FILED DEC 03, 2014
DOCUMENT NO. 06562-14
FPSC - COMMISSION CLERK

# HC Waterworks, Inc.

December 1, 2014

Office of Commission Clerk Public Service Commission 2540 Shumard Oak Blvd. Tallahassee, FL 32399 14 DEC -3 PM 1: 3

Re: Docket No. 140158-WS – Application for increase in water and wastewater rates in Highlands
County by HC Waterworks, Inc. – Response to Staff's First Data Request

Dear Commission Clerk,

HC Waterworks, Inc. hereby submits it response Staff's First Data Request dated November 12, 2014.

- According to the system maps provided for Lake Josephine and Leisure Lakes, it appears that the
  Utility may be serving some customers outside of its authorized service territory. Please
  investigate and inform staff whether the company is serving outside its territory.
  - a) If so, please provide the number of customers and their addresses and a description of when and under what circumstances the Utility begin serving out of its authorized territory. Please note that if HC is serving outside its territory, it will be expected to file for an amendment to its territory.
  - b) If not, please explain the apparent discrepancy on the maps.

COM	<b>Response:</b> All customers of HC waterworks are within the certificated service area. The
AFD	customer connections (meters) are physically inside the service area. The original maps submitted were from the previous owner, Aqua Utilities Florida, Inc. Please find enclosed two
APA	copies of the Revised map for Lake Josephine/Sebring Lakes which has the correct service areas
ECO 2 Maps	indicated.
ENG	For the Leisure Lakes service area, there are no customers being served outside the certificated
GCL	service area. The customers on Jasmine Street have service connections within the service area.
IDM	The triangles for customers, 100, 102, 104, 106, 108, and 110 were shown outside the boundary
TEL	for ease of reading only. The lines on the map indicate where the customers are on the map, but the connections are at the front of the homes by Jasmine Street which is within the service
CLK	area. There is no need for a revision or an amendment.

2. According to F-1, the Utility is using more water for "other uses" than it is selling to customers. Please explain and provide supporting documents for "other uses" during the test year.

Response: The "other uses" is primarily used for the water quality consistency provided to the

5320 Captains Court, New Port Richey, Florida 34652

Mailing: C/O 4939 Cross Bayou Boulevard, New Port Richey, Florida 34652

Tel: 727-848-8292

HC Waterworks, Inc. Response to Staff First Data Request

customers of HC Waterworks, Inc. The two primary uses are for flushing the lines for maintenance and water quality and for the backwashing of the filters at the water treatment plants.

### Flushing

The majority of the water that is being used for other uses is for flushing the distribution systems to maintain water quality. Due to the naturally occurring high sulfide content in the wells, the water must be circulated in the distribution system to maintain the proper chlorine residual as required by FDEP. If the water is allowed to sit stagnant for any length of time, the hydrogen sulfide starts reforming and it exhibits a chlorine demand causing the residual to be reduced and ending with "rotten egg" smelly water and chlorine residuals lower than state requirements placing the utility in violation of Rule 62-555, Florida Administrative Code (F.A.C.). The operator records the amount of water flushed on a monthly basis for each system. This system was converted to a chloramines system in September 2014 to reduce the DBP results to within State and Federal MCL requirements.

### "Rule 62-550.200, F.A.C.

(d) All suppliers of water shall maintain a minimum free chlorine residual of 0.2 milligram per liter, or a minimum combined chlorine residual of 0.6 milligram per liter or an equivalent chlorine dioxide residual, throughout their drinking water distribution system at all times."

HC Waterworks has attempted to reduce the flushing amounts of water over the past year; however, when this occurred, the customer complaints on water quality increased. This residual hydrogen sulfides in the water distribution lines causes bacteria to begin feeding on the residuals. This interaction of the bacteria with the residual hydrogen sulfides increases the chlorine demand in the water. In order to address both the rotton egg smell and the reduction in chlorine in the lines, the utility is forced to increase its flushing. This situation is exacerbrated by the seasonality of the customer base.

HC Waterworks historically used both automatic blow offs, as well as manual flushing at varous points throughout the distribution system to address customer concerns on water quality. HC Waterworks has recently changed this protocol to utilize just the automatic blow offs and reduce manual flushing.

The Commission has previously considered flushing in order to meet DEP requirements in Order No. PSC-09-0385-FOF-WS, issued May 29, 2009, (pg 85). (see also Order No. PSC-14-0283-PAA-WS, issued May 30, 2014).

#### Other Uses – Filter backwash

The water systems of HC Waterworks has historically had issues with water quality. See Order No. PSC-11-0256-PAA-WS, issued June 13, 2011. Therefore, the previous owner of the utility, Aqua Utilities Florida installed Adedge filtration systems on the wells to address previous customer complaints. See Order PSC-12-0102-FOF-WS, issued on March 5, 2012.

Therefore, the HC Waterworks' water treatment plants (WTP) use an Adedge filter to remove elemental sulfur from the well water. To ensure proper treatment the filters must be backwashed to remove the sulfur build-up in the filter mdia. According to the manufacturer's manual, each filter must be backwashed for 10 minutes daily at 192 gpm. This volume is changed (increased) when the water quaility is not acceptable and may then be extended as neccessary. The volume of water used is recorded by the operator.

HC Waterworks, Inc. Response to Staff First Data Request

### Other uses - Inplant uses

Minimal use of water for washdown plant activities and sampling equipment.

3. Total gallons pumped shown on MFR Schedule F-1 does not match total gallons pumped indicated in the MORs.

<u>Response</u>: There were errors discovered in the reporting spreadsheet for the MORs. This was corrected and Revised MORs were submitted to DEP. Please find attached the Revised MORs that were submitted to DEP. Also find attached Revised MFR Schedules F-1, pages 1-3; and F-3, page 1.

4. Please provide supporting justification for the Utility's proposed water and wastewater customer deposits.

Response: The requested amount is calculated using an average residential monthly bill times two (2), in accordance with Rule 25-30.311(7), F.A.C. The amount requested in the MFRs is calculated by taking the Total Expected Residential Revenues on MFR Schedule E-2 and dividing it by the adjusted number of bills for the test year. This is then multiplied by two. If the staff wishes to utilize its adjusted average residential consumption amounts times the recommended gallonage rate plus the base facility charge (BFC) times two bills, HC Waterworks is in agreement with either methodology.

In addition, upon further review of HC Waterworks' response to the deficiency letter, it was discovered that the water usage in the various blocks and the wastewater capped usage was incorrect. The overall usage for water and wastewater was correct, but the appropriate blocks were not. In order to correct this inadvertent error, please find attached Revised MFR Schedules E-1w; E-1s; E-2w; and E-2s.

Should you have any questions, please contact me at (727) 848-8292, ext. 245.

Respectfully Submitted,

Troy Rendell

Manager of Regulated Utilities

// HC Waterworks, Inc.

Gallons of Water Pumped, Sold and Unaccounted For In Thousands of Gallons

Florida Public Service Commission

REVISED

Schedule:

F-1

HC Waterworks, Inc. Docket No. 140158-WS Page: Preparer: 1 of 3 W T Rendell

Historical Test Year Ending June 30, 2014

Lake Josephine and Sebring Lakes (interconnected)

Explanation: Provide a schedule of gallons of water pumped, sold and unaccounted for each month of the test year. The gallons pumped should match the flows shown on the monthly operating reports sent to DEP. The other uses may include plant use, flushing of hydrants and water and sewer lines, line breakages and fire flows. Provide all calculations to substantiate the other uses. If unaccounted for water is greater than 10%, provide an explanation as to the reasons why.

		(1)	(2)	(3)	(4)	(5)	(6)
						Unaccounted	%
Line		Gallons	Gallons	Gallons	Other	For Water	Unaccounted
No.	Month	Pumped	Purchased	Sold	Uses	(1)+(2)-(3)-(4)	For Water
Lake	Josephine a	nd Sebring Lak	ces (interconne	ected)			
1	Jul-13	6,166,210	0	1,700,000	3,041,857	1,424,353	23.1%
2	Aug-13	6,152,000	0	1,978,000	3,264,846	909,154	14.8%
3	Sep-13	5,029,800	0	1,987,000	2,485,235	557,565	11.1%
4	Oct-13	4,589,900	0	1,569,000	2,343,006	677,894	14.8%
5	Nov-13	4,471,380	0	2,240,000	2,277,879	(46,499)	-1.0%
6	Dec-13	4,556,100	0	1,918,000	2,598,754	39,346	0.9%
7	Jan-14	4,686,900	0	2,134,000	2,225,831	327,069	7.0%
8	Feb-14	4,055,800	0	2,345,000	1,828,326	(117,526)	-2.9%
9	Mar-14	5,022,000	0	2,122,000	1,852,948	1,047,052	20.8%
10	Apr-14	4,059,600	0	2,441,000	1,675,313	(56,713)	-1.4%
11	May-14	3,857,500	0	2,123,000	1,604,612	129,888	3.4%
12	Jun-14	3,951,600	0	2,173,000	1,819,817	(41,217)	-1.0%
13				00 12	G C	**********	
14	TOTAL	56,598,790	0	24,730,000	27,018,424	4,850,366	8.6%

Gallons of Water Pumped, Sold and Unaccounted For In Thousands of Gallons

Florida Public Service Commission

REVISED

Schedule: Page: Preparer: F-1 2 of 3

W T Rendell

HC Waterworks, Inc. Docket No. 140158-WS

Historical Test Year Ending June 30, 2014

Leisure Lakes

Explanation: Provide a schedule of gallons of water pumped, sold and unaccounted for each month of the test year. The gallons pumped should match the flows shown on the monthly operating reports sent to DEP. The other uses may include plant use, flushing of hydrants and water and sewer lines, line breakages and fire flows. Provide all calculations to substantiate the other uses. If unaccounted for water is greater than 10%, provide an explanation as to the reasons why.

		(1)	(2)	(3)	(4)	(5) Unaccounted	(6) %
Line		Gallons	Gallons	Gallons	Other	For Water	Unaccounted
No.	Month	Pumped	Purchased	Sold	Uses	(1)+(2)-(3)-(4)	For Water
Leisu	re Lakes					(1) (2) (0) (1)	1 of vvalor
1	Jul-13	1,626,100	0	311,000	1,202,645	112,455	6.9%
2	Aug-13	1,561,207	0	715,000	787,329	58,878	3.8%
3	Sep-13	1,319,570	0	412,000	805,050	102,520	7.8%
4	Oct-13	1,179,920	0	294,000	774,300	111,620	9.5%
5	Nov-13	1,213,000	0	478,000	725,700	9,300	0.8%
6	Dec-13	1,550,900	0	457,000	837.300	256,600	16.5%
7	Jan-14	1,867,300	0	493,000	1,233,822	140,478	7.5%
8	Feb-14	1,869,700	0	660,000	1,124,534	85,166	4.6%
9	Mar-14	2,066,620	0	572,000	1,425,063	69,557	3.4%
10	Apr-14	2,187,100	0	649,000	1,323,465	214,635	9.8%
11	May-14	2,494,600	0	533,000	1,794,525	167,075	6.7%
12 13	Jun-14	2,297,750	0	414,000	1,882,202	1,548	0.1%
14	TOTAL	21,233,767	0	5,988,000	13,915,935	1,329,832	6.3%

Gallons of Water Pumped, Sold and Unaccounted For In Thousands of Gallons

Florida Public Service Commission

REVISED

Schedule:

F-1 3 of 3

Docket No. 140158-WS Historical Test Year Ending June 30, 2014 Page: Preparer:

W T Rendell

**Combined Total** 

HC Waterworks, Inc.

Explanation: Provide a schedule of gallons of water pumped, sold and unaccounted for each month of the test year. The gallons pumped should match the flows shown on the monthly operating reports sent to DEP. The other uses may include plant use, flushing of hydrants and water and sewer lines, line breakages and fire flows. Provide all calculations to substantiate the other uses. If unaccounted for water is greater than 10%, provide an explanation as to the reasons why.

		(1)	(2)	(3)	(4)	(5)	(6)
Line		0-11-	0 "	0 "		Unaccounted	%
Line	(202) 00	Gallons	Gallons	Gallons	Other	For Water	Unaccounted
No.	Month	Pumped	Purchased	Sold	Uses	(1)+(2)-(3)-(4)	For Water
Comb	ined Total						
1	Jul-13	7,792,310	0	2,011,000	4,244,502	1,536,808	19.7%
2	Aug-13	7,713,207	0	2,693,000	4,052,175	968,032	12.6%
3	Sep-13	6,349,370	0	2,399,000	3,290,285	660,085	10.4%
4	Oct-13	5,769,820	0	1,863,000	3,117,306	789,514	13.7%
5	Nov-13	5,684,380	0	2,718,000	3,003,579	(37, 199)	-0.7%
6	Dec-13	6,107,000	0	2,375,000	3,436,054	295,946	4.8%
7	Jan-14	6,554,200	0	2,627,000	3,459,654	467,546	7.1%
8	Feb-14	5,925,500	0	3,005,000	2,952,860	(32,360)	-0.5%
9	Mar-14	7,088,620	0	2,694,000	3,278,011	1,116,609	15.8%
10	Apr-14	6,246,700	0	3,090,000	2,998,778	157,922	2.5%
11	May-14	6,352,100	0	2,656,000	3,399,137	296,963	4.7%
12	Jun-14	6,249,350	0	2,587,000	3,702,019	(39,669)	-0.6%
13	0=			N 5	S 18	10010001	1707/07
14	TOTAL	77,832,557	0	30,718,000	40,934,359	6,180,198	7.9%

#### Water Treatment Plant Data

#### Florida Public Service Commission

HC Waterworks, Inc. Docket No. 140158-WS Historical Test Year Ending June 30, 2014
Lake Josephine/Sebring Lakes - Interconnected:

REVISED Schedule: F-3 Page: Preparer: 1 of 2

WT Rendell

Explanation: Provide the following information for each water treatment plant. If the system has water plants that are interconnected, the data for these plants may be combined. All flow data must be obtained from the monthly operating reports (MORs) sent to the Department of Environmental Protection.

Line	(1)		(2)	(3)
No.	Description		Date	GPD
1	Plant Capacity (Lake Josephine/Sebring Lakes):			
2	LJ - Well #1 - (350 gpm X 16 hrs X 60 min) per Rule 25-30.4325(6)(b), F.A.C.			222 22
3	LJ - Well #2 - (350 gpm X 16 hrs X 60 min) per Rule 25-30.4325(6)(b), F.A.C.			336,000
4	SL - Well # 1 - (225 gpm X 16 hrs X 60 min) per Rule 25-30.4325(6)(b), F.A.C.			336,000
5	SL - Well # 2 - (225 gpm X 16 hrs X 60 min) per Rule 25-30.4325(6)(b), F.A.C.			216,000 216,000
6	The hydraulic rated capacity. If different from that shown on the DEP operating or construction permit, provide an explanation.			
	Lake Josephine WTP #3 (wells #1&2) - DEP Permit: 300,000			
	Sebring Lakes WTP #4 (wells 1&2) - DEP Permit: 280,000			
7	Firm Reliable Capacity - excluding largest well. (Rule 25-30.4325(6), Florida Admistrative Code)			580,000
8	Maximum Day:		07/31/13	395,400
9	The single day with the highest pumpage rate for the test year. Explain, on a separate page,		01101110	333,400
10	if fire flow, line-breaks or other unusual occurrences affected the flow this day.			
11	Five-Day Max Year:	Day		
12	The five days with the highest pumpage rate from any one month in the test year.	1	07/30/13	229.300
13	Provide an explanation if fire flow, line-breaks or other unusual occurrences affected	2	07/20/13	231,200
	the flows on these days.	3	07/09/13	237,200
		4	07/10/13	299,000
		5	07/31/13	395,400
				278,420
14	Average Daily Flow			155,714
15	Required Fire Flow			750
16	The standards will be those as set by the Insurance Service Organization or by a			750
17	governmental agency ordinance. Provide documents to support this calculation.			



## REVISED 11/13/2014

See Pages 4 for Instructions.

PWS Name:	Lake Josephine Plant #3			PWS Identification Number:	6280162
WS Type:	✓ Community ✓ Non-Transient Non-Community	Transient Non-Com	munity	Consecutive	
lumber of Service Connec				Population Served at End of Month:	1,250
WS Owner:	US Water Services Corporation			*	
ontact Person:	Melisa Rotteveel		Conta	ct Person's Title: Complian	nce Manager
ontact Person's Mailing A	ddress: 4939 Cross Bayou Blvd		City: New Port Rich	State: Florida	Zip Code: 34652
ontact Person's Telephone	e Number: 866-753-8292		Conta	ct Person's Fax Number: 727-849-	4219
ontact Person's E-Mail Ac	ddress: mrotteveel@uswatercorp.net				
Vater Treatment Pl	ant Information				
ant Name:	Lake Josephine Plant #3			Plant Telephone Number:	941-377-9456
ant Address:	1949 Canary Way		City: Sebring	State: Florida	Zip Code: 33872
ype of Water Treatment b	y Plant:	Finished Water			
ermitted Maximum Day C	Operating Capacity of Plant, gallons per day:	300,000			
ant Category (per subsect	ion 62-699.310(4), F.A.C.): V			Class (per subsection 62-699.310(4), F.	
Licensed Operators	Name	License Class	License Number	Day(s) / Sh	ift(s) Worked
ead/Chief Operator:	Ron Derossett	A	3531	Operation Manager Days 1st Shift	
Other Operators:	Howard Short	A	3304	Operator Days 1st Shift	
ertification by Leac	I/Chief Operator			是是"A"的"是是"的"是"的"是"的"是"的"是"的"是"的"是"的"是"的"是"的"	Partition Table Table 1989
the undersigned wat	er treatment plant operator licensed in Florida, am the lead/ch	ief operator of the v	vater treatment pla	nt identified in part I of this rep	ort. I certify that the
formation provided	in this report is true and accurate to the best of my knowledge	and belief. I certify	that all drinking	water treatment chemicals used	at this plant conform to NS
	60 or other applicable standards referenced in subsection 62-				
	a licensed operator staffed or visited this plant during the mo				
	treatment process performance records. Furthermore, I agree		aditional operation	is records to the PWS owner so	the PWS owner can retain
em, together with 96	pies of this report, at a convenient location for at least ten yea	rs.			
///	1/71				
1	16 11/14/14 200				A 3531
100	Ron Deros	3000			
gnature and Date	Printed or	Typed Name			License Number

PWS II	): ·			6280162		Plant Name:	Lake Joseph	ine Plant	#3					
	х													
III. D	aily Data f	or the Moi	nth/Year of:			June, 2013								
Means	of Achieving	Four-Log V	/irus Inactivat	ion/Removal:	✓ F	ree Chlorine		Chlor	rine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
Ultr	aviolet Radia	tion			Other (Describe):									
Type o	f Disinfecta	ınt Residua	al Maintainec			✓ Free Chlori	пе По	ombined (	Chlorine (Chlo	oramines)	Chlo	rine Dioxide	2	
The second	THE BUILDING	SIL HARVE	TRESTONE UNE UNE	36 JHW	CT Calculations, o			Four-Los	Virus Inac	tivation, if A	Applicable*	Elect .		
							culations				UVI	Dose	A SPACE	
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C)	Disinfectant Contact Time (T) at C Measurement	Lowest CT Provided Before or at First Customer		pH of Water,		Lowest Operating	Minimum UV Dose Required,	Lowest Residual Disinfectant Concentration at	Emergency or Abnormal Operating Conditions;
					Before or at First Customer During	Point During Peak Flow,	During Peak Flow, mg-	Temp of		Minimum CT Required, mg	UV Dose,	mW-	Remote Point in Distribution	Repair or Maintenance Work that Involves Taking Water System Components Out of
			in or sure		Peak Flow, mg/L	minutes	min/L	Water, OC		min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Operation
1	X	24.0	138,000		2.8								0.9	
2		24.0	124,000											
3	X	24.0	124,000		2.4								1.0	
4	X	24.0	114,000		1.9								0.9	
5	X	24.0	109,000		3.0								1.1	
7	X	24.0 24.0	131,000 79,000		1.9		-		_				1.6	
8	X	24.0	120,000		2.9								1.0	
9		24.0	122,500		ha , ha								1.2	
10	Х	24.0	122,500		2.8								1.0	
11	X	24.0	117,000		2.4								1.1	
12	X	24.0	112,000		2.1		1		10.0117				0.9	
13	X	24.0	117,000		1.7		11 11 11						0.8	
14	X	24.0	121,000		2.2								1.0	
15	X	24.0	124,000		1.7								0.9	
16		24.0	133,500											
17	X	24.0	133,500		2.9								1.1	
18	X	24.0	153,000		1.7								0.8	
20	X	24.0	96,000		2.3								0.7	
21	X	24.0 24.0	114,000 112,000		0.9 3.9								1.2	
22	X	24.0	111,000		3.0								1.3	
23		24.0	131,500		3.0								1.5	
24	Х	24.0	131,500		3.4								0.9	
25	X	24.0	125,000		3.3					-			1,4	
26	X	24.0	127,000		2.6								1.2	
27	Х	24.0	123,000		3.0								1.3	
28	X	24.0	127,000		2.0								1.1	
29	X	24.0	125,000		2.6								1.0	
30		24.0	10,000											
31		24.0												
	VI SANCE	10.00	3,528,000											
Avgerage	STATE OF THE STATE	Director and	117,600											

Maximum 138,000 \* Refer to the instructions for this report to determine which plants must provide this information.



# REVISED 11/13/2014

See Pages 4 for Ins	tructions.							
I. General Information	on for the Month/Y	ear of: June, 2013	3					
A. Public Water Syste	m (PWS) Informat							
PWS Name:	Lake Josephine (Sebr	ing Lakes) Plant #4						
PWS Type:	Community					PWS Identification Number:	6280162	
Number of Service Conne	ections at End of Month	Non-Transient Non-Commun	nity 🔲 T	Fransient Non-Com	nmunity	Consecutive		
PWS Owner:	US Water Services Co	65			Tot	al Population Served at End of M	fonth: 75	
Contact Person:	Melisa Roteveel	прогации						
Contact Person's Mailing		PO Box 2480				tact Person's Title:		
Contact Person's Telephon		(352) 787-0980			City: New Port Ri		Zip Code:	34652
Contact Person's E-Mail A		mrotteveel@uswatercorp.ne	ot		Con	tact Person's Fax Number: 9	41-378-3554	520 55.04
3. Water Treatment Pl	lant Information	motteveel@uswatercorp.fie	<u>et</u>					
Plant Name:	Lake Josephine Plant	44						
Plant Address:	5313 Knight Ave					Plant Telephone Number:	941-377-945	6
Type of Water Treatment b		✓ Raw Ground Water	D 1 15		City: Sebring	State: Florida	Zip Code:	33875
Permitted Maximum Day (		ant gallons per day:	Purchased Fini					
Plant Category (per subsect	tion 62-699.310(4) FA (	C.): V		280,000				
Licensed Operators	SET WILESON ENTRY IN	Name		License Class	Plan	t Class (per subsection 62-699.31	0(4), F.A.C.): C	
Lead/Chief Operator:	Ron Derossett	and the second second	The second secon	License Class	License Numbe		s) / Shift(s) Worked	
Other Operators:	Howard Short			A	3531	Utility Manager		
				A	3304	Operator		
Certification by Lead.	/Chief Operator		A. Phylodic	Te 2010 1 251 50	4 S V (1757) 1853			
I, the undersigned water	er treatment plant or	perator licensed in Florida, am	the lead/chief o	parator of the		OP EXCESS SYNCHOLD	品类别。	ami au 60 //
information provided in	n this report is true	and accurate to the best of my	knowledge and	belief to de	ater treatment pla	nt identified in part I of the	is report. I certify that	the
International Standard	60 or other applical	and accurate to the best of my ble standards referenced in sub- staffed or visited this plant dur	anation (2,555	Delief. I certify	that all drinking	water treatment chemicals	used at this plant confe	orm to NSF
prepared each day that	a licensed operator	staffed or visited this plant d	section 62-355.	320(3), F.A.C.	I also certify that	the following additional of	perations records for th	nis plant were
applicable, appropriate	treatment process p	staffed or visited this plant dur erformance records. Furtherm	ring the month i	ndicated above:	(1) records of an	nounts of chemicals used a	and chemical feed rates	and (2) if
them together with car	sies of this report	erformance records. Furtherm	nore, I agree to p	provide these add	ditional operation	s records to the PWS own	er so the PWS owner of	an retain
meni, toggetter with cop	nes of this report, at	a convenient location for at le	east ten years.				- so me i no omner e	an retain
	) &							
15.1/2		11/1/11						
1)		11/1/	Ron Derossett				A 3531	
Signature and Date			Printed or Typed	Nome		_	- <u> </u>	
			rinica or Typea	radine			License Numbe	er

Means of Achievi Ultraviolet Rai Type of Disinfe  Days Plai Staffed of Visited by Month Month  Days Plai Staffed of Visited by Month Month Month	ng Four-Log diation ctant Residu.	Virus Inactivati al Maintained Net Quantity	ion/Removal:	Other (Describe):			mbined Ch	rine Dioxide nlorine (Chlora Virus Inacti	amines)	oplicable*	rine Dioxide		Chlorine (Chloramines)
Means of Achievi Ultraviolet Rad Type of Disinfe  Days Plat Day of Staffed of the Visited by Month Operator	ng Four-Log diation ctant Residu.	Net Quantity of Finished Water Producted,	ion/Removal:	Other (Describe): tion System: CT Calculations,	Free Chlorine  Free Chlorin  Or UV Dose, to  CT Cal	Demostate F	mbined Ch	nlorine (Chlora	amines)	Chlo	rine Dioxide		Chlorine (Chloramines)
Means of Achievi Ultraviolet Rad Type of Disinfe  Days Plat Day of the Visited b Month Operator	ng Four-Log diation ctant Residu.	Net Quantity of Finished Water Producted,	ion/Removal:	Other (Describe): tion System: CT Calculations,	Free Chloring Or UV Dose, to CT Cal	Demostate F	mbined Ch	nlorine (Chlora	amines)	Chlo	rine Dioxide		Chlorine (Chloramines)
Ultraviolet Rai Type of Disinfe  Days Plai Day of Staffed of Visited by Month Operator	diation ctant Residua  tr Hours plant in Operation	Net Quantity of Finished Water Producted,	l in Distribu	Other (Describe): tion System: CT Calculations,	Free Chloring Or UV Dose, to CT Cal	Demostate F	mbined Ch	nlorine (Chlora	amines)	Chlo	rine Dioxide		
Days Plan Day of the Visited b Month Operator	tant Residus  Hours plant in Operation	Net Quantity of Finished Water Producted,	in Distribu	tion System: CT Calculations,	or UV Dose, to CT Cal	Demostate F	mbined Ch Four-Log	virus Inacti	amines) ivation, if A	oplicable*	rine Dioxide	OF STATE OF THE	
Days Plat Day of Staffed of the Visited b Month Operator	t Hours plant in Operation	Net Quantity of Finished Water Producted,	Peak Flow	CT Calculations,	or UV Dose, to CT Cal	Demostate F	Four-Log	Virus Inacti	ivation, if A	oplicable*	rine Dioxide	DESCRIPTION	
Day of Staffed of Visited by Month Operator	Hours plant in Operation	of Finished Water Producted,	THE RESERVE OF THE PARTY OF THE		CT Cal		our-Log	virus macu	ivation, II A			ACA BOOK	
Day of Staffed of Visited by Month Operator	Hours plant in Operation	of Finished Water Producted,	THE RESERVE OF THE PARTY OF THE	Lowest Residual		culations				TINTI		A BORDON TO STATE OF	
Day of the Visited by Month Operator	Hours plant in Operation	of Finished Water Producted,	THE RESERVE OF THE PARTY OF THE	Lowest Residual	Disinfectant			_		UVI	Jose		
			Rate, gpd.	Disinfectant Concentration (C) Before or at First Customer During	Contact Time (T) at C Measurement Point During Peak Flow,	Lowest CT Provided Before or at First Customer During Peak Flow, mg-		pH of Water, if Applicable	Minimum CT Required, mg- min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1 v	24.0	20,000	SOLOTH-SECS	Peak Flow, mg/L	minutes	min/L		THE PARTY OF		LEGISCO SHOW	Stone Mant	System, mg/L L3	(Processo)
1 X	24.0			2.6								1.3	
3 X	24.0	24,500 24,500		1.8				_				0.9	
4 X	24.0	34,000		1.4			_	_				0.7	
5 X	24.0			1.6								0.7	
6 X	24.0	33,000		1.9								0.6	
7 X	24.0	20,000		2.4								0.7	
8 X	24.0	31,000		2.7								0.8	
9	24.0	27,500											
10 X	24.0	27,500		2.9								0.7	
11 X	24.0	26,000		2.4					L			1,5	
12 X	24.0	26,000		2.0								1.4	
13 X	24.0	25,000		2.1								1.5	
14 X	24.0	25,000		2.4								1.4	
15 X	24.0	27,000		1.6								0.8	
17 X	24.0	29,500		2.0								0.9	
18 X	24.0	29,500 35,000		2.0 1.2		_						0.9	
19 X	24.0	21,000		1.1								0.7	
20 X	24.0	34,000		2.3								0.9	
21 X	24.0	21,000		2.6								1.1	
22 X	24.0	27,000		3,4								1.2	
23	24.0	30,500											
24 X	24.0	30,500		3.4								1.1	
25 X	24.0	34,000		2.6								1.2	
26 X	24.0	35,000		2.7								1.1	
27 X	24.0	35,000		3.1								1.0	
28 X	24.0	36,000		1.8								1.2	
29 X 30	24.0	33,000		2.6								1.0	
31	24.0	0											
otal	24.0	947.000											
vgerage	ST 201 101	847,000 28,240											

Maximum 39,000

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



# MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

Daily Finished-Water Production for the Month/Year of : June 2013 Community Water System (CWS) Name: Lake Josephine Plants 3 & 4 Public Water System (PWS) Identification Number: 6280162 Plant 1 Name: Plant 2 Name: Plant 3 Name: Plant 4 Name: Plant 5 Name: Plant 6 Name: Plant 7 Name: Plant 8 Name: Plant 9 Name: Plant 10 Name: Lake Josephine Lake Josephine Plant 3 Plant 4 Permitted Maximum Day Operating Capacity of Each Plant, gallons per day Total 580,000 300,000 280,000 Day of Month Net Quantity of Finished Water Produced by Each Plant, gallons Total 138,000 39,000 177,000 1 2 124,000 24,500 148,500 148,500 3 124,000 24,500 4 114,000 148,000 34,000 5 109.000 26,000 135,000 6 131,000 33,000 164,000 7 79,000 20,000 99,000 8 120,000 31,000 151,000 122,500 9 27,500 150,000 10 122,500 27,500 150,000 117,000 11 26,000 143,000 12 112,000 26,000 138,000 13 117,000 25,000 142,000 14 121,000 25,000 146,000 124,000 27,000 15 151,000 133,500 29,500 16 163,000 17 133,500 29.500 163,000 153,000 18 35,000 188,000 19 96,000 21,000 117,000 20 34,000 114,000 148,000 21 112,000 21,000 133,000 22 111,000 27,000 138,000 23 131,500 30.500 162,000 24 131,500 30,500 162,000 25 125,000 34,000 159,000 26 127,000 35,000 162,000 27 123,000 35,000 158,000 28 127,000 36,000 163.000 29 125,000 33,000 158,000 30 10,000 0 10.000 Total 4,375,000 Avg. 141,129 Max. 188,000





See Pages 4 for Instructions.

