valve	Automatic with manual switch
Chlorine Residual Analyzer	1
Emergency Generator	1 - 60 kW Allis Chalmers (Not Operational)
Effluent Storage Pond	1 - 414,000 gal.
Percolation/Reject Storage Pond	1 - 420,000 gal.
Reject Pump (pumps reject to headworks)	1 - No name plate visible
Aerobic Digester	2 - 15,598 gal. each
	1 - 8,000 gal.
	Total = 3 - 39,196 gal.

2.2 CONDITION OF FACILITIES

2.2.1 Tanks

The treatment system consists of eight steel, cylindrical, open air tanks of varying capacities and configurations depending on the function and process they perform. One treatment train was off-line for cleaning and maintenance at the time of the site visit. The tanks appear structurally sound below the water level mark; however, significant corrosion damage is evident on the guardrails, catwalk supports, tank rims, and tank walls. Inside the tank walls above the water line the steel surface is flaking and lifting off the paint (Photos 2, 3, 4, and 5). Tank integrity should be verified in order to assess the viability of repairs versus replacement with a new one.

2.2.2 Pumps

During the site visit, only a visual inspection of the pumps that were above water was conducted. The pumps are not located within a building or under a cover. Deterioration of the surface coatings is typical of that expected from constant exposure to direct sunlight and rain (Photos 6 and 7). The submersible pumps were not inspected but appear to be in working order. No compliance issues have been found regarding pump function in the records search.

2.2.3 Blowers

The plant has two separate trains where aeration takes place. Two blowers (one spare) service one and a separate blower services the other. These blowers provide air to both the aeration basins and sludge digesters. Deterioration of the surface coatings is typical of that expected from constant exposure to direct sunlight and rain (Photo 8). The

operator mentioned that one of the two blowers on one train may have to be taken out of service in order to replace the bearings. This activity is part of the regular plant maintenance and may not disrupt daily operations.

2.2.4 Emergency Generator

The emergency generator is not functional (**Photo 9**). The operator confirmed that he had placed a request with the current owners to obtain a new one but that no such request has been granted to date. From the records search, a February 1, 2005 FDEP plant inspection report noted this issue as being in non-compliance. It has not been addressed by the owner since.

2.2.5 Storage Ponds

There are two ponds which are fed by gravity from the chlorine contact chamber based on the effluent turbidity. The effluent from the storage pond (**Photo 10**) next to the treatment plant is pumped to the golf course storage pond mixed with groundwater and used for irrigation. The other pond is where the "reject" water is stored and is circulated back into the plant's headworks for further treatment (**Photo 11**). No significant erosion of the pond berms was noted. The area adjacent to the berms was well maintained.

2.2.6 Reject Valve

The reject valve controls whether the effluent is discharged to the reject storage pond or the effluent storage pond (**Photo 12**). This valve is controlled by an electronic signal from the turbidity analyzer. The valve appeared to be in good operating condition.

2.2.7 Hypochlorite Storage and Feed

Sodium hypochlorite used for disinfection is stored in an HDPE tank. The tank does not have a secondary wall to contain leaks (Photo 13). The tank is resting on a series of stack masonry blocks and is not restrained against tipping due to wind load. The tank is exposed to direct sunlight which accelerates the degradation of the sodium hypochlorite.

A single metering pump is used to meter hypochlorite to the chlorine contact chamber. The metering assembly does not contain typical accessories such as calibration chamber and pulsation dampener. The assembly is located under a cover; however, it is exposed to blowing rain. The metering pump was operational at the time of the site visit.

2.2.8 Electrical System

An inspection of the electrical system was not conducted. It is not known whether the facility has proper grounding, surge, or lightning protection. Lightning air terminals were not observed on the structures or handrails.

2.2.9 Safety Equipment

Safety equipment, such as life rings, fire extinguishers, showers, or eye washes, was not observed.

4.0 EXISTING FACILITY CONFIGURATION AND UNIT PROCESS CAPACITIES

Figure 4.0.1 provides a graphical illustration of the unit process flow scheme.

Plant operations began in the mid 1980's with a capacity of 0.140 MGD. The current unit process used includes the following:

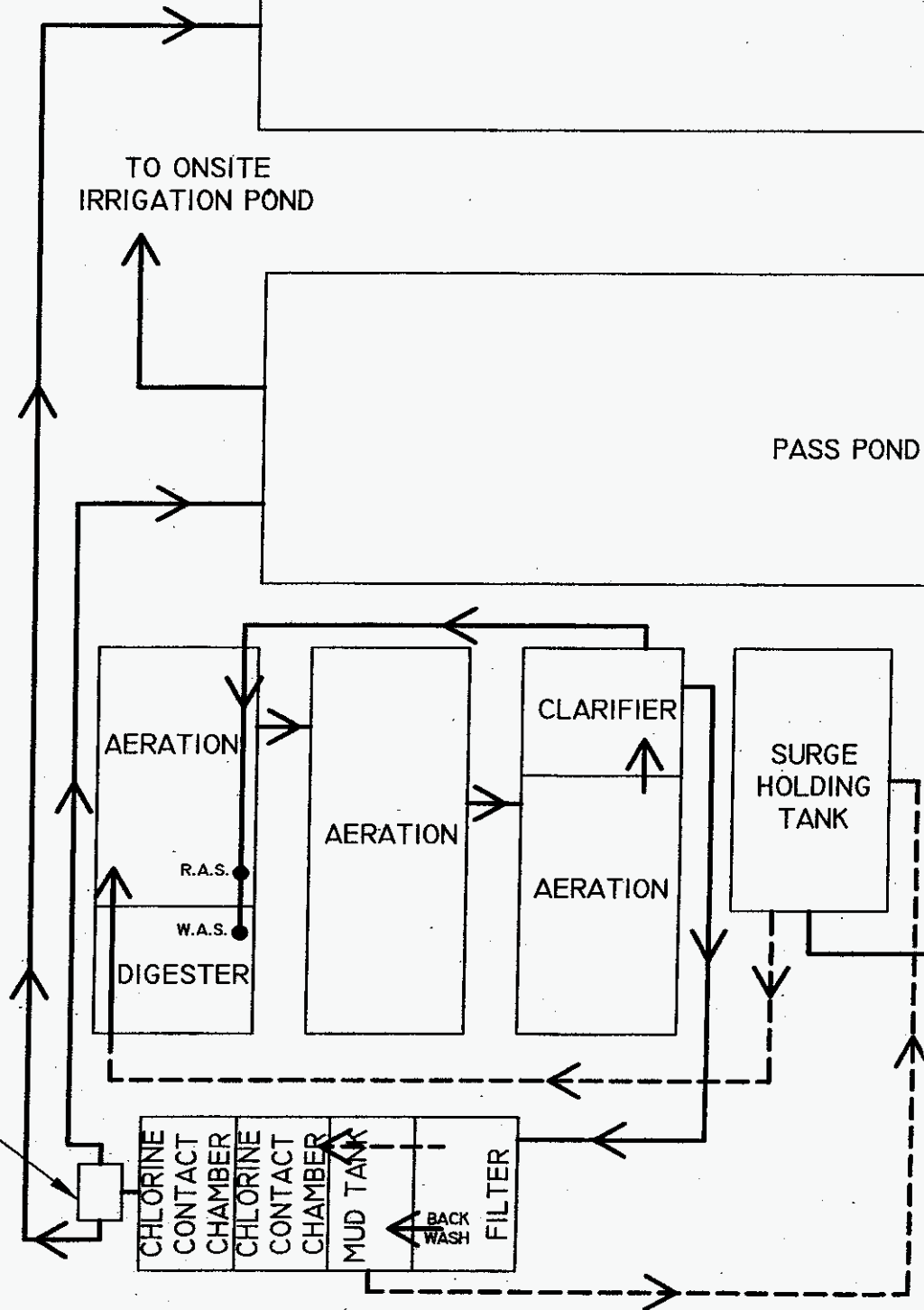
Table 4.0.1
WWTF Unit Process Summary

<u>ITEM</u>	<u>Capacity or Total Gallons</u>	<u># of Tanks or Units</u>
• Surge Holding Tank	64,428 gal	2
• Aeration Basin	107,034 gal	3
• Clarifiers	17,480 gal	1
• Filters	0.150 MGD each	2
• Chlorine Contact Chamber	6,732 gal	2
• Mud Tank	— gal	1
• Sludge Digester	23,598 gal	2

5.0 EFFLUENT DISPOSAL SYSTEM

Flow data at the plant is based on flow calculation from the main lift station that pumps to the facility. The reclaimed water from the facility flows either into an 834,000 gallon reject pond, or a 3,000,000 gallon pass (holding pond). The receiving pond (reject or pass) is determined by the electrical valve, which reads the chlorine residual level and passes only reclaimed water which meets minimum residual levels into the pass pond. From the pass pond, reclaimed water is pumped into the on-site golf course irrigation pond for land application. Reclaimed water not meeting minimum chlorine residual levels is sent to the reject pond, where it is allowed to percolate into the ground.

ELECTRIC BYPASS VALVE



TO ONSITE IRRIGATION POND

REJECT POND

PASS POND

AERATION

R.A.S.

W.A.S.

DIGESTER

AERATION

CLARIFIER

AERATION

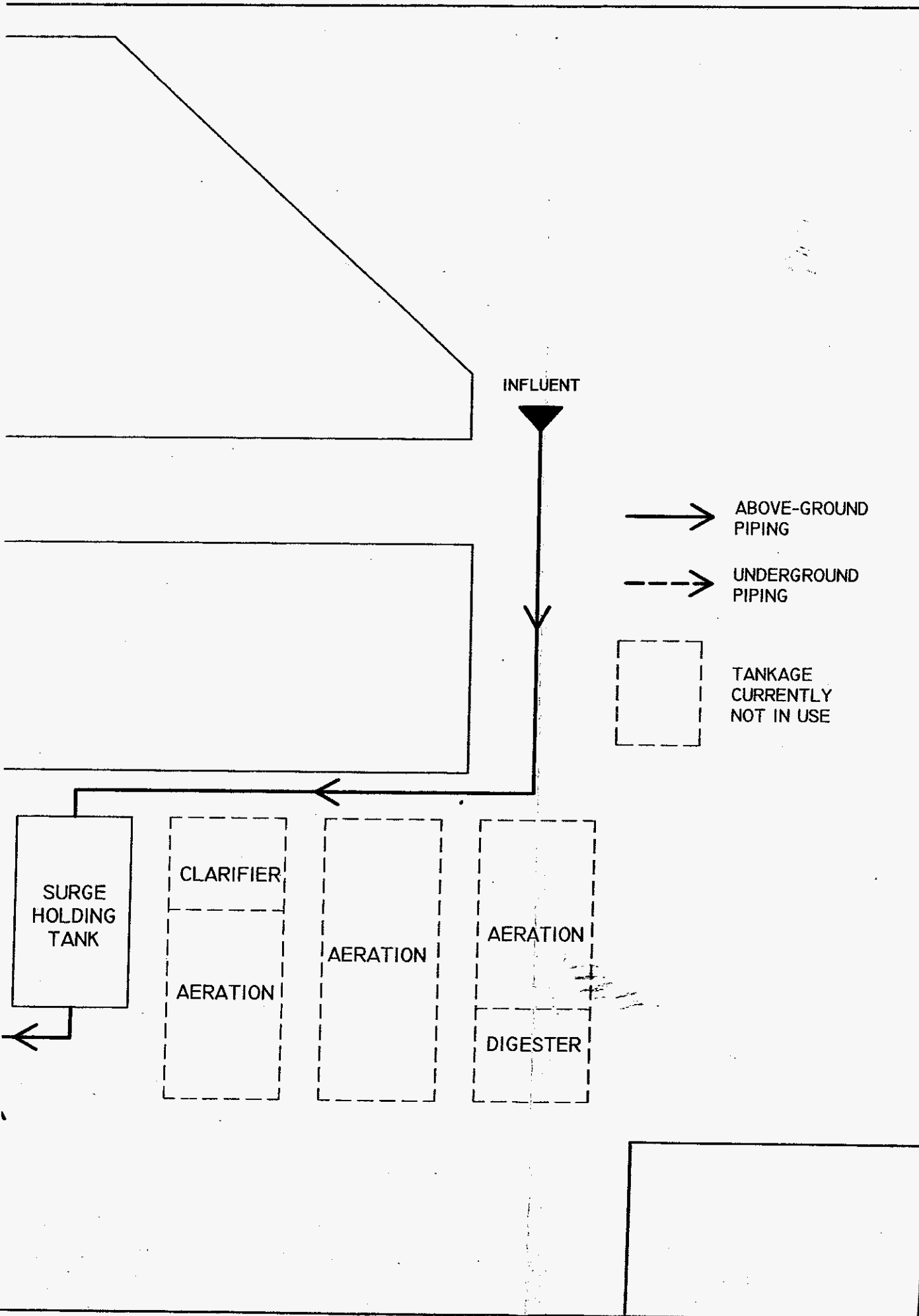
SURGE HOLDING TANK

CHLORINE CONTACT CHAMBER

MUD TANK

BACK WASH

FILTER



INFLUENT

→ ABOVE-GROUND PIPING

- - - UNDERGROUND PIPING

□ TANKAGE CURRENTLY NOT IN USE

SURGE HOLDING TANK

CLARIFIER

AERATION

AERATION

AERATION

DIGESTER

DATE	
REVISION	
JOB NO.	07-588
DESIGNED BY	MC
DRAWN BY	JRM

MBV ENGINEERING, INC.
 CONSULTING ENGINEERING CA #3728
 MOJAVE BOWLES VII AMPTAD & ASSOCIATES

FIGURE 4.0.1 -
 PROCESS FLOW

SPRING LAKE
 GOLF & COUNTRY
 CLUB WWTF

DATE	
DESIGNED BY	
DRAWN BY	

Q

FLORIDA RURAL WATER ASSOCIATION
2970 Wellington Circle West, Suite 101
Tallahassee, FL 32308

WEIR OR FLUME CALIBRATION
 Flow Values Obtained by Using a Weir or Flume

FACILITY NAME & ID #: SPRING LAKE METER FLA014315

FACILITY LOCATION: 525 E. DUANE PALMER LANE / SEBRING

PRIMARY DEVICE

V-NOTCH WEIR	PARSHALL FLUME	RECTANGULAR WEIR
DEGREE OF V-NOTCH	WIDTH OF THROAT (IN)	CREST LENGTH (FT)
45	NA	NA

Gauge setting comparison using yardstick or carpenters rule: Satisfactory Unsatisfactory

Physical inspection of primary device approach, device and discharge: Satisfactory Unsatisfactory

SECONDARY DEVICE

TYPE: SENSOR

MAKE/MODEL/SERIAL#: CONTROL ELECTRONICS PDS-360

DATE OF LAST CALIBRATION: UNKNOWN

	LOW FLOW	MODERATE FLOW	HIGH FLOW
STAFF GAGE READING (IN)	0	0.14	0.37
ACTUAL FLOW (GPM)	0	3.4	38.68
TOTALIZER OR RECORDER READING(GPM)	0	3.7	39.0
PERCENT DIFFERENCE (%)	8.44%	8.11%	0.82%

Physical Inspection of Secondary Device: Satisfactory Unsatisfactory

Totalizer Accuracy Check Using Stopwatch: Satisfactory Unsatisfactory

COMMENTS: *RECOMMEND INSTALLING STAFF GUAGE

I hereby certify that the above test was performed in accordance with the best available technology.

TECHNICIAN SIGNATURE: Allen Slater **DATE:** 2-4-2011

FLORIDA RURAL WATER ASSOCIATION
2970 Wellington Circle West, Suite 101
Tallahassee, FL 32308

WEIR OR FLUME CALIBRATION
 Flow Values Obtained by Using a Weir or Flume

FACILITY NAME & ID #: Spring Lake Golf & Country Club / FLA014315

FACILITY LOCATION: Sebring

PRIMARY DEVICE

V-NOTCH WEIR	PARSHALL FLUME	RECTANGULAR WEIR
DEGREE OF V-NOTCH	WIDTH OF THROAT (IN)	CREST LENGTH (FT)
45	N/A	N/A

Gauge setting comparison using yardstick or carpenters rule: Satisfactory Unsatisfactory

Physical inspection of primary device approach, device and discharge: Satisfactory Unsatisfactory

SECONDARY DEVICE

TYPE: Ultrasonic

MAKE/MODEL/SERIAL#: Control Electronics/PDS 360

DATE OF LAST CALIBRATION: 2/7/08

	LOW FLOW	MODERATE FLOW	HIGH FLOW
STAFF GAGE READING (FT)	.20	.25	.27
ACTUAL FLOW (GPM)	8.309	14.52	17.60
TOTALIZER OR RECORDER READING(GPM)	9.15	15.19	18.91
PERCENT DIFFERENCE (%)	9 %	4 %	7 %

Physical Inspection of Secondary Device: Satisfactory Unsatisfactory

Totalizer Accuracy Check Using Stopwatch: Satisfactory Unsatisfactory

COMMENTS:

I hereby certify that the above test was performed in accordance with the best available technology.

TECHNICIAN SIGNATURE: Tom Stirtzinger DATE: 1/14/09
 Tom Stirtzinger (800) 872-8207

FLORIDA RURAL WATER ASSOCIATION
2970 Wellington Circle West, Suite 101
Tallahassee, FL 32308

WEIR OR FLUME CALIBRATION
Flow Values Obtained by Using a Weir or Flume

FACILITY NAME & ID #: Spring Lake Golf & Country Club / FLA014315

FACILITY LOCATION: Sebring

PRIMARY DEVICE

V-NOTCH WEIR	PARSHALL FLUME	RECTANGULAR WEIR
DEGREE OF V-NOTCH	WIDTH OF THROAT (IN)	CREST LENGTH (FT)
45	N/A	N/A

Gauge setting comparison using yardstick or carpenters rule:

Satisfactory **Unsatisfactory**

Physical inspection of primary device approach, device and discharge:

Satisfactory **Unsatisfactory**

SECONDARY DEVICE

TYPE: Ultrasonic

MAKE/MODEL/SERIAL#: Control Electronics/PDS 360

DATE OF LAST CALIBRATION: 12/18/06

	LOW FLOW	MODERATE FLOW	HIGH FLOW
STAFF GAGE READING (FT)	.14	.22	.28
ACTUAL FLOW (GPM)	3.407	10.55	19.27
TOTALIZER OR RECORDER READING(GPM)	3.26	10.25	19.71
PERCENT DIFFERENCE (%)	4 %	3 %	2 %

Physical Inspection of Secondary Device:

Satisfactory **Unsatisfactory**

Totalizer Accuracy Check Using Stopwatch:

Satisfactory **Unsatisfactory**

COMMENTS:

I hereby certify that the above test was performed in accordance with the best available technology.

TECHNICIAN SIGNATURE:

Tom Stirtzinger
 Tom Stirtzinger (800) 872-8207

DATE: 2/7/08



Florida Department of Environmental Protection

South District Office
P.O. Box 2549
Ft. Myers, Florida 33902-2549

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

CERTIFIED MAIL NO.: 7008-0150 0003 1456 9847
RETURN RECEIPT REQUESTED

September 30, 2008

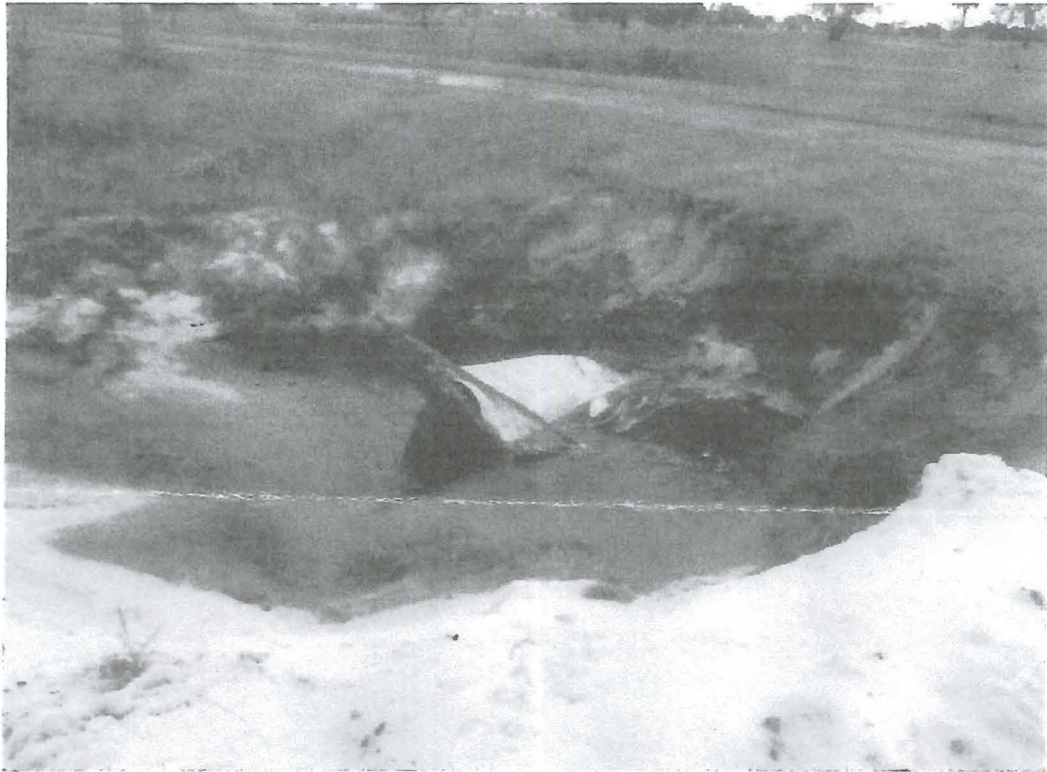
Mike Tellschow, Owner
Utility Corporation of Florida, Inc.
100 Country Club Drive
Sebring, FL 33870

RE: Highlands County-DW
Spring Lake Golf and Country Club WWTP
FLA014315

Dear Mr. Tellschow:

The purpose of this letter is to advise you of possible violations of law for which you may be responsible, and to seek your cooperation in resolving the matter. A site inspection and a file review of the above referenced facility indicate that violations of Florida Statutes (F.S.) and Rules may exist at the above-described facility.

1. **There has been an unauthorized and unpermitted usage of a pond for the storage of reuse water, with subsequent discharge into a canal on August 21, 2008.** Florida Administrative Code (F.A.C.) Rule 62-620.610 (5) states that the permit does not allow the permittee to cause pollution in contravention of Florida Statutes and Department rules, unless specifically authorized by an order from the Department.
2. **Department personnel observed that a stormwater pipe connecting the above-mentioned pond to a canal has not been removed (see photograph).** A letter to the Department from Aaron J. Bowles of MBV Engineering, dated February 8, 2008, certified that this pipe would be backfilled. As of September 17, 2008, this stormwater pipe was still open and active.



3. **There is no advisory signage informing the public of the use of reclaimed water on the golf course.** F.A.C. Rule 62-610.468 (2) states that public notification of the use of reuse water shall be accomplished by the posting of advisory signs designating the nature of the reuse project area where reuse is practiced, notes on scorecards or by other methods.
4. **Reuse facilities are neither color-coded nor clearly marked as being part of the reuse system.** F.A.C. Rule 62-610.469 (7) states that all piping, pipelines, valves and outlets shall be color coded (Pantone Purple 522C), or otherwise marked, to differentiate reclaimed water from domestic or other water.

The activities observed during the Department's field inspection and any activity at the facility that may be contributing to violations of the above described statutes and rules should be ceased.

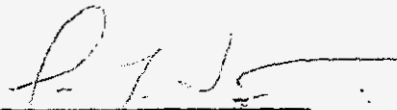
Please contact Keith Kleinmann at (239) 332-6975, ext. 182 or at the letterhead address **within 15 days** of receipt of this Warning Letter to **arrange a meeting** to discuss this matter. The Department is interested in reviewing any facts you may have that will assist in determining whether any violations have occurred. You may bring anyone with you to the meeting that you feel could help resolve this matter.

PLEASE BE ADVISED that this Warning Letter is a part of an agency investigation, preliminary to agency action in accordance with Section 120.57(5), F.S. We look forward to your cooperation in completing the investigation and resolution of this matter

Pursuant to the Americans With Disabilities Act, any person requiring special accommodations to participate in this meeting/workshop/hearing is asked to advise the

agency at least 48 hours before the meeting by calling the Bureau of Personnel Services at (850) 245-2511, or by calling (800) 955-8771 (TDD) or (800) 955-8770 (Voice) via the Florida Relay Service.

Sincerely,



Jon M. Iglehart
Director of
District Management

JMI/DWF/PJR/jl

cc: Enforcement File
Tom Quinn, Operator (tquinn63@embargo.com)
Brandon Ivey, FDEP South District, Ft. Myers
Joe DeCerbo, Spring Lake Improvement District (joedecerbo@hotmail.com)
Allen Slater, FRWA
Phil Reed



Florida Department of Environmental Protection

South District
P.O. Box 2549
Fort Myers, Florida 33902-2549

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

CERTIFIED MAIL NO.: 7008 0150 0003 1458 6493
RETURN RECEIPT REQUESTED

December 3, 2008

Mike Telschow, Owner
Utility Corporation of Florida, Inc.
100 Country Club Drive
Sebring, FL 33870

RE: Highlands County-DW
Spring Lake Golf and Country Club
FLA014315
OGC Case No.:08-2754-28-DW

Dear Mr. Telschow:

Enclosed is the Long Form Consent Order to resolve the above referenced case. Please sign, date, and return this copy to the Department **within fifteen (15) days**.

If you have any questions please contact Keith Kleinmann at (239) 332-6976, ext. 182. Your cooperation in resolving this case is appreciated.

Sincerely,

Jon M. Iglehart
Director of
District Management

JMI/KK/PJR/jl
Enclosure

cc: Enforcement File
Allen Slater, FRWA
Tom Quinn, Operator (tquinn63@embargmail.com)
Aaron Bowles, MBV Engineering (aaronb@mbveng.com)

**BEFORE THE STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION**

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION,)	IN THE OFFICE OF THE SOUTH DISTRICT
Complainant,)	
vs.)	OGC FILE NO. 08-2754-28-DW
Spring Lake Golf and Country Club)	
Respondent.)	

CONSENT ORDER

This Consent Order is entered into between the State of Florida Department of Environmental Protection ("Department") and Spring Lake Golf and Country Club ("Respondent") to reach settlement of certain matters at issue between the Department and Respondent.

The Department finds and the Respondent admits the following:

1. The Department is the administrative agency of the State of Florida having the power and duty to protect Florida's air and water resources and to administer and enforce the provisions of Chapter 403, Florida Statutes, and the rules promulgated thereunder, Title 62, Florida Administrative Code. The Department has jurisdiction over the matters addressed in this Consent Order.
2. Respondent is a person within the meaning of Section 403.031(5), Florida Statutes.
3. Respondent is the owner and is responsible for the operation of the SPRING LAKE GOLF AND COUNTRY CLUB STP, a 0.14 MGD extended aeration domestic wastewater treatment facility ("Facility") with chlorinated effluent to a SLOW-RATE PUBLIC ACCESS SYSTEM. The Facility is located at 100 COUNTRY CLUB DRIVE, SEBRING, FL 33876.

4. The Department finds that the Respondent operates the Facility under Department permit No. FLA014315 which expires on April 31, 2013. The Department finds that on August 21, 2008, Respondent discharged the contents of an on-site reuse storage pond into an adjacent canal without notifying the Department.

5. The Department finds that there exists no advisory signage informing the public of the use of reclaimed water on the golf course.

6. The Department finds that the Facility's reuse systems are neither color-coded nor clearly marked as being part of a reclaimed water system.

7. Having reached a resolution of the matter the Department and the Respondent mutually agree and it is

ORDERED:

8. Respondent shall comply with the following corrective actions within the stated time periods:

9. Within sixty (60) days after the effective date of this Consent Order, Respondent shall retain the services of a Florida professional engineer for the purpose of:

(a) Evaluating the subject Facility including the effluent disposal system and the entire reclaimed water system, mapping this system in its entirety, for the purposes of capping off possible sites of unpermitted discharge.

(b) Designing modifications of the Facility, effluent disposal system, and/or reclaimed water systems to ensure the Facility and effluent disposal system will function in full and consistent compliance with all applicable rules of the Department, with no further unpermitted discharge of effluent or reclaimed water.

(c) Overseeing the any modifications to the Facility, effluent disposal system, or reclaimed water system.

(d) Submitting to the Department an engineer's certification of completion, along with the findings indicated in subparagraph a, above, stating that the modifications to the Facility,

effluent disposal system, or reclaimed water systems have been completed in accordance with the provisions of the wastewater permit referenced in subparagraph c, above, if applicable.

(e) Contacting the Department's Domestic Waste Compliance Inspector by telephone or in person prior to the initiation of the treatment system evaluation listed in subparagraphs a and b, above.

(f) Providing all requested information in writing within thirty (30) days after receipt of such a request in the event the Department requires additional information in order to process the wastewater permit application listed in subparagraph c, above.

(g) Respondent shall complete the modification of the reclaimed water system referred to in sub-paragraph 9(b), above, and submit an engineer's certification of completion to the Department within 60 days after the wastewater permit authorizing said construction is issued.

10. Within sixty (60) days of entry into this order, the Respondent shall submit to the Department an engineer's report containing the results of the evaluation referenced in Subparagraph 9(a), above. This report shall be signed and sealed by the Engineer.

11. Within sixty (60) days of entry into this order, the Respondent shall install the appropriate signs and notifications of the use of reclaimed water on the golf course, designating the nature of the reuse project area where reuse is provided.

12. Within sixty (60) days of entry into this order, the Respondent shall color-code (Pantone Purple 522C) or otherwise mark all piping, pipelines, valves and outlets related to the reclaimed water system in order to differentiate the reclaimed water from domestic or other water.

13. Within thirty (30) days of the effective date of this Consent Order, Respondent shall pay the Department \$6,500.00 in settlement of the matters addressed in this Consent Order. This amount includes \$500 for costs and expenses incurred by the Department during the investigation of this matter and the preparation and tracking of this Consent Order. The civil penalty is apportioned as follows: \$5,500 for the violation of F.A.C. Rule 62-620.610(5); \$500

for the violation of 62-610.468(2). Payment shall be made by cashier's check or money order. The instrument shall be made payable to the "Department of Environmental Protection" and shall include thereon the OGC number assigned to this Consent Order and the notation "Ecosystem Management and Restoration Trust Fund".

14. Respondent agrees to pay the Department stipulated penalties in the amount of \$100 per day for each and every day Respondent fails to timely comply with any of the requirements of Paragraphs 8-13 of this Consent Order. A separate stipulated penalty shall be assessed for each violation of this Consent Order. Within 30 days of written demand from the Department, Respondent shall make payment of the appropriate stipulated penalties to "The Department of Environmental Protection" by cashier's check or money order and shall include thereon the OGC number assigned to this Consent Order and the notation "Ecosystem Management and Restoration Trust Fund." Payment shall be sent to the Department of Environmental Protection, 2295 Victoria Ave, P.O. Box 2549, Fort Myers, FL 33902-2549. The Department may make demands for payment at any time after violations occur. Nothing in this Paragraph shall prevent the Department from filing suit to specifically enforce any terms of this Consent Order. Any penalties assessed under this Paragraph shall be in addition to the settlement sum agreed to in Paragraph 13 of this Consent Order. If the Department is required to file a lawsuit to recover stipulated penalties under this Paragraph, the Department will not be foreclosed from seeking civil penalties for violations of this Consent Order in an amount greater than the stipulated penalties due under this Paragraph.

15. If any event, including administrative or judicial challenges by third parties unrelated to the Respondent, occurs which causes delay or the reasonable likelihood of delay, in complying with the requirements of this Consent Order, Respondent shall have the burden of proving the delay was or will be caused by circumstances beyond the reasonable control of the Respondent and could not have been or cannot be overcome by Respondent's due diligence. Economic circumstances shall not be considered circumstances beyond the control of Respondent, nor

shall the failure of a contractor, subcontractor, materialman or other agent (collectively referred to as "contractor") to whom responsibility for performance is delegated to meet contractually imposed deadlines be a cause beyond the control of Respondent, unless the cause of the contractor's late performance was also beyond the contractor's control. Upon occurrence of an event causing delay, or upon becoming aware of a potential for delay, Respondent shall notify the Department orally within 24 hours or by the next working day and shall, within seven calendar days of oral notification to the Department, notify the Department in writing of the anticipated length and cause of the delay, the measures taken or to be taken to prevent or minimize the delay and the timetable by which Respondent intends to implement these measures. If the parties can agree that the delay or anticipated delay has been or will be caused by circumstances beyond the reasonable control of Respondent, the time for performance hereunder shall be extended for a period equal to the agreed delay resulting from such circumstances. Such agreement shall adopt all reasonable measures necessary to avoid or minimize delay. Failure of Respondent to comply with the notice requirements of this Paragraph in a timely manner shall constitute a waiver of Respondent's right to request an extension of time for compliance with the requirements of this Consent Order.

16. Persons who are not parties to this Consent Order, but whose substantial interests are affected by this Consent Order, have a right, pursuant to Sections 120.569 and 120.57, Florida Statutes, to petition for an administrative hearing on it. The Petition must contain the information set forth below and must be filed (received) at the Department's Office of General Counsel, 3900 Commonwealth Boulevard, MS# 35, Tallahassee, Florida 32399-3000 within 21 days of receipt of this notice. A copy of the Petition must also be mailed at the time of filing to the District Office named above at the address indicated. Failure to file a petition within the 21 days constitutes a waiver of any right such person has to an administrative hearing pursuant to Sections 120.569 and 120.57, Florida Statutes.

The petition shall contain the following information:

(a) The name, address, and telephone number of each petitioner; the Department's Consent Order identification number and the county in which the subject matter or activity is located;

(b) A statement of how and when each petitioner received notice of the Consent Order;

(c) A statement of how each petitioner's substantial interests are affected by the Consent Order;

(d) A statement of the material facts disputed by petitioner, if any;

(e) A statement of facts which petitioner contends warrant reversal or modification of the Consent Order;

(f) A statement of which rules or statutes petitioner contends require reversal or modification of the Consent Order;

(g) A statement of the relief sought by petitioner, stating precisely the action petitioner wants the Department to take with respect to the Consent Order.

If a petition is filed, the administrative hearing process is designed to formulate agency action. Accordingly, the Department's final action may be different from the position taken by it in this Notice. Persons whose substantial interests will be affected by any decision of the Department with regard to the subject Consent Order have the right to petition to become a party to the proceeding. The petition must conform to the requirements specified above and be filed (received) within 21 days of receipt of this notice in the Office of General Counsel at the above address of the Department. Failure to petition within the allowed time frame constitutes a waiver of any right such person has to request a hearing under Sections 120.569 and 120.57, Florida Statutes, and to participate as a party to this proceeding. Any subsequent intervention will only, be at the approval of the presiding officer upon motion filed pursuant to Rule 28-106.201 Florida Administrative Code.

A person whose substantial interests are affected by the Consent Order may file a timely petition for an administrative hearing under Sections 120.569 and 120.57, Florida Statutes, or may choose to pursue mediation as an alternative remedy under Section 120.573, Florida Statutes, before the deadline for filing a petition. Choosing mediation will not adversely affect the right to a hearing if mediation does not result in a settlement. The procedures for pursuing mediation are set forth below.

Mediation may only take place if the Department and all the parties to the proceeding agree that mediation is appropriate. A person may pursue mediation by reaching a mediation agreement with all parties to the proceeding (which include the Respondent, the Department, and any person who has filed a timely and sufficient petition for a hearing) and by showing how the substantial interests of each mediating party are affected by the Consent Order. The agreement must be filed in (received by) the Office of General Counsel of the Department at 3900 Commonwealth Boulevard, MS #35, Tallahassee, Florida 32399-3000, within 10 days after the deadline as set forth above for the filing of a petition.

The agreement to mediate must include the following:

- (a) The names, addresses, and telephone numbers of any persons who may attend the mediation;
- (b) The name, address, and telephone number of the mediator selected by the parties, or a provision for selecting a mediator within a specified time;
- (c) The agreed allocation of the costs and fees associated with the mediation;
- (d) The agreement of the parties on the confidentiality of discussions and documents introduced during mediation;
- (e) The date, time, and place of the first mediation session, or a deadline for holding the first session, if no mediator has yet been chosen;
- (f) The name of each party's representative who shall have authority to settle or recommend settlement; and

(g) Either an explanation of how the substantial interests of each mediating party will be affected by the action or proposed action addressed in this notice of intent or a statement clearly identifying the petition for hearing that each party has already filed, and incorporating it by reference.

(h) The signatures of all parties or their authorized representatives.

As provided in Section 120.573, Florida Statutes, the timely agreement of all parties to mediate will toll the time limitations imposed by Sections 120.569 and 120.57, Florida Statutes, for requesting and holding an administrative hearing. Unless otherwise agreed by the parties, the mediation must be concluded within sixty days of the execution of the agreement. If mediation results in settlement of the administrative dispute, the Department must enter a final order incorporating the agreement of the parties. Persons whose substantial interests will be affected by such a modified final decision of the Department have a right to petition for a hearing only in accordance with the requirements for such petitions set forth above, and must therefore file their petitions within 21 days of receipt of this notice. If mediation terminates without settlement of the dispute, the Department shall notify all parties in writing that the administrative hearing processes under Sections 120.569 and 120.57, Florida Statutes, remain available for disposition of the dispute, and the notice will specify the deadlines that then will apply for challenging the agency action and electing remedies under those two statutes.

17. Respondent shall allow all authorized representatives of the Department access to the property and facility at reasonable times for the purpose of determining compliance with the terms of this Consent Order and the rules and statutes of the Department.

18. All submittals and payments required by this Consent Order to be submitted to the Department shall be sent to the Florida Department of Environmental Protection, 2295 Victoria Ave, P.O. Box 2549, Fort Myers, FL 33902-2549.

19. This Consent Order is a settlement of the Department's civil and administrative authority arising under Florida law to resolve the matters addressed herein. This Consent Order is not a

settlement of any criminal liabilities which may arise under Florida law, nor is it a settlement of any violation which may be prosecuted criminally or civilly under federal law.

20. The Department hereby expressly reserves the right to initiate appropriate legal action to prevent or prohibit any violations of applicable statutes, or the rules promulgated thereunder that are not specifically addressed by the terms of this Consent Order, including but not limited to undisclosed releases, contamination or polluting conditions.

21. The terms and conditions set forth in this Consent Order may be enforced in a court of competent jurisdiction pursuant to Sections 120.69 and 403.121, Florida Statutes. Failure to comply with the terms of this Consent Order shall constitute a violation of Section 403.161(1)(b), Florida Statutes.

22. Respondent is fully aware that a violation of the terms of this Consent Order may subject Respondent to judicial imposition of damages, civil penalties up to \$10,000.00 per day per violation, and criminal penalties.

23. Entry of this Consent Order does not relieve Respondent of the need to comply with applicable federal, state or local laws, regulations or ordinances.

24. No modifications of the terms of this Consent Order shall be effective until reduced to writing and executed by both Respondent and the Department.

25. Respondent acknowledges and waives its right to an administrative hearing pursuant to Sections 120.569 and 120.57, Florida Statutes, on the terms of this Consent Order.

Respondent acknowledges its right to appeal the terms of this Consent Order pursuant to Section 120.68, Florida Statutes, and waives that right upon signing this Consent Order.

THIS SPACE LEFT BLANK INTENTIONALLY

OGC Case NO.: 08-2754-28-DW

26. This Consent Order is a final order of the Department pursuant to Section 120.52(7), Florida Statutes, and it is final and effective on the date filed with the Clerk of the Department unless a Petition for Administrative Hearing is filed in accordance with Chapter 120, Florida Statutes. Upon the timely filing of a petition this Consent Order will not be effective until further order of the Department.

DATE

Mike Tellschow
Owner

DONE AND ORDERED this ____ day of _____ 2008, in Lee County, Florida.

STATE OF FLORIDA DEPARTMENT
OF ENVIRONMENTAL PROTECTION

Jon M. Iglehart
Director of
District Management

FILED, on this date, pursuant to §120.52 Florida Statutes, with the designated Department Clerk, receipt of which is hereby acknowledged.

Clerk

Date



Florida Department of Environmental Protection

South District
P.O. Box 2549
Fort Myers, Florida 33902-2549

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

CERTIFIED MAIL NO.: 7008 0150 0003 1458 7896
RETURN RECEIPT REQUESTED

January 22, 2009

Mike Telschow, Owner
Utility Corporation of Florida, Inc.
100 Clubhouse Lane
Sebring, FL 33876

RE: Highlands County-DW
Spring Lake Golf and Country Club
FLA014315
OGC Case No.:08-2754-28-DW

Dear Mr. Telschow:

Enclosed is the Long Form Consent Order to resolve the above referenced case. Please sign, date, and return this copy to the Department **within fifteen (15) days**.

If you have any questions please contact Keith Kleinmann at (239) 332-6975, ext. 182. Your cooperation in resolving this case is appreciated.

Sincerely,

Jon M. Iglehart
Director of
District Management

JMI/KK/PJR/jl
Enclosure

cc: Enforcement File
Allen Slater, FRWA
Tom Quinn, Operator (tquinn63@embargmail.com)
Aaron Bowles, MBV Engineering (aaronb@mbvend.com)

4. The Department finds that the Respondent operates the Facility under Department permit No. FLA014315 which expires on April 31, 2013. The Department finds that on August 21, 2008, Respondent discharged the contents of an on-site reuse storage pond into an adjacent canal without notifying the Department.

5. The Department finds that there exists no advisory signage informing the public of the use of reclaimed water on the golf course.

6. The Department finds that the Facility's reuse systems are neither color-coded nor clearly marked as being part of a reclaimed water system.

7. Having reached a resolution of the matter the Department and the Respondent mutually agree and it is

ORDERED:

8. Respondent shall comply with the following corrective actions within the stated time periods:

9. **Within sixty (60) days** after the effective date of this Consent Order Respondent shall retain the services of a Florida professional engineer for the purpose of:

(a) Evaluating the subject Facility including the effluent disposal system and the entire reclaimed water system, mapping this system in its entirety, for the purposes of capping off possible sites of unpermitted discharge.

(b) Designing modifications of the Facility, effluent disposal system, and/or reclaimed water systems to ensure the Facility and effluent disposal system will function in full and consistent compliance with all applicable rules of the Department, with no further unpermitted discharge of effluent or reclaimed water.

(c) Overseeing the any modifications to the Facility, effluent disposal system, or reclaimed water system.

(d) Submitting to the Department an engineer's certification of completion, along with the findings indicated in subparagraph a, above, stating that the modifications to the Facility,

effluent disposal system, or reclaimed water systems have been completed in accordance with the provisions of the wastewater permit referenced in subparagraph c, above, if applicable.

(e) Contacting the Department's Domestic Waste Compliance Inspector by telephone or in person prior to the initiation of the treatment system evaluation listed in subparagraphs a and b, above.

(f) Providing all requested information in writing within thirty (30) days after receipt of such a request in the event the Department requires additional information in order to process the wastewater permit application listed in subparagraph c, above.

(g) Respondent shall complete the modification of the reclaimed water system referred to in sub-paragraph 9(b), above, and submit an engineer's certification of completion to the Department within 60 days after the wastewater permit authorizing said construction is issued.

10. Within sixty (60) days of entry into this order, the Respondent shall submit to the Department an engineer's report containing the results of the evaluation referenced in Subparagraph 9(a), above. This report shall be signed and sealed by the Engineer.

11. Within sixty (60) days of entry into this order, the Respondent shall install the appropriate signs and notifications of the use of reclaimed water on the golf course, designating the nature of the reuse project area where reuse is provided.

12. Within sixty (60) days of entry into this order, the Respondent shall color-code (Pantone Purple 522C) or otherwise mark all piping, pipelines, valves and outlets related to the reclaimed water system in order to differentiate the reclaimed water from domestic or other water.

13. Within thirty (30) days of the effective date of this Consent Order, Respondent shall pay the Department \$5,500.00 in settlement of the matters addressed in this Consent Order. This amount includes \$500 for costs and expenses incurred by the Department during the investigation of this matter and the preparation and tracking of this Consent Order. The civil penalty is apportioned as follows: \$4,500 for the violation of F.A.C. Rule 62-620.610(5); \$500

for the violation of 62-610.468(2). Payment shall be made by cashier's check or money order. The instrument shall be made payable to the "Department of Environmental Protection" and shall include thereon the OGC number assigned to this Consent Order and the notation "Ecosystem Management and Restoration Trust Fund".

14. Respondent agrees to pay the Department stipulated penalties in the amount of \$100 per day for each and every day Respondent fails to timely comply with any of the requirements of Paragraphs 8-13 of this Consent Order. A separate stipulated penalty shall be assessed for each violation of this Consent Order. Within 30 days of written demand from the Department, Respondent shall make payment of the appropriate stipulated penalties to "The Department of Environmental Protection" by cashier's check or money order and shall include thereon the OGC number assigned to this Consent Order and the notation "Ecosystem Management and Restoration Trust Fund." Payment shall be sent to the Department of Environmental Protection, 2295 Victoria Ave, P.O. Box 2549, Fort Myers, FL 33902-2549. The Department may make demands for payment at any time after violations occur. Nothing in this Paragraph shall prevent the Department from filing suit to specifically enforce any terms of this Consent Order. Any penalties assessed under this Paragraph shall be in addition to the settlement sum agreed to in Paragraph 13 of this Consent Order. If the Department is required to file a lawsuit to recover stipulated penalties under this Paragraph, the Department will not be foreclosed from seeking civil penalties for violations of this Consent Order in an amount greater than the stipulated penalties due under this Paragraph.

15. If any event, including administrative or judicial challenges by third parties unrelated to the Respondent, occurs which causes delay or the reasonable likelihood of delay, in complying with the requirements of this Consent Order, Respondent shall have the burden of proving the delay was or will be caused by circumstances beyond the reasonable control of the Respondent and could not have been or cannot be overcome by Respondent's due diligence. Economic circumstances shall not be considered circumstances beyond the control of Respondent, nor

shall the failure of a contractor, subcontractor, materialman or other agent (collectively referred to as "contractor") to whom responsibility for performance is delegated to meet contractually imposed deadlines be a cause beyond the control of Respondent, unless the cause of the contractor's late performance was also beyond the contractor's control. Upon occurrence of an event causing delay, or upon becoming aware of a potential for delay, Respondent shall notify the Department orally within 24 hours or by the next working day and shall, within seven calendar days of oral notification to the Department, notify the Department in writing of the anticipated length and cause of the delay, the measures taken or to be taken to prevent or minimize the delay and the timetable by which Respondent intends to implement these measures. If the parties can agree that the delay or anticipated delay has been or will be caused by circumstances beyond the reasonable control of Respondent, the time for performance hereunder shall be extended for a period equal to the agreed delay resulting from such circumstances. Such agreement shall adopt all reasonable measures necessary to avoid or minimize delay. Failure of Respondent to comply with the notice requirements of this Paragraph in a timely manner shall constitute a waiver of Respondent's right to request an extension of time for compliance with the requirements of this Consent Order.

16. Persons who are not parties to this Consent Order, but whose substantial interests are affected by this Consent Order, have a right, pursuant to Sections 120.569 and 120.57, Florida Statutes, to petition for an administrative hearing on it. The Petition must contain the information set forth below and must be filed (received) at the Department's Office of General Counsel, 3900 Commonwealth Boulevard, MS# 35, Tallahassee, Florida 32399-3000 within 21 days of receipt of this notice. A copy of the Petition must also be mailed at the time of filing to the District Office named above at the address indicated. Failure to file a petition within the 21 days constitutes a waiver of any right such person has to an administrative hearing pursuant to Sections 120.569 and 120.57, Florida Statutes.

The petition shall contain the following information:

(a) The name, address, and telephone number of each petitioner; the Department's Consent Order identification number and the county in which the subject matter or activity is located;

(b) A statement of how and when each petitioner received notice of the Consent Order;

(c) A statement of how each petitioner's substantial interests are affected by the Consent Order;

(d) A statement of the material facts disputed by petitioner, if any;

(e) A statement of facts which petitioner contends warrant reversal or modification of the Consent Order;

(f) A statement of which rules or statutes petitioner contends require reversal or modification of the Consent Order;

(g) A statement of the relief sought by petitioner, stating precisely the action petitioner wants the Department to take with respect to the Consent Order.

If a petition is filed, the administrative hearing process is designed to formulate agency action. Accordingly, the Department's final action may be different from the position taken by it in this Notice. Persons whose substantial interests will be affected by any decision of the Department with regard to the subject Consent Order have the right to petition to become a party to the proceeding. The petition must conform to the requirements specified above and be filed (received) within 21 days of receipt of this notice in the Office of General Counsel at the above address of the Department. Failure to petition within the allowed time frame constitutes a waiver of any right such person has to request a hearing under Sections 120.569 and 120.57, Florida Statutes, and to participate as a party to this proceeding. Any subsequent intervention will only, be at the approval of the presiding officer upon motion filed pursuant to Rule 28-106.201 Florida Administrative Code.

A person whose substantial interests are affected by the Consent Order may file a timely petition for an administrative hearing under Sections 120.569 and 120.57, Florida Statutes, or may choose to pursue mediation as an alternative remedy under Section 120.573, Florida Statutes, before the deadline for filing a petition. Choosing mediation will not adversely affect the right to a hearing if mediation does not result in a settlement. The procedures for pursuing mediation are set forth below.

Mediation may only take place if the Department and all the parties to the proceeding agree that mediation is appropriate. A person may pursue mediation by reaching a mediation agreement with all parties to the proceeding (which include the Respondent, the Department, and any person who has filed a timely and sufficient petition for a hearing) and by showing how the substantial interests of each mediating party are affected by the Consent Order. The agreement must be filed in (received by) the Office of General Counsel of the Department at 3900 Commonwealth Boulevard, MS #35, Tallahassee, Florida 32399-3000, within 10 days after the deadline as set forth above for the filing of a petition.

The agreement to mediate must include the following:

- (a) The names, addresses, and telephone numbers of any persons who may attend the mediation;
- (b) The name, address, and telephone number of the mediator selected by the parties, or a provision for selecting a mediator within a specified time;
- (c) The agreed allocation of the costs and fees associated with the mediation;
- (d) The agreement of the parties on the confidentiality of discussions and documents introduced during mediation;
- (e) The date, time, and place of the first mediation session, or a deadline for holding the first session, if no mediator has yet been chosen;
- (f) The name of each party's representative who shall have authority to settle or recommend settlement; and

(g) Either an explanation of how the substantial interests of each mediating party will be affected by the action or proposed action addressed in this notice of intent or a statement clearly identifying the petition for hearing that each party has already filed, and incorporating it by reference.

(h) The signatures of all parties or their authorized representatives.

As provided in Section 120.573, Florida Statutes, the timely agreement of all parties to mediate will toll the time limitations imposed by Sections 120.569 and 120.57, Florida Statutes, for requesting and holding an administrative hearing. Unless otherwise agreed by the parties, the mediation must be concluded within sixty days of the execution of the agreement. If mediation results in settlement of the administrative dispute, the Department must enter a final order incorporating the agreement of the parties. Persons whose substantial interests will be affected by such a modified final decision of the Department have a right to petition for a hearing only in accordance with the requirements for such petitions set forth above, and must therefore file their petitions within 21 days of receipt of this notice. If mediation terminates without settlement of the dispute, the Department shall notify all parties in writing that the administrative hearing processes under Sections 120.569 and 120.57, Florida Statutes, remain available for disposition of the dispute, and the notice will specify the deadlines that then will apply for challenging the agency action and electing remedies under those two statutes.

17. Respondent shall allow all authorized representatives of the Department access to the property and facility at reasonable times for the purpose of determining compliance with the terms of this Consent Order and the rules and statutes of the Department.

18. All submittals and payments required by this Consent Order to be submitted to the Department shall be sent to the Florida Department of Environmental Protection, 2295 Victoria Ave, P.O. Box 2549, Fort Myers, FL 33902-2549.

19. This Consent Order is a settlement of the Department's civil and administrative authority arising under Florida law to resolve the matters addressed herein. This Consent Order is not a

settlement of any criminal liabilities which may arise under Florida law, nor is it a settlement of any violation which may be prosecuted criminally or civilly under federal law.

20. The Department hereby expressly reserves the right to initiate appropriate legal action to prevent or prohibit any violations of applicable statutes, or the rules promulgated thereunder that are not specifically addressed by the terms of this Consent Order, including but not limited to undisclosed releases, contamination or polluting conditions.

21. The terms and conditions set forth in this Consent Order may be enforced in a court of competent jurisdiction pursuant to Sections 120.69 and 403.121, Florida Statutes. Failure to comply with the terms of this Consent Order shall constitute a violation of Section 403.161(1)(b), Florida Statutes.

22. Respondent is fully aware that a violation of the terms of this Consent Order may subject Respondent to judicial imposition of damages, civil penalties up to \$10,000.00 per day per violation, and criminal penalties.

23. Entry of this Consent Order does not relieve Respondent of the need to comply with applicable federal, state or local laws, regulations or ordinances.

24. No modifications of the terms of this Consent Order shall be effective until reduced to writing and executed by both Respondent and the Department.

25. Respondent acknowledges and waives its right to an administrative hearing pursuant to Sections 120.569 and 120.57, Florida Statutes, on the terms of this Consent Order.

Respondent acknowledges its right to appeal the terms of this Consent Order pursuant to Section 120.68, Florida Statutes, and waives that right upon signing this Consent Order.

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OGC Case NO.: 08-2754-28-DW

26. This Consent Order is a final order of the Department pursuant to Section 120.52(7), Florida Statutes, and it is final and effective on the date filed with the Clerk of the Department unless a Petition for Administrative Hearing is filed in accordance with Chapter 120, Florida Statutes. Upon the timely filing of a petition this Consent Order will not be effective until further order of the Department.

DATE

Mike Telschow
Owner

DONE AND ORDERED this ____day of _____ 2009, in Lee County, Florida.

STATE OF FLORIDA DEPARTMENT
OF ENVIRONMENTAL PROTECTION

Jon M. Iglehart
Director of
District Management

FILED, on this date, pursuant to §120.52 Florida Statutes, with the designated Department Clerk, receipt of which is hereby acknowledged.

Clerk

Date



Florida Department of Environmental Protection

South District Office
Post Office Box 2549
Fort Myers, Florida 33902-2549

Rick Scott
Governor

Jennifer Carroll
Lt. Governor

Herschel T. Vinyard Jr.
Secretary

April 20, 2011

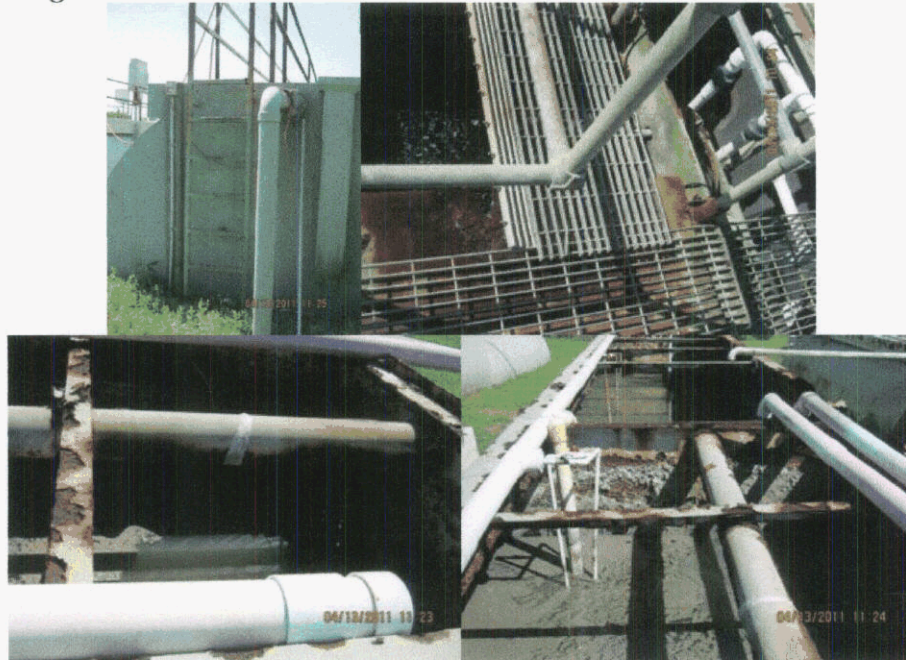
Mike Tellschow, Owner
Utility Corporation of Florida, Inc.
200 Healthy Way
Sebring, FL 33876

RE: Highlands County - DW
Spring Lake Golf & Country Club WWTP
FLA014315

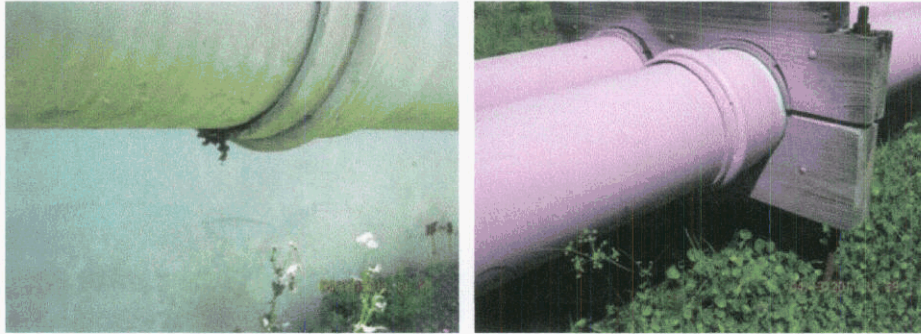
Dear Mr. Tellschow:

On April 13, 2011, Department staff conducted a compliance evaluation inspection of the above-referenced facility. Please note the items listed below which need to be addressed:

1. The facility is in disrepair. Tanks, catwalks, and access ladders are rusting and unsafe.



2. Leaks were observed in the pipe connecting the clarifier to the filter and in the effluent reject line (see photographs on the following page).



3. The blower motor was not operating properly at the time of the inspection.
4. The aeration basins were not providing adequate mixing.

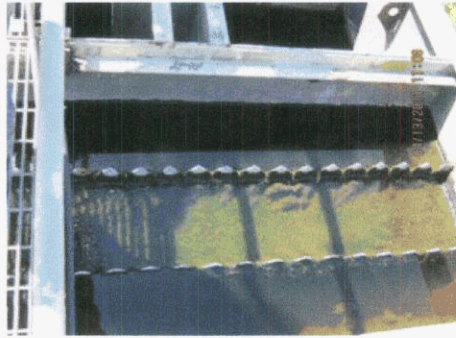


5. The air line to the aeration basin diffusers was leaking at the time of the inspection.

6. The skimmer was not functioning properly. The surface of the clarifier was covered in duckweed and solids were observed discharging over the clarifier weir.



7. The clarifier weirs were covered with algae restricting flow from the unit. Large amounts of sludge have accumulated on the walls of the clarifier (see photograph on the following page).



8. A review of the Department files indicated that the April 2010 and July 2010 Discharge Monitoring Reports (DMRs) were submitted on 6/1/2010 and 8/30/2010 respectively. DMRs must be received by the appropriate District Office of the Department by the 28th of the following month.

9. A review of the January, April, and June 2010 DMRs indicated exceedances for Nitrate (23.2 mg/L, 13.6 mg/L, and 12.1 mg/L respectively).

10. A review of the March, April, May, June, July, and August 2010 DMRs indicated exceedances for Chlorine (0.4 mg/L, 0 mg/L, 0.04 mg/L, 0.4 mg/L, 0.1 mg/L, and 0.05 mg/L respectively).

The Department requests a written response addressing the items listed above within 15 days of your receipt of this letter. Your response should include an explanation of any corrective actions that have either been taken or that you plan to take. Please note that this letter, being part of the Department's investigation, is preliminary to agency action in accordance with Section 120.57(5), Florida Statutes. Please direct your response and any questions to Diane Loughlin at (863) 314-5975 or via e-mail: Diane.Loughlin@dep.state.fl.us.

Sincerely,

Keith Kleinmann
Environmental Manager

DWF/del/jl

cc: [Thomas Quinn](#), Operator, via email
Allen Slater, FRWA
PSC

May 8, 2011

Diane Loughlin
FL Dept of Environmental Protection
Sebring, FL 33870
Diane.Loughlin@dep.state.fl.us

Dear Ms. Loughlin

I am writing in response to your letter concerning the wastewater treatment plant inspection conducted on April 13. I am working to make appropriate repairs or changes in procedures.

1. "The facility is in disrepair. Tanks, catwalks, and access ladders are rusting and unsafe."

A. The first picture provided as evidence of this is of an aeration tank that is off-line, as indicated in the current DEP permit. (Please see the section "Treatment Facilities" in the last revised permit dated 5-23-2008.) There are three aeration tanks on the west side which are off-line.

B. The second picture is over the filter area. The support under the catwalk was being replaced on the 13th of April and was completed on 4-26-2011.

C. The east plant is using the west digester (15,598 gallons) as a back-up to the east digester (8,000g). The west digester is the only tank on the west side in use.

D. All hand rails and ladders on the west side are in good condition, despite some light rust.

E. All catwalks are made of aluminum and do not rust.

F. The main surge tank (surge tank #1) is rusting. The last engineering report approximated its lifespan to be 1-5 years.

2. "Leaks were observed in the pipe connecting the clarifier to the filter and in the effluent reject line."

A. All parts have arrived and repairs should be complete by 5-30-2011.

3. "The blower motor was not operating properly at the time of the inspection."

A. The aeration blower is on a timer with predetermined on and off settings.

B. The blower was and is operating perfectly.

4. "The aeration basins were not providing adequate mixing."

A. The aeration was working properly; the mixing is controlled for the nitrate limits.

B. We have on site aeration profiles for April 13, 15, 17, and most of the previous days.

5. "The airline to the aeration basin diffusers was leaking at the time of the inspection."

A. On aeration tank #2, the north air diffuser only has a small hole in the nipple connecting to the air header. It is scheduled for replacement on 5-6-2011.

6. "The skimmer was not functioning properly. The surface of the clarifier was covered in duckweed and solids were observed discharging over the clarifier weir."

- A. The north skimmer is out of service until further notice.
- B. The south skimmer was repiped on 5-3-2011 and is back in service.

7. "The clarifier weirs were covered with algae restricting flow from the unit. Large amounts of sludge have accumulated on the walls of the clarifier."

- A. Daily cleanings of the weirs and monthly cleaning of the clarifier have been scheduled by the operator.

8. "Discharge Monitoring Reports must be received by the 28th of the following month."

- A. The Operator will deliver reports to the US Post Office personally rather than relying on secretarial staff.

9. "January, April, and June 2010 DMRs indicated exceedances for Nitrate."

- A. January 23, 2010 (23.2) Air was high because the plant was being reseeded to increase the bio- mass, as per Allen Slater's instructions.
- B. April 12, 2010 (13.6) The lab report of April 12 indicated the air was too high. It was subsequently turned down multiple times.
- C. June 9, 2010 (12.1) Seed sludge was added and air adjusted to correct this.

10. "March, April, May, June, July, and August 2010 DMRs indicate exceedances for Chlorine."

- A. March 18, 2010 (0.4 MG/L) Chlorine under 1.0 MG/L for less than 1/2 minute, starting at 1930 hours, when the electric valve switched to the reject pond. Chlorine went back above 1.0 MG/L at (+or-) 1930 hours.
- B. April 28, 2010 (0.0 MG/L) Operator checked the bleach pump tubing and the CL-17 analyzer, as well as the bleach header, but could not find a definite cause. The electric valve switched to the reject pond as required.
- C. May 2, 2010 (0.04 MG/L) a pin hole leak in the bleach tank tubing caused this drop. The line was repaired.
- D. June 6, 2010 (0.4 MG/L) The bleach setting was too low because there was no influent for (+or-) 16 hours. All effluent went to the reject pond when the level dropped below 1.0 MG/L.
- E. July 28, 2010 (0.1. MG/L) Chlorine appeared to be running okay on 7-27 and also on 7-28, until 0300 hours. When the levels dropped below 1.0 MG/L, the auto valve switched as required.

F. August 1, 2010 (0.05 MG/L) Chlorine pump was not pumping to the chlorine contact chamber. The pump appeared to be air locked. Operator released the bypass pressure knob and the pump started back up. The auto valve switched to the reject pond as required.

I hope I have supplied enough clear and accurate information to answer your concerns. If you need additional information, please let me know.

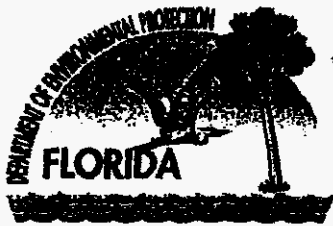
Sincerely,

A handwritten signature in cursive script that reads "Thomas A. Quinn".

Thomas A. Quinn, Operator
Utility Corporation of Florida, Inc.

Cc: Keith Kleinmann, Florida Dept. of Environmental Protection
Allen Slater, Florida Rural Water Association
Michael Tellschow, Utility Corporation of Florida, Inc.
Lois Schlabach, Utility Corporation of Florida, Inc.

Note: Hard copy to be delivered to the office of Ms. Loughlin in Sebring, FL.



Florida Department of Environmental Protection

South District
P.O. Box 2549
Fort Myers, FL 33902-2549

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

STATE OF FLORIDA DOMESTIC WASTEWATER FACILITY PERMIT

PERMITTEE:

Utility Corporation of Florida, Inc.

RESPONSIBLE AUTHORITY:

Mr. Mike Tellschow, President
100 Clubhouse Lane
Sebring, FL 33876
(863) 655-3330

PERMIT NUMBER:

FLA014315

PA FILE NUMBER:

FLA014315-002-DW2P

ISSUANCE DATE:

April 30, 2008

EXPIRATION DATE:

April 31, 2013

REVISION DATE:

May 23, 2008

FACILITY:

Spring Lake Golf and Country Club STP
100 Country Club Drive
Sebring, FL 33876
Highlands County
Latitude: 27° 26' 45" N Longitude: 81° 18' 58" W

This permit is issued under the provisions of Chapter 403, Florida Statutes (F.S.), and applicable rules of the Florida Administrative Code (F.A.C.). The above named permittee is hereby authorized to operate the facilities shown on the application and other documents attached hereto or on file with the Department and made a part hereof and specifically described as follows:

TREATMENT FACILITIES:

Operate an existing 0.140 million gallons per day, annual average daily flow (MGD, AADF) extended aeration domestic wastewater treatment plant consisting of two surge tanks (total volume 64,428 gallons), three aeration basins (total volume 107,034 gallons) with three additional offline basins in a second treatment train, two clarifier tanks (17,480 gallons and 10,960 gallons), two chlorine contact chambers (total volume 6,732 gallons), two digester tanks (15,598 gallons and 8,000 gallons), and tertiary filtration with reclaimed water to reuse holding pond or golf course irrigation system or reject storage/percolation pond

REUSE:

Land Application: An existing 0.140 MGD annual average daily flow (AADF) permitted capacity land application system (R-001) consisting of two (2) percolation ponds.

Land Application: An existing 0.140 MGD annual average daily flow (AADF) permitted capacity slow-rate public access system (R-002) consisting of an isolated reuse irrigation pond and irrigation of a golf course.

IN ACCORDANCE WITH: The limitations, monitoring requirements and other conditions set forth in Pages 1 through 24 of this permit.