L. General Information for the

	Lake Josephine Plant #3			PWS Identification Number:	5284137
PWS Type:	✓ Community ✓ Non-Transient Non-Communi	ty Transient Non-Com	munity	Consecutive	3284137
lumber of Service Connec	ctions at End of Month: 536	Transient Non-com		Population Served at End of Month:	1,250
WS Owner:	US Water Services Corporation		Total	Topulation Served at End of Month.	1,230
ontact Person:	Melisa Rotteveel		Conts	act Person's Title: Compl	iance Manager
ontact Person's Mailing A	ddress: 4939 Cross Bayou Blvd		City: New Port Rich		Zip Code: 34652
ontact Person's Telephone				ict Person's Fax Number: 727-84	The state of the s
ontact Person's E-Mail Ad			Conta	127-84	9-4219
Vater Treatment Pla	ant Information				
ant Name:	Lake Josephine Plant #3			Plant Telephone Number:	941-377-9456
ant Address:	1949 Canary Way		City: Sebring	State: Florida	Zip Code: 33872
ype of Water Treatment by		Purchased Finished Water	eny, scoring	State, Horida	Zip Code: 33872
ermitted Maximum Day O	perating Capacity of Plant, gallons per day:	300.000			
ant Category (per subsecti	ion 62-699.310(4), F.A.C.): V		Plant	Class (per subsection 62-699.310(4),	F.A.C.): C
Licensed Operators	Name	License Class	License Number		Shift(s) Worked
ead/Chief Operator:	Ron Derossett	A	3531	Operation Manager Days 1st Shift	
	Howard Short	A	3304	Operator Days 1st Shift	ß.
The state of			5501	Days 1st Shift	
<b>一种</b>					
ertification by Lead/	(Chief Owenster)				
		VALUE OF SUPERIOR OF SUPERIOR			
ne undersigned wate	er treatment plant operator licensed in Florida, am t	he lead/chief operator of the w	ater treatment plan	nt identified in part I of this rea	port I certify that the
ormation provided if	i uns report is true and accurate to the best of my k	nowledge and belief. I certify	that all drinking u	vater treatment chemicals used	l at this plant conform to Mi
ernational Standard	60 or other applicable standards referenced in subs	ection 62-555 320(3) F A C	I also certify that t	he following additional anamy	de this plant conform to N.
pared each day that	a licensed operator staffed or visited this plant duri	ing the month indicated above	(1) records of an	are following additional operation	tions records for this plant
olicable appropriate	treatment process performance records. Furtherm	ing the month indicated above:	(1) records of am	iounts of chemicals used and c	hemical feed rates; and (2)
m together with	treatment process performance records. Furthermore	ore, I agree to provide these ad	ditional operations	s records to the PWS owner so	the PWS owner can retain
an, together with cop	ries of this report, at a convenient location for at le	ast ten years.			
	1 )				
(_ \	1/1/1/11	Ron Derossett			A 3531

PWS II	):			5284137		Plant Name:	Lake Joseph	ine Plant	#3					
	15020													
III. D	aily Data fo	or the Mor	nth/Year of:			July, 2013								
Means	of Achieving	Four-Log V	irus Inactivat	ion/Removal:	✓F	ree Chlorine		Chlor	ine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
	aviolet Radia				Other (Describe):			7 - N						
50 50000000		PROUES.	l Maintained			✓ Free Chlori	пе По	ombined (	Chlorine (Chlo	ramines)	Chlo	rine Dioxide	9	
Турсо	Distillecti	The residue	I wantamed	I District	CT Calculations, o								of The Street	TE DIA GENERAL
			6 THE RESERVE	19.13	C1 Calculations, c		culations	our Dog	, ritus inne		UV	Dose	No Park Walle	
5 6						T					0,	1		第15条件 <b>对图</b> 图 <b>在</b> 第15
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>O</sup> C		Minimum CT Required, mg min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	147,000		3.8	innuces	minut	11.01.01.		- Market -	in it see out	300,011	1.1	
2	X	24.0	124,000		3.7				_				1.2	
3	X	24.0	129,000	-	3.8	<b></b>							1.0	
4	X	24.0	129,000		1.2								0.8	
5	X	24.0	156,000		2.9								1.0	
6		24.0	130,500		2,7									
7	X	24.0	130,500		2.8								1.1	
8	X	24.0	127,000		0.4								0.3	
9	X	24.0	149,000		0.4								0.2	
10	X	24.0	227,000		4.0								0.8	
11	X	24.0	159,000		3.4								1.8	
12	X	24.0	146,000		2.4								1.6	
13		24.0	126,000											Weekend visit missed
14		24.0	126,000											
15	X	24.0	126,000		0.7								0.4	
16	X	24.0	155,000		3.4								2.0	
17	X	24.0	148,000		1.7								0.8	
18	X	24.0	148,000		3.0								2.1	
19	X	24.0	115,000		2.2								2.1	
21	X	24.0	184,000		3.8								2.6	
22		24.0	124,500		2.7								1.0	
23	X	24.0	124,500		2.7		-					-	1.0	
24	X	24.0	136,000		2,9								2.9	
25	X	24.0	167,000		3.2 3.2								2.5	
26													2.7	
27	X	24.0	151,000 155,000		3.9								1.1	
28	^	24.0	152,000		2.0							-	4,45	
29	х	24.0	152,000		3.9								3.0	
30	X	24.0	161,000		1.9								1.2	
31	X	24.0	217,000		4.3							-	2.9	
Total		E PLOSING	4,552,000		1,0									
Avgerage		CARDINATI	146,839											

Maximum 227,000 \* Refer to the instructions for this report to determine which plants must provide this information.



Signature and Date

11/13/2014

See Pages 4 for Insti	uctions				
I. General Information	for the Month/Year of: July,	2013			
A. Public Water System					
PWS Name:	Lake Josephine Plant #4			PWS Identification Number:	5284137
PWS Type:	✓ Community Non-Transient Non-Co	ommunity Transient Non-Comm		Consecutive	
Number of Service Connec			Tota	Population Served at End of Month:	75
PWS Owner:	US Water Services Corporation				
Contact Person:	Melisa Roteveel			tact Person's Title:	
Contact Person's Mailing A			City: New Port Ric	ch State: Florida	Zip Code: 34652
Contact Person's Telephone			Cont	tact Person's Fax Number: 941-3	78-3554
Contact Person's E-Mail Ac		orp.net_			
B. Water Treatment Pla					
Plant Name:	Lake Josephine Plant #4			Plant Telephone Number:	941-377-9456
Plant Address:	5313 Knight Ave		City: Sebring	State: Florida	Zip Code: 33875
Type of Water Treatment by		Purchased Finished Water			
	perating Capacity of Plant, gallons per day:	280,000			
Plant Category (per subsect		V		t Class (per subsection 62-699.310(4)	
Licensed Operators	Name	License Class	License Numbe	r Day(s) /	Shift(s) Worked
Lead/Chief Operator:		3304	Operator	ALLOW SERVICES	
Other Operators:	Ron Derossett	A	3531	Operation Manager	
					457400
					The Mark Town
出了的 法法则指令法则					
II. Certification by Lead	No. 10 Control of the	(GALLERS AND SELECTION ) 19 19 19 19 19 19 19 19 19 19 19 19 19			
I, the undersigned water	er treatment plant operator licensed in Floric	da, am the lead/chief operator of the w	ater treatment pla	ant identified in part I of this r	eport. I certify that the
	n this report is true and accurate to the best				
International Standard	60 or other applicable standards referenced	in subsection 62-555.320(3), F.A.C.	I also certify that	the following additional oper	rations records for this plant were
prepared each day that	a licensed operator staffed or visited this pla	ant during the month indicated above:	(1) records of a	mounts of chemicals used and	chemical feed rates; and (2) if
annlicable appropriate	treatment process performance records. Fu	urthermore Legree to provide these ad	ditional aparatio	no records to the DWC	chemical feed fates, and (2) if
tham together with an	in a fability and a state of the state of th	rithermore, i agree to provide these ad	ditional operatio	is records to the PWS owners	so the PWS owner can retain
them, together with co	pies of this report, at a convenient location f	or at least ten years.			
1/1/	1 4 11				
X //	04 11/14/14	B D			
->		Ron Derossett			A 3531

Printed or Typed Name

REVISED 11/13/2014

License Number

PWS II	):			5284137		Plant Name:	Lake Josephi	ine Plant #	4					
							-							
III. D	aily Data f	or the Mo	nth/Year of:			July, 2013								
Means	of Achieving	Four-Log V	/irus Inactivat	ion/Removal:	✓ F	ree Chlorine		Chlor	rine Dioxide		Ozone		Combined	Chlorine (Chloramines)
Ultr	aviolet Radia	tion			Other (Describe):									
Туре о	Disinfecta	ant Residua	al Maintained	l in Distribu	tion System:	✓ Free Chlori	ne 🗆 Co	ombined Ch	nlorine (Chlor	amines)	Chlo	orine Dioxide	9	
11.4			CALP STAR	27-1-17	CT Calculations,	or UV Dose, to	Demostate l	Four-Log	Virus Inact	ivation, if A	pplicable*			Comment of the section
				Sara			lculations				UV	Dose		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow,	Lowest CT Provided Before or at First Customer During Peak Flow, mg-		pH of Water, if Applicable		Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution	Emergency or Abnormal Operating Condition Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
5		- 19			Peak Flow, mg/L	minutes	min/L	1.00				TO MALE THE	System, mg/L	
1	X	24.0	36,850		1.7	minutes	Innot	-			CONTRACTOR DE	SIMPLE C	0.5	THE GROUP THE MENT
2	X	24.0	32,000		3.3								1.0	
3	X	24.0	34,000		0.9								0.3	
4	X	24.0	37,200		1.3								0.5	
5	X	24.0	43,900		2.4								1.1	
6		24.0	39,780										0.8	
7	X	24.0	39,780		1.8								0.8	
8	X	24.0	41,100		4.3								2.1	
9	X	24.0	88,200										0.4	
10	X	24.0	72,000		4.5								0.9	
11	X	24.0	54,000		3.8								1.2	
12	X	24.0	48,000		3.4								2.6	
14		24.0	54,100											Weekend visit missed
15	v	24.0	25,900											
16	X	24.0 24.0	25,900 43,300		1.4								0.7	
17	X	24.0	55,600		4.2								1.5	
18	X	24.0	35,500		3.6 3.6								2.0	
19	X	24.0	49,200		3.4								2.2	
20	X	24.0	47,200		2.1								2.3 0.7	
21		24.0	33,700		A					-			0,7	
22	X	24.0	33,700		3.7								2.2	
23	X	24.0	77,400		1.6								0.8	
24	X	24.0	60,700		3.6								1.2	
25	X	24.0	46,200		3.1								1.1	
26	X	24.0	54,400		1.6								0.9	
27	X	24.0	43,200		3.6								1.7	
28		24.0	57,350											
29	X	24.0	57,350		2.3								1.1	
30	X	24.0	68,300		3.2								1.4	
31	X	24.0	178,400		3.4								1.7	
otal		184	1,614,210											
vgerage		1000	52,071											

Maximum 178,400

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



#### MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE **MULTIPLE TREATMENT PLANTS**

Daily Finished-Water Production for the Month/Year of : July 2013 Community Water System (CWS) Name: Lake Josephine Plants 3 & 4 Public Water System (PWS) Identification Number: 5284137 Plant 1 Name: Plant 2 Name: Plant 3 Name: Plant 4 Name: Plant 5 Name: Plant 6 Name: Plant 7 Name: Plant 8 Name: Plant 9 Name: Plant 10 Name: Lake Josephine Lake Josephine Plant 3 Plant 4 Permitted Maximum Day Operating Capacity of Each Plant, gallons per day Total 300,000 Day of 280.000 580,000 Month Net Quantity of Finished Water Produced by Each Plant, gallons Total 147,000 36,850 183,850 2 124,000 32,000 156,000 3 129,000 34,000 163,000 4 129,000 37,200 166,200 156,000 5 43,900 199,900 6 130,500 39,780 170,280 130,500 7 39,780 170,280 8 127,000 41,100 168,100 149,000 9 88,200 237,200 10 227,000 72,000 299,000 159,000 11 54,000 213,000 12 146,000 48,000 194,000 13 126,000 54,100 180,100 14 126,000 25,900 151,900 15 126,000 25,900 151,900 16 155,000 43,300 198,300 148,000 17 55,600 203,600 18 148,000 35,500 183,500 19 115,000 49,200 164,200 20 184,000 47,200 231,200 21 124,500 33,700 158,200 22 124,500 33,700 158,200 23 136,000 77,400 213,400 24 167,000 60,700 227,700 25 130,000 46,200 176,200 26 151,000 54,400 205,400 27 155,000 43,200 198,200 28 152,000 57,350 209,350 29 152,000 57,350 209,350 30 161,000 68,300 229,300 31 217,000 178,400 395,400 Total 6.166.210 Avg. 198,910 Max.

395,400

Dist #1
147,000
124,000
129,000
129,000
156,000
130,500
130,500
127,000
149,000
227,000
159,000
146,000
126,000
126,000
126,000
155,000
148,000
148,000
115,000
184,000
124,500
124,500
136,000
167,000
130,000
151,000
155,000
152,000
152,000
161,000
217,000
4,552,000
146,839

52,071

6,166,210





See Pages 4 for Instructions.

WS Name:	n (PWS) Information Lake Josephine Plant #3			PWS Identification Nun	nber: 5	284137	
WS Type:	Community Non-Transient Non	n-Community Transient Non		Consecutive			
imber of Service Connec			Tota	l Population Served at End	of Month: 1	,250	
VS Owner:	US Water Services Corporation		•				
ontact Person:	Melisa Rotteveel			act Person's Title:	Compliance Man		
ontact Person's Mailing A	Address: 4939 Cross Bayou Blvd		City: New Port Ri			Lip Code:	34652
ontact Person's Telephone			Con	act Person's Fax Number:	727-849-4219		
ontact Person's E-Mail Ac		rcorp.net					
Vater Treatment Pl							
lant Name:	Lake Josephine Plant #3			Plant Telephone Number		41-377-945	
lant Address:	1949 Canary Way		City: Sebring	State: Florida	2	Lip Code:	33872
vpe of Water Treatment b		Purchased Finished Water					
A because of the second of the	Operating Capacity of Plant, gallons per day:	300,000					
	tion 62-699,310(4), F.A.C.):	V		t Class (per subsection 62-		С	
Licensed Operators		License C	7/11) Y. O. I.		Day(s) / Shift(s) V	Vorked	
ead/Chief Operator:		A	3531	T. Processing and the second	ays 1st Shift		
Other Operators:	Howard Short	A	3304	Operator Da	ys 1st Shift		
						Y	

PWS ID	); 1			5284137		Plant Name:	Lake Joseph	ine Plant	<b>#</b> 3					
						2010								
III. D	aily Data fo	or the Mon	th/Year of:		经制度管理制度	August, 2013					По		Combined Ct	nlorine (Chloramines)
Means o	of Achieving	Four-Log V	irus Inactivati	on/Removal:	✓ Fr	ee Chlorine		Chlor	ine Dioxide		Ozone		Combined Ci	norme (emorarimes)
	aviolet Radial				Other (Describe):									
						✓ Free Chlorin	о Пс	ombined (	Chlorine (Chlo	ramines)	Chlo	rine Dioxide		
Type o	f Disinfecta	ınt Residua	l Maintained	in Distribut	on System: CT Calculations, o	TIV Describe	Damastata I	Cour Log	Virus Inac	tivation if A			The second	
- 13	A -	100	E CONTEXT		CT Calculations, o			-our-Log	VIIus IIIac	tivation, ir	UVI	Dose		
1.39		1.5	the state of the s	DIR TO		CT Calc	ulations		150/02/12 17:5		O V	7030	W. 14-77	
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>O</sup> C	pH of Water, if Applicable	Control of the contro		Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	120,000		4.0								2.6	
2	X	24.0	168,000		4.3								3.8 0.6	
3	X	24.0	152,000		1.0								0.0	
4		24.0	174,500									\	0.7	
5	X	24.0	174,500		1.5								2.6	
6	X	24.0	159,000		3.6								1.6	
7	X	24.0	176,000		2.8								2.2	
8	X	24.0	160,000		4.2						_		2.7	
9	X	24.0	119,000		3.6								2.4	
10	X	24.0	114,000		2.9								-	
11		24.0	124,000										2.6	
12	X	24.0	124,000		4.1								3.1	
13	X	24.0	155,000		3.8		-						1.4	
14	X	24.0	113,000		2.4			-	-				1.2	
15	X	24.0	120,000		3.6								2.4	
16	X	24.0	99,000		3.8		-				1		1.9	
17	X	24.0	108,000		3.8									
18		24.0	126,000		2.3								1.9	
19	X	24.0			1.7								0,8	
21	X	24.0			4.5								2.6	
22	X	24.0			4.1								3.2	
23	X	24.0			3.7								3.0	
24	X	24.0			3.8								1.3	
25	_^	24.0	142,000										2.6	
26	X	24.0	142,000		4.0							-	2.6 0.6	
27	X	24.0			1.4						-		2.3	
28	X	24.0	178,000		3.1				-				2.6	
29	X	24.0			3.1					-			1.1	
30	X	24.0	119,000		2.6				_	1	-		1.9	
31	X	24.0	114,000		4.0								1.7	
Total	DE GENERAL		4,189,000											
Avgerage	9		135,129											

Maximum 178,000 \* Refer to the instructions for this report to determine which plants must provide this information.



### REVISED 11/13/2014

PWS   Name   Lake Josephine Plant   Mon-Transient Non-Community   Transient Non-Community   Tr	General Information	for the Month/Yea	ar of: August, 20	13				
PWS Type    Visual Community   Non-Transient Non-Community   Transient Non-Community   Consecutive	Public Water System	(PWS) Information	n					
Number of Service Connections at End of Month: 65  Total Population Served at End of Month: 75  West Source: Us Water Services Corporation  Meliss Roteveel  Contact Person's Malling Address: PO Box 2480  Contact Person's Malling Address: PO Box 2480  Contact Person's Malling Address: PO Box 2480  Contact Person's Fax Number: 941-378-3554  Contact Person's Fax Number:	PWS Name:	Lake Josephine Plant #	4				PWS Identification Number:	5284137
Water Services Corporation    Contact Person's Medias Roteveel   Contact Person's Title:	PWS Type:	✓ Community	Non-Transient Non-Commu	nityT	ransient Non-Comr		The state of the s	
Contact Person's Mailing Address   PO Box 2480   City: New Port Rich State: Florida   Zip Code: 34652	Number of Service Connect	ions at End of Month:	65			Total I	opulation Served at End of Mon	th: 75
Contact Person's Mailing Address: PO Box 2480 City: New Port Rich   State:   Florida   Zip Code: 34652 Contact Person's Telephone Number:   (352) 787-0980	PWS Owner:	US Water Services Cor	poration					
Contact Person's Telephone Number: (352) 787-0980   Contact Person's Fax Number: 941-378-3554    Contact Person's E-Mail Address: mrotteveel@uswatercorp.net.  Water Treatment Plant Information  Vater Treatment Plant Information  Vater Treatment Plant Information  Vater Treatment Plant Information  Vater Treatment Plant Telephone Number: 941-377-9456  Vater Treatment Plant Telephone Number: 941-377-9456  Vater Treatment Plant Telephone Number: 941-377-9456  Vater Treatment by Plant: Value Vater Value	Contact Person:	Melisa Roteveel				A0000000		
Certification by Lead/Chief Operator  the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the undersigned water treatment plant operator is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to termational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant conform to termational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant conform to termational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant conform to termational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant conform to termational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant conform to termational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant conform to termational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant conform to termational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant conform to termational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also cert	Contact Person's Mailing Ac	ddress: P	O Box 2480					
Water Treatment Plant Information    Plant Same   Lake Josephine Plant   Plant	Contact Person's Telephone	Number: (3	52) 787-0980			Contac	t Person's Fax Number: 941	-378-3554
Plant Name: Lake Josephine Plant #4    Plant Address   Sal Snight Ave   Sa			nrotteveel@uswatercorp.n	et_				
l'ant Address: 5313 Knight Ave	Water Treatment Pla	nt Information						
The undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can ret nem, together with-sopies of this report, at a convenient location for at least ten years.	Plant Name:	Lake Josephine Plant #-	4				Plant Telephone Number:	941-377-9456
Terrification by Lead/Chief Operator the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment enhericals used at this plant conform to repare deach day that a license of operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and pplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retirem, together with exposes of this report, at a convenient location for at least ten years.	lant Address:	5313 Knight Ave				City: Sebring	State: Florida	Zip Code: 33875
Plant Class (per subsection 62-699.310(4), F.A.C.):  Licensed Operators  Name  License Class  License Number  Day(s) / Shift(s) Worked  A 3304 Operator  Operator  Ron Derossett  A 3531 Operation Manager  Plant Class (per subsection 62-699.310(4), F.A.C.):  C License Number  A 3531 Operator  Operator  The undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to iternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant conformation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to iternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant conformation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to iternational Standards or or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant conformation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to iternational Standards or or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant conformation provided in this report is true and accurate to the best of my knowledge and belief. I certify that	ype of Water Treatment by	Plant:	✓ Raw Ground Water	Purchased Fini	shed Water			
Licensed Operators  Read/Chief Operator:  Re	ermitted Maximum Day O	perating Capacity of Plan	nt, gallons per day:		280,000	N. Andrews		
Read/Chief Operators:  Ron Derossett  Ron Derossett  A 3304 Operator  Ron Derossett  Operation Manager  Pertification by Lead/Chief Operator  In the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repart each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and pplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retirem, together with express of this report, at a convenient location for at least ten years.	Plant Category (per subsecti	on 62-699.310(4), F.A.C	.): V			- Language		
Other Operators:  Ron Derossett  A 3531 Operation Manager  Certification by Lead/Chief Operator  the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and pplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retherm, together with expires of this report, at a convenient location for at least ten years.			Name		License Class	License Number	Day(s)	/ Shift(s) Worked
Other Operators:  Ron Derossett  A 3531 Operation Manager  Dertification by Lead/Chief Operator  the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and pplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retirem, together with expires of this report, at a convenient location for at least ten years.	ead/Chief Operator:	Howard Short			A	3304	Operator	
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and oplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can return together with copies of this report, at a convenient location for at least ten years.					A	3531	Operation Manager	
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can rethem, together with copies of this report, at a convenient location for at least ten years.								
	the undersigned water information provided in international Standard repared each day that oplicable, appropriate	er treatment plant of n this report is true 60 or other applical a licensed operator treatment process p	and accurate to the best of mode standards referenced in sustaffed or visited this plant deterformance records. Further	y knowledge and ubsection 62-55: during the month remore, I agree to least ten years.	d belief. I certify 5.320(3), F.A.C. i indicated above o provide these as	that all drinking v I also certify that t : (1) records of an	vater treatment chemicals un the following additional or sounts of chemicals used a	used at this plant conform to NS perations records for this plant v and chemical feed rates; and (2) er so the PWS owner can retain
ignature and Date 11/13/2014 Printed or Typed Name License Number							*	·

PWS II	): a			5284137		Plant Name:	Lake Josephin	ne Plant #4	4					
	•													
III. D	ily Data f	or the Moi	th/Year of:			August, 2013								
			irus Inactivati		✓ F	ree Chlorine		Chlor	ine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
	aviolet Radia	A PART BUILDING TO STATE OF THE			Other (Describe):									
		33337	I Maintain ad		tion System:	✓ Free Chlorin	ъ Псо	mbined Ch	nlorine (Chlori	amines)	Chlo	rine Dioxide		
Type o	Disiniecta	Int Residua	i Maintained	I III DISUIDU	CT Calculations,	or IIV Dose to	Demostate F	our-Log	Virus Inacti	ivation if A		THE BIOKIGE	SWITTER BEAUTION	SERVICE SERVIC
				100000	C1 Calculations,		culations	our Log	Thus much	rution, tri	UVI	Dose	A POLICIES AND A	
				20.20.19		T Cr Ca	L	Total Section				-		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L		pH of Water, if Applicable	Minimum CT Required, mg min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	81,600		4.0				_				3.6	
2	X	24.0	160,800		4.2								2.8	
3 4	X	24.0 24.0	118,100 50,500		2.1								2.0	
5	X	24.0	50,500		1.5								1.1	
6	X	24.0	117,200		1.3								1.0	
7	X	24.0	160,900		3.2								1.7	
8	X	24.0	35,600		1.1								0.9	
9	X	24.0	49,700		1.2								0.7	
10	X	24.0	19,800		2.2					V			1.3	
11		24.0	15,400											
12	X	24.0	15,400		3.7								1.1	
13	X	24.0	59,200		3.9								1.6	
14	X	24.0	28,700		4.0								1.7	
15	X	24.0	17,000		4.0								1.4	
16	X	24.0	35,000		3.8								1.7	
17	X	24.0	22,700		3.0								1.9	
18		24.0	22,650										0.5	
19	X	24.0	22,650		1.7								0.5	
20	X	24.0	22,000		1.2								1.8	
21	X	24.0	114,000		5.1								1.5	
22 23	X	24.0	66,900		3.9								3.8	
24	X	24.0	73,800		4.3 3.0								1.2	
25	X	24.0 24.0	155,500		3.0								1.66	
26	X	24.0	57,250 57,250		3.5								1.8	
27	X	24.0	81,600		3.1								0.8	
28	X	24.0	47,700		4.4								3.8	
29	X	24.0	47,700	-	3.0								1.8	
30	X	24.0	100,700		3.3								0.8	
31	X	24.0	55,200		3.1								1.0	
Total	Million Committee	HISTOCHER I	1,963,000											
• 1000000000000000000000000000000000000	AND REAL PROPERTY.		(2,222											

Avgerage 63,323

Maximum 160,900

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



31

Total

Avg.

Max.

114,000

55,200

# MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

Daily Finished-Water Production for the Month/Year of : August 2013 Lake Josephine Plants 3 & 4 Community Water System (CWS) Name: Public Water System (PWS) Identification Number: 5284137 Plant 1 Name: Plant 2 Name: Plant 3 Name: Plant 4 Name: Plant 5 Name: Plant 6 Name: Plant 7 Name: Plant 8 Name: Plant 9 Name: Plant 10 Name: Lake Josephine Lake Josephine Plant 3 Plant 4 Permitted Maximum Day Operating Capacity of Each Plant, gallons per day Total 580,000 Day of 300,000 280,000 Total Net Quantity of Finished Water Produced by Each Plant, gallons Month 201,600 120,000 81,600 1 328,800 2 168,000 160,800 270,100 3 152,000 118,100 225,000 4 174,500 50,500 225,000 174,500 50,500 5 276.200 159,000 117,200 6 336,900 7 176,000 160,900 195,600 8 160,000 35,600 168,700 119,000 49,700 9 133,800 114,000 19,800 10 139,400 11 124,000 15,400 139,400 12 124,000 15.400 214,200 13 155,000 59,200 141,700 113,000 28,700 14 137,000 15 120,000 17,000 134,000 16 99,000 35,000 130,700 108,000 17 22,700 148,650 22,650 18 126,000 148,650 19 126,000 22,650 140,000 20 118,000 22,000 237.000 21 123,000 114,000 189,900 22 123,000 66,900 23 124,000 73,800 197,800 300,500 24 145,000 155,500 199,250 25 142,000 57,250 199,250 26 142,000 57,250 27 173,000 81,600 254,600 225,700 28 178,000 47,700 29 76,000 47,700 123,700 219,700 30 119,000 100,700

169,200

6,152,000

198,452

336,900

x 1000       x 100         120,000       81,600         168,000       160,800         152,000       118,100         174,500       50,500         174,500       50,500         159,000       117,200         176,000       160,900         160,000       35,600         119,000       49,700         114,000       19,800         124,000       15,400         155,000       59,200         113,000       28,700         120,000       17,000         99,000       35,000         126,000       22,650         126,000       22,650         123,000       114,000         123,000       114,000         123,000       66,900         124,000       73,800         145,000       57,250         173,000       81,600         178,000       47,700         119,000       100,700         114,000       55,200	Dist #1	Dist #2	
168,000       160,800         152,000       118,100         174,500       50,500         174,500       50,500         159,000       117,200         176,000       160,900         160,000       35,600         119,000       49,700         114,000       19,800         124,000       15,400         155,000       59,200         113,000       28,700         120,000       17,000         99,000       35,000         126,000       22,650         126,000       22,650         123,000       114,000         123,000       114,000         124,000       73,800         142,000       57,250         173,000       47,700         119,000       100,700         114,000       55,200	x 1000	x 100	
152,000       118,100         174,500       50,500         174,500       50,500         159,000       117,200         176,000       160,900         160,000       35,600         119,000       49,700         114,000       19,800         124,000       15,400         155,000       59,200         113,000       28,700         120,000       17,000         99,000       35,000         126,000       22,650         126,000       22,650         123,000       114,000         123,000       114,000         142,000       73,800         142,000       57,250         173,000       47,700         119,000       100,700         114,000       55,200	120,000	81,600	
174,500       50,500         174,500       50,500         159,000       117,200         176,000       160,900         160,000       35,600         119,000       49,700         114,000       19,800         124,000       15,400         155,000       59,200         113,000       28,700         120,000       17,000         99,000       35,000         126,000       22,650         126,000       22,650         123,000       114,000         123,000       144,000         124,000       73,800         142,000       57,250         142,000       57,250         173,000       47,700         119,000       100,700         114,000       55,200	168,000	160,800	
174.500       50,500         159,000       117,200         176,000       160,900         160,000       35,600         119,000       49,700         114,000       19,800         124,000       15,400         124,000       15,400         155,000       59,200         113,000       28,700         120,000       17,000         99,000       35,000         126,000       22,650         126,000       22,650         123,000       114,000         123,000       66,900         124,000       73,800         145,000       155,500         142,000       57,250         173,000       47,700         119,000       100,700         114,000       55,200	152,000	118,100	
159,000 176,000 160,000 160,000 119,000 114,000 114,000 124,000 15,400 15,400 155,000 113,000 120,000 108,000 126,000 126,000 123,000 123,000 123,000 124,000 123,000 124,000 125,500 126,000 123,000 124,000 125,500 126,000 127,000 127,000 128,000 128,000 128,000 129,000 121,000 121,000 123,000 124,000 124,000 125,500 142,000 125,500 142,000 145,000 145,000 145,000 145,000 155,500 142,000 178,000 178,000 178,000 178,000 178,000 179,000 114,000 119,000 114,000 155,200	174.500	50,500	
176,000 160,000 160,000 119,000 119,000 114,000 114,000 124,000 15,400 155,000 120,000 108,000 126,000 123,000 123,000 124,000 124,000 123,000 124,000 124,000 125,500 126,000 123,000 124,000 123,000 124,000 124,000 125,500 142,000 145,000 145,000 145,000 145,000 145,000 145,000 145,000 140,000 155,500 142,000 155,500 142,000 155,500 142,000 155,500 142,000 155,500 142,000 155,500 142,000 150,000 178,000	174.500	50,500	
160,000       35,600         119,000       49,700         114,000       19,800         124,000       15,400         155,000       15,400         155,000       59,200         113,000       28,700         120,000       17,000         99,000       35,000         126,000       22,650         126,000       22,650         128,000       114,000         123,000       114,000         124,000       73,800         145,000       155,500         142,000       57,250         173,000       81,600         178,000       47,700         119,000       100,700         114,000       55,200	159,000	117,200	
119,000       49,700         114,000       19,800         124,000       15,400         155,000       59,200         113,000       28,700         120,000       17,000         99,000       35,000         108,000       22,700         126,000       22,650         128,000       22,000         123,000       114,000         123,000       66,900         124,000       73,800         142,000       57,250         173,000       81,600         178,000       47,700         119,000       100,700         114,000       55,200	176,000	160,900	
114.000 124.000 124.000 155,000 155,000 155,000 113,000 120,000 108.000 126,000 126,000 123,000 123,000 124,000 124,000 124,000 125,500 124,000 125,500 126,000 127,000 127,000 128,000 129,000 129,000 121,000 121,000 123,000 124,000 125,500 145,000 145,000 145,000 145,000 145,000 145,000 145,000 155,500 142,000 178,000	160,000	35,600	
124,000 124,000 155,000 155,000 113,000 120,000 17,000 99,000 108,000 126,000 126,000 123,000 123,000 124,000 124,000 124,000 125,500 142,000 145,000 145,000 145,000 145,000 145,000 140,000 140,000 155,500 141,000 178,000	119,000	49,700	
124,000 155,000 155,000 113,000 120,000 17,000 99,000 108,000 126,000 126,000 123,000 123,000 124,000 124,000 145,000 142,000 142,000 142,000 142,000 178,000	114,000	19,800	
155,000     59,200       113,000     28,700       120,000     17,000       99,000     35,000       108,000     22,700       126,000     22,650       126,000     22,650       118,000     22,000       123,000     114,000       123,000     66,900       124,000     73,800       145,000     155,500       142,000     57,250       173,000     81,600       178,000     47,700       119,000     100,700       114,000     55,200	124,000	15,400	
113,000       28,700         120,000       17,000         99,000       35,000         108,000       22,700         126,000       22,650         126,000       22,650         118,000       22,000         123,000       114,000         123,000       66,900         124,000       73,800         142,000       57,250         142,000       57,250         173,000       81,600         178,000       47,700         119,000       100,700         114,000       55,200	124,000	15,400	
120,000     17,000       99,000     35,000       108,000     22,700       126,000     22,650       126,000     22,650       118,000     22,000       123,000     114,000       123,000     66,900       124,000     73,800       145,000     155,500       142,000     57,250       173,000     81,600       178,000     47,700       119,000     100,700       114,000     55,200	155,000	59.200	
99.000 108.000 126,000 126,000 126,000 128,000 128,000 128,000 128,000 128,000 128,000 128,000 128,000 128,000 128,000 128,000 128,000 128,000 145,000 145,000 142,000 142,000 142,000 142,000 142,000 142,000 142,000 155,250 173,000 178,000	113,000	28.700	
108.000     22,700       126,000     22,650       126,000     22,650       118,000     22,000       123,000     114,000       123,000     66,900       124,000     73,800       145,000     155,500       142,000     57,250       173,000     81,600       178,000     47,700       119,000     100,700       114,000     55,200	120,000	17,000	
126,000 126,000 126,000 127,000 128,000 128,000 129,00	99,000	35,000	
126,000     22,650       118,000     22,000       123,000     114,000       123,000     66,900       124,000     73,800       145,000     155,500       142,000     57,250       173,000     81,600       178,000     47,700       76,000     47,700       119,000     100,700       114,000     55,200	108,000	22,700	
118,000     22,000       123,000     114,000       123,000     66,900       124,000     73,800       145,000     155,500       142,000     57,250       173,000     81,600       178,000     47,700       76,000     47,700       119,000     100,700       114,000     55,200       4,189,000     1,963,000     total	126,000	22,650	
123,000 123,000 124,000 124,000 145,000 142,000 142,000 173,800 142,000 173,250 173,000 178,000 178,000 178,000 179,000 119,000 114,000 114,000 114,000 119,000 114,000 119,000	126,000	22,650	
123,000 124,000 124,000 145,000 142,000 142,000 173,800 142,000 57,250 173,000 178,000 178,000 179,000 119,000 119,000 114,000 114,000 119,000 114,000 119,000 114,000 119,000	118,000	22,000	
124,000 145,000 142,000 142,000 157,250 142,000 173,000 178,000 178,000 178,000 179,000 119,000 114,000 114,000 114,000 119,000 114,000 119,000 119,000 114,000 119,000 119,000 119,000 119,000 119,000 119,000 119,000 119,000 119,000 119,000 119,000 119,000 119,000 119,000 119,000 119,000 119,000	123,000	114,000	
145,000     155,500       142,000     57,250       142,000     57,250       173,000     81,600       178,000     47,700       76,000     47,700       119,000     100,700       114,000     55,200       4,189,000     1,963,000     total	123,000	66,900	
142,000     57,250       142,000     57,250       173,000     81,600       178,000     47,700       76,000     100,700       114,000     55,200       4,189,000     1.963,000     total	124,000	73,800	
142,000 57,250 173,000 81,600 178,000 47,700 76,000 47,700 119,000 100,700 114,000 55,200  4,189,000 1.963,000 total	145,000	155,500	
173,000 81,600 178,000 47,700 76,000 100,700 119,000 100,700 114,000 55,200 4,189,000 1.963,000 total	142,000	57,250	
178.000 47,700 76.000 47,700 119,000 100,700 114,000 55.200 4,189.000 1.963,000 total	142,000	57,250	
76,000 47,700 119,000 100,700 114,000 55,200 4,189,000 1.963,000 total	173,000	81,600	
119,000 114,000 55,200 4,189,000 1,963,000 total	178.000	47,700	
114,000 55.200 4,189.000 1.963,000 total	76,000	47,700	
4,189.000 1.963,000 total	119,000	100,700	
	114,000	55.200	
135,129 63,323	4,189.000	1.963,000	total
	135,129	63,323	

6,152,000





See Pages 4 for Instructions.

Public Water System WS Name:	Lake Josephine Plan					PWS Identification N	Number:	5284137	
WS Type:	✓ Community	✓ Non-Transient Non-Cor	nmunity	Transient Non-Comn	Territory	Consecutive			
lumber of Service Connec					Total F	opulation Served at I	End of Month:	1,250	
WS Owner:	US Water Services C								
ontact Person:	Melisa Rotteveel					t Person's Title:	Compliance		
ontact Person's Mailing A		4939 Cross Bayou Blvd			City: New Port Rich			Zip Code:	34652
ontact Person's Telephone		866-753-8292			Contac	t Person's Fax Number	er: 727-849-421	9	
ontact Person's E-Mail Ad		mrotteveel@uswaterco	rp.net_						
Vater Treatment Pla	ant Information								
ant Name:	Lake Josephine Plan	t #3				Plant Telephone Nur	mber:	941-377-945	
ant Address:	1949 Canary Way				City: Sebring	State: Florida		Zip Code:	33872
pe of Water Treatment by	y Plant:	✓ Raw Ground Water	Purchased Fin	ished Water					
ermitted Maximum Day O	perating Capacity of F	Plant, gallons per day:		300,000					
lant Category (per subsect	ion 62-699.310(4), F.A	A.C.):	V			class (per subsection			
Licensed Operators	MEASURE F	Name		License Class	License Number		Day(s) / Shift(	s) Worked	
	Ron Derossett			A	3531	Operation Manager			
ther Operators:	Howard Short			A	3304	Operator	Days 1st Shift		
formation provided a ternational Standard epared each day that plicable, appropriate	er treatment plant in this report is tru 60 or other appli t a licensed operate treatment proces	operator licensed in Florical and accurate to the best cable standards referenced or staffed or visited this places performance records. Further, at a convenient location for the standard of the standard or staffed or visited this places are performance records.	of my knowledge as in subsection 62-55 ant during the mont orthermore, I agree to	nd belief. I certify 55.320(3), F.A.C. th indicated above to provide these a	that all drinking v I also certify that : (1) records of an	vater treatment of the following add nounts of chemical	nemicals used at litional operation als used and cher	this plant cor is records for nical feed rat	this plant w es; and (2) i
1	// N	1////////	Ron Derosse					A 3531	

PWS IE	): '			5284137		Plant Name:	Lake Joseph	ine Plant	#3					
III. D	aily Data fo	or the Mon	th/Year of:		是可是是各种的原	September, 201	3							
and the same of the same	The second second	THE RESERVE TO STREET, SALES	irus Inactivati	ion/Removal:	IJ.	ree Chlorine		Chlor	ine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
	aviolet Radia		nus muonvan	-	Other (Describe):									
						✓ Free Chlorin	о По	ombined (	Chlorine (Chlo	ramines)	Chlo	rine Dioxide		
Type o	f Disinfecta	int Residua	l Maintained	in Distribu	CT Calculations, of	r UV Dose to	Demostate	Four-Loo	Virus Inac	tivation, if A		Title Diomics		
					C1 Calculations, c	CT Calc		t our-Log	, virus mue	de la	UVI	Dose	100	
				Filtre Folg	SECONMAND.	T Care					T-10-19-1			
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>O</sup> C	pH of Water, if Applicable		Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions
1		24.0	116,500										1.7	
2	X	24.0	116,500		3.7								1.9	
3	X	24.0	118,000		3.0								2.4	
4	X	24.0	116,000		3.2								3.9	
5	X	24.0	105,000		4.5 3.1								3.2	
6	X	24.0	94,000		3.7								2.9	
8	X	24.0 24.0	106,000 110,000	- 1	3.7	1								
9	X	24.0	110,000		3.9								1.4	
10	X	24.0	135,000		2.8								1.4	
11	X	24.0	125,000		3.8								1.9	
12	X	24.0	83,000		3.9								2.3	
13	X	24.0	102,000		2.5								1.8	
14	X	24.0	170,000		4.1								2.5	
15		24.0	110,500										2.6	
16	X	24.0	110,500		4.5								2.6	
17	X	24.0	125,000		3.0								1.0	
18	X	24.0	115,000		2.9								2.2	
19	X	24.0	152,000		4.3		-	-					2.0	
20	X	24.0	138,000		3.4	-		_					2.2	
21	X	24.0	161,000		3.9									
22	v	24.0 24.0	159,000 159,000		3.0								1.9	
24	X	24.0	137,000		3.8								2.4	
25	X	24.0	151,000		3.4								2.1	
26	X	24.0	154,000		2,7								1.9	
27	X	24.0	106,000		2.9								1.7	BWN - 6" water valve break
28	X	24.0	118,000		4.1								2.2	
29		24.0	119,500										2.0	DUAL Passinded
30	X	24.0	119,500		3.9								3.0	BWN - Rescinded
31		24.0												
Total	TRUST		3,742,000											
Avgerage			124,733	1										
Maximur			170,000	l	W. G									
* Refer to	the instruction	ons for this rep	ort to determin	e which plants	must provide this info	rmation.								



Signature and Date

#### See Pages 4 for Instructions. September, 2013 General Information for the Month/Year of: A. Public Water System (PWS) Information 5284137 PWS Identification Number: Lake Josephine Plant #4 PWS Name: Consecutive Transient Non-Community Non-Transient Non-Community PWS Type: ✓ Community 75 Total Population Served at End of Month: Number of Service Connections at End of Month: 65 US Water Services Corporation PWS Owner: Contact Person's Title: Melisa Roteveel Contact Person: Zip Code: 34652 City: New Port Rich State: Florida PO Box 2480 Contact Person's Mailing Address: 941-378-3554 Contact Person's Fax Number: (352) 787-0980 Contact Person's Telephone Number: mrotteveel@uswatercorp.net Contact Person's E-Mail Address: B. Water Treatment Plant Information 941-377-9456 Plant Telephone Number: Plant Name: Lake Josephine Plant #4 Zip Code: 33875 Sebring State: Florida City: 5313 Knight Ave Plant Address: Purchased Finished Water Type of Water Treatment by Plant: ✓ Raw Ground Water 280,000 Permitted Maximum Day Operating Capacity of Plant, gallons per day: Plant Class (per subsection 62-699.310(4), F.A.C.): V Plant Category (per subsection 62-699.310(4), F.A.C.): Dav(s) / Shift(s) Worked License Number License Class Licensed Operators Name 3304 Operator Lead/Chief Operator: Howard Short Operation Manager 3531 Other Operators: Ron Derossett II. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years. A 3531 Ron Derossett License Number Printed or Typed Name 11/13/2014

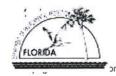
REVISED 11/13/2014

PWS II				5284137		Plant Name:	Lake Josephii	ne Plant #4	4					
I WOIL	, e			J2071J1										
шъ	aily Data f	or the Mo	nth/Year of:		5.75	September, 20	13							
			irus Inactivati		[J] E	ree Chlorine		Chlor	ine Dioxide		Ozone		Combined (	Chlorine (Chloramines)
	aviolet Radia		ilus mactivati	The second second	Other (Describe):	ree chomic								
	ASSESS ASSESSMENT ALLO	PARTICIPAL TO THE PARTICIPAL T			Control and the control and th				la in a (Chian	amin ag\	☐ Chic	rine Dioxide		
Type o	f Disinfecta	ant Residua	l Maintainec	l in Distribu	tion System: CT Calculations,	Free Chlorin	ne 🔲 Co	mbined Cr	Nime (Chlor	immies)		THE DIOXIGE	WILE AND CORN	
				是写好作	CI Calculations,			our-Log	virus maci	ivation, it A	UV	Doce		
				Market .		CT Ca	lculations				UV	Juse		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	0	pH of Water,	Minimum CT Required, mg min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Repair or Maintenance Work that Involves Taking Water System Components Out of
1		24.0	30,700								-		0.9	
2	X	24.0	30,700		3.9			-			-		1.1	
3	X	24.0	32,700		4.1				-				1.0	
4	X	24.0	48,700		4.0			-					4.5	
5	X	24.0	34,300		3.1			-					1.2	
6	X	24.0	43,700		2.9			-	1				1.3	
8	X	24.0	38,800 32,750		2.9		-		1					
9		24.0	32,750		2.8	-							0.8	
10	X	24.0 24.0	38,200		4.2	-							1.3	
11	X	24.0	32,400		4.0	<del>                                     </del>							1.3	
12	X	24.0	32,500		4.7								2.9	
13	X	24.0	36,300		3.5								3.0	
14	X	24.0	46,800	-	2.5								0.9	
15		24.0	31,850		A									
16	X	24.0	31,850		4.2								0.6	
17	X	24.0	62,500		2.1								1.1	
18	X	24.0	39,000		2.9								1.0	
19	X	24.0	80,100		4.3								2.5	
20	X	24.0	42,100		4.0				Y				2.2	
21	X	24.0	58,200		3.9								3.2	
22		24.0	53,150											
23	X	24.0	53,150		4.1								2.1	
24	X	24.0	37,000		2.0								1.6	
25	X	24.0	63,000		2.2								1.6	
26	X	24.0	50,000		2.1								1.1	BWN - 6" water valve break
27	X	24.0	31,000		4.2								1.9	DWIN - O Water varve oreax
28	X	24.0	79,000		4.3				-				1.9	
29		24.0	31,500										2.0	BWN - Rescinded
30	X	24.0	31,500		4.2				-				2.0	5 11 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
31		24.0				1								
Total		CONTRACTOR OF THE PARTY OF THE	1,287,800											

Avgerage 42,927

Maximum 80,100

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



# MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

September 2013 Daily Finished-Water Production for the Month/Year of : Community Water System (CWS) Name: Lake Josephine Plants 3 & 4 5284137 Public Water System (PWS) Identification Number: Plant 5 Name: | Plant 6 Name: | Plant 7 Name: | Plant 8 Name: | Plant 9 Name: | Plant 10 Name: Plant 1 Name: | Plant 2 Name: | Plant 3 Name: | Plant 4 Name: Lake Josephine Lake Josephine Plant 3 Plant 4 Total Permitted Maximum Day Operating Capacity of Each Plant, gallons per day 580.000 300,000 280,000 Day of Total Net Quantity of Finished Water Produced by Each Plant, gallons Month 147,200 116,500 30,700 1 147,200 30,700 2 116,500 150,700 118,000 32,700 3 164,700 48.700 4 116.000 139,300 105,000 34,300 5 137,700 94,000 43,700 6 144,800 106,000 38,800 142,750 32,750 110,000 8 142,750 110,000 32,750 9 173,200 38,200 10 135,000 157,400 125,000 32,400 11 115,500 12 83,000 32,500 138,300 13 102,000 36,300 218,400 48,400 14 170,000 142,350 110,500 31,850 15 142,350 16 110,500 31,850 187,500 17 125,000 62,500 154,000 39,000 18 115,000 232,100 152,000 80,100 19 180,100 20 138.000 42.100 219,200 21 161,000 58,200 212,150 22 159,000 53,150 212,150 23 159,000 53,150 174,000 24 137,000 37,000 214.000 151,000 63,000 25 204,000 26 154,000 50,000 137,000 106,000 31,000 27 197,000 118,000 79,000 28 151,000 119,500 31,500 29 151,000 30 119,500 31,500 0 31 5,029,800 Total 162,252 Avg. 232,100 Max.

Dist #1	
GALLONS	S
x 1000	
116,500	)
116,500	)
118,000	)
116,000	)
105,000	)
94,000	)
106,000	)
110,000	0
110.000	0
135,000	0
125,000	0
83,00	0
102,00	0
170,00	0
110,50	0
110.50	0
125,00	()
115,00	0
152,00	0
138,00	0
161.00	0
159,00	0
159,00	()
137,00	0
151,00	00
154,00	00
106,00	00
118.00	0
119,50	)()
119,50	)()
3,742,00	
124,7	33

Dis	st #2
G	ALLONS
	x 100
	30,700
	30,700
	32,700
	48,700
	34,300
	43,700
	38,800
	32,750
	32,750
	38,200
	32,400
	32,500
	36,300
	48,400
	31,850
	31,850
	62,500
	39,000
	80,100
	42,100
_	58,200
	53,150
	53,150
	37,000
	63,000
	50,000
	31,000
	79,000
	31,500
	31.500
4	

1.287,800 total 42.927 5,029,800





See Pages 4 for Instructions.

PWS Name:	Lake Josephine Plant #3					PWS Identification	Number:	5284137	
PWS Type:		Non-Transient Non-Comm	Consecutive						
Number of Service Connect	the state of the s	536			Total F	opulation Served at	End of Month:	1,250	
WS Owner:	US Water Services Corporat	tion							
Contact Person:	Melisa Rotteveel					t Person's Title:	Compliance		
Contact Person's Mailing A	.ddress: 4939 (	Cross Bayou Blvd			City: New Port Rich	State: Florida		Zip Code:	34652
Contact Person's Telephone		53-8292			Contac	t Person's Fax Numb	er: 727-849-421	19	
Contact Person's E-Mail Ad		teveel@uswatercorp	.net						
Water Treatment Pla	ant Information								
Plant Name:	Lake Josephine Plant #3					Plant Telephone Nu State: Florida	mber:	941-377-94	
lant Address:	1949 Canary Way				City: Sebring		Zip Code:	33872	
ype of Water Treatment by	y Plant:	Raw Ground Water	Purchased Fi	nished Water					
ermitted Maximum Day O	Operating Capacity of Plant, ga	allons per day:		300,000					
	tion 62-699.310(4), F.A.C.):	V				Class (per subsection	C.): C	and the same	
Licensed Operators		Name		License Class	License Number	170 34 1	Day(s) / Shift	(s) worked	
	Ron Derossett			A	3531 3304	Operation Manager Operator	Days 1st Shift Days 1st Shift		
Other Operators:	Howard Short			A	3301	Орегино			

PW\$ IE	); ,			5284137		Plant Name:	Lake Joseph	ine Plant #	3					
II. D	aily Data fo	or the Mor	th/Year of:			October, 2013					П		Combined C	hlorine (Chloramines)
Aeans o	of Achieving	Four-Log V	irus Inactivati	on/Removal:	✓ Fr	ee Chlorine		L Chlori	ne Dioxide		Ozone		Combined C	morne (Choranines)
Ultr	aviolet Radia	tion			Other (Describe):									
			l Maintained	to Disables	ian Cuntami	✓ Free Chlorin	е Пс	ombined C	hlorine (Chlo	oramines)	Chlo	rine Dioxide		
ype o	Disinfecta	int Residua	i Maintained	III Distribut	CT Calculations, o	r IIV Dose to	Demostate I	Four-Log	Virus Inac	tivation, if A	Applicable*		FE THE	
		For the second		21 000 000	C1 Calculations, 0	CT Calc	ulations			MARKET LAND AND ADVISORY	UVI	Oose		
42 - F				A CONTRACTOR		C1 Care		THE STATE OF		CONTRACTOR OF STREET	Televinine Section			
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>O</sup> C	pH of Water, if Applicable		CONTRACTOR STATEMENT	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				Row The Late Line	Peak Flow, mg/L	minutes	mine	Heavy >		MC-SAR			2.7	
- 1	X	24.0	118,000		4.0								3.2	
2	X	24.0	108,000		4.3 3.8								1.8	
3	X	24.0	107,000		4.2								2.0	
4	X	24.0	114,000										2.2	
5	X	24.0	100,000		4.1									
6		24.0	118,500		3.9								2.9	
7	X	24.0	118,500		4.0								3.0	
8	X	24.0	90,000		3.8								2.9	
9	X	24.0	98,000		3.0								2.1	
10	X	24.0	113,000		2.5								1.6	
11	X	24.0	94,000 91,000		2.3								1.9	
13	X	24.0	116,500		2.3									
14	v	24.0	116,500		4.1								4.0	
15	X	24.0	111,000		3.8								2.5	
16	X	24.0	109,000		3.1						5.7		2.2	
17	X	24.0	115,000		2.2								1.4	
18	X	24.0	113,000		3.2								1.9	
19	X	24.0	88,000		3.8								2.4	
20	^_	24.0	126,500											
21	X	24.0	126,500		4.1								2.8	
22	X	24.0	113,000		3.1						-		2.8	
23	X	24.0	128,000		3.4								2.6	
24	X	24.0	130,000		2.8								2.1	
25	X	24.0	130,000		3.6								2.2	
26	X	24.0	115,000		3.2								2.4	
27		24.0	132,000										- 26	
28	X	24.0	132,000		3.5								2.6	
29	X	24.0	118,000		3.6								2.8	
30	X	24.0	119,000		3.0								2.7	
31	X	24.0	116,000		4.3								2.9	
otal			3,525,000											
	2		112.710	1										

Avgerage 113,710

Maximum 132,000

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



### REVISED 11/13/2014

Public Water System (PWS) In PWS Name: Lake Joseph PWS Type: Comm Number of Service Connections at End o PWS Owner: US Water St Contact Person: Melisa Rote Contact Person's Mailing Address: Contact Person's Telephone Number: Contact Person's E-Mail Address: Water Treatment Plant Inform Plant Name: Lake Joseph Plant Address: 5313 Knight Type of Water Treatment by Plant: Permitted Maximum Day Operating Capa	ine Plant #4  unity Non-Transient Non- Month: 65  rivices Corporation  reel PO Box 2480 (352) 787-0980 mrotteveel@uswate  ation  ine Plant #4  Ave		Transient Non-Comm	Total F Contac City: New Port Rich	PWS Identification Number:  Consecutive  Population Served at End of Month:  It Person's Title:  State: Florida  It Person's Fax Number: 941-376	5284137 75 Zip Code: 34652 8-3554
PWS Type:	Inity Non-Transient Non-Month: 65 Prices Corporation PO Box 2480 (352) 787-0980  mrotteveel@uswate  ation Ine Plant #4 Ave		Transient Non-Comm	Total F Contac City: New Port Rich	Consecutive Population Served at End of Month:  It Person's Title: State: Florida	Zip Code: 34652
Number of Service Connections at End of PWS Owner:  Contact Person:  Contact Person's Mailing Address:  Contact Person's Telephone Number:  Contact Person's E-Mail Address:  Water Treatment Plant Inform  Plant Name:  Lake Joseph  Plant Address:  5313 Knight  Type of Water Treatment by Plant:	Month: 65  rivices Corporation  /eel  PO Box 2480  (352) 787-0980  mrotteveel@uswate  ation  ne Plant #4  Ave		Transient Non-Comm	Total F Contac City: New Port Rich	opulation Served at End of Month: t Person's Title: State: Florida	Zip Code: 34652
WS Owner: US Water St. Contact Person: Melisa Rote Contact Person's Mailing Address: Contact Person's Telephone Number: Contact Person's E-Mail Address: Water Treatment Plant Inform Plant Name: Lake Joseph Plant Address: 5313 Knight Type of Water Treatment by Plant:	PO Box 2480 (352) 787-0980 mrotteveel@uswate ation ne Plant #4 Ave			Contac City: New Port Rich	t Person's Title: State: Florida	
Contact Person: Melisa Rote Contact Person's Mailing Address: Contact Person's Telephone Number: Contact Person's E-Mail Address: Water Treatment Plant Inform Plant Name: Lake Joseph Plant Address: 5313 Knight Type of Water Treatment by Plant:	PO Box 2480 (352) 787-0980 mrotteveel@uswate ation ne Plant #4 Ave	ercorp.net		City: New Port Rich	State: Florida	
Contact Person's Mailing Address: Contact Person's Telephone Number: Contact Person's E-Mail Address: Water Treatment Plant Inform Plant Name: Lake Joseph Plant Address: 5313 Knight Type of Water Treatment by Plant:	PO Box 2480 (352) 787-0980 mrotteveel@uswate ation ine Plant #4 Ave	ercorp.net		City: New Port Rich	State: Florida	
Contact Person's Telephone Number: Contact Person's E-Mail Address: Water Treatment Plant Inform Plant Name: Lake Joseph Plant Address: 5313 Knight Type of Water Treatment by Plant:	(352) 787-0980 mrotteveel@uswate ation ine Plant #4 Ave	ercorp.net		Section #10		8-3554
Contact Person's E-Mail Address:  Water Treatment Plant Inform  Plant Name: Lake Joseph  Plant Address: 5313 Knight  Type of Water Treatment by Plant:	mrotteveel@uswate ation ne Plant #4 Ave	ercorp.net				
Water Treatment Plant Inform Plant Name: Lake Joseph Plant Address: 5313 Knight Type of Water Treatment by Plant:	ation ine Plant #4 Ave	ricorp.nec				
Plant Name: Lake Joseph Plant Address: 5313 Knight Type of Water Treatment by Plant:	ne Plant #4 Ave		THE STATE OF			
Plant Address: 5313 Knight Type of Water Treatment by Plant:	Ave				Plant Telephone Number:	941-377-9456
Type of Water Treatment by Plant:				City: Sebring	State: Florida	Zip Code: 33875
		Durchacod F	Finished Water	onj. deering		
ermitted Maximum Day Operating Capa	Raw Ground Water	Purchaseu r	280,000			
1		V	280,000	Plant (	Class (per subsection 62-699.310(4),	F.A.C.): C
Plant Category (per subsection 62-699.31 Licensed Operators	Name		License Class	License Number		Shift(s) Worked
Lead/Chief Operator: Howard Sho		- TANDER AND A TOTAL	A	3304	Operator	
			A	3531	Operation Manager	
Other Operators: Ron Derosso	ш		Α			

PWS II	):			5284137		Plant Name:	Lake Josephii	ne Plant #4	4					
				-		A								
III. D	aily Data f	or the Moi	nth/Year of:			October, 2013								
Means o	of Achieving	Four-Log V	irus Inactivati	on/Removal:	√ F	ree Chlorine		Chlor	rine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
	aviolet Radia		100.000		Other (Describe):			14 <del>1-15</del> 1.00 (80)						
		3977/21/6			and the second of the second o					CONTRACTOR &				
Type o	f Disinfecta	int Residua	l Maintained	in Distribu	tion System:	✓ Free Chlorin	ne 📙 Co	mbined Ch	hlorine (Chlor	amines)	Chlorine Dioxide		2	To a second seco
FE				30 300	CT Calculations,	or UV Dose, to	Demostate I	our-Log	Virus Inact	ivation, if A				
- 31				CONTRACT OF		CT Ca	lculations		A STATE OF THE STA		UV	Dose		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L		pH of Water,	Minimum CT Required, mg- min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	24,000	Market Ma	4.2	minuco		A 2 3 4 4 5 1		Bulley,			2.5	
2	X	24.0	31,000		4.0				1				2.5	
3	X	24.0	25,700		4.1								3.5	
4	X	24.0	26,000		4.2								2.9	
5	X	24.0	25,700		3.8								2.5	
6		24.0	35,950											
7	X	24.0	35,950		4.0								2.0	
8	X	24.0	141,000		1.8								1.0	
9	X	24.0	26,900		3.2								2.1	
10	X	24.0	30,800		3.6								1.8	
11	X	24.0	36,300		2.8								1.6	
12	X	24.0	28,900		2.6								1,8	
13		24.0	24,750											
14	X	24.0	24,750		2.5								1.9	
15	X	24.0	26,000		3.4								1.8	
16	X	24.0	27,300		3.2								2.1	
17	X	24.0	26,100		4.0								3.2	
18	X	24.0	35,000		3.8								3.0	
19	X	24.0	32,000		3.6								2.6	
20		24.0	34,400										2.4	
21	X	24.0	34,400		3.2								2.4	
22	X	24.0	26,100		3.2			_					2.2	
23	X	24.0	40,600		2.4								1.9	
24	X	24.0	37,200		3.5								1.7	
	X	24.0	25,600		3.2								2.1	
26	X	24.0	31,800		3.4								2.1	
27		24.0	33,700		2.1								2.2	
29	X	24.0	33,700		3.1		-						2.1	
30	X	24.0	36,200		3.2					-			2.3	
31	X	24.0	36,100		2.9								1.7	
Total	Α	24.0	31,000		2.1								15.5	
Otal			1,064,900											

Avgerage 34,352

Maximum 141,000

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



Total

Avg. Max.

# MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

Daily Finished-Water Production for the Month/Year of : October 2013 Community Water System (CWS) Name: Lake Josephine Plants 3 & 4 Public Water System (PWS) Identification Number: 5284137 Plant 1 Name: Plant 2 Name: Plant 3 Name: Plant 4 Name: Plant 5 Name: Plant 6 Name: Plant 7 Name: Plant 8 Name: Plant 9 Name: Plant 10 Name: Lake Josephine Lake Josephine Plant 3 Plant 4 Permitted Maximum Day Operating Capacity of Each Plant, gallons per day Total 580,000 300,000 280,000 Day of Total Month Net Quantity of Finished Water Produced by Each Plant, gallons 142,000 118,000 24,000 1 139,000 2 108,000 31,000 132,700 3 107,000 25,700 140,000 4 114.000 26,000 125,700 100,000 25,700 5 154,450 6 118,500 35,950 118,500 154,450 35,950 231,000 90,000 141,000 8 98,000 26,900 124,900 9 143,800 10 113,000 30,800 94,000 36,300 130,300 11 12 91,000 28,900 119,900 141,250 13 116,500 24,750 141,250 14 116,500 24,750 15 26,000 137,000 111,000 16 109,000 27,300 136,300 17 115,000 26,100 141,100 148,000 18 113,000 35,000 19 88,000 32,000 120,000 20 126,500 34,400 160,900 34,400 21 126,500 160,900 22 113,000 26,100 139,100 23 128,000 168,600 40,600 24 130,000 37,200 167,200 25 130,000 25,600 155,600 26 115,000 31,800 146,800 27 165,700 132,000 33,700 28 132,000 165,700 33,700 154,200 29 118,000 36,200 30 119,000 36,100 155,100 31 116,000 31,000 147,000

4,589,900

148,061

231,000

GALLONS	S
x 1000	
118,000	0
108,000	
107.000	
114.000	
100,000	0
118,500	0
118,500	-
90,000	
98.000	_
113.000	0
94,000	0
91,000	0
116,500	
116,500	0
111,000	
109,000	0
115,000	0
113,00	0
88,00	0
126,50	0
126,50	0
113,00	0
128,00	0
130,00	0
130,00	0
115,00	0
132,00	0
132,00	()
118,00	0
119,00	0
116,00	0
	0
	()
3,525,00	0
113,71	

Dist #2	
GALLONS	
x1000	
24,000	
31,000	
25,700	
26,000	
25,700	
35.950	
35.950	
141,000	
26,900	
30,800	
36,300	
28.900	
24,750	
24,750	
26,000	
27,300	
26,100	
35,000	
32,000	
34,400	
34,400	
26,100	
40,600	
37.200	
25,600	
31,800	
33,700	
33,700	
36,200	
36.100	
31.000	
0	
1064,900	total
24.252	

34,352

4,589,900





PWS Name:	n (PWS) Information Lake Josephine Plant #3				PWS Identification Number:	5284137
PWS Type:	✓ Community ✓ Non-Transient Non-Com	nmunity	Transient Non-Comm	nunity	Consecutive	
Number of Service Connec					Population Served at End of Month:	1,250
PWS Owner:	US Water Services Corporation					
Contact Person:	Melisa Rotteveel			Conta	ct Person's Title: Complia	ince Manager
Contact Person's Mailing A	Address: 4939 Cross Bayou Blvd			City: New Port Rich	State: Florida	Zip Code: 34652
Contact Person's Telephon				Conta	ct Person's Fax Number: 727-849	-4219
Contact Person's E-Mail A		p.net				
Water Treatment Pl	ant Information					
Plant Name:	Lake Josephine Plant #3				Plant Telephone Number:	941-377-9456
Plant Address:	1949 Canary Way			City: Sebring	State: Florida	Zip Code: 33872
Type of Water Treatment b	by Plant: Raw Ground Water	Purchased	Finished Water			
Permitted Maximum Day (	Operating Capacity of Plant, gallons per day:		300,000			
Plant Category (per subsec	tion 62-699.310(4), F.A.C.):	V		Plant	Class (per subsection 62-699.310(4), I	
Licensed Operators		N. P. Carlotte	License Class	License Number	Day(s) / S	hift(s) Worked
Lead/Chief Operator:	Ron Derossett		A	3531	Operation Manager Days 1st Shift	
Other Operators:	Howard Short		A	3304	Operator Days 1st Shift	
Contification by Loss	I/Chief Owenston	EN WHOM S		W. KILL BURNES	- Washington and Control of the Control	
Certification by Lead		E GREAT WAS EVEN	Contract Tribal		SECIEDO KENTERIOR	
	ter treatment plant operator licensed in Florida					
	in this report is true and accurate to the best o					
nternational Standard	1 60 or other applicable standards referenced i	n subsection 62-	-555.320(3), F.A.C.	I also certify that	the following additional opera	tions records for this plant
repared each day that	t a licensed operator staffed or visited this pla	nt during the mo	onth indicated above	: (1) records of an	nounts of chemicals used and o	chemical feed rates; and (2)
	e treatment process performance records. Fur					
	pies of this report, at a convenient location for			iditional operation	s records to the rand owner so	the I was a where can recall
icii, together with/ed	phies of this report, at a convenient location to	n at least tell yea	115.			
/ //	// ())					
1 / 1	/ //					
1	1 11/1/10	Ron Deros	ssett			A 3531

PWS II	); '			5284137		Plant Name:	Lake Joseph	nine Plant	#3					
£														
III. D	aily Data f	or the Mor	nth/Year of:			November, 20	13							
Means	of Achieving	Four-Log V	/irus Inactivat	ion/Removal:	<b></b> ✓F	ree Chlorine		Chlo	rine Dioxide		Ozone		Combined C	chlorine (Chloramines)
Ultr	aviolet Radia	tion			Other (Describe):									
Type o	f Disinfecta	nt Residua	l Maintained	l in Distribu	tion System:	✓ Free Chlori	ne 🗆 C	Combined	Chlorine (Chlo	oramines)	Chlo	orine Dioxide	9	
	14.5	The state of		11.5.4.6	CT Calculations, o	or UV Dose, to	Demostate	Four-Log	Virus Inac	tivation, if A	Applicable*	A STORE		THE RELEASE TO SECURE
							culations		The said		UV	Dose		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, O		Minimum CT Required, mg min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
- 1	X	24.0	125,000		4.0								2.5	
2	X	24.0	103,000		3.1								2,5	
3		24.0	138,000											
4	X	24.0	138,000		3.8								2.9	
5	X	24.0	107,000		4.2								3.0	
6	X	24.0	140,000		3.0								1.8	
7	X	24.0	154,000		3.7								2.1	
8	X	24.0	149,000		3.5				-				2.4	
9	X	24.0	115,000		4.0								2.9	
10		24.0	130,500					-					2.4	
11	X	24.0	130,500		3.9								3.3	
12	X	24.0	64,000		4.1			-	-				3.6	
13	X	24.0	101,000		3.8			-					2.5	
15	X	24.0	107,000		3.6 3.4				1				2.4	
16	X X	24.0 24.0	126,000 87,000		3.4			-	-				2.5	
17		24.0	107,500		3.2				1					
18	X	24.0	107,500		1.6								2.8	
19	X	24.0	125,000		3.6	1-17-							2.0	
20	X	24.0	102,000		3.4								1.8	
21	X	24.0	114,000		1.5								1.6	
22	X	24.0	96,000		3.4								1.8	
23	X	24.0	107,000		3.6								2.3	
24		24.0	125,000											
25	X	24.0	125,000		3.2								2.4	
26	X	24.0	81,000		3.6								2.3	
27	X	24.0	125,000		3.5								2.4	PN MAILED - Stage I
28	X	24.0	108,000		3.6								2.3	
29	X	24.0	116,000		4.0								2.4	
30	X	24.0	125,000	ļ	3.8								2.2	
31		24.0							1					l
otal	BE LEVEL (1997)	ALTO DESCRIPTION	3,479,000											
Avgerage		LINE STEELS	115.967											

Maximum 149,000

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



REVISED 11/13/2014

See Pages 4 for Instr	uctions.					
I. General Information		November, 20	113			
A. Public Water System					PWS Identification Number:	5284137
PWS Name:	Lake Josephine Plant #					3204137
PWS Type:	✓ Community	Non-Transient Non-Community	Transient Non-Com		Consecutive Population Served at End of Month	75
Number of Service Connec		65		Total	Population Served at End of Month	1
PWS Owner:	US Water Services Cor	poration		ICanta	ct Person's Title:	
Contact Person:	Melisa Roteveel					Zip Code: 34652
Contact Person's Mailing A		O Box 2480			A STATE OF THE STA	378-3554
Contact Person's Telephone		52) 787-0980		Contac	ct Person's Pax Number: 941-2	178-3334
Contact Person's E-Mail Ac		nrotteveel@uswatercorp.net				
B. Water Treatment Pla					Diest Telephone Number	941-377-9456
Plant Name:	Lake Josephine Plant #	4		la: a1.	Plant Telephone Number:	Zip Code: 33875
Plant Address:	5313 Knight Ave			City: Sebring	State: Florida	Zip Code. 33873
Type of Water Treatment b		Raw Ground Water	Purchased Finished Water			
Permitted Maximum Day C			280,000	DI	Class (per subsection 62-699.310(4	1), F.A.C.): C
Plant Category (per subsect	ion 62-699.310(4), F.A.C		L Linna Class	License Number		Shift(s) Worked
Licensed Operators	(	Name	License Class	3304	Operator	Silita(s) Worked
Lead/Chief Operator:			A		20.4.5.5.5.5.5.5	
Other Operators:	Ron Derossett		A	3531	Operation Manager	
<b>一点相信的数据</b>						
II. Certification by Lead	I/Chief Operator			a solventing	THE REAL PROPERTY OF THE PARTY	
<ol> <li>I, the undersigned wat</li> </ol>	er treatment plant of	perator licensed in Florida, am	the lead/chief operator of the	water treatment pla	nt identified in part I of this	report. I certify that the
information provided	in this report is true	and accurate to the best of my	knowledge and belief. I certif	y that all drinking v	water treatment chemicals us	sed at this plant conform to NSF
International Standard	60 or other applica	ble standards referenced in sub-	section 62-555.320(3), F.A.C.	I also certify that	the following additional ope	erations records for this plant were
prepared each day that	t a licensed operator	staffed or visited this plant dur	ing the month indicated above	e: (1) records of an	nounts of chemicals used an	d chemical feed rates; and (2) if
applicable appropriate	e treatment process i	performance records. Furtherm	ore. I agree to provide these a	dditional operation	s records to the PWS owner	so the PWS owner can retain
		at a convenient location for at le				
them, together with co	)	a a convenient rocation for at it	and ten years.			
///	17	1 1				
	10	11/14/14	Ron Derossett			A 3531
		1 11/				
Signature and Date			Printed or Typed Name			License Number

PWS II	): •			5284137		Plant Name:	Lake Josephii	ne Plant #	4					
00														
III. D	aily Data f	or the Mo	nth/Year of:			November, 201	13							
		1999 1999	rirus Inactivati		IJ.	ree Chlorine		Chlor	ine Dioxide		Ozone		Combined C	chlorine (Chloramines)
- Charles State of	aviolet Radia		nus mactivati	and the same of the same	Other (Describe):	ree Chorne								55 - 19 15 5 5 5 5 6 1 1 1 1 1 1 1 1 1 1 1 1 1
											П			
Type o	f Disinfecta	ant Residua	d Maintained	l in Distribu	tion System:	✓ Free Chlorin	ne 📙 Co	mbined Ch	nlorine (Chlor	amines)	Chlo	rine Dioxide		
				CERTIFICATION OF THE PERSON OF	CT Calculations,	or UV Dose, to	Demostate F	our-Log	Virus Inacti	ivation, if A	pplicable*	de William		
				展期在16		CT Cal	lculations				UV	Oose		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L		pH of Water, if Applicable	Minimum CT Required, mg min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	27,000	The state of the s	3.0								1.9	
2	X	24.0	37,200		2.6								1.8	
3		24.0	29,800			( - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -								
4	X	24.0	29,800		3.0								2.0	
5	X	24.0	36,500		2.6								1.8	
6	X	24.0	26,200		3.1								2.3	
7	X	24.0	25,200		2.7								2.0	
8	X	24.0	19,600		2.6								2.1	
9	X	24.0	38,000		3.5								2.3	
10		24.0	42,000										1.0	
11	X	24.0	42,000		3.7								1.9	
12	X	24.0	22,800		3.4								2.0	
13	X	24.0	36,900		3.2								3.0	
14	X	24.0	32,600		3.8								2.6	
15	X	24.0	31,800		3.4								2.3	
16	X	24.0	27,800		3.6			_					2.3	
18		24.0	31,350		3.5		-				-		2.5	
19	X	24.0	31,350 28,300		3.4								2.5	
20	X	24.0 24.0	43,400		3.6								2.9	
21	X	24.0	40,000		2.8								1.9	
22	X	24.0	32,100		3.7								3.0	
23	X	24.0	33,200		3.6								3.1	
24	Δ.	24.0	38,150		3.0									
25	X	24.0	38,150		3.2								2.7	
26	X	24.0	27,400		3.4								2.4	
27	X	24.0	37,700		3.2								2.4	PN MAILED- Stage I
28	X	24.0	34,480		2.7								1.9	
29	X	24.0	35,400		3.6								2.2	
30	X	24.0	36,200		3.2								2.4	
31		24.0	20,200											
Total	Philip Philip	140	992,380										×	
-														

Avgerage 33,079

Maximum 43,400

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



# MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

olic Wa	ter System (PWS	) Identification No	umber:	5284137						Tar	
UR TOU	Plant 1 Name:	Plant 2 Name:	Plant 3 Name:	Plant 4 Name:	Plant 5 Name:	Plant 6 Name:	Plant 7 Name:	Plant 8 Name:	Plant 9 Name:	Plant 10 Name:	
	Lake Josephine Plant 3	Lake Josephine Plant 4		rmitted Maximum		and the second	Plant gallone per	day	70 W C S S S S S S S S S S S S S S S S S S		Total
		11年日本学院	Per	mitted Maximum	Day Operating C	apacity of Each r	I	T			580,000
Day of	300,000	280,000		L	Finished Water I	Deadwood by Egg	h Diant gallone	THE RESERVE	The section of the section	Manual Page 77	Total
Month	MEN TO SELECT	STATE OF THE PARTY	or a pulsar is	Net Quantity of	Finished vvater i	Toduced by Eac	T Flarit, galloris				152,000
1	125,000	27,000									140,200
2	103,000	37,200								-	167,800
3	138,000	29,800									167,800
4	138,000	29,800									143,500
5	107,000	36,500									166,200
6	140,000	26,200									179,200
7	154,000	25,200									168,600
8	149,000	19,600									153,000
9	115,000	38,000									172,500
10	130,500	42,000									172,500
11	130,500	42,000								-	86,800
12	64,000	22,800									137,900
13	101,000	36,900									139,600
14	107,000	32,600									157,800
15	126,000	31,800								-	114,800
16	87,000	27,800									138,850
17	107,500	31,350									138,850
18	107,500	31,350									153,300
19	125,000	28,300								-	145,400
20	102,000	43,400									154,000
21	114,000	40,000	(								128,100
22	96,000	32,100									140,200
23	107,000	33,200									
24	125,000	38,150									163,150 163,150
25	125,000	38,150									010 2111 4 201110
26	81,000	27,400									108,400 162,700
27	125,000	37,700									162,700
28	108,000	34,480									151,400
29	116,000	35,400									
30	125,000	36,200									161,200
31											0
otal			W. 15 12 10 12			SEATING TO SE					4,471,380
vg.											144,238
ay	W-III WILL IN										179,200

3.5	t #1
	ALLONS
- 9	x 1000
	125,000
	103,000
	138.000
	138,000
	107,000
_	140,000
	154,000
	149,000
	115,000
	130,500
	130,500
	64,000
	101,000
	107,000
	126,000
	87,000
	107,500
	107,500
	125,000
	102,000
	114.000
	96,000
	107,000
	125,000
	125,000
	81,000
	125,000
	108,000
	116,000
	125,000
	3,479,000
	115,967

Dist #2
GALLONS
x 100
27,000
37,200
29,800
29,800
36,500
26,200
25,200
19,600
38,000
42,000
42,000
22,800
36,900
32,600
31,800
27,800
31,350
31.350
28,300
43,400
40,000
32,100
33,200
38,150
38,150
27,400
37,700
34,480
35,400
36,200

4,471,380 992,380 total





#### Polymer Page 3 Due in December

See Pages 4 for Instructions.

I. General Information for the Month/Year of:

December, 2013

PWS Name:	Lake Josephine Plant	#3				PWS Identification Number:	5284137
PWS Type:	✓ Community	✓ Non-Transient Non-Comr	munity	Transient Non-Com	munity	Consecutive	334 32 33 33
Number of Service Connec		536				otal Population Served at End of Mon	th; 1,250
WS Owner:	US Water Services Co	orporation					
Contact Person:	Melisa Rotteveel				Co	ontact Person's Title: Cor	npliance Manager
Contact Person's Mailing A	ddress: 4	4939 Cross Bayou Blvd			City: New Port I	Rich State: Florida	Zip Code: 34652
Contact Person's Telephone		866-753-8292			Co	ontact Person's Fax Number: 727	-849-4219
Contact Person's E-Mail Ac	ddress: r	mrotteveel@uswatercorp	o.net_				
Water Treatment Pl	ant Information						
lant Name:	Lake Josephine Plant #	43				Plant Telephone Number:	941-377-9456
lant Address:	1949 Canary Way				City: Sebring	State: Florida	Zip Code: 33872
ype of Water Treatment b		✓ Raw Ground Water	Purchased Fin	ished Water	•		
ermitted Maximum Day C	perating Capacity of Pla	ant, gallons per day:		300,000			
lant Category (per subsect	ion 62-699.310(4), F.A.C	C.): V			Pl	ant Class (per subsection 62-699.310(	4), F.A.C.): C
Licensed Operators		Name		License Class	License Numb	per Day(s)	/ Shift(s) Worked
ead/Chief Operator:	Ron Derossett			A	3531	Operation Manager Days 1st S	hift
Other Operators:	Howard Short			A	3304	Operator Days 1st Sh	nift
				1			
				L. C. C. C. C. C.			
ertification by Lead	/Chief Operator		LEA DETTINATION OF	RITE AND DE	THE STATE OF	AST THE STREET WAS DESIGNED.	NAMES OF TAXABLE POST OF TAXABLE PARTY.
		perator licensed in Florida	am the lead/chief	operator of the v	ater treatment	plant identified in part I of this	report I certify that the
formation provided i	n this report is true	and accurate to the best of	my knowledge en	d baliaf Laartifi	that all deinkin	a water treatment showingle w	sed at this plant conform to NSF
ternational Standard	60 or other applies	bla standards referenced in	my knowledge an	5 220(2) E A C	t l all dillikili	g water treatment chemicals u	sed at this plant conform to NSF
cinational Standard	oo or other applica	ble standards referenced in	subsection 62-55	5.320(3), F.A.C.	I also certify th	at the following additional op	erations records for this plant we
epared each day that	a licensed operator	staffed or visited this plant	t during the month	indicated above	: (1) records of	amounts of chemicals used ar	nd chemical feed rates; and (2) if
plicable, appropriate	treatment process	performance records. Furth	hermore, I agree to	provide these ac	lditional operati	ions records to the PWS owne	r so the PWS owner can retain
em, together with co	pies of this report, a	at a convenient location for	at least ten years.				
	/ /						
///	//	_ / /					
//	// 7	t ululy	Ron Derossett				A 3531

PWS II	): ·			5284137		Plant Name:	Lake Joseph	nine Plant	#3					
, 	oile Doto 6	ou the Mar	ath/Names			D 1 20	12							
			nth/Year of:			December, 20	13		. 5: 11		По		По 11 16	
		1 473	/irus Inactivat			ree Chlorine		L Chlor	rine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
	aviolet Radia				Other (Describe):									
Type o	f Disinfecta	ant Residua	l Maintained			✓ Free Chlori		Combined (	Chlorine (Chlo	oramines)		orine Dioxide	2	
				18 1 V U S 11	CT Calculations, o			Four-Log	y Virus Inac	tivation, if A		Dio Se		
						CT Cale	culations	The state of			UV	Dose		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>O</sup> C	pH of Water, if Applicable		Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1		24.0	111,500											
2	X	24.0	111,500		2.9								2.0	
3	X	24.0	123,000		3.8								3.0	
4	X	24.0	114,000		3.0								2.0	
6	X	24.0	139,000		3.3								2.2	
7	X	24.0	109,000		2.4							l-	1.8	
8	X	24.0	101,000		2.9								2.0	
9	X	24.0 24.0	117,000		2.2									
10	X	24.0	117,000 127,000		2.3 4.1								1.7 2.8	
11	X	24.0	109,000		3,8								2.4	
12	X	24.0	114,000		3.6						-		2.6	
13	X	24.0	100,000		3.7								2.8	
14	X	24.0	99,000		4.1						-	~	2.4	
15		24.0	93,000											
16	X	24.0	93,000		3.5								2.9	
17	X	24.0	116,000		2.7								2.2	
18	X	24.0	96,000		3,6								2.4	
19	X	24.0	98,000		3.9								2.2	
20	X	24.0	80,000		4.1								3.2	
21	X	24.0	103,000		3.9								3.6	
22		24.0	95,000											
23	X	24.0	95,000		2.7								2.1	
25	X	24.0	115,000		3.1								2.5	
26	X	24.0	88,000		4.1								3.4	
27	X X	24.0	95,000		3.9								3.5	
28	X	24.0	92,000		3.6								3.3	
29	^	24.0	110,000		3.8								3.0	
30	X	24.0	104,000		4.1								26	
31	X	24.0	94,000		4.1								2.6 3.2	
otal	STEEL STEEL	24.0	3,263,000		4.0								3.2	
Avgerage	0.000	120	105,258											

Maximum 139,000 \* Refer to the instructions for this report to determine which plants must provide this information.



### REVISED 11/14/2014

### Polymer Page 3 Due in December

WS Name: Lake Josephine Plant #4  WS Type:	WS Type:	General Information	for the Month/Year of:	December, 2013				
WS Type:	WS Type:	Public Water System	(PWS) Information					
Interpretation   Service Connections at End of Month:   65   Total Population Served at End of Month:   75	Jumber of Service Connections at End of Month: 65  US Water Services Corporation  Wishower: US Water Services Corporation  Wish Roteveel  Ontact Person's Melisa Roteveel  Ontact Person's Mailing Address PO Box 2480  Ontact Person's Telephone Number: (352) 787-0980  Ontact Person's Telephone Number: (352) 787-0980  Total Person's Fax Number: 941-378-3554  Ontact Person's Fax Number: 941-378-3554  Water Treatment Plant Information  Iant Name: Lake Josephine Plant #4  Lake Josephine Plant #4  City Sebring State: Florida 941-377-9456  Janta Address: 5313 Knight Ave City Sebring State: Florida 2ip Code: 33875  Water Treatment by Plant: L' Raw Ground Water Purchased Finished Water Finished Wat	PWS Name:	Lake Josephine Plant #4				PWS Identification Number:	5284137
WS Owner: US Water Services Corporation  Contact Person: Melisa Roteveel  Contact Person's Mailing Address: PO Box 2480  Contact Person's Telephone Number: (352) 787-0980  Contact Person's E-Mail Address: mrotteveel@uswatercorp.net  Vater Treatment Plant Information  Lant Name: Lake Josephine Plant #4  Lant Address: 5313 Knight Ave  Lant Address: 5313 Knight Ave  Lant Address: 5313 Knight Ave  Lant Maximum Day Operating Capacity of Plant, gallons per day:  Lant Category (per subsection 62-699.310(4), F.A.C.): V  Licensed Operator: Howard Short  Name  License Class  License Number: Nontact Person's Title:  Contact Person's Title:  Contact Person's Fax Number: 941-378-3554  Zip Code: 34652  Zip C	WS Owner   US Water Services Corporation   Melisa Rotever   Melisa Rotev	PWS Type:	✓ Community Non-Transient N	lon-Community	Transient Non-Comm	nunity	Consecutive	
Contact Person's Mailing Address: PO Box 2480   City: New Port Rich   State: Florida   St	Contact Person's Mailing Address:   PO Box 2480   City: New Port Rich   State:   Florida   Zip Code:   34652	Number of Service Connect	ions at End of Month;	65		Total !	Population Served at End of Mont	th: 75
Contact Person's Mailing Address: PO Box 2480 City New Port Rich State: Florida Zip Code: 34652 Contact Person's Telephone Number: (352) 787-0980 Contact Person's Fax Number: 941-378-3554 Contact Person's E-Mail Address: mrotteveel@uswatercorp.net  Vater Treatment Plant Information  Iant Name: Lake Josephine Plant #4 Plant Telephone Number: 941-377-9456 Iant Address: 5313 Knight Ave City Sebring State: Florida Zip Code: 33875  Very of Water Treatment by Plant: Paw Ground Water Purchased Finished Water  Termitted Maximum Day Operating Capacity of Plant, gallons per day: 280,000  Iant Category (per subsection 62-699.310(4), F.A.C.): V  In Plant Class (per subsection 62-699.310(4), F.A.C.): C  Licensed Operators Name License Class License Number Day(s) / Shift(s) Worked  Each/Chief Operator: Howard Short A 3304 Operator	Contact Person's Mailing Address   PO Box 2480   City   New Port Rich   State   Florida   Zip Code   34652	PWS Owner:	US Water Services Corporation					
Contact Person's Fax Number: 941-378-3554  Contact Person's Fax Numb	Contact Person's Telephone Number: (352) 787-0980 Contact Person's Fax Number: 941-378-3554  Contact Person's E-Mail Address: mrotteveel@uswatercorp.net  Water Treatment Plant Information  lant Name: Lake Josephine Plant #4  Lant Address: 5313 Knight Ave  yee of Water Treatment by Plant:	Contact Person:	Melisa Roteveel			Contac	et Person's Title:	
Vater Treatment Plant Information  Iant Name: Lake Josephine Plant #4  Iant Address: 5313 Knight Ave City Sebring State: Florida Zip Code: 33875  Iant Address: 5313 Knight Ave Plant Telephone Number: 941-377-9456  Iant Address: 5313 Knight Ave City Sebring State: Florida Zip Code: 33875  Iant Address: Plant Category (per subsection 62-699.310(4), F.A.C.): V  Iant Category (per subsection 62-699.310(4), F.A.C.): V  Iant Category (per subsection 62-699.310(4), F.A.C.): C  Iciensed Operators Name License Class License Number Day(s) / Shift(s) Worked  Iant Category (per subsection 62-699.310(4), F.A.C.): And Cat	Contact Person's E-Mail Address: mrotteveel@uswatercorp.net  Vater Treatment Plant Information    Lake Josephine Plant 4	Contact Person's Mailing A	ddress: PO Box 2480				CONTRACTOR STATE OF THE STATE O	Zip Code: 34652
Vater Treatment Plant Information    Int Name: Lake Josephine Plant #4   Plant Telephone Number: 941-377-9456     Int Address: 5313 Knight Ave   City: Sebring   State: Florida   Zip Code: 33875     Int Address: 5313 Knight Ave   Plant Telephone Number: 941-377-9456     Int Address: 5313 Knight Ave   Plant Telephone Number: 941-377-9456     Int Address: 5313 Knight Ave   Plant Telephone Number: 941-377-9456     Int Address: 5313 Knight Ave   Purchased Finished Water     Interpretation of Plant Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection 62-699.310(4), F.A.C.): C     Interpretation of Plant Class (per subsection	Vater Treatment Plant Information    Iant Name:   Lake Josephine Plant #4   City:   Sebring   State:   Florida   Zip Code:   33875     Yep of Water Treatment by Plant:   Yep Raw Ground Water   Purchased Finished Water	Contact Person's Telephone	Number: (352) 787-0980			Contac	t Person's Fax Number: 941-	-378-3554
lant Name: Lake Josephine Plant #4  lant Address: 5313 Knight Ave City: Sebring State: Florida Zip Code: 33875  ype of Water Treatment by Plant: Plant: Raw Ground Water Purchased Finished Water  ermitted Maximum Day Operating Capacity of Plant, gallons per day: 280,000  lant Category (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): C  Licensed Operators Name License Class License Number Day(s) / Shift(s) Worked  ead/Chief Operator: Howard Short A 3304 Operator	lant Name: Lake Josephine Plant #4  lant Address: 5313 Knight Ave City: Sebring State: Florida Zip Code: 33875  ype of Water Treatment by Plant:	Contact Person's E-Mail Ad	dress: mrotteveel@uswa	itercorp.net				
lant Address: 5313 Knight Ave City: Sebring State: Florida Zip Code: 33875  ype of Water Treatment by Plant:    Purchased Finished Water	lant Address: 5313 Knight Ave    Value   Value	Water Treatment Pla	nt Information					
ype of Water Treatment by Plant:    Purchased Finished Water	ype of Water Treatment by Plant:	lant Name:	Lake Josephine Plant #4				Plant Telephone Number:	941-377-9456
ermitted Maximum Day Operating Capacity of Plant, gallons per day:  ant Category (per subsection 62-699.310(4), F.A.C.):  Licensed Operators  Name  License Class  License Number  Day(s) / Shift(s) Worked  and / Chief Operator:  Howard Short  A 3304 Operator	ermitted Maximum Day Operating Capacity of Plant, gallons per day:    San Category (per subsection 62-699.310(4), F.A.C.): V   Plant Class (per subsection 62-699.310(4), F.A.C.): C	Plant Address:	5313 Knight Ave			City: Sebring	State: Florida	Zip Code: 33875
ant Category (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): C  Licensed Operators	lant Category (per subsection 62-699.310(4), F.A.C.): V  Licensed Operators   Name   License Class   License Number   Day(s) / Shift(s) Worked   ead/Chief Operators:   Howard Short   A 3304 Operator   Ther Operators:   Ron Derossett   A 3531 Operation Manager			er Purchase	d Finished Water			*
ant Category (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): C  Licensed Operators	lant Category (per subsection 62-699.310(4), F.A.C.): V  Licensed Operators   Name   License Class   License Number   Day(s) / Shift(s) Worked   ead/Chief Operators:   Howard Short   A 3304 Operator   Ther Operators:   Ron Derossett   A 3531 Operation Manager	ermitted Maximum Day O	perating Capacity of Plant, gallons per day:		280,000			
ead/Chief Operator: Howard Short A 3304 Operator	ead/Chief Operator: Howard Short A 3304 Operator There Operators: Ron Derossett A 3531 Operation Manager	lant Category (per subsecti		V		Plant (	Class (per subsection 62-699.310(	4), F.A.C.): C
	Other Operators:  Ron Derossett  A 3531 Operation Manager	Licensed Operators	Name		License Class	License Number	Day(s)	/ Shift(s) Worked
ther Operators:  Ron Derossett  A 3531 Operation Manager		ead/Chief Operator:	Howard Short		A	3304	Operator	
	ertification by Lead/Chief Operator	ther Operators:	Ron Derossett		A	3531	Operation Manager	
	ertification by Lead/Chief Operator							
	ertification by Lead/Chief Operator							
	ertification by Lead/Chief Operator							
	ertification by Lead/Chief Operator			1 1 1 1 1 1 1 1 1				, , , , , , , , , , , , , , , , , , , ,
	ertification by Lead/Chief Operator							
		ertification by Lead	Chief Operator	ESTER DATE HELD	DESTRUCTION OF THE PROPERTY OF	STREWOLD ALON	MEN SORVES TARRED IN	· · · · · · · · · · · · · · · · · · ·
ertification by Lead/Chief Operator  the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part L of this report. L certify that the								
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the								
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NS	formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NS							
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NS ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant value.	formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NS ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant of the							
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NS ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant we pared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2)	formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NS ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant of epared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2)	plicable, appropriate	treatment process performance record	ls. Furthermore, I agr	ee to provide these ac	ditional operation:	s records to the PWS owne	r so the PWS owner can retain
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NS ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant we pared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2)	formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NS ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant of epared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2)					599		
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NS ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant very epared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain	formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NS ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant of the pared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) splicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain	11						
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NS ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant water pared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain tem, together with eopies of this report, at a convenient location for at least ten years.	formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NS ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant of the pared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain tem, together with eopies of this report, at a convenient location for at least ten years.	5 · U-	200 11114/19	Ron Der	ossett			A 3531
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NS ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant very epared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) uplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain em, together with eopies of this report, at a convenient location for at least ten years.	formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NS sternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant of the pared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain em, together with eopies of this report, at a convenient location for at least ten years.	gnature and Date		Printed of	or Typed Name			License Number