FACILITY: Spring Lake Golf and Country Club STP
PERMITTEE: Utility Corporation of Florida, Inc.
100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
PA FILE NUMBER: FLA014315-002-DW2P

2. Reclaimed water samples shall be taken at the monitoring site locations listed in Permit Condition I. A. 1. and as described below:

Monitoring Location Site Number	Description of Monitoring Location
EFA-01	After final treatment and before discharge to the ponds.
EFA-02	After filtration and before disinfection

3. Meter shall be utilized to measure flow and calibrated at least annually. [62-601.200(17) and .500(6)]
4. The arithmetic mean of the monthly fecal coliform values collected during an annual period shall not exceed 200 per 100 mL of reclaimed water sample. The geometric mean of the fecal coliform values for a minimum of 10 samples of reclaimed water, each collected on a separate day during a period of 30 consecutive days (monthly), shall not exceed 200 per 100 mL of sample. No more than 10 percent of the samples collected (the 90th percentile value) during a period of 30 consecutive days shall exceed 400 fecal coliform values per 100 mL of sample. Any one sample shall not exceed 800 fecal coliform values per 100 mL of sample. Note: To report the 90th percentile value, list the fecal coliform values obtained during the month in ascending order. Report the value of the sample that corresponds to the 90th percentile (multiply the number of samples by 0.9). For example, for 30 samples, report the corresponding fecal coliform number for the 27th value of ascending order. [62-610.410 and 62-600.440(4)(c)]
5. The minimum total chlorine residual shall be limited as described in the approved operating protocol, such that the permit limitation for fecal coliform bacteria will be achieved. In no case shall the total chlorine residual be less than 0.5 mg/L. [62-600.440(5)(b); 62-610.460(2); 62-610.463(2); 62-610.410; 62-600.440(4)(b)]
6. The maximum turbidity shall be limited as described in the approved operating protocol, such that the permit limitations for total suspended solids and fecal coliforms will be achieved. [62-610.463(2)]

FACILITY: Spring Lake Golf and Country Club STP
 PERMITTEE: Utility Corporation of Florida, Inc.
 100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
 PA FILE NUMBER: FLA014315-002-DW2P

7. During the period beginning on the issuance date and lasting through the expiration date of this permit, the permittee is authorized to direct reclaimed water to Reuse System R-002. Such reclaimed water shall be limited and monitored by the permittee as specified below and reported in accordance with condition I.B.9:

Parameter	Units	Max/Min	Reclaimed Water Limitations				Monitoring Requirements			
			Annual Average	Monthly Average	Weekly Average	Single Sample	Monitoring Frequency	Sample Type	Monitoring Location Site Number	Notes
Nitrogen, Nitrate, Total (as N)	MG/L	Maximum	-	-	-	12	Every Two Weeks	Grab	EFA-01	
BOD, Carbonaceous 5 day, 20C	MG/L	Maximum	20.0	30.0	45.0	60.0	4 Days/Week	Grab	EFA-01	
pH	SU	Range	-	-	-	6.0 to 8.5	5 Days/Week	Grab	EFA-01	
Coliform, Fecal	#/100ML	Maximum	See Permit Condition LA.10.				4 Days/Week	Grab	EFA-01	
Total Residual Chlorine (For Disinfection)	MG/L	Minimum	-	-	-	1.0	Continuous	Meter	EFA-01	See Cond.LA.11
Solids, Total Suspended	MG/L	Maximum	-	-	-	5.0	4 Days/Week	Grab	EFA-02	
Turbidity	NTU	Maximum	See Permit Condition LA.12.				Continuous	Meter	EFA-02	
Giardia	CYSTS/100 L	Maximum	-	-	-	Report	five years	Filtered	EFA-01	
Cryptosporidium	OOCYSTS/100 L	Maximum	-	-	-	Report	five years	Filtered	EFA-01	

FACILITY: Spring Lake Golf and Country Club-STP
PERMITTEE: Utility Corporation of Florida, Inc.
100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
PA FILE NUMBER: FLA014315-002-DW2P

8. Reclaimed water samples shall be taken at the monitoring site locations listed in Permit Condition I. A. 7. and as described below:

Monitoring Location Site Number	Description of Monitoring Location
EFA-01	After final treatment and before discharge to the ponds.
EFA-02	After filtration and before disinfection

9. Meter shall be utilized to measure flow and calibrated at least annually. *[62-601.200(17) and .500(6)]*
10. Over a 30-day period, at least 75 percent of the fecal coliform values shall be below the detection limits. No sample shall exceed 25 fecal coliforms per 100 mL. No sample shall exceed 5.0 mg/L of total suspended solids (TSS) at a point before the application of the disinfectant. Note: To report the "% less than detection," count the number of fecal coliform observations that were less than detection, divide by the total number of fecal coliform observations in the month, and multiply by 100% (round to the nearest integer). *[62-600.440(5)(f)]*
11. The minimum total chlorine residual shall be limited as described in the approved operating protocol, such that the permit limitation for fecal coliform bacteria will be achieved. In no case shall the total chlorine residual be less than 1.0 mg/L. *[62-600.440(5)(b); 62-610.460(2); and 62-610.463(2)]*
12. The maximum turbidity shall be limited as described in the approved operating protocol, such that the permit limitations for total suspended solids and fecal coliforms will be achieved. *[62-610.463(2)]*

FACILITY: Spring Lake Golf and Country Club STP
 PERMITTEE: Utility Corporation of Florida, Inc.
 100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
 PA FILE NUMBER: FLA014315-002-DW2P

B. Other Limitations and Monitoring and Reporting Requirements

1. During the period beginning on the issuance date and lasting through the expiration date of this permit, the treatment facility shall be limited and monitored by the permittee as specified below and reported in accordance with condition I.B.9:

Parameter	Units	Max/Min	Limitations				Monitoring Requirements				Notes
			Annual Average	Monthly Average	Weekly Average	Single Sample	Monitoring Frequency	Sample Type	Monitoring Location Site Number		
Flow (Annual Average Daily Flow)	MGD	Maximum	0.140	-	-	-	5 Days/Week	Meter	FLW-01	See Cond.I.A.3	
Solids, Total Suspended	MGL	Maximum	-	Report	-	-	Monthly	Grab	INF-01	See Cond.I.B.3	
BOD, Carbonaceous 5 day, 20C	MGL	Maximum	-	Report	-	-	Monthly	Grab	INF-01	See Cond.I.B.3	

FACILITY: Spring Lake Golf and Country Club STP
 PERMITTEE: Utility Corporation of Florida, Inc.
 100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
 PA FILE NUMBER: FLA014315-002-DW2P

2. Samples shall be taken at the monitoring site locations listed in Permit Condition I. B. 1 and as described below:

Monitoring Location Site Number	Description of Monitoring Location
FLW-01	Flow is measured from elapsed time meter located upstream of the facility
INF-01	Influent being pumped from lift station to surge tank prior to any side stream mixing.

3. Influent samples shall be collected so that they do not contain digester supernatant or return activated sludge, or any other plant process recycled waters. [62-601.500(4)]
4. The treatment facilities shall be operated in accordance with all approved operating protocols. Only reclaimed water that meets the criteria established in the approved operating protocol(s) may be released to system storage or to the reuse system. Reclaimed water that fails to meet the criteria in the approved operating protocol(s) shall be directed to the onsite percolation pond. The operating protocol(s) shall be reviewed and updated periodically to ensure continuous compliance with the minimum treatment and disinfection requirements. Updated operating protocols shall be submitted to the Department for review and approval upon revision of the operating protocol(s) and with each permit application. [62-610.320(6) and 62-610.463(2)]
5. Instruments for continuous on-line monitoring of total residual chlorine and turbidity shall be equipped with an automated data logging or recording device. [62-610.463(2) & .865(8)(d)]
6. Intervals between sampling for Giardia and Cryptosporidium shall not exceed five years. Sampling results shall be reported on DEP Form 62-610.300(4)(a)4 which is attached to this permit. This form shall be submitted to the Department and to DEP's Reuse Coordinator in Tallahassee. [62-610.463(4)]
7. Parameters which must be monitored as a result of a surface water discharge shall be analyzed using a sufficiently sensitive method to assure compliance with applicable water quality standards and effluent limitations in accordance with 40 CFR (Code of Federal Regulations) Part 136. All monitoring shall be representative of the monitored activity. [62-620.320(6)]
8. The permittee shall provide safe access points for obtaining representative influent, reclaimed water, and effluent samples which are required by this permit. [62-601.500(5)]
9. Monitoring requirements under this permit are effective on the first day of the second month following permit issuance. Until such time, the permittee shall continue to monitor and report in accordance with previously effective permit requirements, if any. During the period of operation authorized by this permit, the permittee shall complete and submit to the Department's South District Office Discharge Monitoring Reports (DMRs) in accordance with the frequencies specified by the REPORT type (i.e., monthly, toxicity, quarterly, semiannual, annual, etc.) indicated on the DMR forms attached to this permit. Monitoring results for each monitoring period shall be submitted in accordance with the associated DMR due dates below.

REPORT Type	Monitoring Period	Due Date
Monthly or Toxicity	First day of month – last day of month	28 th day of following month
Quarterly	January 1 - March 31	April 28
	April 1 - June 30	July 28
	July 1 - September 30	October 28
	October 1 - December 31	January 28
Semiannual	January 1 - June 30	July 28
	July 1 - December 31	January 28
Annual	January 1 - December 31	January 28

DMRs shall be submitted for each required monitoring period including months of no discharge. The permittee shall make copies of the attached DMR form(s) and shall submit the completed DMR form(s) to the Department's South District Office at the address specified in Permit Condition I.B. 13 by the twenty-eighth (28th) of the month following the month of operation. [62-620.610(18)][62-601.300(1), (2), and (3)]

FACILITY: Spring Lake Golf and Country Club STP
PERMITTEE: Utility Corporation of Florida, Inc.
100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
PA FILE NUMBER: FLA014315-002-DW2P

10. During the period of operation authorized by this permit, reclaimed water or effluent shall be monitored annually for the primary and secondary drinking water standards contained in Chapter 62-550, F.A.C., (except for turbidity, total coliforms, color, and corrosivity). Twenty-four hour composite samples shall be used to analyze reclaimed water or effluent for the primary and secondary drinking water standards. These monitoring results shall be reported to the Department annually on the Reclaimed Water or Effluent Analysis Report, Form 62-620.910(15), or in another format if requested by the permittee and if approved by the Department as being compatible with data entry into the Department's computer system. During years when a permit is not renewed, a certification stating that no new non-domestic wastewater dischargers have been added to the collection system since the last reclaimed water or effluent analysis was conducted may be submitted in lieu of the report. The annual reclaimed water or effluent analysis report or the certification shall be completed and submitted in a timely manner so as to be received by the Department by April 15 of each year. [62-601.300(4)][62-601.500(3)]
11. The permittee shall submit an Annual Reuse Report using DEP Form 62-610.300(4)(a)2. on or before January 1 of each year. [62-610.870(3)]
12. The permittee shall maintain an inventory of storage systems. The inventory shall be submitted to the Department at least 30 days before reclaimed water will be introduced into any new storage system. The inventory of storage systems shall be attached to the annual submittal of the Annual Reuse Report. [62-610.464(5)]
13. Unless specified otherwise in this permit, all reports and other information required by this permit, including 24-hour notifications, shall be submitted to or reported to, as appropriate, the Department's South District Office at the address specified below:

South District Office
Department of Environmental Protection
P.O. Box 2549
Ft. Myers, Florida 33902-2549

Phone Number - (239) 332-6975

FAX Number - (239) 332-6969

All FAX copies shall be followed by original copies. All reports and other information shall be signed in accordance with the requirements of Rule 62-620.305, F.A.C. [62-620.305]

II. RESIDUALS MANAGEMENT REQUIREMENTS

1. The method of residuals use or disposal by this facility is land application or disposal in a Class I or II solid waste landfill.
2. The permittee shall be responsible for proper treatment, management, use, and land application or disposal of its residuals. [62-640.300(5)]
3. The permittee will not be held responsible for violations resulting from land application of residuals if the permittee can demonstrate that it has delivered residuals that meet the parameter concentrations and appropriate treatment requirements of this rule and the applier (e.g. hauler, contractor, site manager, or site owner) has legally agreed in writing to accept responsibility for proper land application of the residuals. Such an agreement shall state that the applier agrees, upon delivery of residuals that have been treated as required by Chapter 62-640, F.A.C., that he will accept responsibility for proper land application of the residuals as required by Chapter 62-640, F.A.C., and that the applier agrees that he is aware of and will comply with requirements for proper land application as described in the facility's permit. [62-640.300(5)]
4. Disposal of residuals, septage, and other solids in a solid waste landfill, or disposal by placement on land for purposes other than soil conditioning or fertilization, such as at a monofill, surface impoundment, waste pile, or dedicated site, shall be in accordance with Chapter 62-701, F.A.C. [62-640.100(6)(a)3 & 4]
5. Land application of residuals shall be in accordance with the conditions of this permit, the approved Agricultural Use Plan(s), and the requirements of Chapter 62-640, F.A.C. [62-640]

FACILITY: Spring Lake Golf and Country Club-STP
 PERMITTEE: Utility Corporation of Florida, Inc.
 100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
 PA FILE NUMBER: FLA014315-002-DW2P

6. The domestic wastewater residuals for this facility are classified as Class B.
7. The permittee shall achieve Class B pathogen reduction by meeting the pathogen reduction requirements in section 503.32(b)(3) (Use of PSRP - Lime Stabilization) of Title 40 CFR Part 503, revised as of October 25, 1995. [62-640.600(1)(b)]
8. The permittee shall achieve vector attraction reduction by meeting the vector attraction reduction requirements in section 503.33(b)(6) (Add alkaline materials to raise the pH under specified conditions) of Title 40 CFR Part 503, revised as of October 25, 1995. [62-640.600(2)(a)]
9. Treatment of liquid residuals or septage for the purpose of meeting the pathogen reduction or vector attraction reduction requirements set forth in Rule 62-640.600, F.A.C., shall not be conducted in the tank of a hauling vehicle. Treatment of residuals or septage for the purpose of meeting pathogen reduction or vector attraction reduction requirements shall take place at the permitted facility. [62-640.400(8)]
10. The permittee shall sample and analyze the Class A or Class B residuals to monitor for pathogen and vector attraction reduction requirements of Rule 62-640.600, F.A.C., and the parameters listed in the table below at least once every twelve (12) months. All samples shall be representative of the residuals used or land applied and shall be taken after final treatment of the residuals but before use or land application.

Parameter	Ceiling Concentrations (Single Sample)	Cumulative Application Limits
Total Nitrogen	(Report only) % dry weight	Not applicable
Total Phosphorus	(Report only) % dry weight	Not applicable
Total Potassium	(Report only) % dry weight	Not applicable
Arsenic	75 mg/kg dry weight	36.6 pounds/acre
Cadmium	85 mg/kg dry weight	34.8 pounds /acre
Copper	4300 mg/kg dry weight	1340 pounds/acre
Lead	840 mg/kg dry weight	268 pounds/acre
Mercury	57 mg/kg dry weight	15.2 pounds/acre
Molybdenum	75 mg/kg dry weight	Not applicable
Nickel	420 mg/kg dry weight	375 pounds/acre
Selenium	100 mg/kg dry weight	89.3 pounds/acre
Zinc	7500 mg/kg dry weight	2500 pounds/acre
pH	(Report only) standard units	Not applicable
Total Solids	(Report only) %	Not applicable

[62-640.650(1), 62-640.700(1), 62-640.700(3)(b), and 62-640.850(3)]

FACILITY: Spring Lake Golf and Country Club STP
PERMITTEE: Utility Corporation of Florida, Inc.
100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
PA FILE NUMBER: FLA014315-002-DW2P

11. Residuals samples shall be taken at the monitoring site locations described below:

Monitoring Location Site Number	Description of Monitoring Location
RMP-B	From the Digester

12. Sampling and analysis shall be conducted in accordance with Title 40 CFR Part 503, section 503.8 and the U.S. Environmental Protection Agency publication - POTW Sludge Sampling and Analysis Guidance Document, 1989. In cases where disagreements exist between Title 40 CFR Part 503, section 503.8 and the POTW Sludge Sampling and Analysis Guidance Document, the requirements in Title 40 CFR Part 503, section 503.8 will apply. [62-640.650(1), 62-640.700(1), 62-640.700(3)(b), and 62-640.850(3)]
13. Grab samples shall be used for pathogens and determinations of percent volatile solids. Composite samples shall be used for metals. [62-640.650(1)(e)]
14. Residuals shall not be land applied if a single sample result for any parameter exceeds the ceiling concentrations given in this permit. Monthly averages of parameter concentrations shall be determined by taking the arithmetic mean of all sample results for the month. [62-640.650(1)(f)]
15. The permittee shall submit the results of all residuals monitoring with the permittee's Discharge Monitoring Report under Chapter 62-601, F.A.C. The analytical results from each sampling event shall be submitted with the report for the month in which the sampling event occurs. [62-640.650(3)(a)&(e)]
16. Class B residuals shall not be used on unrestricted public access areas. Use of Class B residuals is limited to restricted public access areas such as agricultural sites, forests, and roadway shoulders and medians. [62-640.600(3)(b)]
17. Plant nursery use of Class B residuals is limited to plants which will not be sold to the public for 12 months after the last application of residuals. [62-640.600(3)(b)1.]
18. Use of Class B residuals on roadway shoulders and medians is limited to restricted public access roads. [62-640.600(3)(b)2.]
19. Food crops, feed crops, and fiber crops shall not be harvested for 30 days following the last application of Class B residuals. [62-640.600(3)(b)6.]
20. Food crops with harvested parts that touch the residuals/soil mixture and are totally above the land surface shall not be harvested for 14 months after the last application of Class B residuals. [62-640.600(3)(b)3.]
21. Food crops with harvested parts below the surface of the land shall not be harvested for 20 months after application of Class B residuals when the residuals remain on the land surface for four months or longer before incorporation into the soil. [62-640.600(3)(b)4.]
22. Food crops with harvested parts below the surface of the land shall not be harvested for 38 months after application of Class B residuals when the residuals remain on the land surface for less than four months before incorporation into the soil. [62-640.600(3)(b)5.]
23. Animals shall not be grazed on the land for 30 days after the last application of Class B residuals. [62-640.600(3)(b)7.]
24. Sod which will be distributed or sold to the public or used on unrestricted public access areas shall not be harvested for 12 months after the last application of Class B residuals. [62-640.600(3)(b)8.]
25. The public shall be restricted from application zones for 12 months after the last application of Class B residuals. [62-640.600(3)(b)]
26. Residuals that do not meet the requirements of Chapter 62-640, F.A.C., for Class AA designation shall not be used for the cultivation of tobacco or leafy vegetables. [62-640.400(7)]

FACILITY: Spring Lake Golf and Country Club-STP
 PERMITTEE: Utility Corporation of Florida, Inc.
 100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
 PA FILE NUMBER: FLA014315-002-DW2P

27. Current Agricultural Use Plan(s) identify residuals landspreading on the following sites:

Site Name	Site Type	Application Area (acres)	Site location						
			County	Latitude			Longitude		
				DD	MM	SS	DD	MM	SS
Manning - Blue Environmental	AG	184.8	Manatee	27	19	52	82	8	43
Flint Ranch - Blue Environmental	AG	259.4	Manatee	27	12	30	82	3	30

The wastewater treatment facility permittee shall apply for a minor permit revision on DEP Form 62-620.910(9) for new, modified, or expanded residuals land application sites. The facility's permit shall be revised to include the new or revised Agricultural Use Plan(s) prior to application of residuals to the new, modified, or expanded sites, unless, under unusual circumstances, all of the following conditions are met:

- a) The permittee notifies the Department within 24 hours that the site is being used;
- b) The site meets the site use restrictions of Rule 62-640.600(3), F.A.C., and the criteria for land application of residuals in Rule 62-640.700, F.A.C.;
- c) The permittee submits a new or revised Agricultural Use Plan for the site with a permit application in accordance with Rule 62-640.300(2), F.A.C., within 30 days of beginning use of the site;
- d) The permittee does not have another approved land application site, another approved disposal method (e.g. landfilling or incineration), or approved storage facilities available for use; and,
- e) The permittee demonstrates during permit application that application of additional residuals to an existing approved application site would have resulted in violation of Department rules, or was not possible due to circumstances beyond the permittee's control.

[62-640.300(2)&(3)]

28. Residuals application rates are limited to agronomic rates based on the site vegetation as identified in the Agricultural Use Plan. [62-640.750(2)].
29. Residuals shall be applied with appropriate techniques and equipment to assure uniform application over the application zone. [62-640.700(2)(c)]
30. The spraying of liquid domestic wastewater residuals shall be conducted so that the formation of aerosols is minimized. [62-640.700(2)(d)]
31. Residuals storage facilities at land application sites shall be subject to applicable setback requirements for residuals application sites. Residuals stored at land application sites shall be stored in a manner that will not cause runoff or seepage from the residuals, objectionable odors, or vector attraction. Storage areas must be fenced or otherwise provided with appropriate features to discourage the entry of animals and unauthorized persons. At the time of application, the stored residuals must meet the parameter concentrations, pathogen and vector attraction reduction requirements, and cumulative application limits of this permit. Residuals storage facilities at land application sites may be used only for temporary storage of stabilized residuals for no more than 30 days during periods of inclement weather or to accommodate agricultural operations, or up to the period (not to exceed two years) specified in the Agricultural Use Plan. [62-640.700(2)(e)]
32. Residuals application sites shall be posted with appropriate advisory signs identifying the nature of the project area. [62-640.700(2)(f)]
33. The pH of the residuals soil mixture shall be 5.0 or greater at the time residuals are applied. At a minimum, soil pH testing shall be done annually. [62-640.700(3)(d)]
34. The permittee shall maintain records of application zones and application rates and shall make these records available for inspection within seven days of request by the Department, or delegated Local Program. The permittee shall maintain record items a. through e. below in perpetuity, and maintain record items f. through k. for five years:
 - a. Date of application of the residuals;

FACILITY: Spring Lake Golf and Country Club/STP
PERMITTEE: Utility Corporation of Florida, Inc.
100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
PA FILE NUMBER: FLA014315-002-DW2P

- b. Location of the residuals application site as specified in the Agricultural Use Plan;
- c. Identification of each application zone used by the permittee at the application site and the acreage of each zone;
- d. Amount of residuals applied or delivered to each application zone;
- e. Cumulative loading of each application zone;
- f. The names of all other wastewater facilities using each of the application zones identified in item c.;
- g. Method of incorporation (if any);
- h. Measured pH of the residuals soil mixture at the time the residuals are applied (tested at least annually);
- i. Unsaturated depth of soil above the water table level at the time of application;
- j. Concentration of parameters in the residuals as required by this permit, and the date of last analysis; and
- k. The results of any soil testing that is done under Rule 62-640.500(4)(a), F.A.C.

[62-640.650(2)]

35. The permittee shall submit an annual summary of residuals application activity to the South District Office on Department Form 62-640.210(2)(b) for all residuals applied during the period of January 1 through December 31. The summary for each year shall be submitted by February 19 of the following year. If more than one facility applies residuals to the same application zones, the summary must include a subtotal of each facility's contribution of residuals to the application zones. [62-640.650(3)(b)]
36. If residuals that are subject to the cumulative loading limitations of Rule 62-640.700(3), F.A.C., have been applied to an application zone, and the cumulative loading amount of one or more of the pollutants is not known, no further applications of residuals may be made to that application zone. [62-640.700(3)(f)]
37. A minimum unsaturated soil depth of two feet above the water table level is required at the time the residuals are applied to the soil. [62-640.700(6)(a)]
38. Residuals shall not be applied during rains that cause runoff from the site or when surface soils are saturated. [62-640.700(7)(a)]
39. Land application of "other solids" as defined in Chapter 62-640, F.A.C., is only allowed if specifically addressed in the Agricultural Use Plan(s) approved for this facility. Land application of "other solids" is subject to Chapter 62-640, F.A.C., and the permit conditions that apply to land applied residuals. [62-640.860]
40. If the permittee intends to accept residuals from other facilities, a permit revision is required pursuant to Rule 62-640.880(2)(d), F.A.C. [62-640.880(2)(d)]
41. Storage of residuals or other solids at the permitted facility shall require prior written notification to the Department. [62-640.300(4)]
42. The permittee shall keep hauling records to track the transport of residuals between facilities. The hauling records shall contain the following information:

Source Facility

1. Date and Time Shipped
2. Amount of Residuals Shipped
3. Degree of Treatment (if applicable)
4. Name and ID Number of Residuals Management Facility or Treatment Facility
5. Signature of Responsible Party at Source Facility
6. Signature of Hauler and Name of Hauling Firm

Residuals Management Facility or Treatment Facility

1. Date and Time Received
2. Amount of Residuals Received
3. Name and ID Number of Source Facility
4. Signature of Hauler
5. Signature of Responsible Party at Residuals Management Facility or Treatment Facility

These records shall be kept for five years and shall be made available for inspection upon request by the Department. A copy of the hauling records information maintained by the source facility shall be provided upon delivery of the residuals to the residuals management facility or treatment facility. The permittee shall report to the Department within 24 hours of discovery any discrepancy in the quantity of residuals leaving the source facility and arriving at the residuals management facility or treatment facility. [62-640.880(4)]

FACILITY: Spring Lake Golf and Country Club-STP
 PERMITTEE: Utility Corporation of Florida, Inc.
 100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
 PA FILE NUMBER: FLA014315-002-DW2P

43. The permittee shall not be held responsible for treatment, management, use, or land application violations that occur after its residuals have been accepted by a permitted residuals management facility with which the source facility has an agreement in accordance with Rule 62-640.880(1)(c), F.A.C., for further treatment, management, use or land application. [62-640.300(5)]

III. GROUND WATER REQUIREMENTS

Operational Requirements

- For the Part III Public Access system, all ground water quality criteria specified in Chapter 62-520, F.A.C., shall be met at the edge of the zone of discharge. For major users of reclaimed water (i.e., using 0.1 MGD or more), the zone of discharge shall extend horizontally 100 feet from the application site or to user's site property line, whichever is less, and vertically to the base of the surficial aquifer. For other users, the zone of discharge shall extend horizontally to the boundary of the general service area identified in the attached map and vertically to the base of the surficial aquifer. [62-520.200(23)] [62-522.400 and 62-522.410]
- The ground water minimum criteria specified in Rule 62-520.400 F.A.C., shall be met within the zone of discharge. [62-520.400 and 62-520.420(4)]
- During the period of operation authorized by this permit, the permittee shall sample ground water in accordance with this permit and the approved ground water monitoring plan prepared in accordance with Rule 62-522.600, F.A.C. [62-522.600][62-610.463,]
- The following monitoring wells shall be sampled in accordance with the monitoring frequencies specified in Permit Condition III.5. for Reuse System R-002. Quarterly sampling must be reasonably spaced to be representative of potentially changing conditions.

Monitoring Well ID	Alternate Well Name and/or Description of Monitoring Location	Depth (Feet)	Aquifer Monitored	New or Existing
MWB-43635	SL-1 Background Well.	15	Surficial	Existing
MWI-43636	SL-2 Intermediate Well.	15	Surficial	Existing
MWC-43637	SL-3 Compliance Well.	15	Surficial	Existing

MWB = Background; MWI = Intermediate; MWC = Compliance

[62-522.600][62-610.463]

5. The following parameters shall be analyzed for each of the monitoring well(s) identified in Permit Condition(s) III. 4:

Parameter	Compliance Well Limit	Units	Sample Type	Monitoring Frequency
Water Level Relative to NGVD	Report	FEET	In-situ	Quarterly
Nitrogen, Nitrates, Total (as N)	10	MG/L	Grab	Quarterly
Solids, Total Dissolved (TDS)	500	MG/L	Grab	Quarterly
Arsenic, Total Recoverable	50	UG/L	Grab	Quarterly
Chloride (as Cl)	250	MG/L	Grab	Quarterly
Cadmium, Total Recoverable	5	UG/L	Grab	Quarterly
Chromium, Total Recoverable	100	UG/L	Grab	Quarterly
Lead, Total Recoverable	15	UG/L	Grab	Quarterly
Coliform, Fecal	4	#/100ML	Grab	Quarterly
pH	6.5 to 8.5	SU	In-situ	Quarterly
Sulfate, Total	250	MG/L	Grab	Quarterly
Turbidity	Report	NTU	Grab	Quarterly

[62-522.600(11)(b)] [62-601.300(3), 62-601.700, and Figure 3 of 62-601][62-601.300(6)] [62-520.300(9)]

FACILITY: Spring Lake Golf and Country Club STP
PERMITTEE: Utility Corporation of Florida, Inc.
100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
PA FILE NUMBER: FLA014315-002-DW2P

6. If the concentration for any constituent listed in Permit Condition III. 5. in the natural background quality of the ground water is greater than the stated maximum, or in the case of pH is also less than the minimum, the representative natural background quality shall be the prevailing standard. [62-520.420(2)]
7. In accordance with Part D of Form 62-620.910(10), water levels shall be recorded before evacuating wells for sample collection. Elevation references shall include the top of the well casing and land surface at each well site (NGVD allowable) at a precision of plus or minus 0.1 foot. [62-610.463(3)(a),]
8. Ground water monitoring wells shall be purged prior to sampling to obtain representative samples. [62-601.700(5)]
9. Analyses shall be conducted on unfiltered samples, unless filtered samples have been approved by the Department's South District Office as being more representative of ground water conditions. [62-520.300(9)]
10. Ground water monitoring parameters shall be analyzed in accordance with Chapter 62-601, F.A.C. [62-620.610(18)]
11. Ground water monitoring test results shall be submitted on Part D of Form 62-620.910(10). For reuse or land application projects, results shall be submitted with the DMR for each month listed in the following schedule. The submitted results shall be for each year during the period of operation allowed by this permit in accordance with Permit Condition I.B.9. [62-522.600(10) and (11)(b)] [62-601.300(3), 62.601.700, and Figure 3 of 62-601] [62-620.610(18)]

SAMPLE PERIOD	REPORT DUE DATE
January - March	April 28
April - June	July 28
July - September	October 28
October - December	January 28

12. If any monitoring well becomes damaged or cannot be sampled for some reason, the permittee shall notify the Department's South District Office immediately and a written report shall follow within seven days detailing the circumstances and remedial measures taken or proposed. Repair or replacement of monitoring wells shall be approved in advance by the Department's South District Office. [62-522.600][62-4.070(3)]
13. All piezometers and monitoring wells not part of the approved ground water monitoring plan are to be plugged and abandoned in accordance with Rule 62-532.500(4), F.A.C., unless there is intent for their future use. [62-532.500(4)]

FACILITY: Spring Lake Golf and Country Club-6TP
 PERMITTEE: Utility Corporation of Florida, Inc.
 100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
 PA FILE NUMBER: FLA014315-002-DW2P

IV. ADDITIONAL REUSE AND LAND APPLICATION REQUIREMENTS

Part IV Rapid Infiltration Basins (R-002)

1. Advisory signs shall be posted around the site boundaries to designate the nature of the project area. [62-610.518]
2. The annual average hydraulic loading rate to the rapid infiltration basins shall be limited to a maximum of 3 inches per day (as applied to the entire bottom area). [62-610.523(3)]
3. The rapid infiltration basins normally shall be loaded for 1 – 7 days and shall be rested for 5 – 14 days. Infiltration ponds, basins, or trenches shall be allowed to dry during the resting portion of the cycle. [62-610.523(4)]
4. Rapid infiltration basins shall be routinely maintained to control vegetation growth and to maintain percolation capability by scarification or removal of deposited solids. Basin bottoms shall be maintained to be level. [62-610.523(6) and (7)]
5. Routine aquatic weed control and regular maintenance of storage pond embankments and access areas are required. [62-610.514 and 62-610.414]
6. Overflows from emergency discharge facilities on storage ponds or on infiltration ponds, basins, or trenches shall be reported as an abnormal event to the Department's South District Office within 24 hours of an occurrence. The provisions of Rule 62-610.800(9), F.A.C. shall be met. [62-610.800(9)]

Part III Public Access System(s) (R-002)

7. This reuse system includes the following major users (i.e., using 0.1 MGD or more of reclaimed water):

User Name	User Type	Capacity (MGD)	Acreage
Spring Lake Golf and Country Club	Golf Courses	0.140	97

[62-610.800(5)][62-620.630(10)(b)]

8. Cross-connections to the potable water system are prohibited. [62-610.469(7)]
9. A cross-connection control program shall be implemented and/or remain in effect within the areas where reclaimed water will be provided for use. [62-610.469(7)]
10. The permittee shall conduct inspections within the reclaimed water service area to verify proper connections, to minimize illegal cross-connections, and to verify the proper use of reclaimed water. Inspections are required when a customer first connects to the reuse distribution system. Subsequent inspections are required as specified in the cross-connection control and inspection program. [62-610.469(7)(h)]
11. If a cross-connection between the potable and reclaimed water systems is discovered, the permittee shall:
 - a. Immediately discontinue potable water and/or reclaimed water service to the affected area.
 - b. If the potable water system is contaminated, clear the potable water lines.
 - c. Eliminate the cross-connection.
 - d. Test the affected area for other possible cross-connections.
 - e. Within 24 hours, notify the South District Office's domestic wastewater and drinking water programs.
 - f. Within 5 days of discovery of a cross-connection, submit a written report to the Department detailing: a description of the cross-connection, how the cross-connection was discovered, the exact date and time of discovery, approximate time that the cross-connection existed, the location, the cause, steps taken to

FACILITY: Spring Lake Golf and Country Club STP
PERMITTEE: Utility Corporation of Florida, Inc.
100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
PA FILE NUMBER: FLA014315-002-DW2P

eliminate the cross-connection, whether reclaimed water was consumed, and reports of possible illness, whether the drinking water system was contaminated and the steps taken to clear the drinking water system, when the cross-connection was eliminated, plan of action for testing for other possible cross-connections in the area, and an evaluation of the cross-connection control and inspection program to ensure that future cross-connections do not occur. [62-555.350(3) and 62-555.360][62-620.610(20)]

12. Maximum obtainable separation of reclaimed water lines and potable water lines shall be provided and the minimum separation distances specified in Rule 62-610.469(7), F.A.C., shall be provided. Reuse facilities shall be color coded or marked. Underground piping which is not manufactured of metal or concrete shall be color coded using Pantone Purple 522C using light stable colorants. Underground metal and concrete pipe shall be color coded or marked using purple as the predominant color. [62-610.469(7)]
13. In constructing reclaimed water distribution piping, the permittee shall maintain a 75-foot setback distance from a reclaimed water transmission facility to public water supply wells. No setback distances are required to other potable water supply wells or to any nonpotable water supply wells. [62-610.471(3)]
14. A setback distance of 75 feet shall be maintained between the edge of the wetted area and potable water supply wells, unless the utility adopts and enforces an ordinance prohibiting potable water supply wells within the reuse service area. No setback distances are required to any nonpotable water supply well, to any surface water, to any developed areas, or to any private swimming pools, hot tubs, spas, saunas, picnic tables, barbecue pits, or barbecue grills. [62-610.471(1), (2), (5), and (7)]
15. Reclaimed water shall not be used to fill swimming pools, hot tubs, or wading pools. [62-610.469(4)]
16. Low trajectory nozzles, or other means to minimize aerosol formation shall be used within 100 feet from outdoor public eating, drinking, or bathing facilities. [62-610.471(6)]
17. A setback distance of 100 feet shall be maintained from indoor aesthetic features using reclaimed water to adjacent indoor public eating and drinking facilities. [62-610.471(8)]
18. The public shall be notified of the use of reclaimed water. This shall be accomplished by posting of advisory signs in areas where reuse is practiced, notes on scorecards, or other methods. [62-610.468(2)]
19. All new advisory signs and labels on vaults, service boxes, or compartments that house hose bibbs along with all labels on hose bibbs, valves, and outlets shall bear the words "do not drink" and "no beber" along with the equivalent standard international symbol. In addition to the words "do not drink" and "no beber," advisory signs posted at storage ponds and decorative water features shall also bear the words "do not swim" and "no nadar" along with the equivalent standard international symbols. Existing advisory signs and labels shall be retrofitted, modified, or replaced in order to comply with the revised wording requirements. For existing advisory signs and labels this retrofit, modification, or replacement shall occur within 365 days after the date of this permit. For labels on existing vaults, service boxes, or compartments housing hose bibbs this retrofit, modification, or replacement shall occur within 730 days after the date of this permit. [62-610.468 & 62-610.469]
20. The permittee shall ensure that users of reclaimed water are informed about the origin, nature, and characteristics of reclaimed water; the manner in which reclaimed water can be safely used; and limitations on the use of reclaimed water. Notification is required at the time of initial connection to the reclaimed water distribution system and annually after the reuse system is placed into operation. A description of on-going public notification activities shall be included in the Annual Reuse Report. [62-610.468(6)]
21. Routine aquatic weed control and regular maintenance of storage pond embankments and access areas are required. [62-610.414 & 62-610.464]
22. Overflows from emergency discharge facilities on storage ponds shall be reported as an abnormal event to the Department's South District Office within 24 hours of an occurrence. The provisions of Rule 62-610.800(9), F.A.C., shall be met. [62-610.800(9)]

FACILITY: Spring Lake Golf and Country Club STP
PERMITTEE: Utility Corporation of Florida, Inc.
100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
PA FILE NUMBER: FLA014315-002-DW2P

V. OPERATION AND MAINTENANCE REQUIREMENTS

1. During the period of operation authorized by this permit, the wastewater facilities shall be operated under the supervision of a(n) operator(s) certified in accordance with Chapter 62-602, F.A.C. In accordance with Chapter 62-699, F.A.C., this facility is a Category II, Class C facility and, at a minimum, operators with appropriate certification must be on the site as follows:

A Class C or higher operator 6 hours/day for 7 days/week. The lead operator must be a Class C, or higher.