PWS II	); •			5284137		Plant Name:	Lake Josephii	ne Plant #	4					
iii b	alle Data f	on the Ma	nth/Year of:			December, 201	2							
-	Contract of the Contract of th	A STATE OF THE PARTY OF THE PAR	The state of the s				3	Chlor	ine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
-	ot Achieving aviolet Radia		irus Inactivat		Other (Describe):	ree Chlorine		Critor	ine Dioxide		☐ Ozone		combined c	anorme (choranines)
Type o	f Disinfecta	ant Residua	l Maintained	l in Distribu	tion System:	✓ Free Chlorii	ne 🗆 Co	mbined Ch	nlorine (Chlor	amines)	Chlo	rine Dioxide	2	
17000	Distilled	I			CT Calculations,			our-Log	Virus Inact	ivation, if A	pplicable*	William III	100	
-				ALTERNATION OF THE STATE OF THE	District Controller		lculations				UV	Dose		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow,	Lowest CT Provided Before or at First Customer During Peak Flow, mg-	Temp of Water, <sup>O</sup> C	pH of Water, if Applicable	Minimum CT Required, mg- min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
		PROFESSION		CALL TO	Peak Flow, mg/L	minutes	min/L			SERVICE COST	Ullegarden		System, mg/L	TO THE REPORT OF THE PARTY OF T
2	V	24.0	37,350		2.2		-	_					2.2	
3	X	24.0	37,350 34,500		3,3			_					2.4	
4	X	24.0	40,700		3.0			-		-			2.2	
5	X	24.0	45,900		3.1			_	-				2.4	
6	X	24.0	33,800		2.7								2.0	
7	X	24.0	35,000		2.4	-							1.9	
8	Λ	24.0	44,000		2.1								100	
9	X	24.0	44,000		2.9		-						2.6	
10	X	24.0	37,200		3.4								2.8	
-11	X	24.0	34,000		3.8								2.6	
12	X	24.0	34,200		3.1								2.2	
13	X	24.0	32,200		2.8								1.9	
14	X	24.0	45,400		3.0								2.1	
15		24.0	51,050											
16	X	24.0	51,050		3.2								2.3	
17	X	24.0	43,100		3.1								2.2	
18	X	24.0	40,100		2.5								2.0	
19	X	24.0	42,200		2.6								2.1	
20	X	24.0	39,900		3.2								2.2	
21	X	24.0	47,700		3.6								2.4	
22		24.0	40,100											
23	X	24.0	40,100		3.5								2.5	
24	X	24.0	51,200		2.7								2.0	
25	X	24.0	40,900		3.2			_					2.3	
26 27	X	24.0	48,000		3.0								2.4	
28	X	24.0	36,700		2.8								3.0	
29	X	24.0	53,500		3.6			-					3.0	
30	v	24.0 24.0	44,800		4.0								3.2	
31	X	24.0	44,800	3	3.8								3.0	
otal	Α	24.0	42,300 1,293,100		3.8								3.0	
vgerage	170	CHARLES NO.	41,713											
Maximum	100.11	A SAME I	53,500											

Maximum 53,500

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



#### MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

Daily Finished-Water Production for the Month/Year of : December 2013 Community Water System (CWS) Name: Lake Josephine Plants 3 & 4 Public Water System (PWS) Identification Number: 5284137 Plant 1 Name: | Plant 2 Name: | Plant 3 Name: | Plant 4 Name: | Plant 5 Name: Plant 6 Name: Plant 7 Name: Plant 8 Name: Plant 9 Name: Plant 10 Name: Lake Josephine Lake Josephine Plant 3 Plant 4 Permitted Maximum Day Operating Capacity of Each Plant, gallons per day Total 580,000 300,000 Day of 280,000 Month Net Quantity of Finished Water Produced by Each Plant, gallons Total 148,850 111,500 37,350 1 2 111,500 37,350 148,850 157,500 123,000 3 34,500 4 114,000 40,700 154,700 5 139,000 184,900 45,900 6 109,000 33,800 142,800 136,000 101,000 35,000 117,000 161,000 8 44,000 9 117,000 44,000 161,000 10 127,000 37,200 164,200 109,000 11 34,000 143,000 114,000 34,200 148,200 12 13 100,000 32,200 132,200 14 99,000 45,400 144,400 15 93,000 51,050 144,050 16 93,000 51,050 144,050 17 116,000 43,100 159,100 18 96,000 40,100 136,100 19 98,000 42,200 140.200 20 80,000 39,900 119,900 21 103,000 47,700 150,700 22 95,000 40,100 135,100 23 95,000 40,100 135,100 24 115,000 51,200 166,200 25 88,000 40,900 128,900 26 95,000 48,000 143,000 27 92,000 36.700 128,700 28 110,000 53,500 163,500 29 104,000 44,800 148,800 30 104,000 44,800 148,800 31 94,000 42,300 136,300 Total 4,556,100 Avg. 146,971 Max.

-		110	
1)	IST	#1	ı
$\boldsymbol{\mathcal{L}}$	136	TT .	

Dist #1	
GALLONS	
x 1000	
111,500	
111,500	
123,000	
114,000	
139,000	
109,000	
101,000	
117,000	
117,000	
127,000	
109,000	
114,000	
100,000	
99,000	
93.000	
93.000	
116,000	
96,000	
98,000	
80,000	
103,000	
95,000	
95,000	
115,000	
88,000	
95,000	
92,000	
110,000	
104,000	
104,000	
94,000	
3,263,000	
105,258	

GALLONS
x 100
37,350
37,350
34,500
40,700
45,900
33,800
35,000
44,000
44,000
37,200
34,000
34,200
32,200
45,400
51,050
51,050
43,100
40,100
42,200
39,900
47,700
40,100
40,100
51,200
40,900
48,000
36,700
53,500
44,800
44,800
42,300
1 293 100

1.293,100 total

41,713

4,556,100





VS Type: imber of Service Connecti	Lake Josephine Plant #3				PWS Identification Number:	5284137
mber of Service Connecti	✓ Community	✓ Non-Transient Non-Community	Transient Non-Comm	nunity	Consecutive	
		536		Total	Population Served at End of Month:	1,250
VS Owner;	US Water Services Corpo	oration				
ntact Person:	Melisa Rotteveel			Contac	et Person's Title: Compliar	nce Manager
ntact Person's Mailing Ad	idress: 493	9 Cross Bayou Blvd		City: New Port Rich	State: Florida	Zip Code: 34652
ntact Person's Telephone	Number: 866	-753-8292		Contac	et Person's Fax Number: 727-849-	4219
ntact Person's E-Mail Add		otteveel@uswatercorp.net				
ater Treatment Plan	nt Information					
nt Name:	Lake Josephine Plant #3				Plant Telephone Number:	941-377-9456
nt Address:	1949 Canary Way			City: Sebring	State: Florida	Zip Code: 33872
pe of Water Treatment by	Plant:	Raw Ground Water Purch	nased Finished Water			
mitted Maximum Day Op	perating Capacity of Plant,	, gallons per day:	300,000			
nt Category (per subsection	on 62-699.310(4), F.A.C.):	V			Class (per subsection 62-699.310(4), F.	
icensed Operators		Name	License Class	License Number	Day(s) / Sh	ift(s) Worked
ad/Chief Operator:	Ron Derossett		A	3531	Operation Manager Days 1st Shift	
her Operators:	Howard Short		A	3304	Operator Days 1st Shift	
			100000			

III. D	aily Data f	or the Mor	nth/Year of:			January, 2014									
Means		Four-Log V	/irus Inactivati	ion/Removal:	Other (Describe):	ree Chlorine	4	Chlor	rine Dioxide		Ozone		Combined Chlorine (Chloramines)		
			l Maintained			✓ Free Chlorin	ъ По	`ombined (	Chlorine (Chlo	oraminos)	Chlo	orine Dioxide			
Type o	Distillecti	T	T		CT Calculations, of							THE DIOXIGE			
	78			2 13 13	C1 Calculations, o	1.14.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.		rour-Log	y irus mac	tivation, ii A					
	THE LAND	I SOUTH	S AU CEL AL			CT Calc	culations	THE .	4	1 1 1 1 1 1 1 1 1 1 1	UV	Dose			
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>o</sup> C	pH of Water, if Applicable		Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
1	X	24.0	97,000		3.6								3.0		
2	X	24.0	97,000		3.4								2.2		
3	X	24.0	96,000		3.6								2.4		
4	X	24.0	99,000		1.9								0.9		
5		24.0	111,500												
6	X	24.0	111,500		3.0								2.4		
7	X	24.0	100,000		3.4								2.5		
8	X	24.0	101,000		3.6								2.8		
9	X	24.0	85,000		3.6								2.7		
10	X	24.0	104,000		3.7								2.8		
- 11	X	24.0	113,000		1.9								1.6		
12	,	24.0	127,500												
13	X	24.0	127,500		3.2								1.9		
14	X	24.0	110,000		3.6								2.1		
15	X	24.0	116,000		3.5								1.5		
16	X	24.0	115,000		4.0								2.1		
17	X	24.0	114,000		3.6								2.4		
18	X	24.0	112,000		4.0								2.0		
19		24.0	128,500												
20	X	24.0	128,500		3.8								2.5		
21	X	24.0	138,000		1.6							-	1.4		
22	X	24.0	111,000		3.6								2,4		
23	X	24.0	132,000		3.7								2.2		
24	X	24.0	101,000		3.9								3.1		
25	X	24.0	138,000		3.9								2.4		
26		24.0	124,500												
27	X	24.0	124,500		4.0								3.0		
28	X	24.0	120,000		3.6								2.9		
29	X	24.0	113,000		3.3								1.5		
30	X	24.0	123,000		3.4								1.7		
31	X	24.0	109,000		3.3								1.5		
		STABLE.	3,528,000												
vgerage	THE STATE OF THE		113,806												

Lake Josephine Plant #3

5284137

Plant Name:

PW\$ ID:

Maximum 138,000 \* Refer to the instructions for this report to determine which plants must provide this information.





See Pages 4 for Insti							
I. General Information	ı for the Month/Year of	January, 2	2014				
A. Public Water Systen	(PWS) Information						
PWS Name:	Lake Josephine Plant #4					PWS Identification Number:	5284137
PWS Type:		Non-Transient Non-Commu	unity I I T	ransient Non-Comr	nunity II	Consecutive	
Number of Service Connec		65	unity i	Tansient Non-Com		Population Served at End of Mo	onth: 75
PWS Owner:	US Water Services Corporati				Total	opulation better at End of the	
Contact Person:	Melisa Roteveel	on			Contac	et Person's Title:	
Contact Person's Mailing A		2480			City: New Port Rich	A CONTRACTOR OF THE PROPERTY O	Zip Code: 34652
Contact Person's Telephone		87-0980				Control of the Contro	11-378-3554
Contact Person's E-Mail Ac		eveel@uswatercorp.r	net		T COMM		
B. Water Treatment Pla		CVCCI(@d3Watcroorp.i	ilot				
Plant Name:	Lake Josephine Plant #4					Plant Telephone Number:	941-377-9456
Plant Address:	5313 Knight Ave				City: Sebring	State: Florida	Zip Code: 33875
Type of Water Treatment b		Raw Ground Water	Purchased Fini	shed Water	ony, oronny		
7.1	perating Capacity of Plant, gal		rurcilaseu i ilii	280,000			
Plant Category (per subsect		V		200,000	Plant (	Class (per subsection 62-699.31)	0(4), F.A.C.): C
Licensed Operators	1011 02 077.510(1),11.11.0.).	Name		License Class	License Number		s) / Shift(s) Worked
Lead/Chief Operator:	Howard Short	Political Property of the Party		A	3304	Operator	,
Other Operators:	Ron Derossett			A	3531	Operation Manager	
	Tion December						
and the same of th							
I. Certification by Lead	/Chief Operator	1523 W. L. S. W.	A 28 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	W. S. W	STATE WE		
		or licensed in Florida a	am the lead/chief	operator of the v	vater treatment plan	nt identified in part L of th	is report. I certify that the
information provided	in this report is true and	accurate to the best of r	ny knowledge an	d belief L certify	that all drinking u	rater treatment chemicals	used at this plant conform to NSF
International Standard	on this report is true and a	tandards referenced in s	ubsection 62 55	5 220(2) E A C	Lalco certify that t	he following additional o	operations records for this plant were
							and chemical feed rates; and (2) if
				provide these ac	dditional operation:	s records to the PWS own	ner so the PWS owner can retain
them, together with co	pies of this report, at a co	onvenient location for a	at least ten years.				
$\cap$	( / ^ )						
Melisa	O Katter	er X	Ron Derossett				A 3531
Signature and Date		11/17/14	Printed or Typ	ed Name			License Number

PWS II				5284137		Plant Name:	Lake Josephin	ne Plant #	4					
28														
III. D	aily Data f	or the Mo	nth/Year of:	大型工程		January, 2014	LO-SASSET T							
			irus Inactivati		√ F	ree Chlorine		Chlor	rine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
( 2 to 2 to 3	violet Radia		mas massiran	Table 1	Other (Describe):									
			l Maintained		5 1 A C 1 P 1 P 1 P 1 P 1 P 1 P 1 P 1 P 1 P 1	✓ Free Chlori	пе Псо	mhined Cl	hlorine (Chlori	amines)	Chlo	rine Dioxide	<u> </u>	
Type o	Disiniecta	int Residua	i Maintained	III DISTITION	CT Calculations,	or IIV Dose to	Demostate F	four-Log	Virus Inact	vation, if A				A CARLON TO THE TOTAL TOTAL TO THE TOTAL TOTAL TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL
			Barra V		C1 Calculations,		lculations	our Log	THUS THUCK		UVI	Dose		
						T Cr Ca	Curations	I and the second	Terral I			150		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>O</sup> C	pH of Water, if Applicable	Minimum CT Required, mg min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	49,000		3.0								2.1	
2	X	24.0	33,300		4.0								3.0 2.0	
3	X	24.0	41,900		2.6								1.7	
4	X	24.0	48,800		3.1								1.7	
5		24.0	46,050										2.2	
6	X	24.0	46,050		2.4				-				2.1	
7	X	24.0	50,300		2.5			_					1.4	
8	X	24.0	39,800		2.4			-					1.8	
9	X	24.0	42,500		2.0			-					1.6	
10	X	24.0	36,900		1.8			_					1.8	
11	X	24.0	24,900		2.0								1.0	
12	1/	24.0	28,500		1.8								0.9	
14	X	24.0	28,500		2.0								1.2	
15	X	24.0 24.0	30,500 28,700		1.6								1.4	
16	X	24.0	37,700		1.0						7		0.8	
17	X	24.0	42,700		3.6								2.0	
18	X	24.0	34,200		3.9								2.1	
19	Λ	24.0	39,450		3.7			7						
20	X	24.0	39,450		3.3								2.7	
21	X	24.0	38,100		2.8								2.4	
22	X	24.0	34,700		2.3								1.2	
23	X	24.0	34,500		2.4								1.6	
24	X	24.0	30,600		3.0								1.5	
25	X	24.0	40,100		2.4								2.2	
26		24.0	37,650								Ü			
27	X	24.0	37,650		2.8								2.1	
28	X	24.0	39,000		2.5								2.3	
29	X	24.0	34,100		2.4								1.9	
30	X	24.0	31,900		2.3								1.6	
31	X	24.0	31,400		2.2				4		is .		1.5	
Total	TO GALLES	TO STREET	1,158,900											

Avgerage 37,384

Maximum 50,300

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



Total

Avg.

Max.

# MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

January 2014 Daily Finished-Water Production for the Month/Year of : Lake Josephine Plants 3 & 4 Community Water System (CWS) Name: 5284137 Public Water System (PWS) Identification Number: Plant 1 Name: Plant 2 Name: Plant 3 Name: Plant 4 Name: Plant 5 Name: Plant 6 Name: Plant 7 Name: Plant 8 Name: Plant 9 Name: Plant 10 Name: Lake Josephine Lake Josephine Plant 3 Plant 4 Total Permitted Maximum Day Operating Capacity of Each Plant, gallons per day 580,000 300,000 280,000 Day of Net Quantity of Finished Water Produced by Each Plant, gallons Total Month 146,000 97,000 49,000 130,300 97,000 33,300 2 137,900 96,000 41,900 147,800 99,000 48.800 4 157,550 111,500 46,050 5 157,550 6 111,500 46,050 150,300 100,000 50,300 140,800 101,000 39,800 8 127,500 85,000 42,500 9 140,900 10 104,000 36,900 137,900 24,900 11 113,000 156,000 127,500 28,500 12 156,000 127,500 28,500 13 140,500 14 110,000 30,500 144,700 15 116,000 28,700 152,700 16 115,000 37,700 156,700 114,000 42,700 17 146,200 18 112,000 34,200 167,950 128,500 39,450 19 167,950 20 128,500 39,450 176,100 21 138,000 38,100 145,700 22 111,000 34,700 166,500 23 132,000 34,500 131,600 24 101,000 30,600 178,100 138,000 40,100 25 162,150 26 124,500 37,650 162,150 27 124,500 37.650 159,000 28 120,000 39,000 147,100 34,100 29 113,000 154,900 30 123,000 31,900 140,400 31 109,000 31,400

4,686,900

151,190

Dist #1
GALLONS
x 1000
97,000
97,000
96,000
99,000
111,500
111,500
100,000
101,000
85,000
104,000
113,000
127,500
127,500
110,000
116,000
115,000
114,000
112,000
128,500
128,500
138,000
111,000
132,000
101,000
138,000
124,500
124,500
120,000
113,000
123,000
109,000
3,528,000

113,806

Dist #2 GALLONS	T.
x 100	
49,000	
33,300	
41,900	-
48,800	-
46,050	
46,050	
50,300	
39,800	
42,500	
36,900	
24,900	
28,500	
28,500	
30,500	
28,700	
37,700	
42,700	
34,200	
39,450	100
39,450	
38,100	
34,700	
34,500	
30,600	
40,100	
37,650	
37,650	
39,000	
34,100	
31,900	
31,400	
1.158,900	tota

37,384

4,686,900



WS Type:	Lake Josephine Plant #3			PWS Identification Numb	er: 5284137	
and the second s	✓ Community ✓ Non-Transient Non-Community	Transient Non-Com	munity	Consecutive		
imber of Service Connec	tions at End of Month: 536		Total	Population Served at End o	f Month: 1,250	
VS Owner:	US Water Services Corporation		***			
ontact Person:	Melisa Rotteveel		Contac	et Person's Title:	Compliance Manager	
ntact Person's Mailing A	ddress: 4939 Cross Bayou Blvd		City: New Port Rich	State: Florida	Zip Code:	34652
ntact Person's Telephone	Number: 866-753-8292		Contac	et Person's Fax Number:	727-849-4219	
ontact Person's E-Mail Ad						
ater Treatment Pla	ant Information					
int Name:	Lake Josephine Plant #3			Plant Telephone Number:	941-377-945	6
nt Address:	1949 Canary Way		City: Sebring	State: Florida	Zip Code:	33872
pe of Water Treatment by	y Plant:	inished Water				
mitted Maximum Day O	perating Capacity of Plant, gallons per day:	300,000				
	ion 62-699.310(4), F.A.C.): V		Plant (	Class (per subsection 62-69		
Licensed Operators	Name	License Class	License Number	1,007	ay(s) / Shift(s) Worked	學所引擎
ACM SATURD CONTRACTOR SON SON STANDARDS	Ron Derossett	A	3531	Operation Manager Days	s 1st Shift	
her Operators:	Howard Short	A	3304	Operator Days	1st Shift	
	Alfred Gregg	A	14324	Operator Days	1st Shift	

PW5 II	): ,			5284137		Plant Name:	Lake Joseph	ine Plant	#3					
k														
III. D	aily Data fo	or the Mor	th/Year of:			February, 2014	Į.							
Means	of Achieving	Four-Log V	irus Inactivat	ion/Removal:	√F	ree Chlorine		Chlor	ine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
	aviolet Radia				Other (Describe):									
300			137			✓ Free Chloric			Chlasia a /Chla		Пон	rine Dioxide		
Type o	Disintecta	int Residua	l Maintained	in Distribu	tion System:				Chlorine (Chlo			rine Dioxide		Note that the second se
152				MANAGED ST	CT Calculations, of			rour-Log	virus mac	tivation, if F		Dana		
				N BINE V		CT Calc	culations				UV	Dose		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>o</sup> C	pH of Water, if Applicable			Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	112,000		2.1			PER MANAGEMENT AND	Marie A.	- San Carlotte			1.3	
2		24.0	132,000											
3	X	24.0	132,000		3.6								2.9	
4	X	24.0	122,000		3.6								2.4	
5	X	24.0	110,000		3.2								2.6	
6	X	24.0	116,000		3.2							Ž.	2.3	
7	X	24.0	126,000		3.0								1.9	
8	X	24.0	92,000		2.6	181							0.8	
9		24.0	134,000											
10	X	24.0	134,000		2.4								1.2	
11	X	24.0	103,000		3,1								1.7	
12	X	24.0	133,000		2.8								0.9	
14	X	24.0	115,000		2.0								1.4	
15	X	24.0 24.0	99,000 124,000		2.7 3.2							-	1.6	
16	_^	24.0	100,500		3.2								1.0	
17	Х	24.0	100,500		3.1								2.0	
18	X	24.0	134,000		3.1								1.6	
19	X	24.0	137,000		1.4								0.9	
20	Х	24.0	103,000		3.0								1.9	
21	X	24.0	112,000		2.6								1.6	
22	X	24.0	109,000		2,4								1.8	
23		24.0	120,500											
24	X	24.0	120,500		2.6								1.9	
25	X	24.0	120,000		2.5								1.9	
26	X	24.0	122,000		2.3								1.8	
27	X	24.0	141,000		2.3								1.7	
28	X	24.0	82,000		3.1								1.9	
1							1 1 1 1 1							
21														
31														
Avgerage	A CONTRACTOR		3,286,000											

Maximum 141,000 \*Refer to the instructions for this report to determine which plants must provide this information.



### REVISED 11/14/2014

WS Type:	Lake Josephine Plant #	14				PWS Identification Number:	5284137
ws type:	✓ Community	Non-Transient Non-Com	munity	Transient Non-Comm		Consecutive	
Number of Service Connec	ctions at End of Month:	65				Total Population Served at End of Month:	75
WS Owner:	US Water Services Con	rporation					
Contact Person:	Melisa Roteveel					Contact Person's Title:	
Contact Person's Mailing A	Address: P	O Box 2480				t Rich State: Florida	Zip Code: 34652
Contact Person's Telephon		352) 787-0980				Contact Person's Fax Number: 941-37	78-3554
Contact Person's E-Mail A		nrotteveel@uswatercor	p.net_				
Vater Treatment Pl	lant Information						W4470 - 5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
lant Name:	Lake Josephine Plant #	4				Plant Telephone Number:	941-377-9456
lant Address:	5313 Knight Ave		73-75		City: Sebring	State: Florida	Zip Code: 33875
ype of Water Treatment b		✓ Raw Ground Water	Purch	ased Finished Water			
	Operating Capacity of Pla			280,000			
	ction 62-699.310(4), F.A.C		V	171 01		Plant Class (per subsection 62-699.310(4)	
Licensed Operators		Name		License Class	License Nur	No. Control of the Co	Shift(s) Worked
ead/Chief Operator:	The Control of the Co			A	3304	Operator	
ther Operators:	Ron Derossett			A	3531	Operation Manager	
	Alfred Gregg			A	14324	Operator	
	8						
	la constant						
						7	
	B Comment						
	å -						

PWS II				5284137		Plant Name:	Lake Josephii	ne Plant #	4					
-														
III. D	aily Data f	or the Mo	nth/Year of:	THE STATE		February, 2014								
			irus Inactivati		√ E	ree Chlorine		Chlor	rine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
Contract of the Contract of th	aviolet Radia		iius mactivati			ree Chlorine			The Divinge					
-		502 W. I			Other (Describe):							a constant and		
Type o	f Disinfecta	nt Residua	l Maintained	l in Distribu	tion System:	✓ Free Chlorin	ne 📙 Co	mbined Ch	nlorine (Chlora	amines)		rine Dioxide		
		THE REAL PROPERTY.		端原の	CT Calculations,	or UV Dose, to	Demostate I	our-Log	Virus Inacti	ivation, if A			1 4 3 3	
- 12				N. F. Company		CT Cal	lculations				UVI	Dose		
	D DI			607225					P. W. Lind					
Day of	Days Plant	Hauss alast	Net Quantity of Finished			Disinfectant	Lowest CT				alifation .	Minimum		
Day of the	Staffed or Visited by	Hours plant in	Water	R 2 1 5 7	Lowest Residual	Contact Time	Provided			Minimum CT	Lowest	UV Dose	Lowest Residual	Emergency or Abnormal Operating Conditions;
Month	Operator	Operation	Producted.	Peak Flow	Disinfectant	(T) at C	Before or at		pH of Water,	Required, mg	Operating	Required,	Disinfectant	Repair or Maintenance Work that Involves
Month	(Place "X")	Operation	gal.	Rate, gpd.	Concentration (C)	Measurement	First Customer	Water, OC	if Applicable	min/L	UV Dose,	mW-	Concentration at	Taking Water System Components Out of
	(riace A)	1 200	gai.		Before or at First	Point During	During Peak			Mills C	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	Remote Point in	Operation
. 17					Customer During	Peak Flow,	Flow, mg-				382 - C	300 cm	Distribution	
12					Peak Flow, mg/L	minutes	min/L		100		100		System, mg/L	
1	X	24.0	36,500		3.0								2.1	
2		24.0	37,200											
3	X	24.0	37,200		3.3								1.8	
4	X	24.0	34,400		2.9								2.8	
5	X	24.0	33,900		1.4								2.4	
6	X	24.0	33,700		2.2								1.2	
7	X	24.0	32,800		2.0								1.4	
8	X	24.0	31,200		2.2								1.4	
9	**	24.0	34,000		1.0							_	1.7	
11	X	24.0 24.0	34,000		1.9 2.0								1.5	
12	X	24.0	40,500 36,000	_	1.5			-					1.3	
13	X	24.0	35,100	-	1.8								2.0	
14	X	24.0	27,100		2.2								1.5	
15	X	24.0	35,800		1.8								1.2	
16		24.0	19,000											
17	X	24.0	19,000		1.9			-					1.4	
18	X	24.0	19,300		1.7								1.6	
19	X	24.0	18,000		2.4								1.7	
20	X	24.0	13,800		1.5								1.8	
21	X	24.0	21,200		1.8								1.7	
22	X	24.0	17,700		1.6								1.4	
23		24.0	18,550											
24	X	24.0	18,550		1.8							_	1.7	
25	X	24.0	34,000		1.4			_					0.8	
26	X	24.0	19,400		1.7								1.0	
28	X	24.0	17,400		1.5								1.3	
1	X	24.0	14,500		1.7								1.3	
31														
Total	FY . S. C.		769,800											
		1	707,000											

Avgerage 27,493

Maximum 40,500

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



Total

Avg.

Max.

## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

Daily Finished-Water Production for the Month/Year of : February 2014 Community Water System (CWS) Name: Lake Josephine Plants 3 & 4 5284137 Public Water System (PWS) Identification Number: Plant 5 Name: | Plant 6 Name: | Plant 7 Name: | Plant 8 Name: | Plant 9 Name: | Plant 10 Name: Plant 1 Name: Plant 2 Name: Plant 3 Name: Plant 4 Name: Lake Josephine Lake Josephine Plant 3 Plant 4 Total Permitted Maximum Day Operating Capacity of Each Plant, gallons per day 580,000 300,000 280,000 Day of Total Net Quantity of Finished Water Produced by Each Plant, gallons Month 148,500 112,000 36,500 169,200 132,000 37,200 2 169,200 37,200 132,000 3 156,400 122,000 34,400 4 143,900 110,000 33,900 5 149,700 6 116,000 33,700 158,800 126,000 32,800 123,200 92,000 31,200 8 168,000 134,000 34,000 9 168,000 10 134,000 34,000 143,500 103,000 40,500 11 169,000 133,000 36,000 12 150,100 13 115,000 35,100 126,100 14 99,000 27,100 159,800 15 124,000 35,800 119,500 16 100,500 19,000 119,500 17 100,500 19,000 153,300 18 134,000 19,300 155,000 137,000 19 18,000 116,800 20 103,000 13,800 133,200 21 112,000 21,200 126,700 22 109,000 17,700 23 139,050 120,500 18,550 139,050 24 120,500 18,550 154,000 34,000 25 120,000 141,400 26 122,000 19,400 158,400 27 141,000 17,400 96,500 28 82,000 14,500 0 1 0 0

4.055,800

130,832

-	100			4
D	ıc	Ť	#	
		•	- 77	

U	ist #1
(	GALLONS
	x 1000
	112,000
	132,000
	132,000
	122.000
	110,000
	116,000
	126,000
	92,000
	134,000
	134,000
	103,000
	133,000
	115,000
	99,000
	124,000
_	100,500
	100,500
	134,000
	137,000
	103,000
	112,000
	109,000
	120,500
	120,500
	120,000
	122,000
	141,000
	82,000
	3 286 000
-	3,286,000
	117,357

GALLONS
x 100
36,500
37,200
37,200
34,400
33,900
33,700
32,800
31,200
34,000
34,000
40,500
36,000
35,100
27,100
35,800
19,000
19,000
19,300
18,000
13,800
21,200
17,700
18,550
18.550
34.000
19,400
17,400
14,500

769,800 total 27,493 4,055,800





Wis Type: Sometiment of Service Connections at End of Month: 1,250  without of Service Connections at End of Month: 1,250  Wis Owner: US Water Services Corporation  US Water Services Composition  Wis Owner: US Water Services Corporation  Contact Person's Title: Compliance Manager  ontact Person's Telephone Number: 866-753-8292  ontact Person's Telephone Number: 866-753-8292  monther Person's Telephone Number: 866-753-8292  water Treatment Plant Information  and Name: Lake Josephine Plant #3	WS Name:	(PWS) Information Lake Josephine Plant #3			PWS Identification Number:	5284137
unther of Service Connections at End of Month: 1,250  SO Owner:  U.S. Water Services Corporation  Melias Rotteved  Melias Rot	ANSWERS CONTRACTOR	- Market Control of the Control of t	Transient Non-Comr	nunity	Consecutive	
VS Owner  US Water Services Corporation   City: New Port Rich  State:   Florida   Zip Code: 34652	7.1			Total	Population Served at End of Ma	onth: 1,250
Intact Person's Mailing Address: 4939 Cross Bayou Bivd City: New Port Rich State: Florida 727-849-4219 Intact Person's Fletphone Number: 866-753-8292 Contact Person's Fax Number: 727-849-4219 Intact Person's Fletphone Number: 866-753-8292 Contact Person's Fax Number: 727-849-4219 Intact Person's Fletphone Number: 866-753-8292 Intact Person's Fletphone Number: 727-849-4219 Intact Person's Fletphone						
### ### ### ### ### ### ### ### ### ##	ntact Person:	Melisa Rotteveel				
Intex Person's E-Mail Address mrotteveel@uswatercorp.net  ater Treatment Plant Information  It Name: Lake Josephine Plant #3  Lake Josephine Plant #4  Lake Josephine Plant Lake Josephine P	ntact Person's Mailing Ac	idress: 4939 Cross Bayou Blvd				
Inter Treatment Plant Information  It Name: Lake Josephine Plant #3				Contac	et Person's Fax Number: 7	27-849-4219
Triffication by Lead/Chief Operator  the undersigned water treatment plant information  the Ware in the Water						
A state: Florida   Zip Code: 33872    Trification by Lead/Chief Operator  Howard Short   A   Greeg   A   14324   Operator    Howard Short   A   14324   Operator    A   14324						
rtification by Lead/Chief Operator the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the ormation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used and chemical feed rates; and (2 bilgaple, appropriate treatment process of this prior), at a convenient location for at least ten years.  Ron Derossett  A 1531 Operator Days Ist Shift Operat	nt Name:	Lake Josephine Plant #3				Cyronic gardena de la companya del companya del companya de la com
rtification by Lead/Chief Operator her Operators   A   3531   Operator   Days 1st Shift	nt Address:	1949 Canary Way		City: Sebring	State: Florida	Zip Code: 33872
Add/Chief Operators:  Howard Short  A 3331 Operator Days 1st Shift  A 3304 Operator Days 1st Shift  Alfred Gregg  A 14324 Operator Days 1st Shift  A 14324 Operator Days 1st Shift  Alfred Gregg  A 14324 Operator Da	e of Water Treatment by	Plant:	ed Finished Water			
Name Licensed Operators A 3531 Operation Manager Days Ist Shift Norbed Days Ist Shift No	mitted Maximum Day Or	perating Capacity of Plant, gallons per day:	300,000			
ad/Chief Operators: Ren Derossett	nt Category (per subsecti	on 62-699.310(4), F.A.C.):			Class (per subsection 62-699.3	10(4), F.A.C.): C
The Operators:  Howard Short  A 3304 Operator Days 1st Shift  Alfred Gregg  A 14324 Operator Days 1st Shift  Alfred Gregg  A 14324 Operator Days 1st Shift  Priffication by Lead/Chief Operator  the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to Neternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant experience acach day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 plicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the process of this poort, at a convenient location for at least ten years.  Ron Derossett  A 3331  Light Shift  A 3331	Cicensed Operators	Name	License Class	License Number		
Alfred Gregg  A 14324 Operator Days 1st Shift  Prification by Lead/Chief Operator  The undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to Nernational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant operations records of this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 obligable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the gentlement process of this report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett	ad/Chief Operator:	Ron Derossett	A	3531	1 0 /	
rtification by Lead/Chief Operator he undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the ormation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to N email of the ornational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant pared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 plicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the process of this report.  Ron Derossett  A3531  Heart Numbers	her Operators:	Howard Short	A		The Property of the Control of the C	
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to Neternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant spared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) obligable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain my together with copies of this report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett		Alfred Gregg	A	14324	Operator Days 1st	Shift
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to Neternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant expanded each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 plicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the together with copies of this report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett						
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to Neternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant departed each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 plicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett						
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to Neternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant expanded each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 plicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the together with copies of this report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett						
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to N ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant epared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 pplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain together with copies of this report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett						
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to N ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant epared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 pplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain together with copies of this report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett						
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to Neternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant departed each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 plicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the properties of this report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett						
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to Neternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant departed each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 pplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the properties of this report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett						
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to Neternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant departed each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 plicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the properties of this report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett						
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to Neternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant expanded each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 plicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the together with copies of this report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett						
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to Neternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant expanded each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 plicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the together with copies of this report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett			CONTRACTOR ASSESSED		Windowski Arbania	
formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to Ne remational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant spared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 obligable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the process of this report, at a convenient location for at least ten years.    Ron Derossett	rtification by Lead	Chief Operator		THE REAL PROPERTY.		Line A. Landiff that the
ernational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant pared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 plicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain together with copies of this report, at a convenient location for at least ten years.    Ron Derossett				voter treatment nia	nt identified in part I of t	his report. I certify that the
ernational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant departed each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 plicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain together with copies of this report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett	he undersigned water	er treatment plant operator licensed in Florida, am the lead	chief operator of the v	vater treatment pla		
epared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 plicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain together with copies of this report, at a convenient location for at least ten years.  Ron Derossett  A 3531	formation provided in	n this report is true and accurate to the best of my knowled	lge and belief. I certify	y that all drinking v	water treatment chemical	s used at this plant conform to N
plicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the process of this report, at a convenient location for at least ten years.  Ron Derossett  A 3531	ormation provided in ernational Standard	n this report is true and accurate to the best of my knowled 60 or other applicable standards referenced in subsection 6	lge and belief. I certify 62-555.320(3), F.A.C.	y that all drinking v I also certify that	water treatment chemical the following additional	s used at this plant conform to N operations records for this plant
Ron Derossett  A 3531	formation provided in ternational Standard	n this report is true and accurate to the best of my knowled 60 or other applicable standards referenced in subsection 6	lge and belief. I certify 62-555.320(3), F.A.C.	y that all drinking v I also certify that	water treatment chemical the following additional	s used at this plant conform to N operations records for this plant
Ron Derossett  Ron Derossett	formation provided in ternational Standard epared each day that	n this report is true and accurate to the best of my knowled 60 or other applicable standards referenced in subsection ( a licensed operator staffed or visited this plant during the	lge and belief. I certify 62-555.320(3), F.A.C. month indicated above	y that all drinking of also certify that also certify that also is: (1) records of ar	water treatment chemical the following additional nounts of chemicals used	s used at this plant conform to N operations records for this plant and chemical feed rates; and (2)
Non-Delivased	formation provided in ternational Standard epared each day that pligable, appropriate	n this report is true and accurate to the best of my knowled 60 or other applicable standards referenced in subsection of a licensed operator staffed or visited this plant during the treatment process performance records. Furthermore, I ag	lge and belief. I certify 62-555.320(3), F.A.C. month indicated above gree to provide these a	y that all drinking of also certify that also certify that also is: (1) records of ar	water treatment chemical the following additional nounts of chemicals used	s used at this plant conform to N operations records for this plant and chemical feed rates; and (2)
Non Deliossen	formation provided in ternational Standard repared each day that oplicable, appropriate	n this report is true and accurate to the best of my knowled 60 or other applicable standards referenced in subsection of a licensed operator staffed or visited this plant during the treatment process performance records. Furthermore, I ag	lge and belief. I certify 62-555.320(3), F.A.C. month indicated above gree to provide these a	y that all drinking of also certify that also certify that also is: (1) records of ar	water treatment chemical the following additional nounts of chemicals used	s used at this plant conform to N operations records for this plant and chemical feed rates; and (2)
Lieuwa Mumbar	formation provided in ternational Standard epared each day that oplicable, appropriate	n this report is true and accurate to the best of my knowled 60 or other applicable standards referenced in subsection of a licensed operator staffed or visited this plant during the treatment process performance records. Furthermore, I ag	lge and belief. I certify 62-555.320(3), F.A.C. month indicated above gree to provide these a	y that all drinking of also certify that also certify that also is: (1) records of ar	water treatment chemical the following additional nounts of chemicals used	s used at this plant conform to N operations records for this plant and chemical feed rates; and (2
	formation provided in ternational Standard repared each day that oplicable, appropriate	n this report is true and accurate to the best of my knowled 60 or other applicable standards referenced in subsection of a licensed operator staffed or visited this plant during the attreatment process performance records. Furthermore, I again pies of this report, at a convenient location for at least tender.	lge and belief. I certify 62-555.320(3), F.A.C. month indicated above gree to provide these a years.	y that all drinking of also certify that also certify that also is: (1) records of ar	water treatment chemical the following additional nounts of chemicals used	s used at this plant conform to N operations records for this plant and chemical feed rates; and (2) over so the PWS owner can retain
	formation provided in ternational Standard epared each day that plicable, appropriate	n this report is true and accurate to the best of my knowled 60 or other applicable standards referenced in subsection 6 a licensed operator staffed or visited this plant during the streatment process performance records. Furthermore, I against of this report, at a convenient location for at least ten your plants.	lge and belief. I certify 62-555.320(3), F.A.C. month indicated above gree to provide these a years.	y that all drinking of also certify that also certify that also is: (1) records of ar	water treatment chemical the following additional nounts of chemicals used	s used at this plant conform to N operations records for this plant and chemical feed rates; and (2) oner so the PWS owner can retain A 3531

PWS II	D: ,			5284137		Plant Name:	Lake Joseph	nine Plant	#3					
	(1)													
III. D	aily Data fo	or the Mor	nth/Year of:		S. State of State	March, 2014								
			irus Inactivati		√F	ree Chlorine		Chlor	rine Dioxide		Ozone		Combined C	hlorine (Chloramines)
7.200	aviolet Radia				Other (Describe):									
- THE SAME OF	With the Alberta, that the Re-	STATULE.	l Maintained	0.5-21		✓ Free Chlori	пе По	ombined (	Chlorine (Chlo	ramines)	Chlo	rine Dioxide		
Type o	Distillecta	T Kesidua	I	I III Distribu	CT Calculations, of	or IIV Dose to	Demostate	Four-Los	Virus Inac	tivation, if A			THE PROPERTY.	
- 22				9.5	C1 Calculations, C		culations	rour Bog	5 True run		UV	Dose		
		1-37				Ci cal	THE RESERVE AND ADDRESS.			PER NAME		The street		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow,	Lowest CT Provided Before or at First Customer During Peak Flow, mg-	Temp of		Minimum CT Required, mg	Lowest Operating UV Dose,	Minimum UV Dose Required, mW-	Lowest Residual Disinfectant Concentration at Remote Point in Distribution	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of
N ING					Peak Flow, mg/L	minutes	min/L	Water, OC		min/L	mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	System, mg/L	Operation
1	X	24.0	118,000		3.6								2.2	
2		24.0	129,500										1.7	
3	X	24.0	129,500		2.2								1.7	
4	X	24.0	194,000		2.0								1.0	
5	X	24.0	92,000		1.4								2.4	
6	X	24.0	143,000		3.8								2.3	
7	X	24.0	102,000		3.6								2.0	
8	X	24.0	133,000		4.2		-						2.0	
9		24.0	96,500		2.0				-				3.0	
10	X	24.0	96,500		3.8								2.9	
12	X	24.0 24.0	159,000 101,000		3.6			_		-			2.7	
13	X	24.0	142,000		3.1								2.0	
14	X	24.0	138,000		4.0								2.7	
15	X	24.0	142,000		4.0								2.8	
16	Α	24.0	133,500		1,0									
17	Х	24.0	133,500		2.2								1.7	
18	X	24.0	149,000		2.4								1.8	
19	X	24.0	141,000		3.8								2.4	
20	X	24.0	127,000		2.4								2.2	
21	X	24.0	138,000		3.0								2.4	
22	X	24.0	125,000		2.4			7					1.8	
23		24.0	151,000											
24	X	24.0	151,000		2.4								2.0	
25	X	24.0	143,000		3.3								2.3	
26	X	24.0	134,000		3.8								2.6	
27	X	24.0	120,000		4.2								3.1	
28	X	24.0	111,000		4.0								3.3	
29	X	24.0	106,000		3.7								3.0	
30		24.0	149,000										3.2	
31	X	24.0	149,000		3.6					1			3.2	
117.00	THE REPORT	EUR S	4,077,000											

Maximum 194,000

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





PWS Name:	n (PWS) Informati					PWS Identification Number:	5284137
PWS Type:	Community	Non-Transient Non-Comm	nunity T	ransient Non-Comm	nunity	Consecutive	
Number of Service Conne		65			Total I	Population Served at End of Month:	75
WS Owner:	US Water Services Co	orporation					
ontact Person:	Melisa Roteveel				Contac	et Person's Title:	
ontact Person's Mailing A	Address:	PO Box 2480			City: New Port Rich	State: Florida	Zip Code: 34652
ontact Person's Telephon		(352) 787-0980			Contac	et Person's Fax Number: 941-37	8-3554
ontact Person's E-Mail A		mrotteveel@uswatercorp	.net				
Vater Treatment Pl	ant Information						
lant Name:	Lake Josephine Plant	#4				Plant Telephone Number:	941-377-9456
ant Address:	5313 Knight Ave				City: Sebring	State: Florida	Zip Code: 33875
ype of Water Treatment I	oy Plant:	✓ Raw Ground Water	Purchased Fini	shed Water			
ermitted Maximum Day	Operating Capacity of Pl	lant, gallons per day:		280,000			
ant Category (per subsec	tion 62-699.310(4), F.A.	.C.): V	k.			Class (per subsection 62-699.310(4),	F.A.C.): C
Licensed Operators	The Countries	Name	State of the state	License Class	License Number	Day(s) / S	Shift(s) Worked
ead/Chief Operator:	Howard Short			A	3304	Operator	
ther Operators:	Ron Derossett	3 1132-4		A	3531	Operation Manager	
	Alfred Gregg			A	14324	Operator	
				4			

Development   Pack   Flow   Policy   Cylinder   Pack   Flow   Policy   Cylinder   Pack   Flow   Policy   Pack   Flow	PWS II				5284137		Plant Name:	Lake Josephii	ne Plant #	4					
Means of Achieving Four-Log Virus Inactivation/Remoral   Free Chlorine   Chloramines   Combined Chloramines   Co						TO STATE OF THE ST									
Ultraviolet Reduildon	HI. D	ily Data f	or the Moi	nth/Year of:		<b>一种,他们的</b>	March, 2014							<b>—</b>	
Type of Disinfectant Residual Maintained in Distribution System:   CF Calculations, or UV Dose, to Demostate Cholorae   Cholorae Cholorae   C	Means o	f Achieving	Four-Log V	irus Inactivati	on/Removal:	✓ F	ree Chlorine		Chlor	rine Dioxide		☐ Ozone		Combined C	Thlorine (Chioramines)
Type of Disinfectant Residual Maintained in Distribution System:   CF Calculations, or UV Dose, to Demostate Cholorae   Cholorae Cholorae   C	Ultr.	aviolet Radia	tion			Other (Describe):									
Day   Plant   Visite   Visit	the second second	and the second second		l Maintained	in Distribut	tion System:	Free Chlori	ле Псо	mbined Cl	nlorine (Chlori	amines)	Chlo	rine Dioxide	2	
Days   Plant   Pl	Type o	Distillecta	III Kesiuua	i iviaimamed	III Distribu	CT Calculations	or IIV Dose to	Demostate I	our-Log	Virus Inact	ivation, if A	pplicable*		Wallaw - S	以(自)(發展)是 [2]。
Days Plant   Use of the Visited by	- 10-1					C1 Carculations,			Can Log			UVI	Dose		
Day of   Suffed or   Visible   Vis						Comment of the commen	Cica	Lactions	The Division		A. Carrier	in the state of the	E7176.580		
Peak Flow, mg/L   minutes   min/L   System, mg/L	Day of the Month	Staffed or Visited by Operator	in	of Finished Water Producted,		Disinfectant Concentration (C) Before or at First	Contact Time (T) at C Measurement Point During	Provided Before or at First Customer During Peak	Temp of Water, <sup>O</sup> C	pH of Water,	Required, mg	Operating UV Dose,	UV Dose Required, mW-	Disinfectant Concentration at Remote Point in	Taking Water System Components Out of
1						Vice the Administration with the Park	ACCURATE STREET, STREE	TOTAL STREET, VO. 25, VO. 11		No.	No.			System, mg/L	多·新用版表 图 20 C C C C C C C C C C C C C C C C C C
2	1	Y	24.0	17 600		TO A CONTRACT OF THE PARTY OF T								1.2	
3         X         240         20.450         1.6         1.0           4         X         240         71,000         3.6         9         2.4           5         X         240         26,400         1.6         9         0.9           6         X         2.0         34,800         2.4         1.4         2.0           7         X         2.0         27,100         3.8         2.0         2.4           8         X         2.0         27,100         3.8         2.4         2.0           10         X         2.4         32,050         3.6         3.2         3.3           11         X         2.4         33,00         3.3         3.3         3.3           12         X         2.4         33,00         3.3         3.0         3.3           12         X         2.4         43,300         3.3         3.0         3.0         3.1           13         X         2.4         2.4         3.1         3.1         3.1         3.1         3.1         3.1         3.1         3.1         3.4         4.0         2.4         4.1         4.2         4.4		Α				1.0									
4         X         240         71,600         3.0         0.9           5         X         240         26,400         1.6         1.14         1.44           6         X         240         34,800         2.4         1.14         2.0           7         X         240         27,100         3.8         1.24         2.4           8         X         240         32,050         3.6         1.24         3.2           10         X         240         32,050         3.6         3.2         3.3           11         X         240         30,100         4.0         3.3         3.0           12         X         240         30,900         3.6         3.0         3.0           13         X         240         24,030         3.6         3.1         3.1           14         X         240         30,900         3.6         3.1         3.1           15         X         240         30,900         3.6         3.1         3.1           15         X         240         26,550         3.4         2.2         2.8           17         X         240	3	X				1.6									
1.6	4	X	24.0	71,600											
7         X         24.0         24,800         3.4         2.0         2.4         2.0         2.4         2.4         2.0         2.4         2.0         2.4         2.0         2.4         2.4         2.2         2.4         2.2         2.4         2.4         2.2         2.2         2.2 <td>5</td> <td>X</td> <td></td>	5	X													
8         X         24.0         25,000         3.8         2.4         2.4         32,050         3.8         3.2         3.2         3.2         3.2         3.2         3.2         3.2         3.2         3.3         3.4         3.3         3.4         3.3         3.4         3.4         3.4         3.4         3.4         3.4         3.4         3.4         3.4         3.4         3.4         3.4<	6	X													-
9	. 7														
10		X				3.8			_	-				2.4	
11	- CANADAG								-			-		3.2	
12	12475-111								_						
13										-					
14       X       240       30,900       3.6       3.1         15       X       240       46,600       4.0       3.4         16       24.0       26,550       3.4       2.8         17       X       24.0       26,550       3.4       2.8         18       X       24.0       33,300       3.4       2.4         19       X       24.0       32,600       3.1       2.2         20       X       24.0       32,400       3.2       2.0         21       X       24.0       31,800       2.4       1.4         22       X       24.0       29,900       3.1       1.7         23       24.0       31,100       3.0       1.8         24       X       24.0       31,100       3.0       1.8         25       X       24.0       32,200       2.5       1.6         26       X       24.0       33,000       4.0       1.9         28       X       24.0       26,900       4.1       3.1         29       X       24.0       27,800       3.8       2.9         30       24.0       26,								-						2.4	
15       X       24.0       46,600       4.0       3.4         16       24.0       26,550       3.4       2.8         17       X       24.0       26,550       3.4       2.8         18       X       24.0       33,300       3.4       2.4         19       X       24.0       32,600       3.1       2.2         20       X       24.0       23,400       3.2       2.0         21       X       24.0       31,800       2.4       1.4         22       X       24.0       29,900       3.1       1.7         23       24.0       31,100       3.0       1.8         24       X       24.0       31,100       3.0       1.8         25       X       24.0       32,200       2.5       1.6         26       X       24.0       33,000       4.0       1.8         27       X       24.0       26,900       4.1       3.1         28       X       24.0       27,800       3.8       1.9         28       X       24.0       27,800       3.8       2.9         30       24.0       2							1007							3.1	
16       24,0       26,550       3.4       2.8         17       X       24,0       26,550       3.4       2.8         18       X       24,0       33,300       3.4       2.4         19       X       24,0       32,600       3.1       2.2         20       X       24,0       23,400       3.2       2.0         21       X       24,0       31,800       2.4       1.4         22       X       24,0       29,900       3.1       1.7         23       24,0       31,100       3.0       1.8         24       X       24,0       31,100       3.0       1.8         25       X       24,0       33,000       4.0       1.8         26       X       24,0       33,000       4.0       1.8         27       X       24,0       25,900       4.1       3.1         28       X       24,0       26,900       4.1       3.1         29       X       24,0       26,950       4.2       3.0	1,000													3.4	
17       X       24.0       26,550       3.4       2.8         18       X       24.0       33,300       3.4       2.4         19       X       24.0       32,600       3.1       2.2         20       X       24.0       23,400       3.2       2.0         21       X       24.0       31,800       2.4       1.4         22       X       24.0       29,900       3.1       1.7         23       24.0       31,100       3.0       1.8         24       X       24.0       31,100       3.0         24       X       24.0       33,000       4.0         25       X       24.0       33,000       4.0         26       X       24.0       33,000       4.0         27       X       24.0       21,400       3.8         29       X       24.0       27,800       3.8         30       24.0       26,950       4.2		Α				1.0									
18       X       24,0       33,300       3.4       2.4         19       X       24,0       32,600       3.1       2.2         20       X       24,0       23,400       3.2       2.0         21       X       24,0       31,800       2.4       1.4         22       X       24,0       29,900       3.1       1.7         23       24,0       31,100       3.0       1.8         24       X       24,0       31,100       3.0       1.8         25       X       24,0       33,000       4.0       1.8         26       X       24,0       33,000       4.0       1.8         27       X       24,0       21,400       3.8       1.9         28       X       24,0       26,900       4.1       3.1         29       X       24,0       26,950       3.8       2.9         31       X       24,0       26,950       4.2       3.0	1.0.76	X				3.4									
19       X       24.0       32,600       3.1       2.2         20       X       24.0       23,400       3.2       2.0         21       X       24.0       31,800       2.4       1.4         22       X       24.0       29,900       3.1       1.7         23       24.0       31,100       3.0       1.8         24       X       24.0       31,100       3.0       1.8         25       X       24.0       32,200       2.5       1.6         26       X       24.0       33,000       4.0       1.8         27       X       24.0       21,400       3.8       1.9         28       X       24.0       26,900       4.1       3.1         29       X       24.0       27,800       3.8       2.9         30       24.0       26,950       4.2       3.0															
20       X       24.0       23,400       3.2       2.0         21       X       24.0       31,800       2.4       1.4         22       X       24.0       29,900       3.1       1.7         23       24.0       31,100       3.0       1.8         24       X       24.0       31,100       3.0       1.8         25       X       24.0       32,200       2.5       1.6         26       X       24.0       33,000       4.0       1.8         27       X       24.0       21,400       3.8       1.9         28       X       24.0       26,900       4.1       3.1         29       X       24.0       26,950       4.1       3.1         30       24.0       26,950       3.8       2.9         31       X       24.0       26,950       4.2       3.0															
22     X     24,0     29,900     3.1     1.7       23     24,0     31,100     3.0     1.8       24     X     24,0     31,100     3.0     1.8       25     X     24,0     32,200     2.5     1.6       26     X     24,0     33,000     4.0     1.8       27     X     24,0     21,400     3.8     1.9       28     X     24,0     26,900     4.1     3.1       29     X     24,0     27,800     3.8     2.9       30     24,0     26,950     4.2     3.0	20	X	24.0	23,400		3.2									
23     24.0     31,100     3.0       24     X     24.0     31,100     3.0       25     X     24.0     32,200     2.5       26     X     24.0     33,000     4.0       27     X     24.0     21,400     3.8       27     X     24.0     26,900     4.1       29     X     24.0     26,900     4.1       30     24.0     26,950     3.8       31     X     24.0     26,950       31     X     24.0     26,950		X	24.0	31,800											
24     X     24,0     31,100     3.0     1.8       25     X     24,0     32,200     2.5     1.6       26     X     24,0     33,000     4.0     1.8       27     X     24,0     21,400     3.8     1.9       28     X     24,0     26,990     4.1     3.1       29     X     24,0     26,990     3.8     2.9       30     24,0     26,950     3.8     3.0       31     X     24,0     26,950     4.2     3.0		X	24.0	29,900		3.1								1.7	
25     X     24.0     31,100     3.0       25     X     24.0     32,200     2.5       26     X     24.0     33,000     4.0       27     X     24.0     21,400     3.8       28     X     24.0     26,900     4.1       29     X     24.0     27,800     3.8       30     24.0     26,950       31     X     24.0     26,950       31     X     24.0     26,950	7.00CF													1.0	
26 X 24.0 32,000 4.0 1.8 27 X 24.0 21,400 3.8 28 X 24.0 26,900 4.1 29 X 24.0 27,800 3.8 30 24.0 26,950 3.8 31 X 24.0 26,950 4.2	1000														
27 X 24.0 35,000 4.0 1.9 27 X 24.0 26,900 4.1 3.8 28 X 24.0 26,900 3.8 29 X 24.0 27,800 3.8 20 24.0 26,950 3.8 31 X 24.0 26,950 4.2															
28 X 24.0 2f,400 3.8 3.1 29 X 24.0 2f,800 3.8 2.9 30 24.0 26,950 3.8 3.0 31 X 24.0 26,950 4.2 3.0															
29 X 24.0 26,950 3.8 2.9 30 24.0 26,950 3.8 31 X 24.0 26,950 4.2									-	-	-				
30 24.0 26,950 3.0 31 X 24.0 26,950 4.2										-					
31 X 24.0 26,950 4.2 3.0		X				3.8			-	-				2.7	
31 X 24.0 20,930 4.2						4.2	-							3.0	
	Total	X	24.0			4,2									1

1

Avgerage 30,484

Maximum 71,600

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



29

30

Total

Avg.

Max.