[62-620.630(3)] [62-699.310] [62-610.462]

2. The lead operator shall be employed at the plant full time. "Full time" shall mean at least 4 days per week, working a minimum of 35 hours per week, including leave time. A certified operator shall be on-site and in charge of each required shift and for periods of required staffing time when the lead operator is not on-site. An operator meeting the lead operator classification level of the plant shall be available during all periods of plant operation. "Available" means able to be contacted as needed to initiate the appropriate action in a timely manner. *[62-699.311(10), (5) and (1)]*
3. An operator meeting the lead operator classification level of the plant shall be available during all periods of plant operation. "Available" means able to be contacted as needed to initiate the appropriate action in a timely manner. *[62-699.311(1)]*
4. The application to renew this permit shall include an updated capacity analysis report prepared in accordance with Rule 62-600.405, F.A.C. *[62-600.405(5)]*
5. The application to renew this permit shall include a detailed operation and maintenance performance report prepared in accordance with Rule 62-600.735, F.A.C. *[62-600.735(1)]*
6. The permittee shall maintain the following records and make them available for inspection on the site of the permitted facility:
 - a. Records of all compliance monitoring information, including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation and a copy of the laboratory certification showing the certification number of the laboratory, for at least three years from the date the sample or measurement was taken;
 - b. Copies of all reports required by the permit for at least three years from the date the report was prepared;
 - c. Records of all data, including reports and documents, used to complete the application for the permit for at least three years from the date the application was filed;
 - d. Monitoring information, including a copy of the laboratory certification showing the laboratory certification number, related to the residuals use and disposal activities for the time period set forth in Chapter 62-640, F.A.C., for at least three years from the date of sampling or measurement;
 - e. A copy of the current permit;
 - f. A copy of the current operation and maintenance manual as required by Chapter 62-600, F.A.C.;
 - g. A copy of the facility record drawings;
 - h. Copies of the licenses of the current certified operators; and
 - i. Copies of the logs and schedules showing plant operations and equipment maintenance for three years from the date of the logs or schedules. The logs shall, at a minimum, include identification of the plant; the signature and certification number of the operator(s) and the signature of the person(s) making any entries; date and time in and out; specific operation and maintenance activities; tests performed and samples taken; and major repairs made. The logs shall be maintained on-site in a location accessible to 24-hour inspection, protected from weather damage, and current to the last operation and maintenance performed.

FACILITY: Spring Lake Golf and Country Club STP
PERMITTEE: Utility Corporation of Florida, Inc.
100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
PA FILE NUMBER: FLA014315-002-DW2P

[62-620.350]

VI. SCHEDULES

1. In accordance with the correspondence to the Department dated March 17, 2008 and the facility's Operations and Maintenance Report, the following improvement actions shall be completed according to the following schedule:

Done 9-13-08

	Improvement Action	Completion Date
1.	Adjust the reuse transfer valve	180 day after permit issuance
2.	Pursuant to the Operation and Maintenance Report, repair the emergency generator, walkways, handrails, and both blowers.	180 days after permit issuance

[62-600.735(1)]

VII. INDUSTRIAL PRETREATMENT PROGRAM REQUIREMENTS

This facility is not required to have a pretreatment program at this time. [62-625.500]

VIII. OTHER SPECIFIC CONDITIONS

1. The permittee shall apply for renewal of this permit at least 180 days before the expiration date of the permit using the appropriate forms listed in Rule 62-620.910, F.A.C., including submittal of the appropriate processing fee set forth in Rule 62-4.050, F.A.C. The existing permit shall not expire until the Department has taken final action on the application renewal in accordance with the provisions of 62-620.335(3) and (4), F.A.C. [62-620.335(1)-(4)]
2. Florida water quality criteria and standards shall not be violated as a result of any discharge or land application of reclaimed water or residuals from this facility. [62-610.850(1)(a) and (2)(a)][62-640.700(2)(b)]
3. In the event that the treatment facilities or equipment no longer function as intended, are no longer safe in terms of public health and safety, or odor, noise, aerosol drift, or lighting adversely affects neighboring developed areas at the levels prohibited by Rule 62-600.400(2)(a), F.A.C., corrective action (which may include additional maintenance or modifications of the permitted facilities) shall be taken by the permittee. Other corrective action may be required to ensure compliance with rules of the Department. Additionally, the treatment, management, use or land application of residuals shall not cause a violation of the odor prohibition in Rule 62-296.320(2), F.A.C. [62-600.410(8) and 62-640.400(6)]
4. The deliberate introduction of stormwater in any amount into collection/transmission systems designed solely for the introduction (and conveyance) of domestic/industrial wastewater; or the deliberate introduction of stormwater into collection/transmission systems designed for the introduction or conveyance of combinations of storm and domestic/industrial wastewater in amounts which may reduce the efficiency of pollutant removal by the treatment plant is prohibited, except as provided by Rule 62-610.472, F.A.C. [62-604.130(3)]
5. Collection/transmission system overflows shall be reported to the Department in accordance with Permit Condition IX. 20. [62-604.550] [62-620.610(20)]
6. The operating authority of a collection/transmission system and the permittee of a treatment plant are prohibited from accepting connections of wastewater discharges which have not received necessary pretreatment or which contain materials or pollutants (other than normal domestic wastewater constituents):
 - a. Which may cause fire or explosion hazards; or
 - b. Which may cause excessive corrosion or other deterioration of wastewater facilities due to chemical action or pH levels; or
 - c. Which are solid or viscous and obstruct flow or otherwise interfere with wastewater facility operations or treatment; or

FACILITY: Spring Lake Golf and Country Club-STP
PERMITTEE: Utility Corporation of Florida, Inc.
100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
PA FILE NUMBER: FLA014315-002-DW2P

- d. Which result in the wastewater temperature at the introduction of the treatment plant exceeding 40°C or otherwise inhibiting treatment; or
- e. Which result in the presence of toxic gases, vapors, or fumes that may cause worker health or safety problems.

[62-604.130(5)]

7. The treatment facility, storage ponds, rapid infiltration basins, and/or infiltration trenches shall be enclosed with a fence or otherwise provided with features to discourage the entry of animals and unauthorized persons. [62-600.400(2)(b)].
8. Screenings and grit removed from the wastewater facilities shall be collected in suitable containers and hauled to a Department approved Class I landfill or to a landfill approved by the Department for receipt/disposal of screenings and grit. [62-701.300(1)(a)]
9. The Permittee shall provide verbal notice to the Department as soon as practical after discovery of a sinkhole within an area for the management or application of wastewater, wastewater residuals (sludges), or reclaimed water. The Permittee shall immediately implement measures appropriate to control the entry of contaminants, and shall detail these measures to the Department in a written report within 7 days of the sinkhole discovery. [62-4.070(3)]
10. The permittee shall provide adequate notice to the Department of the following:
 - a. Any new introduction of pollutants into the facility from an industrial discharger which would be subject to Chapter 403, F.S., and the requirements of Chapter 62-620, F.A.C. if it were directly discharging those pollutants; and
 - b. Any substantial change in the volume or character of pollutants being introduced into that facility by a source which was identified in the permit application and known to be discharging at the time the permit was issued.

Adequate notice shall include information on the quality and quantity of effluent introduced into the facility and any anticipated impact of the change on the quantity or quality of effluent or reclaimed water to be discharged from the facility.

[62-620.625(2)]

IX. GENERAL CONDITIONS

1. The terms, conditions, requirements, limitations and restrictions set forth in this permit are binding and enforceable pursuant to Chapter 403, Florida Statutes. Any permit noncompliance constitutes a violation of Chapter 403, Florida Statutes, and is grounds for enforcement action, permit termination, permit revocation and reissuance, or permit revision [62-620.610(1)]
2. This permit is valid only for the specific processes and operations applied for and indicated in the approved drawings or exhibits. Any unauthorized deviations from the approved drawings, exhibits, specifications or conditions of this permit constitutes grounds for revocation and enforcement action by the Department. [62-620.610(2)]
3. As provided in subsection 403.087(7), F.S., the issuance of this permit does not convey any vested rights or any exclusive privileges. Neither does it authorize any injury to public or private property or any invasion of personal rights, nor authorize any infringement of federal, state, or local laws or regulations. This permit is not a waiver of or approval of any other Department permit or authorization that may be required for other aspects of the total project which are not addressed in this permit. [62-620.610(3)]
4. This permit conveys no title to land or water; does not constitute state recognition or acknowledgment of title, and does not constitute authority for the use of submerged lands unless herein provided and the necessary title or leasehold interests have been obtained from the State. Only the Trustees of the Internal Improvement Trust Fund may express State opinion as to title. [62-620.610(4)]
5. This permit does not relieve the permittee from liability and penalties for harm or injury to human health or welfare, animal or plant life, or property caused by the construction or operation of this permitted source; nor does it allow the permittee to cause pollution in contravention of Florida Statutes and Department rules, unless specifically authorized by

FACILITY: Spring Lake Golf and Country Club STP
PERMITTEE: Utility Corporation of Florida, Inc.
100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
PA FILE NUMBER: FLA014315-002-DW2P

an order from the Department. The permittee shall take all reasonable steps to minimize or prevent any discharge, reuse of reclaimed water, or residuals use or disposal in violation of this permit which has a reasonable likelihood of adversely affecting human health or the environment. It shall not be a defense for a permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of this permit. [62-620.610(5)]

6. If the permittee wishes to continue an activity regulated by this permit after its expiration date, the permittee shall apply for and obtain a new permit. [62-620.610(6)]
7. The permittee shall at all times properly operate and maintain the facility and systems of treatment and control, and related appurtenances, that are installed and used by the permittee to achieve compliance with the conditions of this permit. This provision includes the operation of backup or auxiliary facilities or similar systems when necessary to maintain or achieve compliance with the conditions of the permit. [62-620.610(7)]
8. This permit may be modified, revoked and reissued, or terminated for cause. The filing of a request by the permittee for a permit revision, revocation and reissuance, or termination, or a notification of planned changes or anticipated noncompliance does not stay any permit condition. [62-620.610(8)]
9. The permittee, by accepting this permit, specifically agrees to allow authorized Department personnel, including an authorized representative of the Department and authorized EPA personnel, when applicable, upon presentation of credentials or other documents as may be required by law, and at reasonable times, depending upon the nature of the concern being investigated, to:
 - a. Enter upon the permittee's premises where a regulated facility, system, or activity is located or conducted, or where records shall be kept under the conditions of this permit;
 - b. Have access to and copy any records that shall be kept under the conditions of this permit;
 - c. Inspect the facilities, equipment, practices, or operations regulated or required under this permit; and
 - d. Sample or monitor any substances or parameters at any location necessary to assure compliance with this permit or Department rules.

[62-620.610(9)]

10. In accepting this permit, the permittee understands and agrees that all records, notes, monitoring data, and other information relating to the construction or operation of this permitted source which are submitted to the Department may be used by the Department as evidence in any enforcement case involving the permitted source arising under the Florida Statutes or Department rules, except as such use is proscribed by Section 403.111, Florida Statutes, or Rule 62-620.302, Florida Administrative Code. Such evidence shall only be used to the extent that it is consistent with the Florida Rules of Civil Procedure and applicable evidentiary rules. [62-620.610(10)]
11. When requested by the Department, the permittee shall within a reasonable time provide any information required by law which is needed to determine whether there is cause for revising, revoking and reissuing, or terminating this permit, or to determine compliance with the permit. The permittee shall also provide to the Department upon request copies of records required by this permit to be kept. If the permittee becomes aware of relevant facts that were not submitted or were incorrect in the permit application or in any report to the Department, such facts or information shall be promptly submitted or corrections promptly reported to the Department. [62-620.610(11)]
12. Unless specifically stated otherwise in Department rules, the permittee, in accepting this permit, agrees to comply with changes in Department rules and Florida Statutes after a reasonable time for compliance; provided, however, the permittee does not waive any other rights granted by Florida Statutes or Department rules. A reasonable time for compliance with a new or amended surface water quality standard, other than those standards addressed in Rule 62-302.500, F.A.C., shall include a reasonable time to obtain or be denied a mixing zone for the new or amended standard. [62-620.610(12)]
13. The permittee, in accepting this permit, agrees to pay the applicable regulatory program and surveillance fee in accordance with Rule 62-4.052, F.A.C. [62-620.610(13)]

FACILITY: Spring Lake Golf and Country Club STP
PERMITTEE: Utility Corporation of Florida, Inc.
100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
PA FILE NUMBER: FLA014315-002-DW2P

14. This permit is transferable only upon Department approval in accordance with Rule 62-620.340, F.A.C. The permittee shall be liable for any noncompliance of the permitted activity until the transfer is approved by the Department. [62-620.610(14)]
15. The permittee shall give the Department written notice of least 60 days before inactivation or abandonment of a wastewater facility and shall specify what steps will be taken to safeguard public health and safety during and following inactivation or abandonment. [62-620.610(15)]
16. The permittee shall apply for a revision to the Department permit in accordance with Rules 62-620.300 and the Department of Environmental Protection Guide to Wastewater Permitting at least 90 days before construction of any planned substantial modifications to the permitted facility is to commence or with Rule 62-620.325(2) for minor modifications to the permitted facility. A revised permit shall be obtained before construction begins except as provided in Rule 62-620.300, F.A.C. [62-620.610(16)]
17. The permittee shall give advance notice to the Department of any planned changes in the permitted facility or activity which may result in noncompliance with permit requirements. The permittee shall be responsible for any and all damages which may result from the changes and may be subject to enforcement action by the Department for penalties or revocation of this permit. The notice shall include the following information:
 - a. A description of the anticipated noncompliance;
 - b. The period of the anticipated noncompliance, including dates and times; and
 - c. Steps being taken to prevent future occurrence of the noncompliance.[62-620.610(17)]
18. Sampling and monitoring data shall be collected and analyzed in accordance with Rule 62-4.246, Chapters 62-160 and 62-601, F.A.C., and 40 CFR 136, as appropriate.
 - a. Monitoring results shall be reported at the intervals specified elsewhere in this permit and shall be reported on a Discharge Monitoring Report (DMR), DEP Form 62-620.910(10), or as specified elsewhere in the permit.
 - b. If the permittee monitors any contaminant more frequently than required by the permit, using Department approved test procedures, the results of this monitoring shall be included in the calculation and reporting of the data submitted in the DMR.
 - c. Calculations for all limitations which require averaging of measurements shall use an arithmetic mean unless otherwise specified in this permit.
 - d. Except as specifically provided in Rule 62-160.300, F.A.C., any laboratory test required by this permit shall be performed by a laboratory that has been certified by the Department of Health Environmental Laboratory Certification Program (DOH ELCP). Such certification shall be for the matrix, test method and analyte(s) being measured to comply with this permit. For domestic wastewater facilities, testing for parameters listed in Rule 62-160.300(4), F.A.C., shall be conducted under the direction of a certified operator.
 - e. Field activities including on-site tests and sample collection shall follow the applicable standard operating procedures described in DEP-SOP-001/01 adopted by reference in Chapter 62-160, F.A.C.
 - f. Alternate field procedures and laboratory methods may be used where they have been approved in accordance with Rules 62-160.220 and 62-160.330, F.A.C.[62-620.610(18)]
19. Reports of compliance or noncompliance with, or any progress reports on, interim and final requirements contained in any compliance schedule detailed elsewhere in this permit shall be submitted no later than 14 days following each schedule date. [62-620.610(19)]

FACILITY: Spring Lake Golf and Country Club STP
PERMITTEE: Utility Corporation of Florida, Inc.
100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
PA FILE NUMBER: FLA014315-002-DW2P

20. The permittee shall report to the Department any noncompliance which may endanger health or the environment. Any information shall be provided orally within 24 hours from the time the permittee becomes aware of the circumstances. A written submission shall also be provided within five days of the time the permittee becomes aware of the circumstances. The written submission shall contain: a description of the noncompliance and its cause; the period of noncompliance including exact dates and time, and if the noncompliance has not been corrected, the anticipated time it is expected to continue; and steps taken or planned to reduce, eliminate, and prevent recurrence of the noncompliance.

a. The following shall be included as information which must be reported within 24 hours under this condition:

1. Any unanticipated bypass which causes any reclaimed water or effluent to exceed any permit limitation or results in an unpermitted discharge,
2. Any upset which causes any reclaimed water or the effluent to exceed any limitation in the permit,
3. Violation of a maximum daily discharge limitation for any of the pollutants specifically listed in the permit for such notice, and
4. Any unauthorized discharge to surface or ground waters.

b. Oral reports as required by this subsection shall be provided as follows:

1. For unauthorized releases or spills of treated or untreated wastewater reported pursuant to subparagraph a.4 that are in excess of 1,000 gallons per incident, or where information indicates that public health or the environment will be endangered, oral reports shall be provided to the Department by calling the STATE WARNING POINT TOLL FREE NUMBER (800) 320-0519, as soon as practical, but no later than 24 hours from the time the permittee becomes aware of the discharge. The permittee, to the extent known, shall provide the following information to the State Warning Point:

- a) Name, address, and telephone number of person reporting;
- b) Name, address, and telephone number of permittee or responsible person for the discharge;
- c) Date and time of the discharge and status of discharge (ongoing or ceased);
- d) Characteristics of the wastewater spilled or released (untreated or treated, industrial or domestic wastewater);
- e) Estimated amount of the discharge;
- f) Location or address of the discharge;
- g) Source and cause of the discharge;
- h) Whether the discharge was contained on-site, and cleanup actions taken to date;
- i) Description of area affected by the discharge, including name of water body affected, if any; and
- j) Other persons or agencies contacted.

2. Oral reports, not otherwise required to be provided pursuant to subparagraph b.1 above, shall be provided to the Department within 24 hours from the time the permittee becomes aware of the circumstances.

c. If the oral report has been received within 24 hours, the noncompliance has been corrected, and the noncompliance did not endanger health or the environment, the Department shall waive the written report.

[62-620.610(20)]

21. The permittee shall report all instances of noncompliance not reported under Permit Conditions IX, 17, 18, and 19, of this permit at the time monitoring reports are submitted. This report shall contain the same information required by Permit Condition IX, 20 of this permit. [62-620.610(21)]

FACILITY: Spring Lake Golf and Country Club-STP
PERMITTEE: Utility Corporation of Florida, Inc.
100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
PA FILE NUMBER: FLA014315-002-DW2P

22. Bypass Provisions.

- a. Bypass is prohibited, and the Department may take enforcement action against a permittee for bypass, unless the permittee affirmatively demonstrates that:
 1. Bypass was unavoidable to prevent loss of life, personal injury, or severe property damage; and
 2. There were no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment downtime. This condition is not satisfied if adequate back-up equipment should have been installed in the exercise of reasonable engineering judgment to prevent a bypass which occurred during normal periods of equipment downtime or preventive maintenance; and
 3. The permittee submitted notices as required under Permit Condition IX. 22. b. of this permit.
- b. If the permittee knows in advance of the need for a bypass, it shall submit prior notice to the Department, if possible at least 10 days before the date of the bypass. The permittee shall submit notice of an unanticipated bypass within 24 hours of learning about the bypass as required in Permit Condition IX. 20. of this permit. A notice shall include a description of the bypass and its cause; the period of the bypass, including exact dates and times; if the bypass has not been corrected, the anticipated time it is expected to continue; and the steps taken or planned to reduce, eliminate, and prevent recurrence of the bypass.
- c. The Department shall approve an anticipated bypass, after considering its adverse effect, if the permittee demonstrates that it will meet the three conditions listed in Permit Condition IX. 22. a. 1. through 3. of this permit.
- d. A permittee may allow any bypass to occur which does not cause reclaimed water or effluent limitations to be exceeded if it is for essential maintenance to assure efficient operation. These bypasses are not subject to the provisions of Permit Condition IX. 22. a. through c. of this permit.

[62-620.610(22)]

23. Upset Provisions

- a. A permittee who wishes to establish the affirmative defense of upset shall demonstrate, through properly signed contemporaneous operating logs, or other relevant evidence that:
 1. An upset occurred and that the permittee can identify the cause(s) of the upset;
 2. The permitted facility was at the time being properly operated;
 3. The permittee submitted notice of the upset as required in Permit Condition IX. 20. of this permit; and
 4. The permittee complied with any remedial measures required under Permit Condition IX. 5. of this permit.
- b. In any enforcement proceeding, the burden of proof for establishing the occurrence of an upset rests with the permittee.
- c. Before an enforcement proceeding is instituted, no representation made during the Department review of a claim that noncompliance was caused by an upset is final agency action subject to judicial review.

[62-620.610(23)]

FACILITY: Spring Lake Golf and Country Club STP
PERMITTEE: Utility Corporation of Florida, Inc.
100 Clubhouse Lane, Sebring, FL 33876

PERMIT NUMBER: FLA014315
PA FILE NUMBER: FLA014315-002-DW2P

Executed in Ft. Myers, Florida

STATE OF FLORIDA DEPARTMENT
OF ENVIRONMENTAL PROTECTION



Jon M. Iglehart
Director of
District Management

DATE: 5/23/08



Florida Department of Environmental Protection

South District
P.O. Box 2549
Fort Myers, FL 33902-2549

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

STATE OF FLORIDA NOTICE OF PERMIT REVISION

CERTIFIED MAIL NO.: 7008 0150 0003 1458 9937
RETURN RECEIPT REQUESTED

Michael A. Telschow, President
Utility Corporation of Florida, Inc.
100 Clubhouse Lane
Sebring, FL 33876

Re: Highlands County - DW
Spring Lake Golf Course WWTP
File Number: FLA014315
PA File No. FLA014315-002-DW2P
Fisheating Creek Basin

Dear Mr. Telschow:

In response to your application for a revision to the wastewater permit, this is notification of the Department's revision of wastewater permit No. FLA376400 to incorporate changes, issued under section 403.087 of the Florida Statutes, as follows:

The permittee is authorized to abandon the reuse storage pond located on the Springlake golf course. The location of flow metering FLW-01 is changed to the chlorine contact chamber weir prior to discharge to the reuse system.

All other conditions of the permit shall remain unchanged. This letter must be attached to the referenced permit and becomes a permanent part thereof.

The Department's agency action shall become final unless a timely petition for an administrative proceeding (hearing) is filed pursuant to Sections 120.569 and 120.57 of the Florida Statutes (F.S.), before the deadline for filing a petition. The procedures for petitioning for an administrative hearing are set forth below.

A person whose substantial interests are affected by the Department's permitting decision may petition for an administrative hearing in accordance with the provisions of Sections 120.569 and 120.57, F.S. The petition must contain the information set forth below and must be filed in (received by) the Office of General Counsel of the Department at 3900 Commonwealth Boulevard, Mail Station 35, Tallahassee, Florida 32399-3000.

Petitions filed by the permit applicant ("permittee") or by any of the parties listed below must be filed within fourteen (14) days of receipt of this written notice. Petitions filed by any person other than those entitled to written notice under Section 120.60(3), F.S., must be filed within fourteen (14) days of publication of the public notice or within fourteen (14) days of receipt of the written notice, whichever occurs first. However, pursuant to Section 120.60(3), F.S., any person who has asked the Department for notice of agency action may file a petition within fourteen (14) days of receipt of such notice, regardless of the date of publication.

The petitioner shall mail a copy of the petition to the permittee at the address indicated above at the time of filing. The failure of any person to file a petition (or a request for mediation, as discussed below) within the appropriate time period shall constitute a waiver of that person's right to request an administrative hearing under Sections 120.569 and 120.57, F.S. Any subsequent intervention (in a proceeding initiated by another party) will be only at the discretion of the presiding officer upon the filing of a motion in compliance with Rule 28-106.205 of the Florida Administrative Code (F.A.C.).

Minor Permit Revision

Permit Revision Number: FLA014315-002-DW2P
Spring Lake Golf Course WWTP

A petition that disputes the material facts upon which the Department's action is based must contain the following information:

- (a) the name, address, and telephone number of each petitioner; the name, address, and telephone number of the petitioner's representative, if any; the Department's permit identification number, and the name of the county in which the subject matter or activity is located;
- (b) a statement of how and when each petitioner received notice of the Department's action;
- (c) a statement of how each petitioner's substantial interests are affected by the Department's action;
- (d) a statement of all disputed issues of material fact. If there are none, the petition must so indicate;
- (e) a statement of facts that the petitioner contends warrant reversal or modification of the Department's action;
- (f) a concise statement of the ultimate facts alleged, as well as the rules and statutes which entitle the petitioner to relief; and
- (g) a statement of the relief sought by the petitioner, stating precisely the action that the petitioner wants the Department to take.

A petition that does not dispute the material facts upon which the Department's action is based shall state that no such facts are in dispute and otherwise shall contain the same information as set forth above, as required by Rule 28-106.301, F.A.C.

Because the administrative hearing process is designed to formulate final agency action, the filing of a petition means that the Department's final action may be different from the position taken by it in this notice. Persons whose substantial interests will be affected by any such final decision of the Department have the right to petition to become a party to the proceeding, in accordance with the requirements set forth above.

In addition to requesting an administrative hearing, any petitioner may elect to pursue mediation. The election may be accomplished by filing with the Department a mediation agreement with all parties to the proceeding (which include the permittee, the Department, and any person who has filed a timely and sufficient petition for hearing). The agreement must contain all the information required by Rule 28-106.404, F.A.C., and must be filed in (received by) the Office of General Counsel of the Department at 3900 Commonwealth Boulevard, Mail Station 35, Tallahassee, Florida 32399-3000, within ten (10) days after the deadline for filing a petition, as set forth above. Choosing mediation will not adversely affect the right to an administrative hearing if mediation does not result in a settlement.

As provided in Section 120.573, F.S., the timely agreement of all parties to mediate will toll the time limitations imposed by Sections 120.569 and 120.57, F.S., for holding an administrative hearing and issuing a final order. Unless otherwise agreed by the parties, the mediation must be concluded within sixty (60) days of the execution of the agreement. If mediation results in settlement of the administrative dispute, the Department must enter a final order incorporating the agreement of the parties. Persons seeking to protect substantial interests that would be affected by such a modified final decision must file their petitions within the appropriate time period, as set forth above, or they shall be deemed to have waived their right to a proceeding under Sections 120.569 and 120.57, F.S. If mediation terminates without settlement of the dispute, the Department shall notify all parties in writing that the administrative hearing processes under Sections 120.569 and 120.57, F.S., remain available for disposition of the dispute, and the notice will specify the deadlines that then will apply for challenging the agency action and electing remedies under those two statutes.

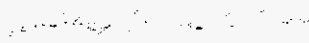
This action is final and effective on the date filed with the clerk of the Department unless a petition (or request for mediation) is filed in accordance with the above provisions. Upon the timely filing of a petition (or request for mediation) this order will not be effective until further order of the Department. Any party to this order has the right to seek judicial review of the order under Section 120.68, F.S., by the filing of a notice of appeal under Rule 9.110 of the Florida Rules of Appellate Procedure with the clerk of the Department in the Office of General Counsel, at 3900 Commonwealth Boulevard, Mail Station 35, Tallahassee, Florida, 32399-3000; and by filing a copy of the notice of appeal accompanied by the

Minor Permit Revision
Permit Revision Number: FLA014315-002-DW2P
Spring Lake Golf Course WWTP

applicable filing fees with the appropriate district court of appeal. The notice of appeal must be filed within thirty (30) days from the date when this order is filed with the clerk of the Department.

Executed in Fort Myers, Florida

STATE OF FLORIDA DEPARTMENT
OF ENVIRONMENTAL PROTECTION



Jon M. Iglehart
Director of District Management

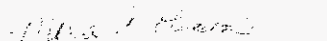
Date: December 9, 2008

CERTIFICATE OF SERVICE

The undersigned duly designated deputy agency clerk hereby certifies that this NOTICE OF PERMIT REVISION and all copies were mailed by certified mail before the close of business on December 9, 2008 to the listed persons.

FILING AND ACKNOWLEDGMENT

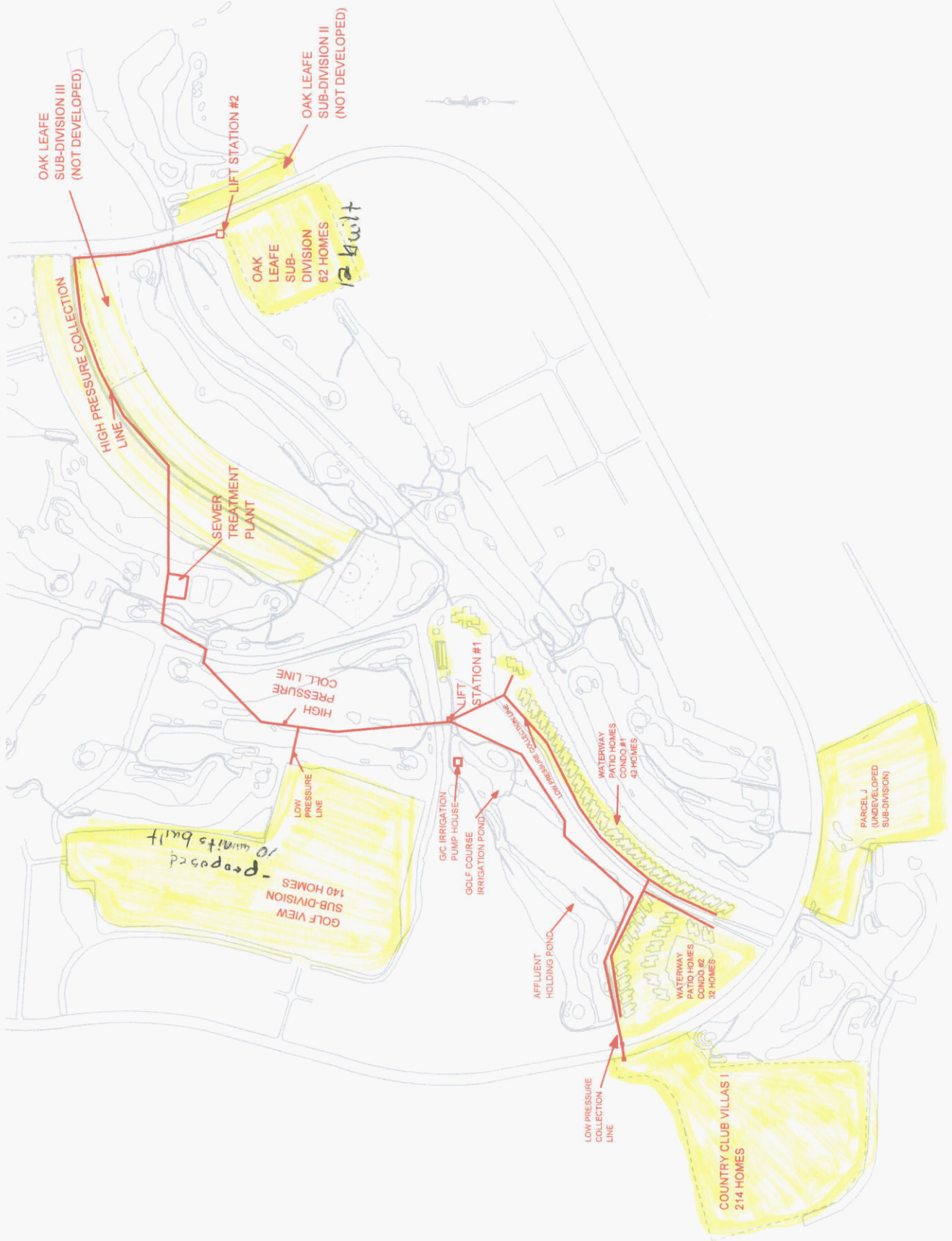
FILED, on this date, pursuant to Section 120.52, F.S., with the designated Department clerk, receipt of which is hereby acknowledged.


Clerk

12-9-08
Date

BCI/mac

Copies furnished to:
Aaron J Bowles, P.E.
Keith Kleinmann, FDEP
Phillip Reed, FDEP, Sebring



DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PLT
COPY

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
MAILING ADDRESS: 100 Country Club Drive
Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
CLASS SIZE: N/A

REPORT: Monthly
GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
LOCATION: 100 Country Club Drive
Sebring, FL 33876

MONITORING GROUP NUMBER: R-002

MONITORING GROUP DESC:

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 1-1-2010 To 1-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			23.2	MG/L	1		
PARM Code 00620 A	Permit Requirement			12 (Max.)	MG/L		Every Two Weeks	Grab
Mon. Site No. EFA-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.49	MG/L	0		
PARM Code 80082 Y	Permit Requirement			20.0 (An. Avg.)	MG/L		Every Two Weeks	Grab
Mon. Site No. EFA-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			9.62	MG/L	0		
PARM Code 80082 A	Permit Requirement			30.0 (Mo. Avg.)	MG/L		Every Two Weeks	Grab
Mon. Site No. EFA-01								
pH	Sample Measurement			7.0	50	0		
PARM Code 00400 A	Permit Requirement			6.0 (Min.)	SU		5 Days/Week	Grab
Mon. Site No. EFA-01								
Coliform, Fecal	Sample Measurement			1.4	#/100ML	0		
PARM Code 74055 A	Permit Requirement			25 (Max.)	#/100ML		Every Two Weeks	Grab
Mon. Site No. EFA-01								
Total Residual Chlorine (For Disinfection)	Sample Measurement			1.4	MG/L	0		
PARM Code 50060 A	Permit Requirement			1.0 (Min.)	MG/L		Continuous	Meter
Mon. Site No. EFA-01								

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	Thomas A. Quinn	463 214-5195	10/02/19

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

1-1-2010 Power Outage, Turbidity went above 5.0 mg/L on morning of 1-3-2010, sensors value switched to Rej pond. (All effluent going to Rej pond), on 1/2/2010 all flow switched to Rej pond from Reser pond.
1-3-2010 Filed abnormal event report to Keith Kleinmann, also called Allen Slater (SRWA) for assistance.
1-3-2010 TSS at 6.0 mg/L (Roman unknown as prior and 2 readings were under 5.0 mg/L (flow to Rej pond)
1-23-2010 NO3 over 12.0 (23.2 mg/L) air high due to receding plant to increase BOD mass
1-29-2010 Keith Kleinmann in plant.

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP NUMBER: R-002
 MONITORING PERIOD From: 1-1-2010 To: 1-31-2010

PERMIT NUMBER: FLA014315

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended PARM Code 00530 A Mon. Site No. EFA-02	Sample Measurement			6.0	mg/L	1		
	Permit Requirement			5.0 (Max)	MG/L		Every Two Weeks	Grab
Turbidity PARM Code 00070 A Mon. Site No. EFA-02	Sample Measurement			6.31	NTU	5		
	Permit Requirement			Report (Max)	NTU		Continuous	Meter
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: 1-2-2010

To: 1-31-2010

Facility: Spring Lake Golf and Country Club STP

14.38 Cap

	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1				7.4	2.8		1.3	1.16		
2				7.1	4.35		2.31	1.042		
3				7.3	4.95		1.91	1.024		
4	11.6	1.4	1.37	7.4	4.95	4.9	2.00	1.023		
5	8.6	1.4		7.3	1.95	6.0	6.00	1.020		
6	4.5	1.4		7.0	4.95	1.9	6.00	1.023		
7	2.04	1.4		7.4	2.26	1.4	1.5	1.027		
8				7.0	2.35		2.0	1.025		
9				7.1	4.95		1.65	1.034		
10				7.3	4.94		2.35	1.020		
11	4.9	1.4		7.3	4.95	1.0	3.35	1.025		
12	3.2	1.4		7.4	4.95	1.04	3.15	1.029		
13	3.6	1.4		7.3	4.95	2.6	2.7	1.029		
14	3.9	1.4		7.3	4.95	3.0	3.1	1.032		
15				7.2	4.95		4.3	1.029		
16				7.2	4.20		2.45	1.030		
17				7.2	4.3		2.05	1.028		
18	2.7	1.4		7.7	1.95	1.04	1.25	1.031		
19	2.04	1.4		7.7	4.95	1.04	1.00	1.029		
20	2.04	1.4		7.2	4.58	1.04	1.1	1.031		
21				7.3	4.95		1.4	1.027		
22	2.1	1.4	23.2	7.1	2.4	1.04	1.2	1.027	5.5	30
23				7.1	2.28		1.8	1.032		
24				7.2	1.4		1.5	1.024		
25	2.2	1.4		7.1	3.0	1.04	2.65	1.029		
26	2.04	1.4		7.3	4.95	1.04	2.2	1.027		
27	2.04	1.4		7.3	4.95	1.04	2.5	1.035		
28	2.04	1.4		7.4	4.95	1.04	2.6	1.035		
29	2.04			7.2	4.95		0.95	1.032		
30				7.2	1.6		2.5	1.036		
31				7.1	2.35		0.95	1.025		
Total	58	26.4	24.57	223.4	121.05	29.6	91.72	1.997	5.5	30
Mo. Avg.	3.62	1.4	12.29	7.2	3.9	1.25	2.64	1.029	0.18	0.99

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: 9 Certificate No: 000689A Name: Thomas A. Quinn

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT GROUP: Monthly Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESC: , including Influent

COUNTY: Highlands

NO DISCHARGE FROM SITE:
 MONITORING PERIOD

From: 1-1-2010 To 1-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			23.2		MG/L	1		
PARM Code 00620 A Mon. Site No. EPA-01	Permit Requirement			12 (Max.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.49		MG/L	5		
PARM Code 80082 Y Mon. Site No. EPA-01	Permit Requirement			20.0 (An.Avg.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.62	16.0	MG/L	5		
PARM Code 80082 A Mon. Site No. EPA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
pH	Sample Measurement			7.0	7.4	SU	5		
PARM Code 00400 A Mon. Site No. EPA-01	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			1.11		#/100ML	5		
PARM Code 74055 A Mon. Site No. EPA-01	Permit Requirement			25 (Max.)		#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			1.4		MG/L	5		
PARM Code 30060 A Mon. Site No. EPA-01	Permit Requirement			0.5 (Min.)		MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	<i>Thomas A. Quinn</i>	963 214-5185	10/02/19

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):
 1-2-2010 Power Outage, Turbidity went above 5.0 mg/L on morning of 1/2/2010 to 1-6-2010. Repair work suspended
 all flow to right pond until 1-7-2010, all flow switched to left pond from right pond.
 1-23-2010, NO₃ over 12.0 (23.2 mg/L) air high due to Reseeding plant to increase bio mass.

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP
NUMBER:
MONITORING PERIOD

R-001

PERMIT NUMBER: FLA014315

From: 1-1-2010 To

1-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement			1.16		MGL	0		
PARM Code 00530 Y	Permit Requirement			20.0 (An.Avg.)		MGL		Every Two Weeks	Grab
Solids, Total Suspended	Sample Measurement			1.95	6.0	MGL	0		
PARM Code 00530 A	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	MGL		Every Two Weeks	Grab
Turbidity	Sample Measurement			6.31		NTU	5		
PARM Code 00070 A	Permit Requirement			Report (Max.)		NTU		Continuous	Meter
Flow	Sample Measurement	.029	MGD						
PARM Code 50050 1	Permit Requirement	Report (Mo.Avg.)	MGD					5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement			0.99		MGL	0		
PARM Code 00530 G	Permit Requirement			Report (Mo.Avg.)		MGL		Monthly	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			0.19		MGL	0		
PARM Code 80082 G	Permit Requirement			Report (Mo.Avg.)		MGL		Monthly	Grab
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315

From: 1-1-2010 To: 1-31-2010

Facility: Spring Lake Golf and Country Club STP

143% CAP

	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1				7.1	2.8		2.3	1.016		
2				7.1	4.95		2.31	1.048		
3				7.3	4.95		6.31	1.024		
4	ND	1.4	1.37	7.4	4.95	4.8	6.00	1.023		
5	8.0	1.4		7.3	4.95	6.0	6.00	1.020		
6	4.5	1.4		7.0	4.93	1.8	6.00	1.023		
7	2.04	1.4		7.4	2.26	1.4	1.5	1.027		
8				7.0	4.95		2.0	1.025		
9				7.1	4.95		1.65	1.034		
10				7.3	4.94		2.35	1.020		
11	4.9	1.4		7.3	4.95	1.0	3.35	1.025		
12	3.2	1.4		7.4	4.95	1.04	3.95	1.029		
13	3.6	1.4		7.3	4.95	2.6	2.7	1.029		
14	3.8	1.4		7.3	4.95	3.0	3.1	1.032		
15				7.2	4.95		4.3	1.028		
16				7.2	4.20		2.15	1.030		
17				7.2	4.9		2.05	1.028		
18	2.7	1.4		7.1	1.85	1.04	1.35	1.031		
19	2.04	1.4		7.1	4.95	1.04	1.00	1.035		
20	2.04	1.4		7.2	4.95	1.04	1.1	1.031		
21				7.3	4.95		1.4	1.037		
22	2.1	1.4	23.2	7.1	2.4	1.04	7.2	1.027	5.5	30
23				7.1	2.22		1.8	1.032		
24				7.2	2.4		1.5	1.024		
25	2.2	1.4		7.1	3.0	1.04	1.65	1.029		
26	2.04	1.4		7.3	4.95	1.04	2.2	1.027		
27	2.04	1.4		7.3	4.95	1.04	2.5	1.035		
28	2.04	1.4		7.3	4.95	1.04	2.6	1.035		
29				7.3	4.95		0.35	1.032		
30				7.2	1.6		2.5	1.036		
31				7.1	2.25		2.35	1.025		
Total	58	16.4	24.57	723.4	121.05	29.6	91.92	1.991	5.5	30
Mo. Avg	3.62	1.4	12.29	7.2	3.9	1.85	2.64	1.029	0.19	0.99

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____

Evening Shift Operator Class: _____ Certificate No: _____ Name: _____

Night Shift Operator Class: _____ Certificate No: _____ Name: _____

Lead Operator Class: B Certificate No: 0006298 Name: Thomas A. Quinn

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

*PLT
copy
2/2010*

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
MAILING ADDRESS: 100 Country Club Drive
Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
CLASS SIZE: N/A

REPORT: Monthly
GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
LOCATION: 100 Country Club Drive
Sebring, FL 33876

MONITORING GROUP NUMBER: R-002
MONITORING GROUP DESC:

COUNTY: Highlands

NO DISCHARGE FROM SITE:
MONITORING PERIOD From: 2-1-2010 To 2-29-2010

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			12.0		MG/L	0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement			12 (Max.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.62		MG/L	0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.92	4.2	MG/L	0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
pH	Sample Measurement			7.1	7.4	SU	0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			1.4		#/100ML	0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement			25 (Max.)		#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			1.7		MG/L	0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			1.0 (Min.)		MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Lead Operator	<i>Thomas A. Quinn</i>	363 214-5195	10/03/09

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP
NUMBER:
MONITORING PERIOD

R-002

PERMIT NUMBER: FLA014315

From: 2-1-2010 To 2-29-2010

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solid, Total Suspended PARM Code 00530 A Mon.Site No. EPA-02	Sample Measurement			1.8				
	Permit Requirement			5.0 (Max.)			Every Two Weeks	Grab
Turbidity PARM Code 00070 A Mon.Site No. EPA-02	Sample Measurement			2.25				
	Permit Requirement			Report (Max.)			Continuous	Meter
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From:

2-1-2010 To: 2-29-2010

Facility: Spring Lake Golf and Country Club STP

18.6% CAP

	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1	2.3	1.2		7.2	4.95	1.04	0.55	0.96		
2	2.8	1.4		7.24	1.25	1.04	0.95	1.030		
3	2.6	1.4		7.18	1.75	1.04	0.9	1.025		
4	2.0	1.4		7.2	1.7	1.0	1.6	1.043		
5			12.0	7.13	1.95		1.35	1.034		
6				7.26	4.7		1.1	1.037		
7				7.27	4.95		1.7	1.034		
8	3.2	1.4	1.1	7.30	4.95	1.8	2.15	1.035		
9	2.0	1.4		7.24	4.95	1.04	1.75	1.035		
10	4.2	1.4		7.24	4.95	1.02	2.25	1.033		
11	3.3	1.4		7.39	4.95	1.04	1.4	1.027		
12				7.27	4.95		1.035	1.029		
13				7.39	4.55		0.95	1.035		
14				7.21	4.15		1.095	1.031		
15	2.7	1.4	6.24	7.22	4.65	1.02	0.60	1.034	133	44
16	3.9	1.4		7.16	4.2	1.04	0.5	1.036		
17	2.4	1.4		7.22	3.9	1.04	0.9	1.041		
18	2.4	1.4		7.19	4.0	1.04	0.95	1.034		
19				7.25	4.95		0.8	1.028		
20				7.18	4.95		0.7	1.037		
21				7.22	4.95		1.25	1.040		
22	3.3	1.4		7.17	4.97	1.04	0.95	1.040		
23	3.9	1.4		7.2	4.95	1.5	0.95	1.037		
24	2.2	1.4		7.19	4.95	1.04	1.0	1.034		
25	4.0	1.4		7.26	4.95	1.0	1.25	1.031		
26				7.22	4.95		0.65	1.032		
27				7.23	4.35		0.95	1.038		
28				7.25	4.75		0.7	1.029		
29										
30										
31										
Total	46.7	16.4	19.34	202.36	120.17	17.3	29.91	0.965	133	44
Mo. Avg	2.92	1.4	6.43	7.2	4.29	1.08	1.06	1.0345	4.59	1.57

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 0006899 Name: Thomas A. Quinn

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESC: , including Influent

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 2-1-2010 To 2-29-2010

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement							
PARM Code 00620 A Mon.Site No. BFA-01	Permit Requirement			12 (Max.)	MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement							
PARM Code 80082 Y Mon.Site No. BFA-01	Permit Requirement			20.0 (An.Avg.)	MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement							
PARM Code 80082 A Mon.Site No. BFA-01	Permit Requirement			30.0 (Mo.Avg.) 60.0 (Max.)	MG/L		Every Two Weeks	Grab
pH	Sample Measurement							
PARM Code 00400 A Mon.Site No. BFA-01	Permit Requirement			6.0 (Min.) 8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement							
PARM Code 74055 A Mon.Site No. BFA-01	Permit Requirement			25 (Max.)	#100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement							
PARM Code 50060 A Mon.Site No. BFA-01	Permit Requirement			0.5 (Min.)	MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Lead Operator	<i>Thomas A. Quinn</i>	863 244-5195	10/03/09

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

No flow to system R-001

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP R-001
 NUMBER:
 MONITORING PERIOD From: 2-1-2010 To 2-28-2010

PERMIT NUMBER: FLA014315

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement								
PARM Code 00530 Y Mon. Site No. EPA-02	Permit Requirement			20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
Solids, Total Suspended	Sample Measurement								
PARM Code 00530 A Mon. Site No. EPA-02	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
Turbidity	Sample Measurement								
PARM Code 00070 A Mon. Site No. EPA-02	Permit Requirement			Report (Max.)		NTU		Continuous	Meter
Flow	Sample Measurement								
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Requirement	Report (Mo. Avg.)	MGD					5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement								
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement			Report (Mo. Avg.)		MG/L		Monthly	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement								
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			Report (Mo. Avg.)		MG/L		Monthly	Grab
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								

No Flow to System R-001

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014315**
 Monitoring Period: **From: 2-1-2010 To: 2-28-2010**

Facility: **Spring Lake Golf and Country Club STP**

14.6% CAP

	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
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23										
24										
25										
26										
27										
28										
29										
30										
31										
Total										
Mo. Avg.										

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 0006898 Name: Thomas A. Quinn

NO FLOW TO SYSTEM R-001

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

*Rjt
Copy*

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
MAILING ADDRESS: 100 Country Club Drive
Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
CLASS SIZE: N/A

REPORT: Monthly
GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
LOCATION: 100 Country Club Drive
Sebring, FL 33876

MONITORING GROUP NUMBER: R-002
MONITORING GROUP DESC:

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 3-1-2010 To 3-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			2.00		MG/L	0	
PARM Code 00620 A	Permit Requirement			12 (Max.)		MG/L		Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.2		MG/L	0	
PARM Code 80082 Y	Permit Requirement			20.0 (An.Avg.)		MG/L		Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.57	4.2	MG/L	0	
PARM Code 80082 A	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	MG/L		Grab
pH	Sample Measurement			7.07	7.25	SU	0	
PARM Code 00400 A	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week
Coliform, Fecal	Sample Measurement			1.4		#/100ML	0	
PARM Code 74055 A	Permit Requirement			25 (Max.)		#/100ML		Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.4		MG/L	1	
PARM Code 50060 A	Permit Requirement			1.0 (Min.)		MG/L		Continuous

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	<i>Thomas A. Quinn</i>	963 214-5195	20/04/12

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

319/2010 Cl₂ under 1.0 MG/L FOR LESS THAN 1/2 MINUTE, WHEN IT WENT UNDER 1.0 MG/L AT 1930 THE ELECTRIC VALVE SWITCHED TO THE RES. POND. CL₂ WENT BACK ABOVE 1.0 MG/L AT 1930.

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP R-002
 NUMBER:
 MONITORING PERIOD From: 3-1-2010 To 3-31-2010

PERMIT NUMBER: FLA014315

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement			1.0	mg/L	5		
PARM Code 00530 A	Permit Requirement			5.0 (Max.)	MG/L		Every Two Weeks	Grab
Man. Site No. BFA-02								
Turbidity	Sample Measurement			1.75	NTU	5		
PARM Code 00070 A	Permit Requirement			Report (Max.)	NTU		Continuous	Meter
Man. Site No. BFA-02								
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA014315
Monitoring Period: 3-1-2010 To: 3-31-2010

Facility: Spring Lake Golf and Country Club STP

22.8% CAP
75% CAP

Code	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1	4.2	1.4	2.00	7.25	4.45	1.0	0.5	0.32		
2	2.2	1.4		7.25	4.35	1.04	0.5	0.33		
3	3.0	1.4		7.21	4.05	1.04	0.65	0.30		
4	2.04	1.4		7.20	4.45	1.4	0.55	0.35		
5				7.22	4.65		1.0	0.36		
6				7.19	4.55		0.6	0.31		
7				7.23	4.4		0.6	0.30		
8	2.9	1.4		7.16	2.4	1.2	0.55	0.33		
9	2.9	1.4		7.15	3.2	1.04	0.7	0.34		
10	2.2	1.4		7.12	1.5	1.04	0.45	0.32		
11	2.3	2.4		7.19	1.65	1.2	0.6	0.32		
12				7.22	2.3		0.65	0.35		
13				7.25	2.55		0.9	0.36		
14				7.20	3.65		0.7	0.33		
15	2.8	1.4	1.96	7.2	4.95	1.04	0.8	0.31		
16	3.0	1.4		7.2	3.45	1.04	0.5	0.29		
17	2.9	1.4		7.18	2.55	1.04	0.7	0.29		
18	2.1	1.4		7.13	0.4	1.04	1.25	0.39		
19				7.17	2.4		0.75	0.34		
20				7.12	1.7		0.55	0.33		
21				7.11	1.7		0.75	0.32		
22	2.04	1.4		7.13	2.35	1.04	1.0	0.32		
23	2.0	1.4		7.16	2.4	1.04	0.6	0.31		
24	2.4	1.4		7.14	1.75	1.04	0.6	0.31		
25	2.1	1.4		7.09	1.5	1.04	1.25	0.31		
26				7.07	1.75		0.9	0.29		
27				7.09	2.05		1.5	0.29		
28				7.10	2.95		1.15	0.23		
29	2.04	1.4	1.99	7.08	1.8	1.04	1.05	0.43		
30	2.5	1.4		7.13	1.6	1.04	1.25	0.25	63	16
31	2.4	1.4		7.15	4.95	1.04	0.8	0.32		
Total	49.9	19.4	5.94	221.9	99.3	19.9	24.15	2.52	63	16
Mo. Avg.	2.57	1.4	1.95	7.16	2.95	1.0	0.8	0.43	2.0	0.52

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 0006999 Name: Thomas A. Quinn

3118 Cl₂ under 1.0 mg/L for less than 1/2 minute, when it went under 1.0 mg/L @ 1930 THE ELECTRIC VALVE SWITCHED TO Res Pond. Cl₂ went back to 3.0 at 1930.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESC: including Influent

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 3-1-2010 To 3-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			2.00	MG/L	0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement			12 (Max.)	MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.2	MG/L	0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An. Avg.)	MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.57 4.2	MG/L	0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo. Avg.) 60.0 (Max.)	MG/L		Every Two Weeks	Grab
pH	Sample Measurement			7.07 7.25	SU	0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.) 8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			1.4	#/100ML	0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement			25 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.4	MG/L	1		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			0.5 (Min.)	MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
THOMAS A. QUINN ^{LOAD} OPERATOR	THOMAS A. QUINN	363 214-5195	10/04/12

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

3-19-2010 - CL2 UNDER 1.0 MG/L FOR LESS THAN 1/2 MINUTE, WHEN IT WENT UNDER 1.0 MG/L AT 1930 THE ELECTRIC VALVE SWITCHED TO THE RESPECT POND, CL2 WENT BACK ABOVE 1.0 MG/L AT 1930.

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP R-002
 NUMBER:
 MONITORING PERIOD From: 3-1-2010 To 3-31-2010

PERMIT NUMBER: FLA014315

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended PARM Code 0030 A Mon Site No. EFA-02	Sample Measurement			1.0		MGL		
	Permit Requirement			5.0 (Max)		MGL	Every Two Weeks	Grab
Turbidity PARM Code 0070 A Mon Site No. EFA-02	Sample Measurement			1.75		NTU		
	Permit Requirement			Report (Max)		NTU	Continuous	Meter
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: 3-1-2010 To: 3-31-2010

Facility: Spring Lake Golf and Country Club STP

21
79-9-175 CAP

	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1	4.2	1.4	2.00	7.25	4.45	1.0	0.5	.032		
2	2.0	1.4		7.15	4.35	1.04	0.5	.033		
3	3.0	1.4		7.21	4.05	1.04	0.65	.030		
4	2.04	1.4		7.20	4.45	1.4	0.55	.035		
5				7.20	4.65		1.0	.036		
6				7.18	4.55		0.6	.031		
7				7.23	4.4		0.6	.030		
8	2.9	1.4		7.16	2.4	1.2	0.55	.033		
9	2.9	1.4		7.15	3.2	1.04	0.7	.034		
10	2.2	1.4		7.12	1.5	1.04	0.45	.032		
11	3.3	1.4		7.19	1.65	1.2	0.6	.032		
12				7.02	2.3		0.65	.035		
13				7.25	2.55		0.8	.036		
14				7.20	3.65		0.7	.033		
15	2.8	1.4	1.56	7.2	4.25	1.04	0.8	.031		
16	3.0	1.4		7.2	3.45	1.04	0.5	.029		
17	2.9	1.4		7.18	2.55	1.04	0.7	.028		
18	2.1	1.4		7.13	0.4	1.04	0.25	.039		
19				7.17	2.4		0.75	.034		
20				7.12	1.7		0.55	.033		
21				7.11	1.7		0.75	.038		
22	2.04	1.4		7.19	2.35	1.04	1.0	.032		
23	2.0	1.4		7.16	2.4	1.04	0.6	.031		
24	2.4	1.4		7.14	1.75	1.04	0.6	.031		
25	2.1	1.4		7.08	1.5	1.04	1.25	.031		
26				7.07	1.75		0.9	.029		
27				7.09	2.05		1.5	.029		
28				7.10	2.25		1.15	.028		
29	2.04	1.4	1.98	7.08	1.8	1.04	1.05	.048		
30	2.5	1.4		7.13	1.6	1.04	1.25	.035	63	16
31	2.4	1.4		7.16	4.25	1.04	0.8	.032		
Total	49.8	19.4	5.24	72.14	28.3	19.2	24.5	.039	63	16
Mo. Avg.	2.57	1.4	1.95	7.16	2.95	1.0	0.8	.032	2.0	0.52

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: 3 Certificate No: 0008999 Name: Thomas A. Quinn

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PET
COPY
4/2010

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
MAILING ADDRESS: 100 Country Club Drive
Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
CLASS SIZE: N/A

REPORT: Monthly
GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
LOCATION: 100 Country Club Drive
Sebring, FL 33876

MONITORING GROUP NUMBER: R-002

MONITORING GROUP DESC:

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 4-1-2010 To 4-30-2010

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N) PARM Code 00620 A Mon. Site No. EFA-01	Sample Measurement			13.6	MG/L	1		
	Permit Requirement			12 (Max.)	MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C PARM Code 80082 Y Mon. Site No. EFA-01	Sample Measurement			2.53	MG/L	0		
	Permit Requirement			20.0 (An. Avg.)	MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C PARM Code 80082 A Mon. Site No. EFA-01	Sample Measurement			1.32 2.9	MG/L	0		
	Permit Requirement			30.0 (Mo. Avg.) 60.0 (Max.)	MG/L		Every Two Weeks	Grab
pH PARM Code 00400 A Mon. Site No. EFA-01	Sample Measurement			7.19 7.72	SU	0		
	Permit Requirement			6.0 (Min.) 8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal PARM Code 74055 A Mon. Site No. EFA-01	Sample Measurement			1.0	#/100ML	0		
	Permit Requirement			25 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection) PARM Code 50060 A Mon. Site No. EFA-01	Sample Measurement			0.0	MG/L	4		
	Permit Requirement			1.0 (Min.)	MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
THOMAS A. QUINN - OPERATOR	<i>Thomas A. Quinn</i>	363 214-5195	10/05/23

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):
 4-6-10 Res = 0.0: CL 17 IN ECC WITH SUNSHINE FL, FRAMED THROUGH HAND. ANALYSE
 4-19-10 Res = 0.05: GROUND HEAD OR LEAKING AT LEFT PA. SWITCHED TO RIGHT SIDE, VALVE IN MID NOT HOLDING. REPLACED MOST OF HEAD.
 4-21-10 Res = 0.6: GROUND WAS AT 4.25 PPM @ 0.100 T WENT DOWN TO 0.6 PPM, WAS SET AT 40% CHECKED CL-17 ANALYSER, NO DATA.
 4-23-10 Res = 6.0: 3RD SAMPLE - LAB DIDN'T REPORTLY SAMPLE ON 4.23 (1.04) 7.4.26 (1.04)
 4-26-10 Res = 0.05: NO FLOW THROUGH PLANT FROM 4.26-10 (0530) TIL AFTER DARK, STAY UNKNOWN, (3 PHASE POWER OUT DUE TO TRANSFORMER AT PLANT FAILING. SENT EMAIL TO KEITH + ALLEN S.
 4-28-10 Res = 0.00 CHECKED GROUND PUMP, PUMPING, CL 17 ANALYSER (300MS OK) + GROUND HEAD OR, ELAST 2.0
 VALVE SWITCHED TO RIGHT POND.

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP R-002
 NUMBER:
 MONITORING PERIOD From: 4-1-2010 To 4-30-2010

PERMIT NUMBER: FLA014315

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement			6.0			MGL	1		
PARM Code 00530 A	Permit Requirement			5.0 (Max.)			MGL		Every Two Weeks	Grab
Mon. Site No. EPA-02										
Turbidity	Sample Measurement			2.0			NTU			
PARM Code 00070 A	Permit Requirement			Report (Max.)			NTU		Continuous	Meter
Mon. Site No. EPA-02										
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: 4-15-2010 To: 4-30-2010

Facility: Spring Lake Golf and Country Club STP

20.7% CAP

	CBOD5 (MG/L)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MG/L)	pH (SU)	TRC (For Disinfect.) (MG/L)	TSS (MG/L)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MG/L)	TSS (MG/L)	
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530	
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01	
1				7.45	4.95		1.65	1.032			
2	2.06	1.0		7.31	4.20	1.04	1.5	1.021			
3				7.52	4.95		0.4	1.022			
4				7.53	4.95		0.3	1.024			
5	2.9	1.0		7.44	4.95	1.04	0.5	1.023			
6	2.6	1.0		7.57	0.0	1.04	0.855	1.029			
7				7.45	4.95		0.6	1.023			
8	2.4	1.0		7.55	4.95	1.04	0.6	1.020			
9	2.3	1.0		7.38	4.95	1.04	0.6	1.032			
10				7.41	4.95		0.45	1.024			
11				7.42	4.95		0.20	1.024			
12	2.8	1.0	13.6	7.40	4.95	1.04	0.45	1.029	96	29	
13	2.04	1.0		7.36	4.95	1.2	2.0	1.018			
14	2.4	1.0		7.39	4.95	1.04	2.0	1.020			
15	2.2	1.0		7.44	4.95	1.04	0.65	1.019			
16				7.44	4.95		0.40	1.022			
17				7.43	4.95		0.45	1.019			
18				7.42	4.95		0.40	1.024			
19	2.0	1.0		7.31	4.95	1.04	0.50	1.015			
20				7.55	4.95		1.75	1.016			
21	2.0	1.0		7.40	0.60	1.04	1.35	1.017			
22	2.04	1.0		7.18	4.95	1.04	0.75	1.017			
23	2.8	1.0		7.40	4.4	6.0	0.75	1.020			
24				7.37	4.95		0.55	1.022			
25				7.39	4.95		0.85	1.020			
26	2.1	1.0		7.38	0.05	1.04	1.6	1.019			
27				7.72	4.95		1.5	1.011			
28	2.04	1.0	11.5	7.42	0.0	1.04	1.45	1.022			
29	2.7	1.0		7.35	2.15	1.04	1.00	1.015			
30	2.5	1.0		7.44	4.95	1.04	1.05	1.016			
31					10.35						
Total	39.7	17.0	25.1	22.4	40.5	22.2	25.765	0.635	96	29	
Mo. Avg.	1.32	1.0	12.58	7.42	13.4	1.3	0.86	0.021	3.2	0.97	

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 0006999 Name: Thomas A. Quinn

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESC: , including Influent

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 4-1-2010 To 4-30-2010

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N) PARM Code 00620 A Mon. Site No. EPA-01	Sample Measurement			13.6		MGL	2x/2w	Grab
	Permit Requirement			13 (Max.)		MGL	Every Two Weeks	
BOD, Carbonaceous 5 day, 20C PARM Code 80082 Y Mon. Site No. EPA-01	Sample Measurement			2.53		MGL	0	Grab
	Permit Requirement			20.0 (An. Avg.)		MGL	Every Two Weeks	
COD, Carbonaceous 5 day, 20C PARM Code 80082 A Mon. Site No. EPA-01	Sample Measurement			1.32 2.9		MGL	0	Grab
	Permit Requirement			30.0 (Mo. Avg.) 60.0 (Max.)		MGL	Every Two Weeks	
pH PARM Code 00400 A Mon. Site No. EPA-01	Sample Measurement			7.18 7.72		SU	0	Grab
	Permit Requirement			6.0 (Min.) 8.5 (Max.)		SU	5 Days/Week	
Coliform, Fecal PARM Code 74055 A Mon. Site No. EPA-01	Sample Measurement			1.4		#100ML	0	Grab
	Permit Requirement			25 (Max.)		#100ML	Every Two Weeks	
Total Residual Chlorine (For Disinfection) PARM Code 50060 A Mon. Site No. EPA-01	Sample Measurement			0.0		MGL	2x/2w	Meter
	Permit Requirement			0.5 (Min.)		MGL	Continuous	

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	Thomas A. Quinn	963 214-5195	10/05/23

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):
 4-6-10 Res 0.0 CK CK IN CK WITH SENSION #2. TURBID PUMP ON HAND TO REMOVE RESIDUAL
 4-12-10 NO2 13.6 Aik to High: Reduced Aik MULTIPLE TIMES.
 4-19-10 Res 0.055 BEACH HEADER WORKING AT LEFT FA. SWITCHED TO Right Side, VALVE NOT HOLDING, Replaced most
 OF Header.
 4-26-10 Res 0.05 NO FLOW THROUGH PLANT FROM 4-26-10 (0530) TIL AFTER DARK, TIME UNKNOWN (3 phase power out)
 DUE TO TRANSFORMER AT PLANT FAILING.
 4-28-10 Res 0.0 CHECKED BEACH PUMP (APPEARS OK) TUBING LCL-17 ANALYZER (500MS CK) + Beach Header
 DEP Form 62-620.910(10), Effective November 29, 1994

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP R-001
 NUMBER:
 MONITORING PERIOD From: 4-1-2010 To 4-30-2010

PERMIT NUMBER: FLA014315

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement				1.15		MGL	0		
PARM Code 00530 Y Mon. Site No. EFA-02	Permit Requirement				20.0 (An. Avg.)		MGL		Every Two Weeks	Grab
Solids, Total Suspended	Sample Measurement				1.30	6.0	MGL	0		
PARM Code 00530 A Mon. Site No. EFA-02	Permit Requirement				30.0 (Mo. Avg.)	60.0 (Max.)	MGL		Every Two Weeks	Grab
Turbidity	Sample Measurement				2.0		NTU	0		
PARM Code 00070 A Mon. Site No. EFA-02	Permit Requirement				Report (Max.)		NTU		Continuous	Meter
Flow	Sample Measurement									
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Requirement		Report (Mo. Avg.)	MGD					5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement				6.97		MGL	0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement				Report (Mo. Avg.)		MGL		Monthly	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement				3.2		MGL	0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement				Report (Mo. Avg.)		MGL		Monthly	Grab
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: 4-1-2010 To: 4-30-2010

Facility: Spring Lake Golf and Country Club STP

20.7% CAP

	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1				7.45	4.95		1.65	1.032		
2	2.026	1.16		7.31	4.9	1.04	1.5	1.021		
3				7.52	4.95		0.4	1.022		
4				7.52	4.95		0.3	1.024		
5	2.09	1.16		7.44	4.95	1.06	0.5	1.023		
6	2.6	1.11		7.35	0.90	1.011	0.255	1.029		
7				7.45	4.95		0.6	1.023		
8	2.4	1.16		7.55	4.95	1.06	0.6	1.020		
9	2.3	1.16		7.38	4.95	1.016	0.6	1.032		
10				7.41	4.95		0.45	1.024		
11				7.42	4.95		0.20	1.024		
12	2.8	1.11	13.6	7.40	4.95	1.06	0.45	1.029	96	29
13	2.04	1.11		7.36	4.95	1.2	2.0	1.018		
14	2.4	1.16		7.39	4.95	1.06	2.0	1.020		
15	2.2	1.16		7.44	4.95	1.06	0.85	1.019		
16				7.44	4.95		0.46	1.022		
17				7.43	4.95		0.45	1.029		
18				7.42	4.95		0.40	1.024		
19	2.0	1.16		7.31	4.95	1.06	0.50	1.015		
20				7.55	4.95		1.75	1.016		
21	2.0	1.16		7.40	0.60	1.06	1.35	1.017		
22	2.04	1.16		7.18	4.95	1.04	0.75	1.017		
23	2.9	1.16		7.40	4.9	6.0	0.75	1.020		
24				7.37	4.95		0.55	1.022		
25				7.39	4.95		0.95	1.020		
26	2.1	1.16		7.38	0.05	1.06	1.6	1.019		
27				7.72	4.95		1.5	1.011		
28	2.04	1.16	11.5	7.42	0.90	1.06	1.45	1.022		
29	2.7	1.16		7.35	2.15	1.06	1.00	1.015		
30	2.5	1.16		7.44	4.95	1.06	1.05	1.016		
31										
Total	39.7	17.16	25.1	226.64	120.355	22.2	25.765	0.635	96	29
Mo. Avg.	1.32	1.16	12.55	7.42	4.01	1.3	0.86	0.021	3.2	0.97

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 0006998 Name: Thomas A. Quinn

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT GROUP: Monthly Domestic

FACILITY LOCATION: Spring Lake Golf and Country Club STP
 100 Country Club Drive

MONITORING GROUP NUMBER: R-002

Sebring, FL 33876

MONITORING GROUP DESC:

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 5-1-2010 To 5-31-2010

Parameter	Sample Measurement	Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
				Sample Measurement	Permit Requirement				
Nitrogen, Nitrate, Total (as N) PARM Code 00620 A Mon. Site No. EFA-01	Sample Measurement			9.4		MG/L	4		
BOD, Carbonaceous 5 day, 20C PARM Code 80082 Y Mon. Site No. EFA-01	Sample Measurement			2.6		MG/L	4	Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C PARM Code 80082 A Mon. Site No. EFA-01	Sample Measurement			20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
pH PARM Code 00400 A Mon. Site No. EFA-01	Sample Measurement			3.2	4.9	MG/L	4	Every Two Weeks	Grab
Coliform, Fecal PARM Code 74055 A Mon. Site No. EFA-01	Sample Measurement			7.3	2.7	SU	4	5 Days/Week	Grab
Total Residual Chlorine (For Disinfection) PARM Code 50060 A Mon. Site No. EFA-01	Sample Measurement			1.04		#/100ML	4	Every Two Weeks	Grab
	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Continuous	Meter
	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU			
	Permit Requirement			25 (Max.)		MG/L	4		
	Permit Requirement			1.0 (Min.)		MG/L			

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Thomas A. Quinn Operator</i>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Thomas A Quinn</i>	TELEPHONE NO 863 2145195	DATE (YY/MM/DD) 10/06/12
--	---	--------------------------------	-----------------------------

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

5-2-2010 Res at 0.04 MG/L DUE TO PIN HOLD LOCK FROM SEARCH TR TUBING TO PVC SEARCH HEAD - REPAIRED

5-3-2010 Res at 0.95 MG/L, FOCK. BAD SAMPLE, SENSION II. WAS 1.11 MG/L.

5-6-2010 Res at 0.75 MG/L, FIRST THOUGHT WAS FLECT PRAS WITH FILTER AUTO/ON IMP, HOWEVER BELIEVE IT WAS BAD BK VALVE AT BOTTOM OF CLR PUMP HEAD - REPAIRED.

5-12-2010 Res at 0.20, CLR PUMP LEAKING AT SOFT HEAD CONNECTIONS. REPAIRED SERIES 100 PULSA PUMP WITH A SERIES 200 PULSA PUMP.