106,000

149,000

149,000

27,800

26,950

26,950

## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

March 2014 Daily Finished-Water Production for the Month/Year of : Community Water System (CWS) Name: Lake Josephine Plants 3 & 4 Public Water System (PWS) Identification Number: 5284137 Plant 5 Name: | Plant 6 Name: | Plant 7 Name: | Plant 8 Name: | Plant 9 Name: | Plant 10 Name: Plant 1 Name: Plant 2 Name: Plant 3 Name: Plant 4 Name: Lake Josephine Lake Josephine Plant 3 Plant 4 Total Permitted Maximum Day Operating Capacity of Each Plant, gallons per day 580,000 Day of 300,000 280,000 Total Net Quantity of Finished Water Produced by Each Plant, gallons Month 135,600 17,600 118,000 149,950 129,500 20,450 2 149,950 129,500 20,450 3 265,600 194,000 71,600 4 118,400 92,000 26,400 5 177,800 143,000 34,800 6 125,500 102,000 23,500 160,100 133,000 27,100 8 128,550 32,050 9 96,500 128,550 96,500 32,050 10 189,100 159,000 30,100 11 144,300 12 101,000 43,300 168,600 26,600 142,000 13 168,900 14 138,000 30,900 188,600 142,000 46,600 15 160,050 16 133,500 26,550 160,050 133,500 26,550 17 182,300 149.000 33,300 18 173,600 141,000 32,600 19 150,400 20 127,000 23,400 169,800 21 138,000 31,800 154,900 125,000 29,900 22 182,100 23 151,000 31,100 182,100 24 151,000 31,100 175,200 25 143,000 32,200 167,000 26 134,000 33,000 141,400 27 120,000 21,400 137,900 28 111,000 26,900

133,800

175,950

175,950

5,022,000

162,000

	GALLONS
	x 1000
	118,000
	129,500
	129,500
	194,000
	92,000
	143,000
	102,000
	133,000
	96,500
	96,500
	159,000
	101,000
	142,000
	138,000
	142,000
	133,500
	133,500
	149,000
	141,000
	127,000
	138,000
	125,000
	151,000
	151,000
	143,000
	134,000
	120,000
	111,000
	106,000
_	149,000
	149,000

4,077.000

131,516

GA	LLONS
	x 100
	17,600
	20,450
	20,450
	71,600
	26,400
	34,800
	23,500
	27,100
	32,050
	32,050
	30,100
	43,300
	26,600
	30.900
	46,600
	26,550
	26,550
	33,300
	32,600
	23,400
	31.800
	29,900
	31,100
	31,100
	32,200
	33,000
	21,400
	26,900
	27,800
	26,950

945,000 total

26,950

30,484

5,022,000





PWS Name:	(PWS) Information Lake Josephine Plant #3			PWS Identification Number:	6280162
WS Type:		Transient Non-Comr		Consecutive	
Number of Service Connect			Total I	Population Served at End of Month:	1,250
WS Owner:	US Water Services Corporation				V
Contact Person:	Melisa Rotteveel				iance Manager
Contact Person's Mailing Ad	ddress: 4939 Cross Bayou Blvd		City: New Port Rich		Zip Code: 34652
Contact Person's Telephone			Contac	et Person's Fax Number: 727-84	9-4219
Contact Person's E-Mail Add	dress: mrotteveel@uswatercorp.net				
Water Treatment Pla					041 277 0466
Plant Name:	Lake Josephine Plant #3			Plant Telephone Number:	941-377-9456
lant Address:	1949 Canary Way		City: Sebring	State: Florida	Zip Code: 33872
Type of Water Treatment by					
	perating Capacity of Plant, gallons per day:	300,000		2 2 20 20 2 20 2	F.A.C.): C
Plant Category (per subsection				Class (per subsection 62-699.310(4),	Phit(a) Worked
Licensed Operators	Name	License Class	License Number		Shift(s) Worked
ON TO SHOULD VISIT WHEN THE WARRENCE OF THE PROPERTY OF THE PR	Ron Derossett	A	3531	Operation Manager Days 1st Shift	
Other Operators:	Howard Short	A	3304	Operator Days 1st Shift	
	Alfred Gregg	A	14324	Operator Days 1st Shift	
	Several field			THE RESERVE OF THE PARTY OF THE	
10.000					
ertification by Lead	/Chief Operator				
the undersigned water	er treatment plant operator licensed in Florida, am the lead/chie	f operator of the	water treatment pla	nt identified in part I of this r	eport. I certify that the
the undersigned water	er treatment plant operator licensed in Florida, am the lead/chie n this report is true and accurate to the best of my knowledge at	nd belief. I certif	y that all drinking v	vater treatment chemicals use	ed at this plant conform to N
the undersigned water aformation provided in atternational Standard	er treatment plant operator licensed in Florida, am the lead/chie n this report is true and accurate to the best of my knowledge at 60 or other applicable standards referenced in subsection 62-55	nd belief. I certify 55.320(3), F.A.C.	y that all drinking v I also certify that	vater treatment chemicals use the following additional oper	ed at this plant conform to Nations records for this plant
the undersigned water information provided in international Standard repared each day that	er treatment plant operator licensed in Florida, am the lead/chie n this report is true and accurate to the best of my knowledge at 60 or other applicable standards referenced in subsection 62-55 a licensed operator staffed or visited this plant during the month	nd belief. I certify 55.320(3), F.A.C. th indicated above	y that all drinking value of the state of th	vater treatment chemicals use the following additional oper nounts of chemicals used and	ed at this plant conform to Nations records for this plant chemical feed rates; and (2)
the undersigned water information provided in international Standard	er treatment plant operator licensed in Florida, am the lead/chie n this report is true and accurate to the best of my knowledge at 60 or other applicable standards referenced in subsection 62-55 a licensed operator staffed or visited this plant during the month	nd belief. I certify 55.320(3), F.A.C. th indicated above	y that all drinking value of the state of th	vater treatment chemicals use the following additional oper nounts of chemicals used and	ed at this plant conform to Nations records for this plant chemical feed rates; and (2)
the undersigned water information provided in international Standard interpared each day that pplicable, appropriate	er treatment plant operator licensed in Florida, am the lead/chie in this report is true and accurate to the best of my knowledge at 60 or other applicable standards referenced in subsection 62-55 a licensed operator staffed or visited this plant during the monte treatment process performance records. Furthermore, I agree to	nd belief. I certify 55.320(3), F.A.C. th indicated above to provide these a	y that all drinking value I also certify that also certify that also is (1) records of an	vater treatment chemicals use the following additional oper nounts of chemicals used and	ed at this plant conform to Nations records for this plant chemical feed rates; and (2)
, the undersigned water information provided in international Standard prepared each day that applicable, appropriate	er treatment plant operator licensed in Florida, am the lead/chie n this report is true and accurate to the best of my knowledge at 60 or other applicable standards referenced in subsection 62-55 a licensed operator staffed or visited this plant during the month	nd belief. I certify 55.320(3), F.A.C. th indicated above to provide these a	y that all drinking value I also certify that also certify that also is (1) records of an	vater treatment chemicals use the following additional oper nounts of chemicals used and	ed at this plant conform to Nations records for this plant chemical feed rates; and (2)
the undersigned water information provided in international Standard interpared each day that pplicable, appropriate	er treatment plant operator licensed in Florida, am the lead/chie in this report is true and accurate to the best of my knowledge at 60 or other applicable standards referenced in subsection 62-55 a licensed operator staffed or visited this plant during the monte treatment process performance records. Furthermore, I agree to	nd belief. I certify 55.320(3), F.A.C. th indicated above to provide these a	y that all drinking value I also certify that also certify that also is (1) records of an	vater treatment chemicals use the following additional oper nounts of chemicals used and	ed at this plant conform to frations records for this plant chemical feed rates; and (2 so the PWS owner can retain
f, the undersigned water information provided in international Standard prepared each day that applicable, appropriate	er treatment plant operator licensed in Florida, am the lead/chie in this report is true and accurate to the best of my knowledge at 60 or other applicable standards referenced in subsection 62-55 a licensed operator staffed or visited this plant during the monte treatment process performance records. Furthermore, I agree to	nd belief. I certify 55.320(3), F.A.C. th indicated above to provide these as.	y that all drinking value I also certify that also certify that also is (1) records of an	vater treatment chemicals use the following additional oper nounts of chemicals used and	ed at this plant conform to Nations records for this plant chemical feed rates; and (2)
information provided in International Standard prepared each day that applicable, appropriate	er treatment plant operator licensed in Florida, am the lead/chie in this report is true and accurate to the best of my knowledge at 60 or other applicable standards referenced in subsection 62-55 a licensed operator staffed or visited this plant during the monte treatment process performance records. Furthermore, I agree to pies of this report, at a convenient location for at least ten years	nd belief. I certify the state of the state	y that all drinking value I also certify that also certify that also is (1) records of an	vater treatment chemicals use the following additional oper nounts of chemicals used and	ed at this plant conform to Nations records for this plant chemical feed rates; and (2 so the PWS owner can retain
, the undersigned water information provided in international Standard orepared each day that ipplicable, appropriate them together with con	er treatment plant operator licensed in Florida, am the lead/chie in this report is true and accurate to the best of my knowledge at 60 or other applicable standards referenced in subsection 62-55 a licensed operator staffed or visited this plant during the monte treatment process performance records. Furthermore, I agree to pies of this report, at a convenient location for at least ten years	nd belief. I certify the state of the state	y that all drinking value I also certify that also certify that also is (1) records of an	vater treatment chemicals use the following additional oper nounts of chemicals used and	ed at this plant conform to Nations records for this plant chemical feed rates; and (2 so the PWS owner can retain A 3531

PWS ID	):			6280162		Plant Name:	Lake Joseph	ine Plant	13					
,	**************************************		ou was a stransfer	4.000		1 2014								
			th/Year of: /irus Inactivati	on/Removal:	√ Fr	April, 2014 ree Chlorine		Chlor	ine Dioxide		Ozone		Combined C	hlorine (Chloramines)
	violet Radia				Other (Describe):									
Type o	f Disinfecta	ınt Residua	I Maintained	in Distribut	tion System:	✓ Free Chlorin	ne 🔲 C	ombined (	Chlorine (Chlo	ramines)	Chlo	rine Dioxide		
Туре о	Bisimicott	1			CT Calculations, o	r UV Dose, to	Demostate l	Four-Log	Virus Inact	tivation, if A	pplicable*			
				RICE NE		CT Calc			TERES.		UVI	Dose		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>o</sup> C	pH of Water, if Applicable	Minimum CT Required, mg- min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	140,000		4.2								3.7	
2	X	24.0	83,000		2.7								3.0	
3	X	24.0	124,000		3.2								2.1	
4	X	24.0	124,000		2.4								2.0	
5	X	24.0	79,000		2.2								1.7	
6		24.0	135,000										1.2	
7	X	24.0	135,000		2.0		1						1.6	
8	X	24.0	123,000		2.2								1.4	
9	X	24.0	87,000		2.0	1.000							1.7	
10	X	24.0	94,000		3.2								2.4	
11	X	24.0	97,000		2.7								2.0	
12	X	24.0	104,000		2.4						-		2.0	
13		24.0	117,000		24			-					2.3	
14	X	24.0	117,000		2.6				-				2.0	
15	X	24.0	96,000		2.3								1.8	
16	X	24.0	107,000		2.2								2.0	
18	X	24.0	97,000		4.0								2.9	
19	X	24.0 24.0	113,000 100,000	-	4.0								3.2	
20	X	24.0	110,000		4.0								3.0	
21		24.0	126,000		4.0									
22	X	24.0	126,000		4.0								2.9	
23	X	24.0	91,000		4.0		5						2.4	
24	X	24.0	127,000		3.0								2.4	
25	X	24.0	115,000		3.4								2.2	
26	X	24.0	119,000		2.8								2.4	
27	Α	24.0	118,000											
28	Х	24.0	118,000		3.0								2.6	
29	X	24.0	109,000		3.1					1			2.4	
30	X	24.0	97,000		3.2								2.1	
31		24.0	2008700											
HOUSE WE	PER STATE		3,328,000 110,933											

Maximum 140,000
\* Refer to the instructions for this report to determine which plants must provide this information.



### REVISED 11/14/2014

WS Name: WS Type: umber of Service Connecti WS Owner:		ring Lakes) Plant #4				PWS Identification Number:	6280162
umber of Service Connecti	✓ Community	Non-Transient Non-Community	Trans	sient Non-Comn	nunity	Consecutive	
		65			Total I	opulation Served at End of Month:	75
W. D. OWHEL.	US Water Services C	orporation					
ontact Person:	Melisa Roteveel				0.0000000000000000000000000000000000000	t Person's Title:	1
ontact Person's Mailing Ad	ldress:	PO Box 2480			City: New Port Rich		Zip Code: 34652
ontact Person's Telephone	Number:	(352) 787-0980			Contac	t Person's Fax Number: 941-3	78-3554
ontact Person's E-Mail Add	dress:	mrotteveel@uswatercorp.net					
Vater Treatment Pla	nt Information						
ant Name:	Lake Josephine Plant	#4				Plant Telephone Number:	941-377-9456
ant Address:	5313 Knight Ave				City: Sebring	State: Florida	Zip Code: 33875
ype of Water Treatment by			Purchased Finishe				
ermitted Maximum Day Op	perating Capacity of P		28	0,000			516)
ant Category (per subsection	on 62-699.310(4), F.A				And the second s	Class (per subsection 62-699.310(4)	
Licensed Operators	<b>计对于特别的</b>	Name	100	icense Class	License Number		Shift(s) Worked
ead/Chief Operator:			A		3304	Operator	
ther Operators:	Ron Derossett		A		3531	Operation Manager	
	Alfred Gregg		A		14324	Operator	

PWS ID	,			6280162		Plant Name:	Lake Josephii	ne Plant #4	4					
40		The same	Service Control	Parent de		1 2017								
			nth/Year of:			April, 2014		Chlor	rine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
24.4			irus Inactivati			ree Chlorine		Chio	IIIE DIOXIGE				_	(40
200.00	aviolet Radia				Other (Describe):	✓ Free Chlorin	п	mbinad Ch	hlorine (Chlori	amines)	Chlo	rine Dioxide	3	
Type o	Disinfecta	int Residua	l Maintained	in Distribu	tion System:	Free Chlorif	Demostate F	Four-Log	Virus Inacti	ivation, if A		4		
				CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Ap							UV	Dose		
		100		THE STATE OF THE	STATE OF THE STATE	CICA	culations	T and	1					
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	0-	pH of Water,	Minimum CT Required, mg min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
- 1	X	24.0	30,300		3.8		2						3.0 2.9	
2	X	24.0			4.0			-					2.5	
3	X	24.0	26,000		3.0			-					1.9	
4	X	24.0	18,600		2.6			-			_		1.9	
5	X	24.0	27,100		2.7			_					1.2	
6		24.0	27,700				-				-	_	1.6	
7	X	24.0	27,700		2.8								1.7	
8	X	24.0	19,600		2.4			_	-				1.9	
9	X	24.0	20,000		2.2			_	-				1.7	
10	X	24.0			2.0			_	-				2.0	
11	X	24.0			2.3			-	_		-		1.6	
12	X	24.0			2.0			-					- 22	
13		24.0					-						1.4	
14	X	24.0			1.6			_		-			1.6	
15	X	24.0	23,600		1.9			+	_				1.6	
16	X	24.0	17,600		1.9			_					1.3	
17	X	24.0	17,800		2.6			_	1				0.8	
18	X	24.0	22,600		3.1			_	_				1.1	
19	X	24.0	17,500		3.0		-	_					0.9	
20	X	24.0			3,0				1					
21	v	24.0 24.0			3.2			1					1.2	
23	X	24.0			3.4								2.1	
24	X	24.0	14,800		3.2								2.0	
25	X	24.0			3.4								2.6	
26	X	24.0	20,800		3.0					-			2.0	
27	Λ	24.0	17,150											
28	X	24.0			2.6								1.8	
29	X	24.0			2.8								2.0	
30	X	24.0			2.7								2.1	
31		24.0												
Total		24.0	731 600											

Avgerage 24,387

Maximum 152,800

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



Total

Avg.

Max.

#### MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

Daily Finished-Water Production for the Month/Year of : April 2014 Community Water System (CWS) Name: Lake Josephine Plants 3 & 4 Public Water System (PWS) Identification Number: 6280162 Plant 1 Name: Plant 2 Name: Plant 3 Name: Plant 4 Name: Plant 5 Name: Plant 6 Name: Plant 7 Name: Plant 8 Name: Plant 9 Name: Plant 10 Name: Lake Josephine Lake Josephine Plant 3 Plant 4 Permitted Maximum Day Operating Capacity of Each Plant, gallons per day Total 580,000 300,000 280,000 Day of Total Net Quantity of Finished Water Produced by Each Plant, gallons Month 170,300 140,000 30,300 1 99,500 83.000 16,500 2 150,000 124,000 26,000 3 142,600 124,000 18,600 4 106.100 79,000 27,100 5 162,700 6 135,000 27,700 162,700 27,700 7 135,000 142,600 123,000 19,600 8 107,000 87,000 20,000 9 112,000 94.000 18,000 10 117,100 20,100 97,000 11 120,900 12 104,000 16,900 134,750 117,000 17,750 13 134,750 14 117,000 17,750 119,600 96,000 23,600 15 124,600 16 107,000 17,600 114,800 97,000 17,800 17 135,600 113,000 22,600 18 117,500 100,000 17,500 19 124,500 14,500 20 110,000 148,850 21 126,000 22,850 148,850 22 126,000 22,850 110,700 23 91,000 19,700 141.800 24 127,000 14,800 267,800 152,800 25 115,000 139,800 119,000 20,800 26 135,150 27 118,000 17,150 135,150 28 118,000 17,150 128,000 29 109,000 19,000 113,900 16,900 30 97,000 4,059,600

135,320

GALLO	ONS
x 100	
	000
	000
124	.000
124	.000
79	000,
135	,000
135	,000
123	,000
87	.000
94	.000
97	()()(
104	,000
117	,000
117	,000
96	.000
107	,000
97	,000
113	,000
100	,000
110	000,0
126	5,000
120	6.000
9	000.1
12	7,000
11:	5,000
119	9,000
113	8.000
11	8.000
10	9.000
9	7,000
	8,000

110,933

GAI	LLONS
	100
	30,300
	16,500
	26,000
	18,600
	27,100
	22,700
	22,700
	19,600
	20,000
	18,000
	20,100
	16.900
	17,750
	17,750
	23,600
	17,600
	17,800
	22,600
	17,500
	14,500
	22,850
	22,850
	19,700
	14.800
	152,800
	20,800
	17,150
	17,150
	19,000
	16,900
	16,900

731,600 total

24,387

4,059,600





WS Type: Some Connections at End of Month: 1,250  without Foreign Connections at End of Month: 1,250  with Solvener US Water Services Corporation  WS Owner: US Water Services Corporation  US Water Services Corporation  WS Owner: US Water Services Corporation  US Water Services Corporation  WS Owner: US Water Services Corporation  Water Treatment Plant Information  ### Plant Telephone Number: 277-849-4219  ### Plant Telephone Number: 277-849-4219  ### Plant Telephone Number: 941-377-9456  ##	WS Name:	Lake Josephine Plant #3					PWS Identification	Number:	6280162	
uniber of Service Connections at End of Month: 1,250  XS Owner: US Water Services Corporation  Melias Rotineved	WS Type:			munity 🔲	Fransient Non-Comm	nunity	Consecutive			
WS Owner: US Water Services Corporation maker Person's Melisa Rotteveel Modern Roth						Total I	Population Served at	End of Month:	1,250	
Plant Class (per subsection 62-699 310(4), F.A.C.)   Clicensed Operators			oration							
Inter Person's Telephone Number: 866-753-8392   Contact Person's Fax Number: 727-849-4219   Inter Person's Telephone Number: 866-753-8392   Plant Telephone Number: 727-849-4219   Inter Person's E-Mail Address: Plant Information   Plant Telephone Number: 941-377-9456   Inter Person's E-Mail Address: 1949 Cansary Way   City: Sebring State: Florida   Zip Code: 33872   Person's E-Mail Address: 1949 Cansary Way   City: Sebring State: Florida   Zip Code: 33872   Person's E-Mail Address: 1949 Cansary Way   City: Sebring State: Florida   Zip Code: 33872   Person's E-Mail Address: 1949 Cansary Way   City: Sebring State: Florida   Zip Code: 33872   Person's E-Mail Address: 1949 Cansary Way   City: Sebring State: Florida   Zip Code: 33872   Person's E-Mail Address: 1949 Cansary Way   City: Sebring State: Florida   Zip Code: 33872   Person's E-Mail Address: 1949 Cansary Way   City: Sebring State: Florida   Zip Code: 33872   Person's E-Mail Address: 1949 Cansary Way   Plant Class (per subsection 62-699.310(4), F.A.C.): C  Licensed Operators:   V	ontact Person:	Melisa Rotteveel						Compliance		
Treatment Plant Information and Name: Lake Josephine Plant, gallons per day: and Address: Interport of subsection 62-699-310(4), F.A.C.): Interport of Subsection 62-699-310(4), F.A.C.: Interport of Subsection 62-699-310(4), F.A.C.: Interport of Subsection 62-699-310(4), F.A.C.: Interport of Subsection 62-699-310(4),	ontact Person's Mailing A	ddress: 49.	39 Cross Bayou Blvd						The Branch Control	34652
Aut Treatment Plant Information and Name: Lake Josephine Plant #3 Living Sebring State: Plorida Zip Code: 33872    Plant Class   Plant   Telephone Number:   Plant   P	ontact Person's Telephone	Number: 86	6-753-8292			Contac	t Person's Fax Numb	per: 727-849-421	19	
License Class   State: Florida   Zip Code:   33872	ontact Person's E-Mail Ad	dress: <u>m</u>	rotteveel@uswatercorp	o.net_						
Licensed Operators:  A 3304 Operator Days Ist Shift  A 14324 Opera	Vater Treatment Pla	ant Information								
Terrification by Lead/Chief Operator the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to iterrational Standard 60 or other applicable standards referenced in subsection 62-555,320(3), F.A.C. I also certify that the following additional operations records for this plant conform to iterrational Standard 60 or other applicable standards referenced in subsection 62-555,320(3), F.A.C. I also certify that the following additional operations records for this plant conform to iterrational Standard 60 or other applicable standards referenced in subsection 62-699.310(4), F.A.C.):  C Plant Class (per subsection 62-699.310(4), F.A.C.):  C Plant Class (per subsection 62-699.310(4), F.A.C.):  C Day(s) / Shift(s) Worked  Day(s)	lant Name:	Lake Josephine Plant #3	X				Company of the Compan	imber:		
Erritited Maximum Day Operating Capacity of Plant, gallons per day:  and Category (per subsection 62-699.310(4), F.A.C.):  V	lant Address:	1949 Canary Way				City: Sebring	State: Florida		Zip Code:	33872
lant Category (per subsection 62-699, 310(4), F.A.C.): V  Licensed Operators: Name License Class License Class License Number Day(s) / Shift(s) Worked License Class License Class License Number Day(s) / Shift(s) Worked License Class L	Printer of the control of the contro		The second secon	Purchased Fin						
License Operators License Operators Read/Chief Operator					300,000			50 500 010/ft T	2)	
ead/Chief Operators:    Howard Short		ion 62-699.310(4), F.A.C.	,-	/	1.1.	2700000000	Class (per subsection			HERIOGRAPHICS 1
Howard Short Alfred Gregg A 14324 Operator Days 1st Shift  Alfred Gregg A 14324 Operator Days 1st Shift  Certification by Lead/Chief Operator The undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant conform to international standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant conform to indicated each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 pplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the process of this report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett		are in the sense	Name		License Class				(s) worked	
Alfred Gregg  A 14324 Operator Days 1st Shift  Certification by Lead/Chief Operator  the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant conform to international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) opplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain together with copies of this report, at a convenient location for at least ten years.  Ron Derossett  A 3531					A					
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) opplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the operation of this report, at a convenient location for at least ten years.  Ron Derossett  A 3531	Other Operators:				3.27.	5333200				
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the process of this report, at a convenient location for at least ten years.    Ron Derossett		Alfred Gregg			A	14324	Operator	Days 1st Shift		
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the process of this report, at a convenient location for at least ten years.    Ron Derossett										
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the afformation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to be international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) opplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the process of this report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett  Ron Derossett										
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the process of this report, at a convenient location for at least ten years.    Ron Derossett										
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retainent, together with copies of this report, at a convenient location for at least ten years.    Ron Derossett   Ron Derossett										
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retainent, together with copies of this report, at a convenient location for at least ten years.    Ron Derossett   Ron Derossett										
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retainent, together with copies of this report, at a convenient location for at least ten years.    Ron Derossett   Ron Derossett										
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the process of this report, at a convenient location for at least ten years.    Ron Derossett										
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to iternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) oplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain em, together with copies of this report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett  Ron Derossett										
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to iternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) oplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett  Ron Derossett						77 - 27 - 3 - 3 - 3	V CONTRACTOR OF THE	MANAGE MESS	1 1 C 1 2 2 3 3 5 7	1000
formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) oplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain em, together with copies of this report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett  Ron Derossett	ertification by Lead	/Chief Operator	AND STREET OF THE							A CHESTER IN
International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2 opplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the report, at a convenient location for at least ten years.    Ron Derossett   Ron D	the undersigned wat	er treatment plant op	erator licensed in Florida	, am the lead/chief	f operator of the v	vater treatment plan	nt identified in p	art I of this repor	t. I certify th	at the
repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) opplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the content of this report, at a convenient location for at least ten years.  Ron Derossett  Ron Derossett	formation provided i	n this report is true a	and accurate to the best of	f my knowledge ar	nd belief. I certify	that all drinking v	vater treatment c	hemicals used at	this plant cor	ntorm to N
repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) opplicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the process of this report, at a convenient location for at least ten years.    Ron Derossett   Ron Deross	iternational Standard	60 or other applicab	le standards referenced in	subsection 62-55	5.320(3), F.A.C.	I also certify that	the following ad	ditional operation	ns records for	this plant
policable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain the policy of this report, at a convenient location for at least ten years.  Ron Derossett  A 3531	repared each day that	a licensed operator:	staffed or visited this plan	nt during the mont	h indicated above	: (1) records of an	nounts of chemic	als used and che	mical feed rat	tes; and (2)
em, together with copies of this report, at a convenient location for at least ten years.  Ron Derossett  A 3531	onlicable, appropriate	treatment process p	erformance records. Furt	thermore, I agree t	o provide these a	dditional operation	s records to the l	PWS owner so th	e PWS owne	r can retair
Ron Derossett  Ron Derossett	em together with co	nies of this report at	a convenient location for	r at least ten vears.						
Total Delissed	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	pies of this toport, at	a convenient to parton to	tar reast terr y ears.	X					
Roll Delossed	V 1 1). ~ ~	. (2)	V							
gnature and Date Printed or Typed Name License Number	1 1 1 1 1 1 1 1 1 1	1) nott	wux	Ron Derosset	t				200000000000000000000000000000000000000	
	gnature and Date	1	11711	Printed or Ty	ped Name				License Nur	nber
		1 1	(11) (114							

PWS II	): 			6280162		Plant Name:	Lake Joseph	ine Plant	#3					
,														
III. D	aily Data fo	or the Mor	th/Year of:			May, 2014								
			irus Inactivati			ree Chlorine		Chlor	ine Dioxide		Ozone		Combined C	chlorine (Chloramines)
	aviolet Radia		ilus iliactivati	and the contract of the con-		ree Chlorine		cinor	inc bloxide					(
100000		1790174			Other (Describe):									
Type o	f Disinfecta	ant Residua	l Maintained	l in Distribu	tion System:	✓ Free Chlorin	ne 📙 C	ombined (	Chlorine (Chlo	oramines)		rine Dioxide		
				Control Co	CT Calculations, o	or UV Dose, to	Demostate l	Four-Log	Virus Inac	tivation, if A	applicable*	ALL SHEET		
				- 二重		CT Calc	ulations				UV	Dose		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>O</sup> C	pH of Water, if Applicable	Minimum CT Required, mg- min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
-1	X	24.0	108,000		3.0								2.4	
2	X	24.0	97,000		2.7								1.9	
3	X	24.0	106,000		2.5								1.8	
4		24.0	113,000											
5	X	24.0	113,000		3.6								2.1	
6	X	24.0	90,000		2.4								1.9	
7	X	24.0	93,000		2.2								1.6	
8	X	24.0	104,000		2.4								1.9	
9	X	24.0	105,000		2.2								1.6	
10	X	24.0	116,000		3.6								2.0	
11		24.0	119,500											
12	X	24.0	119,500		3.4								2.2	
13	X	24.0	89,000		4.2								3.0	
14	X	24.0	118,000		3.7								2.8 3.0	
15	X	24.0	117,000		3.7							-	2.8	
16	X	24.0	90,000		3.2								2.6	
17	X	24.0	106,000		3.0								2.0	
19	v	24.0	112,500		2.0								2.4	
20	X	24.0	112,500		2.9								2.2	
21	X X	24.0	96,000		3.0								2.4	
22	X	24.0 24.0	109,000 105,000		3.2							-	2.1	
23	X	24.0	99,000		3.9						·		3.4	
24	X	24.0	105,000		1.4								1.1	
25	^	24.0	123,500		1.4									
26	Х	24.0	123,500		2.4								1.4	
27	X	24.0	121,000		3.1								2.0	
28	X	24.0	96,000		1.4								1.1	
29	X	24.0	98,000		2.2								1.0	
30	X	24.0	102,000	-	2.1								0.5	
31	X	24.0	85,000		1.0								0.9	
10000		CALLE S & R	3,292,000										1.102	
voerage	National Association	NIDENE WEIGHT DEST	106 104											

<sup>|</sup> Avgerage | 106,194 |
| Maximum | 123,500 |
\* Refer to the instructions for this report to determine which plants must provide this information.