IN ALL CASES AUTO-MATIC VALVE 3 UNHOOKED TO REJECT POND - UNTIL ROOT BY OPERATOR

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Spring Lake Golf and Country Club STP

MONITORING GROUP

R-002

PERMIT NUMBER: FLA014315

NUMBER:

MONITORING PERIOD

From: 2-1-2010 To

5-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended PARM Code 00530 A Mon. Site No. EFA-02	Sample Measurement			1.06		MGL		
	Permit Requirement			5.0 (Max.)		MGL	Every Two Weeks	Grab
Turbidity PARM Code 00070 A Mon. Site No. EFA-02	Sample Measurement			1.75		NTU		
	Permit Requirement			Report (Max.)		NTU	Continuous	Meter
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From:

5-31-2010 To: 5-31-2010

Facility: Spring Lake Golf and Country Club STP

15.0
10 0-15 0/0 CAP

	CBOD5 (MG/L)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MG/L)	pH (SU)	TRC (For Disinfect.) (MG/L)	TSS (MG/L)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MG/L)	TSS (MG/L)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1				7.5	4.95		1.75	1.015		
2				7.4	4.04		0.30	1.011		
3	2.5	1.4		7.6	2.09	1.04	1.2	1.011		
4	3.1	1.4	8.64	7.4	1.40	1.04	1.1	1.011		
5	3.9	1.1		7.4	0.95	1.04	0.75	1.014		
6	4.3	1.1		7.4	0.75	1.04	0.50	1.017		
7				7.5	4.95		0.2	1.015		
8				7.5	4.95		0.4	1.016		
9				7.5	4.95		0.3	1.026		
10	2.2	1.4	4.16	7.5	4.95	1.04	0.35	1.010	92	108
11	2.0	1.4		7.5	4.95	1.04	0.25	1.009		
12	3.1	1.4		7.5	0.95	1.04	0.40	1.013		
13	4.9	1.1		7.6	2.25	1.04	0.50	1.012		
14				7.5	2.15		0.35	1.014		
15				7.7	2.25		1.15	1.015		
16				7.6	4.95		0.60	1.011		
17	3.2	1.1		7.5	4.95	1.04	1.25	1.013		
18	2.7	1.1		7.4	4.95	1.04	0.4	1.010		
19	2.2	1.4		7.4	4.95	1.04	0.4	1.008		
20	3.1	1.4		7.4	4.95	1.04	0.41	1.009		
21				7.5	3.2		0.35	1.013		
22				7.5	3.2		1.25	1.013		
23				7.5	2.95		0.9	1.006		
24	2.7	1.4	9.40	7.3	2.65	1.04	0.45	1.008		
25	4.2	1.4		7.4	1.4	1.04	0.4	1.010		
26	2.5	1.1		7.4	1.95	1.04	0.4	1.005		
27	3.1	1.1		7.4	4.95	1.04	0.4	1.007		
28				7.4	4.95		0.55	1.011		
29				7.4	3.8		0.45	1.013		
30				7.6	4.95		0.25	1.012		
*31				7.5	4.95		0.30	1.007		
Total	50.5	16.4	29.2	231.7	168.71	16.04	19.235	1.342	92	109
Mo. Avg.	3.16	1.1	7.4	7.5	3.31	1.04	0.59	1.011	2.64	3.5

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 0002299 Name: Thomas A. Quinn
 5/21/2010 LAB CLOSED

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

all this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

Utility Corporation of Florida, Inc.
100 Country Club Drive
Sebring, FL 33870

Spring Lake Golf and Country Club STP
100 Country Club Drive

Sebring, FL 33876

Highlands

PERMIT NUMBER FLA014315

LIMIT: Final
CLASS SIZE: N/A

REPORT: Monthly
GROUP: Domestic

MONITORING GROUP NUMBER: R-001
MONITORING GROUP DESC: , including Influent

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 5-1-2010 To 5-31-2010

		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
(as N)	Sample Measurement			9.4		MG/L	0		
A	Permit Requirement			12 (Max.)		MG/L		Every Two Weeks	Grab
May, 20C	Sample Measurement			2.6		MG/L	0		
Y	Permit Requirement			20.0 (An.Avg.)		MG/L		Every Two Weeks	Grab
May, 20C	Sample Measurement			3.2	4.9	MG/L	0		
A	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
	Sample Measurement			7.3	7.7	SU	0		
	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
	Sample Measurement			1.04		#/100ML	0		
	Permit Requirement			25 (Max.)		#/100ML		Every Two Weeks	Grab
For	Sample Measurement			0.04		MG/L	2		
	Permit Requirement			0.5 (Min.)		MG/L		Continuous	Meter

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

EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
<i>A. Quinn - Operator</i>	<i>Thomas A. Quinn</i>	813 214-5198	10/06/22

DESCRIPTION OF ANY VIOLATIONS (Reference all attachments here):
 3 AT 0.04 MG/L due to pin hole leak from branch TK tubing to PVC branch header - Repaired
 3 AT 0.20 MG/L, 1/2 pump looking at wet head connections. Replaced series 100 pusher
 in a series 200 pusher pump.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESC: , including Influent

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 5-1-2010 To 5-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N) PARM Code 00620 A Mon. Site No. EFA-01	Sample Measurement			9.4		MG/L	0		
	Permit Requirement			12 (Max.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C PARM Code 80082 Y Mon. Site No. EFA-01	Sample Measurement			2.6		MG/L	0		
	Permit Requirement			20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C PARM Code 80082 A Mon. Site No. EFA-01	Sample Measurement			3.2	4.9	MG/L	0		
	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
pH PARM Code 00400 A Mon. Site No. EFA-01	Sample Measurement			7.3	7.7	SU	0		
	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal PARM Code 74055 A Mon. Site No. EFA-01	Sample Measurement			1.04		#/100ML	0		
	Permit Requirement			25 (Max.)		#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection) PARM Code 50060 A Mon. Site No. EFA-01	Sample Measurement			0.04		MG/L	2		
	Permit Requirement			0.5 (Min.)		MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
THOMAS A. QUINN - OPERATOR	Thomas A. Quinn	883 214-5195	10/06/22

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

5-2-2010 Res at 0.04 MG/L due to pin hole leak from bleach TK tubing to PVC blower hood air - repaired
 5-12-2010 Res at 0.20 MG/L. 1/2 pump looking at belt head connections. Replaced series 100 pulsed pump with a series 200 pulsed pump.

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP R-001

PERMIT NUMBER: FLA014315

NUMBER:

MONITORING PERIOD From: 5-01-2010 To 5-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended PARM Code 00530 Y Mon.Site No. EPA-02	Sample Measurement			1.15		MG/L	0		
	Permit Requirement			20.0 (An.Avg.)		MG/L		Every Two Weeks	Grab
Solids, Total Suspended PARM Code 00530 A Mon.Site No. EPA-02	Sample Measurement			1.04	1.04	MG/L	0		
	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
Turbidity PARM Code 00070 A Mon.Site No. EPA-02	Sample Measurement			2.7		NTU	0		
	Permit Requirement			Report (Max.)		NTU		Continuous	Meter
Flow PARM Code 50050 I Mon.Site No. FLW-01	Sample Measurement	.011	MGD				0		
	Permit Requirement	Report (Mo.Avg.)	MGD					5 Days/Week	Flow Totalizer
Solids, Total Suspended PARM Code 00530 G Mon.Site No. INF-01	Sample Measurement			3.5		MG/L	0		
	Permit Requirement			Report (Mo.Avg.)		MG/L		Monthly	Grab
BOD, Carbonaceous 5 day, 20C PARM Code 80082 G Mon.Site No. INF-01	Sample Measurement			2.6		MG/L	0		
	Permit Requirement			Report (Mo.Avg.)		MG/L		Monthly	Grab
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA014315
Monitoring Period: 5-1-2010 To: 5-31-2010

Facility: Spring Lake Golf and Country Club STP 3 mo ADF = .02
15.0
19.0-15.0 % cap

	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1				7.5	4.95		1.75	1.015		
2				7.4	4.04		0.3	1.011		
3	2.5	1.4		7.6	2.09	1.04	1.2	1.011		
4	3.1	1.4	8.64	7.4	1.46	1.04	1.1	1.011		
5	3.9	1.4		7.4	4.95	1.04	0.75	1.014		
6	4.6	1.4		7.4	4.75	1.04	0.50	1.017		
7				7.5	4.95		0.2	1.015		
8				7.5	4.95		0.4	1.016		
9				7.5	4.95		0.3	1.006		
10	2.2	1.4	4.16	7.5	4.95	1.04	0.35	1.010	92	108
11	2.0	1.4		7.5	4.23	1.04	0.25	1.008		
12	3.1	1.4		7.5	4.20	1.04	0.40	1.013		
13	4.9	1.4		7.6	2.25	1.04	0.50	1.012		
14				7.5	2.15		0.55	1.014		
15				7.7	2.25		1.15	1.015		
16				7.6	4.95		0.60	1.011		
17	3.2	1.4		7.5	4.95	1.04	1.35	1.013		
18	2.7	1.4		7.4	4.95	1.04	0.4	1.010		
19	2.2	1.4		7.4	4.2	1.04	0.4	1.008		
20	3.1	1.4		7.4	4.25	1.04	0.41	1.009		
21				7.5	3.2		0.35	1.013		
22				7.5	3.2		1.25	1.013		
23				7.5	4.45		0.9	1.006		
24	2.7	1.4	9.40	7.3	2.65	1.04	0.45	1.008		
25	4.2	1.4		7.4	1.4	1.04	0.4	1.010		
26	2.5	1.4		7.4	1.95	1.04	0.4	1.005		
27	3.1	1.4		7.4	4.95	1.04	0.4	1.007		
28				7.4	4.95		0.55	1.011		
29				7.4	3.8		0.45	1.013		
30				7.6	4.95		0.25	1.012		
31				7.5	4.95		0.20	1.002		
Total	50.5	16.4	22.2	7.5	102.7	26.04	15.235	1.342	92	108
Mo. Avg	3.16	1.4	7.4	7.5	3.31	1.04	0.59	1.011	2.64	3.5

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: B Certificate No: 0006979 Name: Thomas A. Quinn
 Lead Operator Class: _____ Certificate No: _____ Name: _____

5-31-2010 CAS CLOSED

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT GROUP: Monthly Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

MONITORING GROUP NUMBER: R-002
 MONITORING GROUP DESC:

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 6-1-2010 To 6-30-2010

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			12.1		MG/L	1	
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement			12 (Max.)		MG/L		Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.73		MG/L	0	
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An. Avg.)		MG/L		Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.28	6.4	MG/L	0	
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Grab
pH	Sample Measurement			7.35	7.6	BU	0	
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)	8.5 (Max.)	BU		5 Days/Week
Coliform, Fecal	Sample Measurement			1.4		#/100ML	0	
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement			25 (Max.)		#/100ML		Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.4		MG/L	1	
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			1.0 (Min.)		MG/L		Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	Thomas A. Quinn	763 214-5195	10/07/20

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

6-9-10 Nitrate 12.1, Adjusted AIR & Added seed sludge to Clarifier.
 6-6-10 BOD below 1.0 & 0.5, HAD BODENH setting to LOW. NO PLANT INF FLOW FOR 24 HRS
 ALL EFF TO Rej Pond when under 1.0 ppm.

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP
NUMBER:
MONITORING PERIOD

R-002

PERMIT NUMBER: FLA014315

From: 6-1-2010 To 6-30-2010

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement			2.0	M/L	0		
FARM Code 00530 A	Permit Requirement			5.0 (Max.)	MGL		Every Two Weeks	Grab
Turbidity	Sample Measurement			2.7	NTU	0		
FARM Code 00070 A	Permit Requirement			Report (Max.)	NTU		Continuous	Meter
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From:

6-1-2010 To: 6-30-2010

Facility: Spring Lake Golf and Country Club STP

12.9% CAP

	CBOD5 (MGL)	Focal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1	5.3	1.0W		7.49	4.45	1.0W	0.5	0.010		
2	4.2	1.0W		7.51	4.95	1.0W	0.5	0.009		
3	3.4	1.0W		7.57	4.95	1.0W	0.5	0.017		
4	3.4	1.0W		7.55	4.95	1.0W	0.45	0.016		
5				7.56	4.95		0.45	0.019		
6				7.53	4.4		0.23	0.007		
7	2.6	1.0W		7.25	4.95	1.0W	0.5	0.012		
8	3.7	1.0W		7.44	4.95	1.0W	0.5	0.006		
9	3.6	1.0W	72.1	7.33	4.3	1.0	0.5	0.014	39	44
10	4.3	1.0W		7.34	4.95	1.0W	0.55	0.012		
11				7.41	4.95		1.0	0.012		
12				7.36	4.95		2.7	0.014		
13				7.47	4.7		0.9	0.006		
14	5.0	1.0W		7.33	4.9	1.0W	1.0	0.006		
15	4.9	1.0W		7.32	4.95	1.0W	0.6	0.007		
16	5.1	1.0W		7.45	2.15	1.0W	0.3	0.010		
17	3.9	1.0W		7.42	4.95	1.0W	0.6	0.010		
18				7.50	4.95		0.3	0.019		
19				7.47	4.95		0.235	0.020		
20				7.51	4.65		0.6	0.015		
21	3.0	1.0W		7.44	2.55	1.0W	0.65	0.008		
22	3.0	1.0W		7.38	1.95	1.0W	0.6	0.012		
23	2.7	1.0W		7.43	1.7	1.0W	0.6	0.009		
24				7.37	4.95		0.7	0.012		
25	6.4	1.0W		7.52	4.95	2.0W	1.05	0.018		
26				7.57	4.95		1.00	0.020		
27				7.57	4.95		0.8	0.012		
28	4.6	1.0W	6.73	7.47	2.85	1.0W	0.65	0.007		
29	3.2	1.0W		7.54	4.95	2.0	0.65	0.010		
30	5.1	1.0W	3.44	7.53	2.05	1.4	0.65	0.007		
31										
Total	81.4	19.0W	22.27	223.94	125.25	22.04	20.005	0.355	39	44
Mo. Avg.	4.29	1.0W	7.42	7.5	4.17	1.16	0.67	0.012	1.27	1.47

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 0006798 Name: Thomas A. Quinn

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive

MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESC: including Influent

Sebring, FL 33876

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 6-1-2010 To 6-30-2010

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			12.1		MGL	1		
PARM Code 00620 A Mon. Site No. EPA-01	Permit Requirement			12 (Max.)		MGL		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.73		MGL	0		
PARM Code 80082 Y Mon. Site No. EPA-01	Permit Requirement			20.0 (Ar. Avg.)		MGL		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.28	6.4	MGL	0		
PARM Code 80082 A Mon. Site No. EPA-01	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MGL		Every Two Weeks	Grab
pH	Sample Measurement			7.85	7.6	SU	0		
PARM Code 00400 A Mon. Site No. EPA-01	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			1.4		N/DOML	0		
PARM Code 74055 A Mon. Site No. EPA-01	Permit Requirement			25 (Max.)		N/DOML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.4		MGL	1		
PARM Code 30060 A Mon. Site No. EPA-01	Permit Requirement			0.5 (Min.)		MGL		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	<i>Thomas A. Quinn</i>	863 214-5195	10/07/20

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

6-6-10 Search Below 0.5. Search Setting to Low. NO PLANT INF FLOW FOR ± 16 HRS
 ALL EFF SWITCHED TO Reject Pond, via Electric Valve. WHEN UNDER 1.0 MIN (SEARCH)

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY:

Spring Lake Golf and Country Club STP

MONITORING GROUP
NUMBER:
MONITORING PERIOD

R-001

From: 6-1-2010 To

PERMIT NUMBER: FLA014315

6-30-2010

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement				1.24		MGL	0		
PARM Code 00530 Y	Permit Requirement				20.0 (An.Avg.)		MGL		Every Two Weeks	Grab
Mon. Site No. EFA-02										
Solids, Total Suspended	Sample Measurement				1.16	2.0	MGL	0		
PARM Code 00530 A	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)	MGL		Every Two Weeks	Grab
Mon. Site No. EFA-02										
Turbidity	Sample Measurement				2.7		NTU	0		
PARM Code 00070 A	Permit Requirement				Report (Max.)		NTU		Continuous	Meter
Mon. Site No. EFA-02										
Flow	Sample Measurement		1.012	MGD						
PARM Code 50050 1	Permit Requirement		Report (Mo.Avg.)	MGD					5 Days/Week	Flow Totalizer
Mon. Site No. FLW-01										
Solids, Total Suspended	Sample Measurement				1.47		MGL		Monthly	Grab
PARM Code 00530 G	Permit Requirement				Report (Mo.Avg.)		MGL			
Mon. Site No. INF-01										
BOD, Carbonaceous 5 day, 20C	Sample Measurement				1.27		MGL		Monthly	Grab
PARM Code 80082 G	Permit Requirement				Report (Mo.Avg.)		MGL			
Mon. Site No. INF-01										
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: 6-2-2010 To: 6-30-2010

Facility: Spring Lake Golf and Country Club STP

12.9% CAP

	CBOD5 (MGL)	Focal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1	5.3	1.4		7.42	4.95	1.04	0.5	1.010		
2	4.2	1.4		7.51	4.95	1.04	0.5	1.009		
3	3.4	1.4		7.57	4.95	1.04	0.5	1.017		
4	3.4	1.4		7.55	4.95	1.04	0.45	1.016		
5				7.56	4.95		0.15	1.019		
6				7.53	4.9		0.25	1.007		
7	2.6	1.4		7.25	4.95	1.16	0.5	1.012		
8	3.7	1.4		7.44	4.95	1.04	0.5	1.006		
9	5.6	1.4	12.1	7.32	4.3	1.0	0.5	1.014	38	44
10	4.3	1.4		7.34	4.95	1.04	0.35	1.012		
11				7.41	4.95		1.0	1.012		
12				7.36	4.95		2.7	1.014		
13				7.47	4.7		0.9	1.003		
14	3.0	1.4		7.38	4.4	1.04	1.0	1.006		
15	4.9	1.4		7.32	4.95	1.04	0.6	1.007		
16	6.1	1.4		7.45	2.26	1.04	0.3	1.010		
17	3.9	1.4		7.32	4.95	1.04	0.6	1.010		
18				7.50	4.95		0.3	1.019		
19				7.49	4.95		0.255	1.020		
20				7.51	4.65		0.6	1.015		
21	3.0	1.4		7.44	2.55	1.04	0.65	1.008		
22	3.0	1.4		7.39	1.95	1.04	0.6	1.012		
23	2.7	1.4		7.43	1.7	1.04	0.6	1.009		
24				7.57	4.95		0.7	1.012		
25	6.4	1.4		7.52	4.95	2.0	1.05	1.008		
26				7.57	4.95		1.00	1.020		
27				7.38	4.95		0.9	1.012		
28	4.6	1.4	6.73	7.49	2.95	1.04	0.125	1.007		
29	5.2	1.4		7.54	4.95	2.0	0.65	1.010		
30	5.1	1.4	3.44	7.33	2.05	1.4	0.65	1.007		
31							1.0	1.005		
Total	91.4	19.4	22.27	223.92	125.26	22.04	20.05	1.355	38	44
Mo. Avg	4.29	1.4	7.42	7.5	4.17	1.16	0.67	1.012	1.27	1.47

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 0006899 Name: Thomas A. Quinn

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

MONITORING GROUP NUMBER: R-002
 MONITORING GROUP DESC:

COUNTY: Highlands

NO DISCHARGE FROM SITE:
 MONITORING PERIOD

From: 7-1-2010 To 7-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			7.6	MG/L	1		
PARM Code 00620 A	Permit Requirement			12 (Max.)	MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.85	MG/L	1		
PARM Code 80082 Y	Permit Requirement			20.0 (An.Avg.)	MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.88	MG/L	1		
PARM Code 80082 A	Permit Requirement			30.0 (Mo.Avg.)	MG/L		Every Two Weeks	Grab
pH	Sample Measurement			7.9	BU	1		
PARM Code 00400 A	Permit Requirement			6.0 (Min.)	BU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			1.0	#/100ML	1		
PARM Code 74055 A	Permit Requirement			25 (Max.)	#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.10	MG/L	2		
PARM Code 50060 A	Permit Requirement			1.0 (Min.)	MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
THOMAS A. QUINN - OPERATOR	<i>Thomas A. Quinn</i>	864 214-5195	10/09/05

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

7-7-2010 TSS 6.2 mg/L : REASON UNKNOWN 7-6-2010 AT 2.2 mg/L & 7-8-2010 AT 2.4 mg/L.
 7-19-2010 Cl₂ AT 0.15 WHAT UNDER 1.0 AT APPROX 1800. BLEACH FEED WAS SET TO LOW. SWITCHED TO REG POND.
 7-29-2010 Cl₂ AT 0.10 APPEARED TO BE RUNNING OK ON 7/27/2010 & ALSO ON 7/29/10 UNTIL 0300 WHEN IT
 WENT BELOW 1.0 mg/L. AUTO VALVE SWITCHED AS REQUIRED.

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP
NUMBER:
MONITORING PERIOD

R-002

PERMIT NUMBER: FLA014315

From: 7-1-2010 To 7-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended PARM Code 00530 A Mon. Site No. EFA-02	Sample Measurement			6.2		1		
	Permit Requirement			5.0 (Max.)			Every Two Weeks	Grab
Turbidity PARM Code 00070 A Mon. Site No. EFA-02	Sample Measurement			4.2		5		
	Permit Requirement			Report (Max.)			Continuous	Meter
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							

DAILY SAMPLE RESULTS - PART B

 Permit Number:
 Monitoring Period:

FLA014315

From:

7-21-2010

To:

7-31-2010

Facility: Spring Lake Golf and Country Club STP

16.8% CAP

	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (mg N) (MGL)	pH (SU)	TRC (Per Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1	5.3	1.1L	2.87	7.4	3.35	1.04	0.65	1.013		
2				7.6	4.95		0.45	1.012		
3				7.6	4.40		1.15	1.023		
4				7.5	4.96		1.5	1.026		
5				7.6	2.95		2.0	1.046		
6	3.9	1.4	2.95	7.3	1.35	2.2	4.2	1.016	2.8	2.2
7	3.7	1.1L		7.3	1.2	*6.2	4.1	1.027		
8	5.0	1.1L		7.3	2.05	2.4	1.85	1.009		
9	2.6	1.1L		7.3	3.25	3.2	0.65	1.021		
10				7.4	4.95		1.5	1.013		
11				7.5	4.95		0.3	1.014		
12	3.8	* 1.45		7.5	4.95	1.04	0.45	1.007		
13	4.4	1.1L	4.00	7.4	4.95	1.04	0.6	1.010		
14	3.3	1.1L		7.4	3.05	1.04	0.6	1.013		
15	2.1	1.1L		7.4	3.25	1.04	0.6	1.007		
16		1.1L		7.4	4.95		0.45	1.007		
17				7.4	4.95		2.1	1.014		
18				7.4	4.95		0.9	1.011		
19	3.6	1.4		7.4	* 0.15	1.04	0.65	1.008		
20	6.4	1.4		7.3	4.95	1.04	0.6	1.008		
21	4.0	1.1L		7.5	4.45	1.04	0.65	1.008		
22	3.6	1.0	7.59	7.3	4.95	1.04	0.6	1.010		
23				7.4	4.95		0.45	1.016		
24				7.4	4.95		0.45	1.016		
25				7.5	4.95		0.45	1.006		
26	5.0	1.1L		7.4	4.95	5.0	0.35	1.013		
27	4.9	1.1L		7.4	4.55	1.04	0.6	1.006		
28	3.9	1.1L		7.3	* 0.10	1.04	0.6	1.013		
29	2.04	1.1L		7.3	4.95	1.04	0.6	1.007		
30				7.4	1.05		0.95	1.000		
31				7.3	4.95		0.65	1.017		
Total	66	17.4	17.26	249.6	116.3	31.0	31.65	1.419	2.8	2.2
Mo. Avg	3.99	1.1L	4.3	7.41	3.75	1.8	1.0	1.013	0.9	0.71

PLANT STAFFING:

Day Shift Operator	Class: _____	Certificate No: _____	Name: _____
Evening Shift Operator	Class: _____	Certificate No: _____	Name: _____
Night Shift Operator	Class: _____	Certificate No: _____	Name: _____
Lead Operator	Class: <u>B</u>	Certificate No: <u>0006894</u>	Name: <u>Thomas A Quinn</u>

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESC: , including Influent

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 7-1-2010 To 7-31-2010

Parameter	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement		7.59		MG/L	0	
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement		12 (Max.)		MG/L		Every Two Weeks Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement		2.95		MG/L	0	
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement		20.0 (An. Avg.)		MG/L		Every Two Weeks Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement		3.99	6.4	MG/L	0	
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement		30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks Grab
pH	Sample Measurement		7.3	7.6	SA	0	
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement		6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week Grab
Coliform, Fecal	Sample Measurement		1.41		#/100ML	0	
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement		25 (Max.)		#/100ML		Every Two Weeks Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement		0.1		MG/L	2	
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement		0.5 (Min.)		MG/L		Continuous Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	Thomas A. Quinn	863 214-5195	10/08/25

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

7-19-2010 Ch at 0.15, wind under 1.0 at approx 1900 - FRED 547 To LOW, Auto valve switched to Reg'd pond as required.
 7-28-2010 Ch at 0.10, appeared to be running OK on 7-29-2010 & also 7-29-10 until 0300 when it went below 1.0 & 0.5 MG/L. Auto valve switched as required to Reg pond.

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP NUMBER:
MONITORING PERIOD

R-001

PERMIT NUMBER: FLA014315

From: 7-1-2010 To 7-31-2010

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement				1.21		MG/L	0		
PARM Code 00530 Y	Permit Requirement				20.0 (An.Avg.)		MG/L		Every Two Weeks	Grab
Solids, Total Suspended	Sample Measurement				1.9	6.2	MG/L	0		
PARM Code 00530 A	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
Turbidity	Sample Measurement				4.2		NTU	0		
PARM Code 00070 A	Permit Requirement				Report (Max.)		NTU		Continuous	Meter
Flow	Sample Measurement	.013	MGD							
PARM Code 50050 1	Permit Requirement	Report (Mo.Avg.)	MGD						5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement				0.71		MG/L	0		
PARM Code 00530 G	Permit Requirement				Report (Mo.Avg.)	0.75	MG/L		Monthly	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement				0.9		MG/L	0		
PARM Code 80082 G	Permit Requirement				Report (Mo.Avg.)		MG/L		Monthly	Grab
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: 7-1-2010 To: 7-31-2010

Facility: Spring Lake Golf and Country Club STP

16.9 CAD

	CBOD5 (MGL)	Focal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)	
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530	
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01	
1	3.3	1.4	2.92	7.4	3.95	1.04	0.65	0.013			
2				7.6	4.95		0.45	0.019			
3				7.6	4.40		1.15	0.023			
4				7.5	4.95		1.5	0.026			
5				7.6	2.95		2.0	0.046			
6	3.8	1.4	2.95	7.2	1.95	2.4	4.2	0.016	2.9	2.2	
7	3.7	1.4		7.3	1.20	6.2	4.1	0.027			
8	5.0	1.4		7.3	2.05	2.4	1.95	0.028			
9	2.5	1.4		7.3	3.05	3.2	0.65	0.021			
10				7.4	4.95		1.5	0.013			
11				7.5	4.95		0.3	0.014			
12	3.2	* 1.0		7.5	4.95	1.04	0.45	0.007			
13	4.2	1.4	4.00	7.4	4.95	1.04	0.6	0.010			
14	3.3	1.4		7.4	3.05	1.04	0.6	0.012			
15	2.1	1.4		7.4	3.05	1.04	0.6	0.007			
16		1.4		7.4	4.95		0.45	0.010			
17				7.4	4.95		2.1	0.014			
18				7.4	4.95		0.9	0.021			
19	3.6	1.4		7.4	* 0.15	1.04	0.65	0.008			
20	6.4	1.4		7.3	4.95	1.04	0.6	0.008			
21	4.6	1.4		7.5	4.95	1.04	0.65	0.008			
22	2.6	1.4	7.59	7.3	4.95	1.04	0.6	0.010			
23				7.4	4.95		0.45	0.016			
24				7.4	4.95		0.45	0.016			
25				7.5	4.95		0.45	0.006			
26	5.0	1.4		7.4	4.95	5.0	0.35	0.013			
27	4.8	1.4		7.4	1.55	1.04	0.6	0.006			
28	3.9	1.4		7.3	* 0.10	1.04	0.6	0.013			
29	2.04	1.4		7.3	4.95	1.04	0.6	0.007			
30				7.4	1.05		0.35	0.000			
31				7.3	4.95		0.65	0.017			
Total	66	17.4	17.26	229.1	116.9	31.0	31.15	1.419	2.9	2.2	
Mo. Avg	3.88	1.4	4.3	7.41	3.75	1.8	1.0	0.013	0.9	0.71	

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 0006298 Name: Thomas A. Quinn

7-3-2010 CAS CLOSED

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

MONITORING GROUP: R-002
 NUMBER:
 MONITORING GROUP DESC:

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 9-1-2010 To 9-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			11.6		MG/L	0		
PARM Code 00620 A Mon. Site No. BFA-01	Permit Requirement			12 (Max.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.91		MG/L	0		
PARM Code 80082 Y Mon. Site No. BFA-01	Permit Requirement			20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.92	6.0	MG/L	0		
PARM Code 80082 A Mon. Site No. BFA-01	Permit Requirement			30.0 (Ms. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
pH	Sample Measurement			7.3	7.5	SU	0		
PARM Code 00400 A Mon. Site No. BFA-01	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			1.0		#/100ML	0		
PARM Code 74055 A Mon. Site No. BFA-01	Permit Requirement			25 (Max.)		#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			1.05		MG/L	2		
PARM Code 50060 A Mon. Site No. BFA-01	Permit Requirement			1.0 (Min.)		MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YYMM/DD)
Thomas A. Quinn - Operator	<i>Thomas A. Quinn</i>	363 214-5195	10/09/22

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

9-1-10 cl pump was not pumping bleach to eel. Pump appeared to be air locked - Released bypass & pump started back up. Auto VALVE switched to Res' panel as required
 9-27-10 cl pump not pumping enough bleach to eel. Corrosit Read 0/0. Auto VALVE switched to Res' panel as required.
 9-30-10 TSS hi at 6.8 mg/L. sample on 9-31-10 was 1.06

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP
NUMBER:
MONITORING PERIOD

R-002

PERMIT NUMBER: FLA014315

From: 8-1-2010 To 8-31-2010

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended PARM Code 00530 A Mon. Site No. EFA-02	Sample Measurement				6.9			mg/l	1		
	Permit Requirement				5.0 (Max.)			MG/L		Every Two Weeks	Grab
Turbidity PARM Code 00070 A Mon. Site No. EFA-02	Sample Measurement				0.75			NTU	0		
	Permit Requirement				Report (Max.)			NTU		Continuous	Meter
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period:

FLA014315
From: 8-1-2010 To: 8-31-2010

Facility: Spring Lake Golf and Country Club STP

7.9% CAP

	CBOD5 (MG/L)	Focal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MG/L)	pH (SU)	TRC (For Disinfect.) (MG/L)	TSS (MG/L)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MG/L)	TSS (MG/L)	
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530	
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01	
1				7.4	0.05		0.65	1.011			
2	3.3	1.4		7.4	4.95	1.04	0.85	1.008			
3	2.5	1.4		7.4	2.9	1.04	0.65	1.008			
4	5.0	1.4		7.3	3.5	1.04	0.5	1.008			
5	3.9	1.4		7.4	4.28	1.04	0.5	1.006			
6			11.2	7.4	2.15		0.35	1.012			
7				7.4	3.45		0.55	1.010			
8				7.4	3.95	4.79	0.3	1.010			
9	3.2	1.4		7.3	1.90	1.04	0.5	1.008			
10	3.3	1.4		7.4	2.15	1.04	0.55	1.007			
11	6.0	1.4		7.4	4.95	1.04	0.55	1.007			
12	3.9	1.4		7.4	3.50	1.04	0.50	1.006			
13				7.4	3.85		0.20	1.008			
14				7.4	2.95		0.85	1.007			
15				7.4	2.90	1.4	0.35	1.009			
16	2.85	1.4		7.4	3.25	1.04	0.50	1.006			
17	2.7	1.4	9.75	7.5	3.95	1.04	0.50	1.007	44	2.2	
18	2.9	1.4		7.5	4.90	1.04	0.45	1.005			
19	2.2	1.4		7.5	2.75		0.50	1.008			
20			10.3	7.4	2.45		0.35	1.014			
21				7.5	3.25		0.35	1.008			
22				7.5	2.15		0.40	1.016			
23	5.4	1.4		7.4	3.20	1.04	0.30	1.011			
24	3.6	1.4		7.5	3.50	1.04	0.50	1.017			
25	4.8	1.4		7.4	3.45	1.04	0.45	1.020			
26	5.8	1.10		7.5	4.90	2.2	0.45	1.012			
27				7.4	0.15		0.25	1.010			
28				7.5	4.25		0.65	1.015			
29				7.5	4.45		0.30	1.011			
30	-	1.10		7.5	4.95	6.8	0.25	1.007			
31	2.6	1.4		7.5	3.95	1.04	0.40	1.011			
Total	64.9	19.4	31.65	730.3	104.9	25.4	14.505	1.306	44	2.2	
Mo. Avg.	3.92	1.4	10.55	7.4	3.38	1.41	0.47	1.010	1.4	0.21	

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 0002998 Name: Thomas A Quinn

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.

PERMIT NUMBER

FLA014315

MAILING ADDRESS: 100 Country Club Drive
Sebring, FL 33870

LIMIT:
CLASS SIZE:

Final
N/A

REPORT:
GROUP:

Monthly
Domestic

FACILITY: Spring Lake Golf and Country Club STP
LOCATION: 100 Country Club Drive

MONITORING GROUP
NUMBER:

R-001

Sebring, FL 33876

MONITORING GROUP DESC: , including Influent

COUNTY: Highlands

NO DISCHARGE FROM
SITE:

MONITORING PERIOD

From: 8-1-2000 To 8-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			11.6		MG/L	0		
PARM Code 00620 A	Permit Requirement			12 (Max.)		MG/L		Every Two Weeks	Grab
Mon. Site No. EPA-01									
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.91		MG/L	0		
PARM Code 80082 Y	Permit Requirement			20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
Mon. Site No. EPA-01									
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.82	6.0	MG/L	0		
PARM Code 80082 A	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
Mon. Site No. EPA-01									
pH	Sample Measurement			7.3	7.5	SU	0		
PARM Code 00400 A	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Mon. Site No. EPA-01									
Coliform, Fecal	Sample Measurement			1.44		#/100ML	0		
PARM Code 74055 A	Permit Requirement			25 (Max.)		#/100ML		Every Two Weeks	Grab
Mon. Site No. EPA-01									
Total Residual Chlorine (For Disinfection)	Sample Measurement			.05		MG/L	2		
PARM Code 90060 A	Permit Requirement			0.5 (Min.)		MG/L		Continuous	Meter
Mon. Site No. EPA-01									

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A Quinn - Operator	Thomas A Quinn	913 214 5195	10/09/22

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

8-7-10 c/c pump was not pumping enough to ccc. Pump appeared to be air locked - Released Bypass + pump started back up. Auto valve switched to Reject Pond as required
 8-27-10 c/c pump not pumping enough to ccc. Correct Feed % . Auto valve switched to Rej pond as required.

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP R-001
 NUMBER:
 MONITORING PERIOD From: 8-1-2010 To 8-31-2010

PERMIT NUMBER: FLA014315

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement			1.23	MG/L	0		
PARM Code 00530 Y	Permit Requirement			20.0 (An.Avg.)	MG/L		Every Two Weeks	Grab
Mon.Site No. EPA-02								
Solids, Total Suspended	Sample Measurement			1.41	MG/L	0		
PARM Code 00530 A	Permit Requirement			30.0 (Mo.Avg.)	MG/L		Every Two Weeks	Grab
Mon.Site No. EPA-02				6.8 (Max.)				
Turbidity	Sample Measurement			0.95	NTU	0		
PARM Code 00070 A	Permit Requirement			Report (Max.)	NTU		Continuous	Meter
Mon.Site No. EPA-02								
Flow	Sample Measurement		0.10					
PARM Code 50050 I	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
Mon.Site No. FLW-01								
Solids, Total Suspended	Sample Measurement			0.71	MG/L			
PARM Code 00530 G	Permit Requirement			Report (Mo.Avg.)	MG/L		Monthly	Grab
Mon.Site No. INF-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.4	MG/L			
PARM Code 80082 G	Permit Requirement			Report (Mo.Avg.)	MG/L		Monthly	Grab
Mon.Site No. INF-01								
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period:

FLA014315
From: 9-1-2010 To: 9-31-2010

Facility: Spring Lake Golf and Country Club STP

7.3% CAP

	CBOD5 (MG/L)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MG/L)	pH (SU)	TRC (For Disinfect.) (MG/L)	TSS (MG/L)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MG/L)	TSS (MG/L)	
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530	
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01	
1				7.4	*0.05		0.65	.011			
2	3.3	1.4		7.4	4.95	1.04	0.65	.008			
3	2.5	1.4		7.4	2.9	1.04	0.60	.008			
4	5.0	1.4		7.3	2.5	1.04	0.5	.008			
5	3.9	1.4		7.9	4.25	1.04	0.5	.006			
6			11.6	7.4	2.15		0.35	.012			
7				7.4	3.45		0.55	.010			
8				7.4	3.95		0.3	.010			
9	3.2	1.4		7.3	1.90	1.04	0.5	.008			
10	3.3	1.4		7.4	2.15	1.04	0.55	.007			
11	6.0	1.4		7.7	4.55	1.04	0.55	.007			
12	3.9	1.4		7.9	3.50	1.04	0.50	.006			
13				7.4	3.95		0.20	.008			
14				7.4	2.95		0.255	.007			
15				7.4	2.90		0.35	.009			
16	3.43	1.4		7.4	3.25	1.4	0.50	.006			
17	2.7	1.4	9.75	7.5	2.95	1.04	0.5	.007	44	2.2	
18	2.9	1.4		7.5	4.90	1.04	0.65	.005			
19	2.9	1.4		7.5	2.75	1.04	0.50	.008			
20			10.5	7.4	2.45		0.35	.014			
21				7.5	3.25		0.35	.009			
22				7.5	2.75		0.40	.016			
23	5.4	1.4		7.4	3.20	1.04	0.30	.011			
24	3.6	1.4		7.5	3.30	1.04	0.50	.017			
25	4.8	1.4		7.4	3.45	1.04	0.45	.020			
26	5.8	1.4		7.5	4.90	2.2	0.45	.022			
27				7.4	*0.15		0.25	.010			
28				7.5	4.95		0.65	.015			
29				7.5	4.95		0.50	.011			
30	-	1.4		7.5	4.95	*6.8	0.75	.007			
31	2.6	1.4		7.5	4.95	1.04	0.40	.011			
Total	64.9	19.4	31.65	230.3	104.9	25.4	14.505	1.306	44	2.2	
Mo. Avg	3.82	1.4	10.55	7.4	3.38	0.82	0.47	.010	1.4	0.71	

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 0006799 Name: Thomas A. Quinn

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

MONITORING GROUP NUMBER: R-002
 MONITORING GROUP DESC:

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 2-7-2010 To 2-30-2010

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement				9.49		MG/L	0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement				12 (Max.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement				3.01		MG/L	0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement				20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement				3.95	8.1	MG/L	0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement				30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
pH	Sample Measurement				7.28	7.53	SU	0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement				6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1.4		#/100ML	0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement				25 (Max.)		#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				4.45		MG/L	0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement				1.0 (Min.)		MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A Quinn - Operator	<i>Thomas A Quinn</i>	363 214 5195	10/10/25

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP
NUMBER:
MONITORING PERIOD

R-002

PERMIT NUMBER: FLA014315

From: 9-1-2010 To 9-30-2010

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended PARM Code 00530 A Mon. Site No. EFA-02	Sample Measurement			1.8		MGL		
	Permit Requirement			5.0 (Max.)		MGL	Every Two Weeks	Grab
Turbidity PARM Code 00070 A Mon. Site No. EFA-02	Sample Measurement			1.35		NTU		
	Permit Requirement			Report (Max.)		NTU	Continuous	Meter
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: 9-7-2010 To: 9-30-2010

Facility: Spring Lake Golf and Country Club STP

24.3
79 5-9 CAP

	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1	4.7	1.0		7.42	4.95	1.010	0.45	1.007		
2	3.5	1.0		7.45	4.95	1.014	0.5	1.006		
3	4.8		9.49	7.47	4.95		0.75	1.010		
4				7.52	4.95		0.35	1.011		
5				7.51	4.95		0.7	1.013		
6	LAB	Closed		7.50	4.95		0.95	1.023		
7	3.1	1.0		7.46	4.95	1.040	0.85	1.015		
8	3.9	1.0		7.42	4.95	1.041	0.95	1.010		
9	3.0	1.0	4.26	7.28	4.90	1.041	0.75	1.014		
10	2.4	1.0		7.39	4.95	1.041	1.35	1.009		
11				7.42	4.95		0.50	1.010		
12				7.46	4.95		0.635	1.010		
13	3.3	1.0	1.83	7.49	4.95	1.041	0.55	1.010		
14	6.6	1.0		7.39	4.95	1.041	0.5	1.013		
15	2.3	1.0		7.41	4.95	1.041	0.5	1.008	2.6	2.7
16	3.1	1.0		7.39	4.95	1.041	1.35	1.004		
17								1.000		
18								1.000		
19								1.000		
20	3.8	1.0		7.41	4.95	1.041	-	1.007		
21	3.1	1.0		7.36	4.95	1.041	0.65	1.011		
22	3.4	1.0		7.38	4.95	1.041	0.65	1.008		
23	2.04	1.0		7.39	4.95	1.041	0.75	1.010		
24				7.48	4.95		0.65	1.010		
25				7.45	4.95		0.70	1.010		
26				7.39	4.95		0.75	1.009		
27	8.1	1.0	7.70	7.40	4.95	1.041	0.55	1.009		
28	4.9	1.0		7.34	4.60	1.041	0.70	1.010		
29	3.3	1.0		7.39	4.95	1.0	0.65	1.012		
30	4.1	1.0		7.37	4.95	1.041	0.85	1.015		
31										
Total	79.2	19.0	23.38	200.32	182.65	18.9	17.015	0.302	2.6	2.7
Mo. Avg.	3.85	1.0	5.84	7.42	4.91	0.7	0.63	0.011	0.97	0.9

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 0006888 Name: Thomas A. Quinn

9-6-2010 LAB CLOSED

9-16-9-19-2010: ELECTRICAL PROBLEM AT TRANSFER POND, ALL FLOW TO ROCKET POND

9-20-2010 TURBIDITY METER WENT OUT, CALLED ALLEN SLATER - BRWA

DEP Form 62-620.910(10), Effective November 29, 1994

9-21-2010 TURBIDITY METER ROSET OK.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESC: , including Influent

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 9-1-2010 To 9-30-2010

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			0.11		MG/L	5		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement			12 (Max.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.3		MG/L	5		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.3	3.3	MG/L	5		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
pH	Sample Measurement			7.4	7.4	SU	5		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			1.0		#/100ML	5		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement			25 (Max.)		#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			4.95		MG/L	5		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			0.5 (Min.)		MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A Quinn - Operator	<i>Thomas A Quinn</i>	863 214-5195	10/10/25

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP R-001
 NUMBER:
 MONITORING PERIOD From: 9-7-2010 To 9-30-2010

PERMIT NUMBER: FLA014315

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement									
PARM Code 00530 Y Mon. Site No. EFA-02	Permit Requirement				20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
Solids, Total Suspended	Sample Measurement				1.0 W	1.0 W	MG/L			
PARM Code 00530 A Mon. Site No. EFA-02	Permit Requirement				30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
Turbidity	Sample Measurement				7.43		NTU			
PARM Code 00070 A Mon. Site No. EPA-02	Permit Requirement				Report (Max.)		NTU		Continuous	Meter
Flow	Sample Measurement	0.009	MGD							
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Requirement	Report (Mo. Avg.)	MGD						5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement				42		MG/L			
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement				Report (Mo. Avg.)		MG/L		Monthly	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement				55		MG/L			
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement				Report (Mo. Avg.)		MG/L		Monthly	Grab
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014315**
 Monitoring Period: From: 9-1-2010 To: 9-30-2010

Facility: **Spring Lake Golf and Country Club STP**

	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80062	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16				7.39	4.95		1.35	0.606		
17	3.3	1.4	0.11	7.39	4.95	1.60	1.7	0.610	55	42
18				7.41	4.95		1.25	0.610		
19				7.43	4.95		0.758	0.607		
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										
31										
Total	3.3	1.4	0.11	14.77	19.8	1.60	5.455	0.632	55	42
Mo. Avg.	3.3	1.4	0.11	7.38	4.95	1.60	1.86	0.609	55	42

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: A Certificate No: 0006898 Name: THOMAS A. QUINN

9-16-2010 → 9-17-2010 ELECTRICAL PROBLEM AT XFER POND, ALL FLOW TO REJECT POND

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
MAILING ADDRESS: 100 Country Club Drive
Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
CLASS SIZE: N/A

REPORT: Monthly
GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
LOCATION: 100 Country Club Drive
Sebring, FL 33876

MONITORING GROUP NUMBER: R-002
MONITORING GROUP DESC:

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 10-1-2010 To 10-31-2010

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement				8.95		MG/L	0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement				12 (Max.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement				3.22		MG/L	0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement				20.0 (An.Avg.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement				4.91	7.2	MG/L	0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement				30.0 (Mo.Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
pH	Sample Measurement				7.3	7.6	SU	0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement				6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement				1.0		#/100ML	0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement				25 (Max.)		#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement				3.8		MG/L	0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement				1.0 (Min.)		MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	<i>Thomas A. Quinn</i>	214 5195 963	10/11/10

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP
NUMBER:
MONITORING PERIOD

R-002

PERMIT NUMBER: FLA014315

From: 10-1-2010 To 10-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended PARM Code 00530 A Mon. Site No. EFA-02	Sample Measurement			2.6		mg/L	5		
	Permit Requirement			5.0 (Max.)		MG/L		Every Two Weeks	Grab
Turbidity PARM Code 00070 A Mon. Site No. EFA-02	Sample Measurement			1.2		NTU	5		
	Permit Requirement			Report (Max.)		NTU		Continuous	Meter
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315

From: 10-17-2010 To: 10-31-2010

Facility: Spring Lake Golf and Country Club STP

24.3% Cap

	CBOD5 (MG/L)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MG/L)	pH (SU)	TRC (For Disinfect.) (MG/L)	TSS (MG/L)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MG/L)	TSS (MG/L)	
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530	
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01	
1				7.4	4.95		0.50	0.17			
2				7.4	4.95		0.55	0.14			
3				7.3	3.95		0.55	0.14			
4	5.4	1.0		7.3	3.90	1.00	0.45	0.12			
5	3.4	1.0		7.3	4.95	1.00	0.50	0.19			
6	7.5	1.0		7.4	4.95	1.00	0.43	0.19			
7	2.4	1.0		7.4	4.95	2.00	0.50	0.09			
8				7.5	4.95		1.05	0.12			
9				7.5	4.95		0.95	0.14			
10				7.6	4.95		0.75	0.19			
11	3.1	1.0		7.6	4.95	1.00	0.55	0.19			
12	4.9	1.0		7.5	4.95	1.0	0.60	0.19			
13	5.4	1.0	9.25	7.5	4.95	1.0	0.45	0.06	66	49	
14	5.3	1.0		7.4	4.95	1.00	0.50	0.19			
15				7.4	4.95		0.50	0.12			
16				7.4	4.95		1.00	0.14			
17				7.4	4.95		1.2	0.11			
18	6.3	1.0		7.4	4.95	2.0	1.05	0.10			
19	3.9	1.0		7.3	4.95	1.6	0.7	0.12			
20	5.0	1.0		7.4	4.95	1.6	0.75	0.09			
21	7.9	1.0		7.4	4.95	1.00	0.70	0.14			
22				7.4	4.95		0.80	0.16			
23				7.4	4.95		0.65	0.16			
24				7.4	4.95	2.0	0.65	0.12			
25	3.4	1.0		7.4	4.95	2.6	0.56	0.09			
26	5.6	1.0		7.3	4.95	1.00	0.50	0.17			
27	4.3	1.0		7.4	4.95	1.60	0.40	0.16			
28	3.3	1.0	9.95	7.4	4.95	1.00	0.40	0.16			
29				7.3	4.95		0.75	0.16			
30				7.3	4.95		0.75	0.15			
31				7.3	3.90		0.35	0.13			
Total	76.9	16.0	17.2	229.4	149.05	20.0	18.99	0.416	66	49	
Mo. Avg	4.91	1.0	0.55	7.4	4.8	0.64	0.61	0.013	2.13	1.55	

1.25

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 0006899 Name: Thomas A Quinn

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESC: , including Influent

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 10-1-2010 To 10-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement							
PARM Code 00620 A Mon. Site No. EPA-01	Permit Requirement			12 (Max.)			Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement							
PARM Code 80082 Y Mon. Site No. EPA-01	Permit Requirement			20.0 (An.Avg.)			Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement							
PARM Code 80082 A Mon. Site No. EPA-01	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)		Every Two Weeks	Grab
pH	Sample Measurement							
PARM Code 00400 A Mon. Site No. EPA-01	Permit Requirement			6.0 (Min.)	8.5 (Max.)		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement							
PARM Code 74055 A Mon. Site No. EPA-01	Permit Requirement			25 (Max.)			Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement							
PARM Code 50060 A Mon. Site No. EPA-01	Permit Requirement			0.5 (Min.)			Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
THOMAS M. QUINN - OPERATOR	<i>Thomas M. Quinn</i>	463 214-5195	10/11/10

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

NO FLOW TO SYSTEM R-001

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP
NUMBER:
MONITORING PERIOD

R-001

PERMIT NUMBER: FLA014315

From: 10-1-2010 To 10-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement							
PARM Code 00530 Y Mon. Site No. EFA-02	Permit Requirement			20.0 (An. Avg.)	MG/L		Every Two Weeks	Grab
Solids, Total Suspended	Sample Measurement							
PARM Code 00530 A Mon. Site No. EFA-02	Permit Requirement			30.0 (Mo. Avg.) 60.0 (Max.)	MG/L		Every Two Weeks	Grab
Turbidity	Sample Measurement							
PARM Code 00070 A Mon. Site No. EFA-02	Permit Requirement			Report (Max.)	NTU		Continuous	Meter
Flow	Sample Measurement							
PARM Code 50050 I Mon. Site No. FLW-01	Permit Requirement	Report (Mo. Avg.)	MGD				5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement							
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement			Report (Mo. Avg.)	MG/L		Monthly	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement							
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			Report (Mo. Avg.)	MG/L		Monthly	Grab
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315

From: 10-7-2010 To: 10-31-2010

Facility: Spring Lake Golf and Country Club STP

	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
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20										
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22										
23										
24										
25										
26										
27										
28										
29										
30										
31										
Total										
Mo. Avg.										

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____

Evening Shift Operator Class: _____ Certificate No: _____ Name: _____

Night Shift Operator Class: _____ Certificate No: _____ Name: _____

Lead Operator Class: B Certificate No: 0006999 Name: Thomas J. Quinn

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PET
copy
11/2010

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
MAILING ADDRESS: 100 Country Club Drive
Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
CLASS SIZE: N/A

REPORT: Monthly
GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
LOCATION: 100 Country Club Drive
Sebring, FL 33876

MONITORING GROUP NUMBER: R-002

MONITORING GROUP DESC:

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 11-1-2010 To 11-30-2010

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			9.62	-	MG/L	5		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement			12 (Max.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.27		MG/L	5		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.5	6.4	MG/L	5		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
pH	Sample Measurement			7.3	7.5	SU	5		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			1.4		#/100ML	5		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement			25 (Max.)		#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.75		MG/L	1		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			1.0 (Min.)		MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	Thomas A. Quinn	863 214-5195	10/11/19

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

11/17/2010 CL27 ANALYZER AT 0.75 MG/L T-GRAB WAS 0.80 MG/L, FOUND ON ARRIVAL.

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP
NUMBER:
MONITORING PERIOD

R-002

PERMIT NUMBER: FLA014315

From: 4-1-2010 To 11-30-2010

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended PARM Code 00530 A Mon. Site No. EFA-02	Sample Measurement				2.0						
	Permit Requirement				5.0 (Max.)			MGL MBL	0	Every Two Weeks	Grab
Turbidity PARM Code 00070 A Mon. Site No. EFA-02	Sample Measurement				1.75			NTU	0		
	Permit Requirement				Report (Max.)			NTU		Continuous	Meter
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA014315
Monitoring Period: From: 11-1-2010 To: 11-30-2010

Facility: Spring Lake Golf and Country Club STP

27.9% CAP

	CBOD5 (MG/L)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MG/L)	pH (SU)	TRC (For Disinfect.) (MG/L)	TSS (MG/L)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MG/L)	TSS (MG/L)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1	4.9	1.4	6.23	7.35	4.55	1.04	0.35	0.013		
2	4.5	1.4		7.37	5.00	1.04	0.40	0.013		
3	3.1	1.4		7.39	4.95	1.04	0.40	0.014		
4				7.4	4.25		0.30	0.019		
5	2.7	1.4		7.4	2.05	1.04	0.25	0.015		
6	19.0			7.4	1.55		0.75	0.022		
7				7.4	1.55		1.15	0.000		
8	3.0	1.4	6.46	7.3	2.95	2.0	1.0	0.012	2.31	56
9	2.7	1.4		7.3	1.7	1.04	1.55	0.019		
10	6.4	1.4		7.2	2.5	1.04	1.95	0.020		
11	2.8	1.4		7.2	2.7	1.04	1.55	0.018		
12				7.2	5.0		1.50	0.022		
13				7.3	4.95		1.15	0.019		
14				7.4	4.3		1.60	0.019		
15	3.8	1.4	9.62	7.2	3.65	1.4	1.4	0.016	114	58
16	3.8	1.4		7.3	5.00	1.0	1.35	0.015		
17	4.9	1.4		7.4	5.00	1.0	1.60	0.015		
18	2.6	1.4		7.4	4.95	1.04	0.70	0.014		
19				7.5	5.00		0.95	0.018		
20				7.5	5.00		0.90	0.015		
21				7.4	4.95		0.40	0.016		
22	2.0	1.4		7.5	4.95	1.04	1.75	0.014		
23	2.04	1.4		7.3	4.95	1.04	0.40	0.013		
24	4.8	1.4		7.4	5.00	1.04	0.35	0.014		
25				7.4	5.00		0.35	0.014		
26				7.4	5.00		0.35	0.015		
27				7.3	4.95		0.40	0.017		
28				7.3	4.95		0.35	0.012		
29	2.0	1.4		7.3	4.95	1.04	0.90	0.014		
30	2.5	1.4		7.3	4.95	1.04	0.50	0.013		
31										
Total	59.5	17.2	22.31	220.91	120.55	19.4	24.65	0.46	345	114
Mo. Avg.	3.5	1.4	7.44	7.3	4.02	1.08	0.92	0.015	172.5	57

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: S Certificate No: 0006998 Name: Thomas A. Quinn

X LAB CLOSED 11-25-10 + 11-26-10

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

MONITORING GROUP: R-001
 NUMBER:
 MONITORING GROUP DESC: , including Influent

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 11-1-2010 To 11-30-2010

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			9.62		MG/L	0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement			12 (Max.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.27		MG/L	0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.5	6.4	MG/L	0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
pH	Sample Measurement			7.3	7.5	SU	0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			1.0		#/100ML	0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement			25 (Max.)		#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.75		MG/L	0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			0.5 (Min.)		MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	<i>Thomas A. Quinn</i>	933 214-5195	10/12/19

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP R-001

PERMIT NUMBER: FLA014315

NUMBER:

MONITORING PERIOD From: 11-1-2010 To 11-30-2010

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement				1.17		MG/L	0		
PARM Code 00530 Y Mon. Site No. EFA-02	Permit Requirement				20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
Solids, Total Suspended	Sample Measurement				2.0	2.0	MG/L	0		
PARM Code 00530 A Mon. Site No. EFA-02	Permit Requirement				30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
Turbidity	Sample Measurement				1.75		NTU	0		
PARM Code 00070 A Mon. Site No. EFA-02	Permit Requirement				Report (Max.)		NTU		Continuous	Meter
Flow	Sample Measurement	.021		MGD						
PARM Code 50050 1 Mon. Site No. FLW-01	Permit Requirement	Report (Mo. Avg.)		MGD					5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement				57		MG/L	0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement				Report (Mo. Avg.)		MG/L		Monthly	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement				172.5		MG/L	0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement				Report (Mo. Avg.)		MG/L		Monthly	Grab
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: 11-1-2010 To: 11-30-2010

Facility: Spring Lake Golf and Country Club STP

	CBOD5 (MG/L)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MG/L)	pH (SU)	TRC (For Disinfect.) (MG/L)	TSS (MG/L)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MG/L)	TSS (MG/L)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1										
2										
3										
4										
5										
6										
7					0.75		1.15	0.020		
8	4.7	1.16	6.46	7.3	2.35	2.0	1.0	0.001	231	56
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										
31										
Total	4.7	1.16	6.46	7.3		2.0		0.021	231	56
Mo. Avg.										

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____

Evening Shift Operator Class: _____ Certificate No: _____ Name: _____

Night Shift Operator Class: _____ Certificate No: _____ Name: _____

Lead Operator Class: B Certificate No: 0006899 Name: Thomas A Quinn

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

MONITORING GROUP NUMBER: R-002
 MONITORING GROUP DESC:

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 12-1-2010 To 12-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			21.7		MGL	2		
PARM Code 00620 A	Permit Requirement			12 (Max.)		MGL		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.49		MGL	0		
PARM Code 80082 Y	Permit Requirement			20.0 (Ar. Avg.)		MGL		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.01	6.6	MGL	0		
PARM Code 80082 A	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MGL		Every Two Weeks	Grab
pH	Sample Measurement			7.2	7.5	5U	0		
PARM Code 00400 A	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			1.4		1/100ML	0		
PARM Code 74055 A	Permit Requirement			25 (Max.)		1/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.02		MGL	0		
PARM Code 50060 A	Permit Requirement			1.0 (Min.)		MGL		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YYMMDD)
THOMAS A. GUINN - OPERATOR	<i>Thomas A. Guinn</i>	863 214-5195	11/01/12

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

12-3 NO₂ Hi - TURNED AIR DOWN AS FAR AS POSSIBLE
 12-27 NO₂ Hi - TURNED AIR DOWN AS FAR AS POSSIBLE.
 12-12 Cl₂ 0.02 : CL₂ PUMP OFF, AIR LOCKED, NOT PUMPING, BLEW OFF PRESSURE - FINALLY REPAIRED PUMP AND A
 REASON. RESET OK, ALL FLOW TO ROOT SYSTEM R-0010
 12-21 Cl₂ 0.3 CL₂ PUMP AIR LOCKED, NOT PUMPING, BLEW OFF PRESSURE - REPAIRED : ALL FLOW TO REG SYSTEM R-001

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP NUMBER:

R-002

PERMIT NUMBER: FLA014315

MONITORING PERIOD From: 12-1-2010 To 12-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended PARM Code 00330 A Mon. Site No. EFA-02	Sample Measurement			1.4			MGL	0		
	Permit Requirement			5.0 (Max.)			MGL		Every Two Weeks	Grab
Turbidity PARM Code 00070 A Mon. Site No. EFA-02	Sample Measurement			2.5			NTU	0		
	Permit Requirement			Report (Max.)			NTU		Continuous	Meter
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									

545 Room DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: *12-1-2010* To: *12-31-2010*

Facility: Spring Lake Golf and Country Club STP

30.7 % CAP

	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1	5.3	1.4		7.3	5.00	1.04	0.5	0.11		
2	3.6	1.4		7.4	4.95	1.04	0.6	0.13		
3			21.7	7.4	5.00		0.5	0.13		
4				7.4	5.00		0.45	0.14		
5				7.4	5.00		1.4	0.15		
6	2.8	1.4		7.4	4.95	1.04	1.15	0.15		
7	3.7	1.4		7.4	5.00	1.04	0.7	0.11		
8	4.3	1.4		7.4	5.00	1.04	0.95	0.15		
9	2.8	1.4		7.4	5.00	1.04	0.95	0.12		
10				7.3	5.00		0.9	0.12		
11				7.3	4.95		0.7	0.21		
12					0.92					
13			12.0							
14	4.4	1.4		7.4	4.99	1.2	2.2	0.12		
15	4.5	1.4		7.4	4.99	1.04	1.4	0.17	79	2.0
16	5.8	1.4		7.4	5.00	1.4	1.05	0.18		
17				7.3	4.55		0.95	0.11		
18				7.3	4.4		1.25	0.18		
19				7.2	3.6		2.45	0.14		
20	4.6	1.4		7.2	1.0	2.0	2.0	0.14		
21					0.3					
22										
23	4.7	1.4		7.5	5.00	1.04	2.5	0.19		
24				7.3	4.45		1.6	0.18		
25				7.2	5.00		2.1	0.16		
26				7.2	3.95		1.8	0.14		
27	3.4	1.4	15.4	7.2	5.00	2.0	1.15	0.15		
28	6.6	1.4		7.3	4.98	1.2	1.13	0.16		
29	2.96	1.4		7.4	4.99	1.2	0.96	0.18		
30	2.3	1.4		7.3	5.00	2.0	1.7	0.24		
31			49.1	7.2	2.1		1.7	0.28		
Total	60.2	15.4	49.1	1979	123.99	19.0	34.29	1.414	79	2.0
Mo. Avg	4.01	1.4	16.4	7.3	4.00 4.2799	1.27	1.27	0.015	2.92	0.74

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: 9 Certificate No: 0006898 Name: Thomas A. Blinn

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESC: , including Influent

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 12-1-2010 To 12-31-2010

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			12.0		MG/L	1		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement			12 (Max.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.48		MG/L	1		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.77	3.4	MG/L	1		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
pH	Sample Measurement			7.2	7.6	SU	1		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			1.4		N/100ML	1		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement			25 (Max.)		N/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.02		MG/L	2		
PARM Code 50060 A Mon. Site No. EPA-01	Permit Requirement			0.5 (Min.)		MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
THOMAS A. QUINN - OPERATOR	THOMAS A. QUINN	733 214-5195	11/01/22

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

12-12-2010 CL2 0.02 GRAB; Cl₂ pump off, AIR LOCKED, NOT PUMPING - Replaced pump with a new one
 ALL FLOW WENT TO REJECT SYSTEM R-001 AS REQUIRED.

12-21-2010 CL2 0.3 GRAB Cl₂ pump AIR LOCKED, NOT PUMPING - REPAIRED; ALL FLOW TO REJECT SYSTEM AS REQUIRED.

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP NUMBER:

R-001

PERMIT NUMBER: FLA014315

MONITORING PERIOD

From: 12-1-2010 To

12-1-2010

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended PARM Code 00530 Y Mon. Site No. EPA-02	Sample Measurement			3.2		MG/L			
	Permit Requirement			20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
Solids, Total Suspended PARM Code 00530 A Mon. Site No. EPA-02	Sample Measurement			3.2	10.0	MG/L			
	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
Turbidity PARM Code 00070 A Mon. Site No. EPA-02	Sample Measurement			2.45		NTU			
	Permit Requirement			Report (Max.)		NTU		Continuous	Meter
Flow PARM Code 00050 I Mon. Site No. FLW-01	Sample Measurement	0.013	MGD						
	Permit Requirement	Report (Mo. Avg.)	MGD					5 Days/Week	Flow Totalizer
Solids, Total Suspended PARM Code 00330 G Mon. Site No. INF-01	Sample Measurement			0.74		MG/L			
	Permit Requirement			Report (Mo. Avg.)		MG/L		Monthly	Grab
BOD, Carbonaceous 5 day, 20C PARM Code 00082 G Mon. Site No. INF-01	Sample Measurement			2.92		MG/L			
	Permit Requirement			Report (Mo. Avg.)		MG/L		Monthly	Grab
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								

SYS R-001

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: 12-1-2011 To: 12-31-2010

Facility: Spring Lake Golf and Country Club STP

	CBOD5 (MG/L)	Focal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MG/L)	pH (SU)	TRC (For Disinfect.) (MG/L)	TSS (MG/L)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MG/L)	TSS (MG/L)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12				7.5	0.02		1.15	0.019		
13	3.4	1.0	12.0	7.3	2.5	1.0	2.45	0.019		
14										
15										
16										
17										
18										
19										
20										
21	2.6	1.0		7.2	0.3	1.8	1.80	0.010		
22	2.3	1.4		7.6	4.95	10.0	1.75	0.019		
23										
24										
25										
26										
27										
28										
29										
30										
31										
Total	8.3	3.46	12.0	29.6	7.77	12.8	2.15	6.034		
Mo. Avg.	2.27	1.0	12.0	7.4	1.94	3.2	1.39	0.013		

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: 3 Certificate No: 0006898 Name: Thomas A. Gann

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: 1-1-2011 To: 1-31-2011

Facility: Spring Lake Golf and Country Club STP

	CBOD5 (MG/L)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MG/L)	pH (SU)	TRC (For Disinfect.) (MG/L)	TSS (MG/L)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MG/L)	TSS (MG/L)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1										
2										
3										
4										
5										
6										
7				7.3	4.99		1.6	0.022		
8										
9										
10										
11										
12										
13	11.0	1.11		7.4	5.00	4.2	15.00	0.020		
14			1.19	7.5	5.00		4.00	0.025		
15				7.3	5.00		4.75	0.025		
16				7.3	5.00		3.9	0.025		
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										
31										
Total	11.0	1.21	7.19	36.9	24.99	4.2	19.25	0.117		
Mo. Avg	2.2	1.11	1.19	7.36	5.00	0.94	3.95	0.023		

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 0006198 Name: Thomas L. Quinn

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP
NUMBER:
MONITORING PERIOD

R-001

PERMIT NUMBER: FLA014315

From: 1-1-2011 To 1-31-2011

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement			1.20		MGL		
PARM Code 00530 Y	Permit Requirement			20.0 (An. Avg.)		MGL	Every Two Weeks	Grab
Mon. Site No. EFA-02								
Solids, Total Suspended	Sample Measurement			1.96	4.8	MGL		
PARM Code 00530 A	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MGL	Every Two Weeks	Grab
Mon. Site No. EFA-02								
Turbidity	Sample Measurement			5.60		NTU		
PARM Code 00070 A	Permit Requirement			Report (Max.)		NTU	Continuous	Meter
Mon. Site No. EFA-02								
Flow	Sample Measurement	0.023	MGD					
PARM Code 50050 1	Permit Requirement	Report (Mo. Avg.)	MGD				5 Days/Week	Flow Totalizer
Mon. Site No. FLW-01								
Solids, Total Suspended	Sample Measurement			1.29		MGL		
PARM Code 00530 G	Permit Requirement			Report (Mo. Avg.)		MGL	Monthly	Grab
Mon. Site No. INF-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.45		MGL		
PARM Code 80082 G	Permit Requirement			Report (Mo. Avg.)		MGL	Monthly	Grab
Mon. Site No. INF-01								
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive

MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESC: , including Influent

Sebring, FL 33876

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 1-1-2011 To 1-31-2011

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N) PARM Code 00620 A Mon. Site No. EPA-01	Sample Measurement			1.12		98/L	0		
	Permit Requirement			12 (Max.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C PARM Code 80082 Y Mon. Site No. EPA-01	Sample Measurement			2.94		106/L	0		
	Permit Requirement			20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C PARM Code 80082 A Mon. Site No. EPA-01	Sample Measurement			2.2	11.0	106/L	0		
	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
pH PARM Code 00400 A Mon. Site No. EPA-01	Sample Measurement			7.3	7.5	5.1	0		
	Permit Requirement			6.0 (Min.)	8.5 (Max.)	BU		5 Days/Week	Grab
Coliform, Fecal PARM Code 74055 A Mon. Site No. EPA-01	Sample Measurement			1.41		#/100ML	0		
	Permit Requirement			25 (Max.)		#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection) PARM Code 50060 A Mon. Site No. EPA-01	Sample Measurement			4.99		106/L	0		
	Permit Requirement			0.5 (Min.)		MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	Thomas A. Quinn	863 214 5195	11/02/19

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

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: 1-1-2011 To: 1-31-2011

Facility: Spring Lake Golf and Country Club STP

99.9 % CAP

	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)	
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530	
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01	
1				7.1	2.6		3.55	1.030			
2				7.2	4.95		2.655	1.023			
3	4.7	1.11		7.2	4.99	2.8	3.75	1.028			
4	6.9	1.11	3.57	7.3	5.00	3.4	2.1	1.025			
5	3.0	1.11		7.3	5.00	1.0	1.45	1.022			
6	3.1	1.11		7.2	5.00	1.2	1.25	1.025			
7				7.3	4.99		1.6	1.025			
8				7.3	4.99		2.05	1.026			
9				7.3	5.00		2.45	1.025			
10	9.2	1.11		7.3	5.00	1.8	2.5	1.025			
11	4.9	1.11		7.3	4.99	1.0	3.6	1.023			
12	5.4	1.11		7.3	4.99	2.2	4.25	0.20	76	40	
13											
14											
15											
16											
17	4.6	1.11		7.25	5.00	3.2	4.9	1.026			
18	6.5	1.11		7.2	5.00	2.4	2.65	1.026			
19	5.6	1.11		7.2	4.99	2.0	2.1	1.026			
20	8.7	1.11		7.2	5.00	2.0	1.6	1.027			
21				7.2	5.00		1.8	1.028			
22				7.2	4.99		1.4	1.024			
23			2.29	7.3	4.99		1.35	1.025			
24	4.6	1.11	3.54	7.3	5.00	1.11	0.9	1.025			
25	5.3	1.11		7.2	5.00	1.11	0.9	1.028			
26	4.8	1.11		7.2	4.99	1.4	1.0	1.023			
27	3.3	1.11		7.2	4.99	1.04	0.95	1.028			
28				7.2	4.99		0.8	1.027			
29				7.2	4.99		1.0	1.028			
30				7.2	4.55		1.2	1.026			
31	6.5	1.11		7.2	5.00	1.04	1.0	1.027			
Total	87.7	16.11	6.86	193.35	131.99	31.4	54.75	0.656	74	40	
Mo. Avg.	5.44	1.11	3.43	7.2	4.89	1.96	20.3	0.025	2.45	1.29	

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: 3 Certificate No: 0006199 Name: Thomas A. Quinn

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP R-002

PERMIT NUMBER: FLA014315

NUMBER:

MONITORING PERIOD From: 1-1-2011 To

1-31-2011

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement			4.8		4616		
PARM Code 00530 A	Permit Requirement			5.0 (Max.)		MGL	Every Two Weeks	Grab
Turbidity	Sample Measurement			+5.00		NPL		
PARM Code 00070 A	Permit Requirement			Report (Max.)		NTU	Continuous	Meter
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870
 FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876
 COUNTY: Highlands

PERMIT NUMBER: FLA014315
 LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: R-002
 MONITORING GROUP DESC:

REPORT GROUP: Monthly Domestic

NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: 1-1-2011 To 1-31-2011

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			3.57	MG/L	0		
PARM Code 00620 A	Permit Requirement			12 (Max.)	MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.63	MG/L	0		
PARM Code 80082 Y	Permit Requirement			20.0 (An.Avg.)	MG/L		4 Days/Week	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			5.44	MG/L	0		
PARM Code 80082 A	Permit Requirement			30.0 (Max.Avg.)	MG/L		4 Days/Week	Grab
pH	Sample Measurement			7.1	SU	0		
PARM Code 00400 A	Permit Requirement			6.0 (Min.)	SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			1.0	#/100ML	0		
PARM Code 74055 A	Permit Requirement			25 (Max.)	#/100ML		4 Days/Week	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			2.6	MG/L	0		
PARM Code 50060 A	Permit Requirement			1.0 (Min.)	MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	<i>Thomas A. Quinn</i>	323 214-5196	11/02/19

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

1-13-2011: Turbidity OVER 5.00 FROM 11-13-2011, 1045 TO 11-14-2011, 1700. Auto VALVE SWITCHED TO Reject Pond AS REQUIRED ON 1-13-2011.

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: 2-1-2011 To: 2-29-2011

Facility: Spring Lake Golf and Country Club STP

	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1			4.74							
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15			4.38						132	44
16										
17										
18										
19										
20										
21										
22	4.4	1.4		7.05	2.30	1.04	2.30	0.32		
23	5.4	1.4		7.05	5.00	1.2	0.5	0.31		
24	2.016	1.4		7.09	5.00	1.04	2.90	0.28		
25				7.15	0.90		2.15	1.037		
26				7.14	1.95		1.4	0.32		
27				7.14	5.00		1.25	0.32		
28										
29										
30										
31										
Total	11.8	3.4	9.12	42.62	20.15	3.2	2.9	0.192	132	44
Mo. Avg.	3.93	1.4	4.56	7.10	3.36	1.07	1.78	0.032	6.0	2.0

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Load Operator Class: B Certificate No: 0008198 Name: Thomas A. Quinn

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP
NUMBER:
MONITORING PERIOD

R-001

PERMIT NUMBER: FLA014315

From: 2-1-2011 To

2-28-2011

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement			1.23		MGL	0		
PARM Code 00530 Y	Permit Requirement			20.0 (Mo.Avg.)		MGL		Every Two Weeks	Grab
Mon.Site No. EFA-02									
Solids, Total Suspended	Sample Measurement			1.07	1.2	MGL	1		
PARM Code 00530 A	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	MGL		Every Two Weeks	Grab
Mon.Site No. EFA-02									
Turbidity	Sample Measurement			NO DATA		NTU	1		
PARM Code 00070 A	Permit Requirement			Report (Max.)		NTU		Continuous	Meter
Mon.Site No. EFA-02									
Flow	Sample Measurement	.032	MGD						
PARM Code 50050 1	Permit Requirement	Report (Mo.Avg.)	MGD					5 Days/Week	Flow Totalizer
Mon.Site No. FLW-01									
Solids, Total Suspended	Sample Measurement			2.0		MGL			
PARM Code 00530 G	Permit Requirement			Report (Mo.Avg.)		MGL		Monthly	Grab
Mon.Site No. INF-01									
BOD, Carbonaceous 5 day, 20C	Sample Measurement			6.0		MGL			
PARM Code 80082 G	Permit Requirement			Report (Mo.Avg.)		MGL		Monthly	Grab
Mon.Site No. INF-01									
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive

MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESC: , including Influent

Sebring, FL 33876

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 2-1-2011 To 2-29-2011

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			4.94	MG/L	0		
PARM Code 00620 A	Permit Requirement			12 (Max.)	MG/L		Every Two Weeks	Grab
Mon. Site No. EFA-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.23	MG/L	0		
PARM Code 80082 Y	Permit Requirement			20.0 (Ar. Avg.)	MG/L		Every Two Weeks	Grab
Mon. Site No. EFA-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.93	MG/L	0		
PARM Code 80082 A	Permit Requirement			30.0 (Mo. Avg.)	MG/L		Every Two Weeks	Grab
Mon. Site No. EFA-01								
pH	Sample Measurement			7.05	BU	0		
PARM Code 00400 A	Permit Requirement			6.0 (Min.)	BU		5 Days/Week	Grab
Mon. Site No. EFA-01								
Coliform, Fecal	Sample Measurement			1.0	M/100ML	0		
PARM Code 74055 A	Permit Requirement			25 (Max.)	M/100ML		Every Two Weeks	Grab
Mon. Site No. EFA-01								
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.9	MG/L	0		
PARM Code 50060 A	Permit Requirement			0.5 (Min.)	MG/L		Continuous	Meter
Mon. Site No. EFA-01								

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	<i>Thomas A. Quinn</i>	963 214 2195	11/09/19

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

2/23 Turbidity level unknown as motor would not reset.
 2/10/11 Turbidity motor ^{was} reset at 1305 (order new turbidity motor from H&M.)
 2/12/11 SWITCH BACK TO XFER POND ON 2/12/11.

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: 2-1-2011

To: 3-28-2011

Facility: Spring Lake Golf and Country Club STP

16.4 mgd

	CBOD5 (MG/L)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MG/L)	pH (SU)	TRC (For Disinfect.) (MG/L)	TSS (MG/L)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MG/L)	TSS (MG/L)	
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530	
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01	
1	4.2	1.00	4.74	7.2	5.00	2.0	1.3	0.28			
2	4.1	1.00		7.2	5.00	1.00	1.45	0.28			
3	3.9	1.00		7.2	5.00	1.00	1.45	0.31			
4				7.2	0.95		2.4	0.27			
5				7.2	5.00		2.0	0.32			
6				7.2	5.00		2.4	0.33			
7	8.6	1.30		7.2	4.99	4.2	3.0	0.35			
8	6.3	1.40		7.2	4.99	1.6	2.1	0.30			
9	10.0	1.00		7.3	5.00	1.00	1.55	0.29			
10	6.6	2.00		7.2	5.00	1.00	1.3	0.31			
11				7.1	4.99		1.0	0.30			
12				7.2	4.99		1.25	0.28			
13				7.2	4.99		1.35	0.28			
14	2.8	1.00		7.2	4.99	1.4	1.10	0.28			
15	2.6	1.00	4.38	7.2	4.2	1.00	1.2	0.28	192	44	
16	4.7	1.00		7.1	2.25	1.00	1.7	0.28			
17	4.4	1.00		7.1	2.00	3.2	1.85	0.30			
18				7.1	2.15		2.0	0.29			
19				7.0	2.30		1.5	0.31			
20				7.1	2.05		2.15	0.32			
21	2.8	1.00		7.1	2.2	1.6	3.25	0.35			
22							2.5				
23											
24											
25											
26											
27											
28	2.0	1.00		7.25	5.00	1.2	1.20	0.27			
29											
30											
31											
Total	65.0	13.00	9.12	157.75	59.54	21.2	38.5	0.659	192	44	
Mo. Avg	5.0	1.00	4.56	7.17	4.02	1.63	1.25	0.30	6.0	6.0	

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 0006994 Name: Thomas A. Quinn

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP
NUMBER:
MONITORING PERIOD

R-002

PERMIT NUMBER: FLA014315

From: 2-1-2011 To 2-29-2011

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended PARM Code 00530 A Mon. Site No. EFA-02	Sample Measurement			4.2		MGL	0	
	Permit Requirement			5.0 (Max.)		MGL	4 Days/Week	Grab
Turbidity PARM Code 00070 A Mon. Site No. EFA-02	Sample Measurement			3.25		NTU	0	
	Permit Requirement			Report (Max.)		NTU	Continuous	Meter
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							

2/4/01
 PET
 COPY

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

MONITORING GROUP NUMBER: R-002
 MONITORING GROUP DESC:

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 2-1-2011 To 2-29-2011

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			4.74		MG/L	0		
PARM Code 00630 A	Permit Requirement			12 (Max.)		MG/L		Every Two Weeks	Grab
Mon. Site No. EFA-01									
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.8		MG/L	0		
PARM Code 80082 Y	Permit Requirement			20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
Mon. Site No. EFA-01									
BOD, Carbonaceous 5 day, 20C	Sample Measurement			5.0	10.0	MG/L	0		
PARM Code 80082 A	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
Mon. Site No. EFA-01									
pH	Sample Measurement			7.0	7.3	SU	0		
PARM Code 00400 A	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Mon. Site No. EFA-01									
Coliform, Fecal	Sample Measurement			1.4		#/100ML	0		
PARM Code 74055 A	Permit Requirement			25 (Max.)		#/100ML		Every Two Weeks	Grab
Mon. Site No. EFA-01									
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.95		MG/L	1		
PARM Code 50060 A	Permit Requirement			1.0 (Min.)		MG/L		Continuous	Meter
Mon. Site No. EFA-01									

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	<i>Thomas A. Quinn</i>	863 244-5195	11/03/19

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):
 2-4-2011 GRAB SRS WAS OK, ACID WASHING CL 17. ACT WAS UNDER 1.0 & 1.0 MIN, STOPPING AT 0.95 MG/L Y-BACK TO 5.00 f.
 2-22-2011 SWITCH TO REJECT POND FOR MAINT. (0630)
 2-25-2011 SWITCH BACK TO REER POND.

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From:

3-1-2011 To: 3-31-2011

Facility:

Spring Lake Golf and Country Club STP

	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24	5.8	1.0		7.5	5.00		0/5	.008		
25	2.06	1.0		7.4	5.00	1.0	0/5	.046		
26				7.4	5.00	1.0	0/5	.022		
27				7.4	5.00		0/5	.034		
28	2.06	1.0		7.4	5.00		0/5	.025		
29	3.4	1.0		7.4	5.00	1.0	0/5	.029		
30				7.3	5.01	2.8	0/5	.033		
31			2.41							
Total	13.2	4.0	2.41	51.9	35.04	6.8	0/5	0.196		
Mo. Avg.	5.3	1.0	0.31	7.4	5.01	1.7	0/5	.008		

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____

Evening Shift Operator Class: _____ Certificate No: _____ Name: _____

Night Shift Operator Class: _____ Certificate No: _____ Name: _____

Lead Operator Class: B Certificate No: 0008898 Name: Thomas J. Quinn

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP R-001

PERMIT NUMBER: FLAG14315

NUMBER:

MONITORING PERIOD From: 3-1-2011 To

3-31-2011

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement			1.38		MGL	0		
PARM Code 00530 Y	Permit Requirement			20.0 (An.Avg.)		MGL		Every Two Weeks	Grab
Mon.Site No. EFA-02									
Solids, Total Suspended	Sample Measurement			1.7	3.8	MGL	0		
PARM Code 00530 A	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	MGL		Every Two Weeks	Grab
Mon.Site No. EFA-02									
Turbidity	Sample Measurement			NOT REPORTED		NTU	0		
PARM Code 00070 A	Permit Requirement			Report (Max.)		NTU		Continuous	Meter
Mon.Site No. EFA-02									
Flow	Sample Measurement	0.029	MGD						
PARM Code 50050 1	Permit Requirement	Report (Mo.Avg.)	MGD					5 Days/Week	Flow Totalizer
Mon.Site No. FLW-01									
Solids, Total Suspended	Sample Measurement			1.7		MGL	0		
PARM Code 00530 G	Permit Requirement			Report (Mo.Avg.)		MGL		Monthly	Grab
Mon.Site No. INF-01									
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.3		MGL	0		
PARM Code 80082 G	Permit Requirement			Report (Mo.Avg.)		MGL		Monthly	Grab
Mon.Site No. INF-01									
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESC: , including Influent

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 3-1-2011 To 3-31-2011

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			2.41		MG/L	0	
PARM Code 00620 A	Permit Requirement			12 (Max.)		MG/L		Every Two Weeks Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.51		MG/L	0	
PARM Code 80082 Y	Permit Requirement			20.0 (An. Avg.)		MG/L		Every Two Weeks Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.3 5.8		MG/L	0	
PARM Code 80082 A	Permit Requirement			30.0 (Mo. Avg.) 60.0 (Max.)		MG/L		Every Two Weeks Grab
pH	Sample Measurement			7.3 7.5		SU	0	
PARM Code 00400 A	Permit Requirement			6.0 (Min.) 8.5 (Max.)		SU		5 Days/Week Grab
Coliform, Fecal	Sample Measurement			1.4		#/100ML	0	
PARM Code 74055 A	Permit Requirement			25 (Max.)		#/100ML		Every Two Weeks Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			5.00		MG/L	0	
PARM Code 50060 A	Permit Requirement			0.5 (Min.)		MG/L		Continuous Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	<i>Thomas A. Quinn</i>	883 2145195	11/04/17

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

New
 3-23-2011 SWITCHED TO RESET POND AS TURBIDITY METER WAS INSTALLED.
 3-24-2011 CALL NASH ABOUT TURBIDITY METER NOT SENDING SIGNALS ON 4-200V CIRCUIT. NASH Tech SUPPORT DETERMINED THAT SC 200 CONTROLLER WAS DEFECTIVE. ORDER A WARRANTY REPLACEMENT MANY CALLS TO NASH THE REPAIR MANT CONTROLLER ARR, FROEX T WAS REINSTALLED LOCALIZANTO. SACK IN SERVICE. ON 3-30-2011, FLOW RETURNED TO XFER POND.

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: 3-1-2011 To: 3-31-2011

Facility: Spring Lake Golf and Country Club STP

$6828 \div 140 \times 100 = 20\% \text{ CAP}$

	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00330	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1	2.04	1.14		7.4	5.00	1.04	1.95	0.025		
2	3.3	1.4	2.95	7.5	4.30	1.04	2.14	0.030		
3	3.9	1.14		7.5	4.2	1.04	1.0	0.029		
4				7.5	5.00		0.75	0.029		
5				7.5	5.00		1.4	0.029		
6				7.5	4.99		0.85	0.031		
7	4.5	1.14		7.5	4.99	1.04	0.9	0.029		
8	4.4	1.14		7.5	5.00	1.04	0.85	0.033		
9	3.6	1.14		7.5	3.7	1.04	0.55	0.033		
10	2.7	1.14		7.4	4.99	1.04	0.50	0.035		
11				7.5	4.99		4.20	0.029		
12				7.5	4.99		0.65	0.027		
13				7.5	4.99		0.65	0.024		
14	4.2	1.14		7.4	4.99	1.04	1.15	0.031		
15	4.8	1.14	6.54	7.5	4.99	1.04	0.55	0.033	115	42
16	6.6	1.14		7.4	5.00	1.04	0.75	0.036		
17	2.6	1.14		7.4	5.00	1.0	1.20	0.031		
18				7.4	5.00		0.95	0.033		
19				7.4	1.30		1.15	0.028		
20				7.4	5.00		1.155	0.034		
21	2.2	1.14		7.5	5.00	1.0	0.65	0.027		
22	2.8	1.14		7.4	5.00	1.04	2.65	0.027		
23										
24										
25										
26										
27										
28										
29										
30	2.9	1.14		7.4	4.95	1.04	0.40	0.029		
31	2.3	1.14	2.41	7.4	4.95	1.04	0.60	0.033	115.99	42.75
Total	53.2	15.14	11.9	179.9	112.52	15.0	29.555	0.723	115	42
Mo. Avg.	3.55	1.14	0.8	7.45	4.73	1.0	1.19	0.030	4.79	1.75

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 0006998 Name: Thomas L. Quinn

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP NUMBER:
MONITORING PERIOD

R-002

PERMIT NUMBER: FLA014315

From: 3-1-2011 To 3-31-2011

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement			1.0	MGL	0		
PARM Code 00530 A	Permit Requirement			5.0 (Max.)	MGL		Every Two Weeks	Grab
Mon. Site No. BFA-02								
Turbidity	Sample Measurement			4.20	NTU	0		
PARM Code 00070 A	Permit Requirement			Report (Max.)	NTU		Continuous	Meter
Mon. Site No. BFA-02								
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

Plant Copy

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

MONITORING GROUP NUMBER: R-002
 MONITORING GROUP DESC:

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 3-1-2011 To 3-31-2011

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			6.54		462		
PARM Code 00620 A	Permit Requirement			12 (Max.)		MG/L	Every Two Weeks	Grab
Mon.Site No. EFA-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.99		MG/L		
PARM Code 80082 Y	Permit Requirement			20.0 (An.Avg.)		MG/L	Every Two Weeks	Grab
Mon.Site No. EFA-01								
BOD, Carbonaceous 5 day, 20C	Sample Measurement			3.55	6.6	MG/L		
PARM Code 80082 A	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	MG/L	Every Two Weeks	Grab
Mon.Site No. EFA-01								
pH	Sample Measurement			7.4	7.5	SU		
PARM Code 00400 A	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU	5 Days/Week	Grab
Mon.Site No. EFA-01								
Coliform, Fecal	Sample Measurement			1.2		#/100ML		
PARM Code 74055 A	Permit Requirement			25 (Max.)		#/100ML	Every Two Weeks	Grab
Mon.Site No. EFA-01								
Total Residual Chlorine (For Disinfection)	Sample Measurement			1.6		MG/L		
PARM Code 50060 A	Permit Requirement			1.0 (Min.)		MG/L	Continuous	Meter
Mon.Sits No. EFA-01								

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
THOMAS A. QUINN-OPERATOR	<i>Thomas A Quinn</i>	363 214-5195	11/4/17

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

3-23-2011 - ALL FLOW TO REJECT POND TO INSTALL NEW TURBIDITY MOTOR.
 3-24-2011 - MOTOR FOUND TO BE DEFECTIVE / ORDERED A WARRANTY REPLACEMENT
 3-31-2011 - REPLACEMENT ARRIVED + PUT BACK IN SERVICE.
 ALL FLOW RETURNED TO REJECT POND.

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315

From: 4-1-2011 To: 4-30-2011

Facility: Spring Lake Golf and Country Club STP

	CBOD5 (MG/L)	Focal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MG/L)	pH (SU)	TRC (For Disinfect.) (MG/L)	TSS (MG/L)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MG/L)	TSS (MG/L)	
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530	
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01	
1											
2											
3											
4											
5											
6											
7	3.1	1.46		7.4	0.15	1.2	0.6	1.002			
8											
9											
10											
11											
12											
13											
14			4.45								
15											
16											
17											
18											
19											
20											
21											
22											
23											
24											
25											
26											
27											
28											
29											
30											
31											
Total	3.1	1.46	-	7.4	0.15	1.2	0.6	1.002			
Mo. Avg.	3.1	1.46	-	7.4	0.15	1.2	0.6	1.002			

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____

Evening Shift Operator Class: _____ Certificate No: _____ Name: _____

Night Shift Operator Class: _____ Certificate No: _____ Name: _____

Lead Operator Class: B Certificate No: 0006899 Name: Richard A. Quinn

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP
NUMBER:
MONITORING PERIOD

R-001

PERMIT NUMBER: FLA014315

From: 4-6-2011 To 4-30-2011

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement			1.39		MG/L	0		
PARM Code 00530 Y Mon. Site No. EFA-02	Permit Requirement			20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
Solids, Total Suspended	Sample Measurement			1.2	1.2	MG/L	0		
PARM Code 00530 A Mon. Site No. EFA-02	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
Turbidity	Sample Measurement			0.6		NTU	0		
PARM Code 00070 A Mon. Site No. EFA-02	Permit Requirement			Report (Max.)		NTU		Continuous	Meter
Flow	Sample Measurement	.002	MGD						
PARM Code 50050 I Mon. Site No. FLW-01	Permit Requirement	Report (Mo. Avg.)	MGD					5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement			1.53		MG/L	0		
PARM Code 00530 G Mon. Site No. INF-01	Permit Requirement			Report (Mo. Avg.)		MG/L		Monthly	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.6		MG/L	0		
PARM Code 80082 G Mon. Site No. INF-01	Permit Requirement			Report (Mo. Avg.)		MG/L		Monthly	Grab
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive

MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESC: , including Influent

Sebring, FL 33876

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 4-1-2011 To: 4-30-2011

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N) PARM Code 00620 A Mon. Site No. EFA-01	Sample Measurement			4.45		MG/L	0		
	Permit Requirement			12 (Max.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C PARM Code 80082 Y Mon. Site No. EFA-01	Sample Measurement			2.65		MG/L	0		
	Permit Requirement			20.0 (An. Avg.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C PARM Code 80082 A Mon. Site No. EFA-01	Sample Measurement			3.1	3.1	MG/L	0		
	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
pH PARM Code 00400 A Mon. Site No. EFA-01	Sample Measurement			7.4	7.4	SU	0		
	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal PARM Code 74055 A Mon. Site No. EFA-01	Sample Measurement			1.4		#/100ML	0		
	Permit Requirement			25 (Max.)		#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection) PARM Code 50060 A Mon. Site No. EFA-01	Sample Measurement			0.15		MG/L	1		
	Permit Requirement			0.5 (Min.)		MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	<i>Thomas A. Quinn</i>	963 214-5195	11/05/13

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

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: 4-1-2011 To: 4-30-2011

Facility: Spring Lake Golf and Country Club STP

19.3% CAP

	COD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	COD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1				7.4	4.95		0.6	0.026		
2				7.4	4.95		1.5	0.030		
3				7.4	4.95		0.6	0.026		
4	2.3	1.0		7.4	5.00	1.0	0.6	0.025		
5	7.4	1.0		7.5	5.00	1.0	0.6	0.029		
6	7.1	1.0		7.4	4.95	1.0	0.6	0.031		
7	3.1	1.0		7.4	0.15	1.2	0.6	0.026		
8				7.4	4.95		0.8	0.027		
9				7.5	5.00		0.5	0.029		
10				7.4	5.00		1.25	0.023		
11	3.0	1.0	4.45	7.5	5.00	1.0	0.7	0.028	78	46
12	2.9	1.0		7.5	5.01	1.0	1.0	0.023		
13	3.9	1.0		7.6	4.95	1.0	0.7	0.027		
14	3.9	1.0		7.4	4.95	1.0	1.15	0.029		
15				7.5	5.00		1.1	0.022		
16				7.5	5.00		0.5	0.022		
17				7.4	5.00		0.6	0.018		
18	2.3	1.0		7.3	5.00	1.0	0.9	0.015		
19	6.4	1.0		7.4	5.00	1.0	1.0	0.022		
20	2.6	1.0		7.4	4.1	1.0	0.8	0.028		
21	3.2	1.0		7.5	4.95	1.0	0.7	0.020		
22				7.4	5.00		0.8	0.015		
23				7.5	5.01		1.6	0.012		
24				7.4	5.00		0.9	0.013		
25	2.6	1.0		7.4	5.01	1.4	1.6	0.006		
26	4.4	1.0		7.3	5.01	1.0	1.8	0.018		
27	9.9	1.0		7.4	5.01	1.0	1.1	0.007		
28	3.5	1.0		7.3	5.01	1.0	0.5	0.020		
29				7.4	5.01		1.1	0.015		
30				7.4	5.01		0.4	0.017		
31										
Total	89.5	16.0	4.45	222.7	143.94	16.6	26.6	1.643	78	46
Mo. Avg.	4.28	1.0	0.15	7.4	4.64	1.04	0.89	0.21	2.6	1.59

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: R Certificate No: 0006899 Name: Thomas A. Quinn

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP
NUMBER:
MONITORING PERIOD

R-002

PERMIT NUMBER: FLA014315

From: 4-1-2017 To 4-30-2017

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended PARM Code 00530 A Mon. Site No. EFA-02	Sample Measurement			1.4		MGL	0	
	Permit Requirement			5.0 (Max.)		MGL	Every Two Weeks	Grab
Turbidity PARM Code 00070 A Mon. Site No. EFA-02	Sample Measurement			1.8		NTU	0	
	Permit Requirement			Report (Max.)		NTU	Continuous	Meter
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive

MONITORING GROUP NUMBER: R-002

Sebring, FL 33876

MONITORING GROUP DESC:

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 4-1-2011 To 4-30-2011

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			4.45		MG/L	0		
PARM Code 00620 A	Permit Requirement			12 (Max.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.13		MG/L	0		
PARM Code 80082 Y	Permit Requirement			20.0 (An.Avg.)		MG/L		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.29	9.9	MG/L	0		
PARM Code 80082 A	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	MG/L		Every Two Weeks	Grab
pH	Sample Measurement			7.3	7.6	SU	0		
PARM Code 00400 A	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			1.4		#/100ML	0		
PARM Code 74055 A	Permit Requirement			25 (Max.)		#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.15		MG/L	0		
PARM Code 50060 A	Permit Requirement			1.0 (Min.)		MG/L		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	<i>Thomas A. Quinn</i>	963 214-5495	11/05/13

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

4-7-2011 @ 0.15 MG/L 0900 AUTO VALVE SWITCHED TO RESET POND DUE TO TRIPED GF1 RECEIVED, FLOW RETURNED TO XFER POND AT 0730 BY TAG.

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: 5-1-2011

To: 5-31-2011

Facility: Spring Lake Golf and Country Club STP

	CBOD5 (MG/L)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MG/L)	pH (SU)	TRC (For Disinfect.) (MG/L)	TSS (MG/L)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MG/L)	TSS (MG/L)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12	4.2	1.0		7.4	0.6	1.0	0.6	1.002		
13										
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										
31										
Total	4.2	1.0	-	7.4	0.6	1.0	0.6	1.002		
Mo. Avg.	4.2	1.0	-	7.4	0.6	1.0	0.6	1.002		

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____

Evening Shift Operator Class: _____ Certificate No: _____ Name: _____

Night Shift Operator Class: _____ Certificate No: _____ Name: _____

Lead Operator Class: 9 Certificate No: 0006998 Name: Thomas A. Quinn

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP NUMBER:

R-001

PERMIT NUMBER: FLA014315

MONITORING PERIOD From: 5-1-2011 To

5-31-2011

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement			1.4		MGL	0		
PARM Code 00530 Y	Permit Requirement			20.0 (An.Avg.)		MGL		Every Two Weeks	Grab
Solids, Total Suspended	Sample Measurement			1.0	1.0	MGL	0		
PARM Code 00530 A	Permit Requirement			30.0 (Mo.Avg.)	60.0 (Max.)	MGL		Every Two Weeks	Grab
Turbidity	Sample Measurement			0.6		NTU			
PARM Code 00070 A	Permit Requirement			Report (Max.)		NTU		Continuous	Meter
Flow	Sample Measurement								
PARM Code 50050 1	Permit Requirement	Report (Mo.Avg.)	MGD	.002				5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement			1.6		MGL			
PARM Code 00530 G	Permit Requirement			Report (Mo.Avg.)		MGL		Monthly	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			7.9		MGL			
PARM Code 80082 G	Permit Requirement			Report (Mo.Avg.)		MGL		Monthly	Grab
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
 MAILING ADDRESS: 100 Country Club Drive
 Sebring, FL 33870

FACILITY: Spring Lake Golf and Country Club STP
 LOCATION: 100 Country Club Drive
 Sebring, FL 33876

COUNTY: Highlands

PERMIT NUMBER: FLA014315

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

MONITORING GROUP: R-001
 NUMBER:
 MONITORING GROUP DESC: , including Influent

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 5-1-2011 To 5-31-2011

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N)	Sample Measurement			6.4		MGL	0		
PARM Code 00620 A Mon. Site No. EFA-01	Permit Requirement			12 (Max.)		MGL		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.84		MGL	0		
PARM Code 80082 Y Mon. Site No. EFA-01	Permit Requirement			20.0 (An. Avg.)		MGL		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			4.2	4.2	MGL	0		
PARM Code 80082 A Mon. Site No. EFA-01	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MGL		Every Two Weeks	Grab
pH	Sample Measurement			7.4	7.4	54	0		
PARM Code 00400 A Mon. Site No. EFA-01	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal	Sample Measurement			7.0		#/100ML	0		
PARM Code 74055 A Mon. Site No. EFA-01	Permit Requirement			25 (Max.)		#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection)	Sample Measurement			0.6		MGL	0		
PARM Code 50060 A Mon. Site No. EFA-01	Permit Requirement			0.5 (Min.)		MGL		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	<i>Thomas A. Quinn</i>	863 214 5195	11/06/15

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

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA014315
From: 5-1-2011

To: 5-31-2011

Facility: Spring Lake Golf and Country Club STP

14.3% CAP

	CBOD5 (MGL)	Fecal Coliform Bacteria (#/100ML)	Nitrogen, Nitrate, Total (as N) (MGL)	pH (SU)	TRC (For Disinfect.) (MGL)	TSS (MGL)	Turbidity (NTU)	Flow (MGD)	CBOD5 (MGL)	TSS (MGL)
Code	80082	74055	00620	00400	50060	00530	00070	50050	80082	00530
Mon. Site	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-02	EFA-02	FLW-01	INF-01	INF-01
1				7.5	5.01		3.53	.014		
2	6.4	1.0		7.4	5.01	1.0	1.0	.009		
3	6.4	1.0	6.40	7.4	5.01	1.0	2.4	.006		
4	9.4	1.0	3.45	7.4	5.01	1.0	0.6	.014		
5	2.4	1.0		7.4	5.01	1.0	0.4	.014		
6				7.4	5.01		1.4	.018		
7				7.5	5.01		1.2	.011		
8				7.4	5.01		0.9	.005		
9	4.2	1.0		7.3	5.01	1.0	0.7	.005		
10	6.0	1.0		7.3	5.01	1.2	0.9	.006		
11	2.8	1.0	0.33	7.4	3.95	1.0	0.9	.010	242	50
12	4.8	1.0		7.4	0.6	1.0	0.6	.006		
13				7.5	5.02		0.8	.010		
14				7.3	5.01		0.4	.016		
15				7.4	5.01		0.35	.008		
16	3.0	1.0		7.4	5.01	1.0	0.35	.011		
17	3.6	1.0		7.4	5.01	1.0	0.3	.005		
18	4.3	1.0		7.4	5.01	1.0	0.6	.007		
19	6.0	1.0		7.5	5.01	1.0	0.55	.010		
20				7.3	5.01		0.55	.010		
21				7.4	5.01		0.6	.011		
22				7.4	5.01		0.3	.010		
23	2.8	1.0		7.4	5.01	1.0	0.35	.005		
24	3.7	1.0	2.51	7.4	3.7	1.0	0.45	.006		
25	3.1	1.0		7.5	3.1	1.0	1.55	.004		
26	4.0	1.0		7.4	2.6	1.0	0.6	.007		
27				7.4	5.01		0.95	.011		
28				7.4	5.01		0.65	.013		
29				7.5	5.01		0.5	.013		
30	Holiday			7.4	5.01		0.5	.007		
31	6.7	1.0		7.3	2.80	1.0	0.5	.005		
Total	72.0	17.4	12.69	229.5	140.91	17.2	25.25	22.7	242	50
Mo. Avg.	4.59	1.0	3.2	7.4	4.54	1.0	0.8	.009	7.8	1.6

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 08068998 Name: Thomas A. Quinn

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Spring Lake Golf and Country Club STP

MONITORING GROUP
NUMBER:
MONITORING PERIOD

R-002

PERMIT NUMBER: FLA014315

From: 5-1-2011 To 5-31-2011

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended PARM Code 00530 A Mon. Site No. EFA-02	Sample Measurement			1.2		mg/L	5		
	Permit Requirement			5.0 (Max.)		MG/L		Every Two Weeks	Grab
Turbidity PARM Code 00070 A Mon. Site No. EFA-02	Sample Measurement			3.53		NTU	1		
	Permit Requirement			Report (Max.)		NTU		Continuous	Meter
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								
	Sample Measurement								
	Permit Requirement								

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PLT
Copy
5/2011

When Completed mail this report to: Department of Environmental Protection, South District, P.O. Box 2549, Ft. Myers, FL, 33902-2549

PERMITTEE NAME: Utility Corporation of Florida, Inc.
MAILING ADDRESS: 100 Country Club Drive
Sebring, FL 33870

PERMIT NUMBER: FLA014315

LIMIT: Final
CLASS SIZE: N/A

REPORT: Monthly
GROUP: Domestic

FACILITY: Spring Lake Golf and Country Club STP
LOCATION: 100 Country Club Drive
Sebring, FL 33876

MONITORING GROUP NUMBER: R-002
MONITORING GROUP DESC:

COUNTY: Highlands

NO DISCHARGE FROM SITE:

MONITORING PERIOD From: 5-1-2011 To 5-31-2011

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Nitrate, Total (as N) PARM Code 00620 A Mon. Site No. EFA-01	Sample Measurement			6.4		MGL	0		
	Permit Requirement			12 (Max.)		MGL		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C PARM Code 80082 Y Mon. Site No. EFA-01	Sample Measurement			4.25		MGL	0		
	Permit Requirement			20.0 (An. Avg.)		MGL		Every Two Weeks	Grab
BOD, Carbonaceous 5 day, 20C PARM Code 80082 A Mon. Site No. EFA-01	Sample Measurement			4.59	8.4	MGL	0		
	Permit Requirement			30.0 (Mo. Avg.)	60.0 (Max.)	MGL		Every Two Weeks	Grab
pH PARM Code 00400 A Mon. Site No. EFA-01	Sample Measurement			7.3	7.5	SU	0		
	Permit Requirement			6.0 (Min.)	8.5 (Max.)	SU		5 Days/Week	Grab
Coliform, Fecal PARM Code 74055 A Mon. Site No. EFA-01	Sample Measurement			1.4		#/100ML	0		
	Permit Requirement			25 (Max.)		#/100ML		Every Two Weeks	Grab
Total Residual Chlorine (For Disinfection) PARM Code 50060 A Mon. Site No. EFA-01	Sample Measurement			0.6		MGL	1		
	Permit Requirement			1.0 (Min.)		MGL		Continuous	Meter

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Thomas A. Quinn - Operator	<i>Thomas A. Quinn</i>	883 214-5195	11/06/15

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

5-12-2011 BEI RECEPTABLE TRIPPED ^{AT 12:30} (REASON UNKNOWN) TO OFF POSITION, AUTO VALVE SWITCHED TO RES POND. (1730) RESET BEI SWITCH & CL2 PUMP CAME BACK ON.

Utility Corp of FL, Inc. improvements

Needed Immediately:

2 new pumps at the transfer pond to pump water to the golf course, with breakers and contactors, and metal head works. Estimated cost \$5,000-10,000

100 KW emergency generator. Estimated cost \$50,000 [DEP requirement, see DEP permit]

Storage shed, 12 x 20'. Estimate \$3,500

New chlorine feed system. Estimate \$4,000

Needed to accommodate new construction:

2 centrifugal blowers 20HP, 2 motors 20HP, electrical connections, Estimate \$15,000 [DEP requirement, see DEP permit]

Repair west clarifier. Estimate \$500-1,000