See Pages 4 for Instr	uctions.					
I. General Information	for the Month/Y	ear of: May, 2014				
A D LU WA C .	(DIVG) I C	•				
A. Public Water System					PWS Identification Number:	6280162
PWS Name:	Lake Josephine (Seb					0200102
PWS Type:	✓ Community	Non-Transient Non-Communi	ity Transient Non-Co		Consecutive Population Served at End of Mont	h: 75
Number of Service Connec	Several terroris de la companya de l			Total	ropulation Served at End of Mont	1. 73
PWS Owner:	US Water Services C	orporation		ICt-	ct Person's Title:	
Contact Person:	Melisa Roteveel				CARRELL MANAGEMENT AND	Zip Code: 34652
Contact Person's Mailing A		PO Box 2480		City: New Port Rich	A contract of the contract of	378-3554
Contact Person's Telephone		(352) 787-0980	4	Conta	ct Person's Pax Number. 941-	376-3334
Contact Person's E-Mail Ac		mrotteveel@uswatercorp.ne	<u> </u>			
. Water Treatment Pla					IN THE NAME	941-377-9456
Plant Name:	Lake Josephine Plant	.#4		Ich Calaire	Plant Telephone Number:	Zip Code: 33875
Plant Address:	5313 Knight Ave		T	City: Sebring	State: Florida	Zip Code. 33873
Type of Water Treatment b	-	✓ Raw Ground Water	Purchased Finished Water			
Permitted Maximum Day C		CONTRACTOR	280,000	I DI.	Class (per subsection 62-699.310(4	4), F.A.C.): C
Plant Category (per subsect	ion 62-699.310(4), F.A		T. I			/ Shift(s) Worked
Licensed Operators	0.000	Name	License Cla	THE STATE OF THE PARTY OF	AND THE RESERVE THE PARTY OF TH	Silili(s) worked
Lead/Chief Operator:	Howard Short		A	3304	Operator	
Other Operators:	Ron Derossett		A	3531	Operation Manager	
	Alfred Gregg		A	14324	Operator	
		1,117,14,11				
. Certification by Lead						
I, the undersigned wat	er treatment plant	operator licensed in Florida, am	the lead/chief operator of the	e water treatment pla	nt identified in part I of this	report. I certify that the
information provided i	in this report is tru	e and accurate to the best of my	knowledge and belief. I cer	tify that all drinking	water treatment chemicals u	sed at this plant conform to NSF
International Standard	60 or other applic	cable standards referenced in sul	bsection 62-555.320(3), F.A.	.C. I also certify that	the following additional op-	erations records for this plant were
prepared each day that	a licensed operate	or staffed or visited this plant du	iring the month indicated abo	ove: (1) records of ar	nounts of chemicals used an	nd chemical feed rates; and (2) if
applicable appropriate	e treatment process	s performance records. Furthern	more I agree to provide thes	e additional operation	is records to the PWS owner	r so the PWS owner can retain
		, at a convenient location for at l		e additional operation		
them, together with co	pies of titls report,	, at a convenient tocation for at i	icasi icii years.			
Y   ()	1/1/					
1 la VAM	) K = + +	-0100	Ron Derossett			A 3531
	- 1100		Non Delossen			
Signature and Date	\ \	MITIM	Printed or Typed Name			License Number

PWSJE	);			6280162		Plant Name:	Lake Josephir	ne Plant #4	1					
ν.					W. Shi Wens Kowala Vision	0.000 3276/4000								
III. D	aily Data f	or the Moi	nth/Year of:			May, 2014			A Turket over		П-		Combined 6	thlorine (Chloramines)
Means	of Achieving	Four-Log V	'irus Inactivati	on/Removal:	✓ F	ree Chlorine		L Chlor	ine Dioxide		Ozone		Combined C	niorine (Chioramines)
Ultr	aviolet Radia	tion			Other (Describe):						(see			
Tyma a	f Digin facts	nt Docidus	l Maintained	in Distribut	tion System:	✓ Free Chlorin	пе Псо	mbined Ch	nlorine (Chlora	amines)	Chlo	rine Dioxide		
Type o	Disiniecta	III Kesidua	I Maintained	III Distribu	CT Calculations,	or IIV Dose to	Demostate F	our-Log	Virus Inacti	vation, if A	pplicable*			
FEW.					C1 Carculations,		culations		EN PERSONAL PROPERTY.		UVI	Oose		
177						T Ci Cai	L	TERROTOR	TAKE THE CASE OF		TO AT THE	20102		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>O</sup> C	pH of Water, if Applicable	Minimum CT Required, mg min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	17,700		2.5								1.9	
2	X	24.0	16,500		2.4			-					1.7	
3	X	24.0	19,100		2.2								1.7	
4		24.0	17,500										1.8	
5	X	24.0	17,500		2.0								1,6	
6	X	24.0	16,000		2.2								2.9	
7	X	24.0	21,200		3.4							-	2.8	
8	X	24.0	17,300		2.2								2.6	
9	X	24.0	16,900		3.0								2.2	
10	X	24.0	16,500		2.1									
11		24.0	17,600		2.5								2.0	
12	X	24.0	17,600		2.4								1.9	
13	X	24.0	18,200		2.4								1.7	
14	X	24.0	18,300		2.3		-						1.9	
16	X	24.0 24.0	15,700 14,800		2.4		1						1.9	
17	X	24.0	18,600		2.2								1.7	
18		24.0	17,700		See . See									
19	X	24.0	17,700		2,4								1.9	
20	X	24.0	17,300		2.4						-		2.0	
21	X	24.0	19,100		1.7								2.9	
22	X	24.0	17,400		1.4								1.4	
23	X	24.0	19,700		0.6			-					1.0	
24	X	24.0	21,700		1.6								0.7	A 3
25		24.0	19,100											
26	X	24.0	19,100		1.6								0.9	
27	X	24.0	27,800		0.9								0.6	
28	X	24.0	19,000		2.0								0.4	
29	X	24.0	18,000		0.7								0.3	
30	X	24.0	17,200		1.9								0.3	
31	X	24.0	17,700		3.7								1.5	
Total	CHEST CONTRACTOR AND ADDRESS.	PROPERTY AND INCOME.	565 500											

Avgerage 18,242

Maximum 27,800

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



## MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

May 2014 Daily Finished-Water Production for the Month/Year of : Lake Josephine Plants 3 & 4 Community Water System (CWS) Name: Public Water System (PWS) Identification Number: 6280162 Plant 6 Name: Plant 7 Name: Plant 8 Name: Plant 9 Name: Plant 10 Name: Plant 1 Name: | Plant 2 Name: | Plant 3 Name: Plant 4 Name: Plant 5 Name: Lake Josephine Lake Josephine Plant 3 Plant 4 Total Permitted Maximum Day Operating Capacity of Each Plant, gallons per day 580,000 280,000 Day of 300,000 Total Net Quantity of Finished Water Produced by Each Plant, gallons Month 125,700 17,700 1 108,000 113,500 97,000 16,500 2 125,100 19,100 106,000 3 130,500 113,000 17,500 4 130,500 17,500 113,000 5 106,000 90,000 16,000 6 114,200 21,200 93,000 7 121,300 104,000 17,300 8 121,900 16,900 105,000 9 132,500 116,000 16,500 10 137,100 119,500 17,600 11 137,100 12 119,500 17,600 107,200 89,000 18,200 13 136,300 118,000 18,300 14 132,700 15,700 117,000 15 104,800 16 90.000 14,800 124,600 18,600 17 106,000 130,200 17,700 18 112,500 130,200 17,700 112,500 19 113,300 17,300 20 96,000 128,100 19,100 109,000 21 122,400 105,000 17,400 22 118,700 99,000 19,700 23 126,700 24 105,000 21,700 142,600 123,500 19,100 25 142,600 26 123,500 19,100 148,800 27,800 121,000 27 115,000 28 96,000 19,000 116,000 18.000 29 98,000 119,200 17,200 30 102,000 102,700 17,700 85,000 3,857,500 Total 124,435 Avg. 148,800 Max.

#### Dist #1

GALLONS	
x 1000	
108,000	
97,000	
106.000	
113.000	
113,000	
90,000	
93,000	
104,000	
105,000	
116.000	
119,500	
119,500	
89,000	
118,000	1
117,000	)
90,000	)
106,000	)
112,500	)
112,500	)
96,000	)
109.000	)
105.000	)
99,000	)
105,000	)
123,500	)
123,500	)
121,000	
96.000	÷
98,000	)
102,000	)
85,000	)
3,292,00	0
5,272,00	4

GALLONS
x 100
17,700
16,500
19,100
17,500
17,500
16.000
21,200
17.300
16,900
16,500
17,600
17,600
18,200
18,300
15,700
14,800
18,600
17,700
17,700
17,300
19,100
17,400
19,700
21.700
19,100
19,100
27,800
19,000
18,000
17,200
17,700

565,500 total

18,242

3,857,500





VS Type: umber of Service Connect	Lake Josephine Plant	#3				PWS Identification Numb	per: 6280162
	✓ Community	✓ Non-Transient Non-	Community T	Fransient Non-Comr	munity	Consecutive	
and the state of t	ions at End of Month:	536			Total	Population Served at End o	f Month: 1,250
VS Owner:	US Water Services Co	orporation					
ntact Person:	Melisa Rotteveel				Conta	et Person's Title:	Compliance Manager
ntact Person's Mailing Ad		4939 Cross Bayou Blvd			City: New Port Rich	State: Florida	Zip Code: 34652
ntact Person's Telephone	Number:	866-753-8292			Conta	t Person's Fax Number:	727-849-4219
ntact Person's E-Mail Ado		mrotteveel@uswater	corp.net_				
ater Treatment Pla	nt Information						
nt Name:	Lake Josephine Plant	#3				Plant Telephone Number:	941-377-9456
nt Address:	1949 Canary Way				City: Sebring	State: Florida	Zip Code: 33872
pe of Water Treatment by		✓ Raw Ground Water	Purchased Fini	ished Water			
mitted Maximum Day Op				300,000			
nt Category (per subsection	on 62-699.310(4), F.A.		V		11000001101	Class (per subsection 62-69	
icensed Operators		Name		License Class	License Number		ay(s) / Shift(s) Worked
	Ron Derossett			A	3531	Operation Manager Days	
ner Operators:	Jackie Williams			С	20588		1st Shift
						Operator Days	1st Shift
MAR.							

Day of the   Month   Open (Place	hieving l		th/Year of:											
Means of Ach Ultraviolet Type of Disi  Days Day of Staff the Visite Month Open (Place  1 2 3 3 4 5 6 2 2 3 4 5 6 2 3 4 5 6 5 6 5 6 6 5 6 6 5 6 6 6 6 6 7 6 6 7 6 7	hieving l		th/Year of:											
Days Staff the Month Open (Place 1 2 3 3 3 4 3 5 6 3 2 6 5 2 6 5 5 5 6 5 5 5 5 5 5 5 5 5 5 5	575					June, 2014								
Day of the Month (Place)  1 2 3 4 5 6    Dultraviolet  Days Staff Visit Oper (Place)  1 2 3 3 3 4 5 5 5 5 6	575	Four-Log V	irus Inactivati	ion/Removal:	√F.	ree Chlorine		Chlor	ine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
Days Staff Visit Oper (Place 1 2 3 3 3 4 3 5 6 3 5 6 5 5	et Radiati				Other (Describe):									
Days Staff the Wisit Month Open (Place 1)  1 2 3 3 4 3 5 6 5 5 6 5			I Maintained			✓ Free Chlorin	пе По	ombined (	Chlorine (Chlo	ramines)	Chlo	rine Dioxide	10	
Day of the   Visit	Simectai	it Kesidua	iviaiiitailieu	III DISTITUTI	CT Calculations, o	r IIV Dose, to	Democtate	Four-Los	Virus Inact	ivation if A		TITLE DIOXIGE	- 100 E 100 E	A STREET STREET, STREET STREET, STREET
Day of the   Wisit	1				C1 Calculations, 0		culations	r our-Log	, virus maci	avation, it ?	UVI	lose		
Day of the   Wisit	X W					Ci Caio				Battle Jan Steel	0 1	7030	SOUTH	
2 3 3 3 4 3 5 5 3 6 3 5	rs Plant ffed or ited by erator ce "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>O</sup> C	pH of Water, if Applicable	Minimum CT Required, mg- min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
3 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		24.0	122,000		6.8								4.4	
4 × 5 × 6 ×	X	24.0	88,000		6.8								4.4	
5 x	X	24.0	120,000		6.6								5.0	
6 x	X	24.0	77,000		3.7								1.3	
	X	24.0	111,000		3.3								2.3	
/ X	X	24.0	99,000		4.0								2.8	
0	X	24.0	114,000		3.9								0.3	
8	-	24.0	114,000		1.1								0.3	
	X	24.0	89,000		1.1								0.9	
7,000,000	X	24.0	78,000		1.4					_			0.8	
100000000000000000000000000000000000000	X	24.0	81,000 107,000		2.0								3.5	
	x	24.0	134,000		4.2								1.3	
	x	24.0	103,000		2.2	-							1.3	
15	^	24.0	103,000		0,8								1.4	
16 X	x	24.0	119,000		0.8									BWN - 1166 Josephine Ct
17 X		24.0	166,000		1.6								1.9	
	X	24.0	68,000		2.1								0.5	
19 X		24.0	156,000		1.9								0.4	Rescinded
20 X	X	24.0	111,000		4.7								3.6	
21 X	X	24.0	122,000		2.5								1.7	
22		24.0	121,000		2.5								0.8	
23 X	X	24.0	120,000		2.5								0.8	
24 X	X	24.0	107,000		3.3								2.1	
25 X		24.0	110,000		4.7								4.3	
26 X		24.0	128,000		6.5								1.8	
27 X		24.0	97,000		4.2								3.1	
28 X	X	24.0	95,000		2.7								1.3	
29		24.0	95,000		1.5								0.4	
30 X	X	24.0	116,000		1.5								0.4	
31		24.0												
Avgerage		-0.7119 ST-0000	3,271,000											

Maximum 166,000 \* Refer to the instructions for this report to determine which plants must provide this information.



Public Water Syster		une, 2014				
ubile trater Syster	m (PWS) Information					
PWS Name:	Lake Josephine (Sebring Lakes) Plant #4				PWS Identification Number:	6280162
WS Type:	✓ Community Non-Transient No	n-Community	Transient Non-Comr	nunity	Consecutive	17.75
lumber of Service Conne					opulation Served at End of Month:	75
WS Owner:	US Water Services Corporation					
ontact Person:	Melisa Roteveel			Contac	t Person's Title:	
ontact Person's Mailing				************	State: Florida	Zip Code: 34652
ontact Person's Telephon						78-3554
ontact Person's E-Mail A		ercorp.net		- 1/2 SCOR_SKY		0.00.00000
Vater Treatment P						
lant Name:	Lake Josephine Plant #4				Plant Telephone Number:	941-377-9456
lant Address:	5313 Knight Ave			City: Sebring	State: Florida	Zip Code: 33875
ype of Water Treatment I		Purchased	Finished Water		Company Control Contro	
	Operating Capacity of Plant, gallons per day:		280,000			
ant Category (per subsec	ction 62-699.310(4), F.A.C.):	V		Plant (	Class (per subsection 62-699.310(4)	, F.A.C.): C
Licensed Operators			License Class	License Number	Day(s)/	Shift(s) Worked
ead/Chief Operator:	Ron Derossett		A	3531	Utility Manager	
ther Operators:	Jackie Williams		C	20588	Operator	
					_=	
	8					

PWS II	): •			6280162		Plant Name:	Lake Josephii	ne Plant #	4					<del></del>
	353	III PO TOWN	AND WHEN THE SON			(A)								
III. D	aily Data f	or the Mo	nth/Year of:			June, 2014								
Means	of Achieving	Four-Log V	irus Inactivati	on/Removal:	✓ F	ree Chlorine		Chlor	rine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
Ultr	aviolet Radia	tion			Other (Describe):									
			l Maintained			✓ Free Chlorin	о Пс	mbined Ch	nlorine (Chlora	aminos)	Chlo	rine Dioxide		
Type o	Disintecta	int Residua	i Maintaineo	in Distribu	CT Calculations,			Tour Log	Virus Inacti	votion if A		THE DIOXIGE	inserential ser	
			20		C1 Calculations,			our-Log	VII us macu	ivation, it A	UVI	Daga		
					THE RESERVE AND ADDRESS.	CT Cal	culations		1		UVI	Dose	A STATE OF THE PARTY OF THE PAR	in the province of the control of th
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>o</sup> C	pH of Water,	Minimum CT Required, mg min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
177		24.0	16,000		5.8								3.8	
2	X	24.0	23,300		5.8								3.8	
3	X	24.0	15,800		4.8				0		1		3.6	4
4	X	24.0	15,100		3.6								3.2	
5	X	24.0	17,100		3.9						7.5		14.1 3.6	
6	X	24.0	21,200		3.8							-	3.1	
7	X	24.0	17,600		2.6								1.7	
9		24.0	17,600		2.9								1.7	
10	X	24.0 24.0	55,200 30,600		2.9 1.8								1.7	
-11	X	24.0	16,300		0.7					_			0.5	
12	X	24.0	19,300		1.3								0.3	
13	X	24.0	19,000		1.9								0.4	
14	X	24.0	30,000		2.0	4-0-1							0.5	
15		24.0	30,100		2.1		-		-	-			0.7	
16	X	24.0	35,400		2.1								0.7	
17	X	24.0	22,500		2.0								1.0	
18	X	24.0	27,100		2.5								1.9	
19	X	24.0	32,700		2.4								1.4	
20	X	24.0	21,600		1.5						- 11		0.9	
21	X	24.0	17,000		5.0								1.1	
22		24.0	17,100		4.9								3.4	
23	X	24.0	25,100		4.9		- 3						3.4	
24	X	24.0	21,100		5.5								3.2	
25	X	24.0	23,500		6.4								3.3	
26	X	24.0	18,000		7.4								4.2	
27	X	24.0	18,500		7.8								4.6	
28	X	24.0	15,000		4.0								4.0	
29		24.0	15,700		7.6								3.9	
30	X	24.0	26,100		7.6								3.9	
31		24.0												
Γotal	White Street		680,600											

Avgerage 22,687

Maximum 55,200

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



# MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

ons

blic Wa	ater System (PWS	) Identification Nu	umber:	6280162							
	Plant 1 Name:	Plant 2 Name:	Plant 3 Name:	Plant 4 Name:	Plant 5 Name:	Plant 6 Name:	Plant 7 Name:	Plant 8 Name:	Plant 9 Name:	Plant 10 Name:	
	Lake Josephine Plant 3	Lake Josephine Plant 4									
	THE STATE OF THE S	M. Art of the	Per	mitted Maximum	Day Operating Ca	apacity of Each F	lant, gallons per	day		A STATE OF THE STA	Total
Day of	300,000	280,000									580,000
Month		THE PROPERTY OF		Net Quantity of	Finished Water F	roduced by Eacl	n Plant, gallons	75,55			Total
1	122,000	16,000									138,000
2	88,000	23,300									111,300
3	120,000	15,800									135,800
4	77,000	15,100									92,100
5	111,000	17,100									128,100
6	99,000	21,200									120,200
7	114,000	17,600						- 3			131,600
8	114,000	17,600									131,600
9	89,000	55,200									144,200
10	78,000	30,600									108,600
11	81,000	16,300									97,300
12	107,000	19,300									126,300
13	134,000	19,000									153,000
14	103,000	30,000									133,000
15	103,000	30,100									133,100
16	119,000	35,400									154,400
17	166,000	22,500									188,500
18	68,000	27,100									95,100
19	156,000	32,700									188,700
20	111,000	21,600									132,600
21	122,000	17,000									139,000
22	121,000	17,100									138,100
23	120,000	25,100									145,100
24	107,000	21,100									128,100
25	110,000	23,500									133,500
26	128,000	18,000									146,000
27	97,000	18,500									115,500
28	95,000	15,000									110,000
29	95,000	15,700									110,700
30	116,000	26,100									142,100
ELES II			0								0
otal	1576					N/2-506 2 3 / 1	E CONTRACTOR				3,951,600
/g.											127,471
ax.										AGE TO THE REAL PROPERTY.	188,700

Dist #1
GALLONS
x 1000
122,000
88,000
120,000
77,000
111,000
99,000
114,000
114,000
89.000
78,000
81,000
107,000
134,000
103,000
103,000
119.000
166,000
68,000
156,000
111,000
122,000
121,000
120,000
107,000
110,000
128,000
97,000
95,000
95,000
116,000
3,271,000
109,033

Dist #2
GALLONS
x 100
16.000
23,300
15,800
15,100
17,100
21,200
17,600
17,600
55,200
30,600
16,300
19,300
19,000
30,000
30,100
35,400
22,500
27,100
32,700
21,600
17,000
17,100
25,100
21,100
23,500
18,000
18,500
15,000
15,700
26,100
680,600

680.600 total

22.687

3,951,600





WS Name:	Lake Josephine Plant #3				PWS Identification N	umber:	6280162	
WS Type:	✓ Community ✓ Non-Transient N	Ion-Community	Transient Non-Com	munity	Consecutive			
umber of Service Connect		536			Population Served at Er	nd of Month:	1,250	
VS Owner:	US Water Services Corporation							
ontact Person:	Melisa Rotteveel			Contac	et Person's Title:	Compliance l	Manager	
ntact Person's Mailing A	ddress: 4939 Cross Bayou Blvd			City: New Port Rich	State: Florida		Zip Code:	34652
ntact Person's Telephone	Number: 866-753-8292			Contac	et Person's Fax Number	727-849-4219	9	
ontact Person's E-Mail Ad	dress: mrotteveel@uswa	tercorp.net						
ater Treatment Pla	nt Information							
nt Name:	Lake Josephine Plant #3				Plant Telephone Num	ber:	941-377-945	6
nt Address:	1949 Canary Way			City: Sebring	State: Florida		Zip Code:	33872
pe of Water Treatment by	Plant:	er Purchased Fin	ished Water		***			
mitted Maximum Day O	perating Capacity of Plant, gallons per day:		300,000					
nt Category (per subsecti	on 62-699.310(4), F.A.C.):	V		Plant (	Class (per subsection 62			
Licensed Operators	Name		License Class	License Number		Day(s) / Shift(	s) Worked	
	Ron Derossett		A	3531	Operation Manager	Days 1st Shift		
her Operators:	Jackie Williams		C	20588	Operator I	Days 1st Shift		
					Operator I	Days 1st Shift		
			-					
1,450								
rtification by Lead	Chief Operator			K UZBER LETS			10.5	
맛이지 않아 아이에 아이에 아이에 가장 하나 아니는 것이 없어 없다.	er treatment plant operator licensed in	없는 말이 나는 사람들이 얼마나 아니는 사람들이 되었다. 그리고 얼마나 나를 하는 것이 없는 것이 없는 것이다.	하는 사람들이 살아왔다면 하나 살아 없는 아이들이 하는데 하나 나는데 없다.	그렇는 사람이에 배를 하면서 잘 된다면 있는 병에 된다면서 어떻게 하네요.	1 시간 사람들이 되게 하는 것이 되었다면 하는 것이 없는 것이 없었다.			
ormation provided in	n this report is true and accurate to the	best of my knowledge an	d belief. I certify	that all drinking v	vater treatment che	emicals used at t	his plant con	form to NS
ernational Standard	60 or other applicable standards refere	enced in subsection 62-55	5.320(3), F.A.C.	I also certify that	the following addit	tional operations	s records for	this plant w
	a licensed operator staffed or visited the							
	treatment process performance record							
				authoriai operation	s records to the r v	V5 OWIEL SO THE	I W5 OWNER	can retain
m, together with col	pies of this report, at a convenient loca	ition for all least ten years.						
	- // N	\ /						
()								
1 0	an hottim	Ron Derosset	į.				A 3531	

PWS II	); 			6280162		Plant Name:	Lake Joseph	nine Plant	#3					
		S 1800	SONAICH I SAN				**							
III. D	aily Data f	or the Mor	nth/Year of:		<b>与中国制度</b>	July, 2014								WAY 10 COMPAN
Means	of Achieving	Four-Log V	/irus Inactivat	ion/Removal:	✓ F	ree Chlorine		Chlor	rine Dioxide		Ozone		Combined C	chlorine (Chloramines)
Ultr	aviolet Radia	tion			Other (Describe):									
			l Maintained			✓ Free Chlori	по По	Combined (	Chlorine (Chlo	oraminoc)	Chlo	rine Dioxide		
Type o	Dismiecta	ini Residua	i Maintaineo	i in Distribu	CT Calculations, of			Four Loc	Virue Inac	tivation if		TITLE DIOXIGE	D. C. C. C. Story	
					C1 Calculations, c	The second secon		roui-Log	y ii us iiiac	tivation, ii z	UV	Doca	The state of	
				SERVICE CONTRACTOR		CT Cale	culations		United state		UV	Dose	45	
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Producted, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>O</sup> C		Minimum CT Required, mg min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	143,000		6.6								3.4	
2	X	24.0	105,000		3.6								2.1	
3	X	24.0	96,000		4.0								4.0	
4	X	24.0	32,000		5.1								3.9	
5	X	24,0	148,500		5.6								3.8	
6		24.0	148,500											
7	X	24.0	132,000		6.1								3.8	BWN - 1248 Lake Josephine
8	X	24.0	104,000		4.4								2.9	
9	X	24.0	87,000		5.3								3.3	
10	X	24.0	94,000		4.7								3.6	
11	X	24.0	118,000		4.5								3.4	Recinded
12	X	24.0	14,000		4.0								3.7	
13		24,0	43,000					V					3.6	
14	X	24.0	43,000		4.4								3.3	
15	X	24.0	90,000		4.2		<b>-</b>						3.2	
17	X	24.0	84,000		3.4 4.0		-						3.3	
18	X	24.0 24.0	91,000 94,000		3.5				_		-		2.5	
19	X	24.0	93,000		2.8		<del>                                     </del>						2.0	
20		24.0	92,000		2.0		-							
21	X	24.0	92,000		1.9		<b>†</b>						1.2	
22	X	24.0	74,000		3.9								1.4	
23	X	24.0	78,000		3.6								2.6	
24	X	24.0	85,000	60 KI T T	2.0								1.1	
25	X	24.0	69,000		3.4								2.3	
26	X	24.0	88,500		3.1								1.9	
27		24.0	88,500											
28	X	24.0	130,000		1.6								1.3	
29	X	24.0	111,000		3.1								2.2	
30	X	24.0	102,000	V T	3.7								2.4	
31	X	24.0	108,000		3.7								3.6	
	- 470		2,878,000											
Avgerage		Tener Call	92,839											

Maximum 143,000 \* Refer to the instructions for this report to determine which plants must provide this information.



PWS Type:  V Commun  Number of Service Connections at End of M  PWS Owner:  US Water Serv  Contact Person:  Melisa Roteve  Contact Person's Mailing Address:  Contact Person's Telephone Number:  Contact Person's E-Mail Address:  Water Treatment Plant Informat  Plant Name:  Lake Josephine  Plant Address:  5313 Knight A  Type of Water Treatment by Plant:  Permitted Maximum Day Operating Capacit  Plant Category (per subsection 62-699.310(4)  Licensed Operators	ices Corporation  PO Box 2480 (352) 787-0980 mrotteveel@uswaterccoon Plant #4 //e    Raw Ground Water	orp.net_		Total F Contac City: New Port Riche Contac	PWS Identification Number:  Consecutive  Population Served at End of Month:  Et Person's Title:  State: Florida  Et Person's Fax Number: 941-37.  Plant Telephone Number:	6280162 75  Zip Code: 34652 8-3554
Number of Service Connections at End of MPWS Owner: US Water Service Contact Person: Melisa Roteve Contact Person's Mailing Address: Contact Person's Telephone Number: Contact Person's E-Mail Address: Water Treatment Plant Informat Plant Name: Lake Josephine Plant Address: 5313 Knight A Type of Water Treatment by Plant: Permitted Maximum Day Operating Capacit Plant Category (per subsection 62-699.310(4) Licensed Operators	ices Corporation  PO Box 2480 (352) 787-0980 mrotteveel@uswaterccoon Plant #4 //e    Raw Ground Water	orp.net_		Total F Contac City: New Port Riche Contac	Population Served at End of Month:  st Person's Title:  State: Florida  st Person's Fax Number: 941-37	Zip Code: 34652 8-3554
WS Owner: US Water Serve Contact Person: Melisa Roteve Contact Person's Mailing Address: Contact Person's Telephone Number: Contact Person's E-Mail Address: Water Treatment Plant Informat Plant Name: Lake Josephine Plant Address: 5313 Knight A Type of Water Treatment by Plant: Contact Person's E-Mail Address: 5313 Knight A Type of Water Treatment by Plant: Contact Person's E-Mail Address: 5313 Knight A Type of Water Treatment by Plant: Contact Person Plant Category (per subsection 62-699.310(4) Licensed Operators	PO Box 2480 (352) 787-0980 mrotteveel@uswaterco  on Plant #4 //e    Raw Ground Water			Contac	st Person's Title:  State: Florida  st Person's Fax Number: 941-37	8-3554
Contact Person: Melisa Roteve Contact Person's Mailing Address: Contact Person's Telephone Number: Contact Person's E-Mail Address: Water Treatment Plant Informat Plant Name: Lake Josephine Plant Address: 5313 Knight A Type of Water Treatment by Plant: Contact Person's E-Mail Address: 5313 Knight A Type of Water Treatment by Plant: Contact Person's E-Mail Address: 5313 Knight A Type of Water Treatment by Plant: Contact Person's E-Mail Address: 5313 Knight A Type of Water Treatment by Plant: Contact Person's E-Mail Address: 5313 Knight A Type of Water Treatment by Plant: Contact Person's Melisa Roteve Contact Person's Melisa Roteve Contact Person's Mailing Address:  Water Treatment Plant Informat Call Address:  Water Treatment Plant Informat Call Call Call Call Call Call Call Call	PO Box 2480 (352) 787-0980 mrotteveel@uswaterco on Plant #4 //c    ✓   Raw Ground Water			City: New Port Riche Contac	State: Florida et Person's Fax Number: 941-37	8-3554
Contact Person's Mailing Address: Contact Person's Telephone Number: Contact Person's E-Mail Address: Water Treatment Plant Informat Plant Name: Lake Josephine Plant Address: S313 Knight A Type of Water Treatment by Plant: Contact Person's E-Mail Address: Contact	PO Box 2480 (352) 787-0980 mrotteveel@uswaterco on Plant #4 /e     Raw Ground Water			Contac	tt Person's Fax Number: 941-37	8-3554
Contact Person's Telephone Number: Contact Person's E-Mail Address: Water Treatment Plant Informat Plant Name: Lake Josephine Plant Address: 5313 Knight A Type of Water Treatment by Plant: Committed Maximum Day Operating Capacil Contact Person's Telephone Number: Contact Person's E-Mail Address: Contact Person'	mrotteveel@uswatercc on Plant #4 /e    Raw Ground Water			Contac	tt Person's Fax Number: 941-37	8-3554
Contact Person's E-Mail Address:  Water Treatment Plant Informat Plant Name: Lake Josephine Plant Address: 5313 Knight A Type of Water Treatment by Plant: Permitted Maximum Day Operating Capacit Plant Category (per subsection 62-699.310(4) Licensed Operators	Plant #4 /e    Raw Ground Water				Plant Telephone Number	041.277.045/
Plant Name: Lake Josephine Plant Address: 5313 Knight A Type of Water Treatment by Plant: Permitted Maximum Day Operating Capacit Plant Category (per subsection 62-699.310(4) Licensed Operators	Plant #4	Durchasad Einic			Plant Telephone Number:	041 277 0457
lant Address: 5313 Knight A Type of Water Treatment by Plant: ermitted Maximum Day Operating Capacit lant Category (per subsection 62-699.310(4 Licensed Operators	√e Raw Ground Water	Durchasad Einig			Plant Telephone Number:	041 277 0457
Type of Water Treatment by Plant: ermitted Maximum Day Operating Capacital Category (per subsection 62-699.310(4) Licensed Operators	✓ Raw Ground Water	Durchased Finis			t tant rerephone transcer.	941-377-9430
Permitted Maximum Day Operating Capacit Plant Category (per subsection 62-699.310(4 Licensed Operators		Durchasad Finis		City: Sebring	State: Florida	Zip Code: 33875
lant Category (per subsection 62-699.310(4 Licensed Operators	y of Plant, gallons per day:	Purchaseu riins	shed Water			
Licensed Operators			280,000			
	), F.A.C.):	V		Plant (	Class (per subsection 62-699.310(4),	
UGILLAG	Name		License Class	License Number	Day(s) / S	Shift(s) Worked
ead/Chief Operator: Ron Derossett			A	3531	Utility Manager	
Other Operators: Jackie William	3		C	20588	Operator	
						0
	15					

PWS ID				6280162		Plant Name:	Lake Josephii	ne Plant #4	4					
	,													
III. D	aily Data f	or the Mor	nth/Year of:			July, 2014								
	1000		irus Inactivati		[√] E	ree Chlorine		Chlor	ine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
			irus mactivati			ree chiorine								
And the same	aviolet Radia				Other (Describe):			300 1000	507 G 18850161	th Sa			9	
Type o	f Disinfecta	ınt Residua	I Maintained	l in Distribu	tion System:	✓ Free Chlorin	ne 📙 Co	mbined Ch	nlorine (Chlora	mines)		rine Dioxide	?	
THUR IT IN			TOWN STATE	DATE OF THE PARTY OF	CT Calculations,			our-Log	Virus Inacti	vation, if A	pplicable*			
FILE				-		CT Cal	culations	25.0			UVI	Dose		
				APPLE HOSPIE			THE NEW YORK					10,000		
D	Days Plant		Net Quantity of Finished			Disinfectant	Lowest CT					Minimum		
Day of	Staffed or Visited by	Hours plant in	Water	In East of	Lowest Residual	Contact Time	Provided	The second		Minimum CT	Lowest	UV Dose	Lowest Residual	Emergency or Abnormal Operating Conditions;
the Month	Operator	Operation	Producted,	Peak Flow	Disinfectant	(T) at C	Before or at	Temp of	pH of Water,	Required, mg-	Operating	Required,	Disinfectant	Repair or Maintenance Work that Involves
Monui	(Place "X")	Operation	gal.	Rate, gpd.	Concentration (C)	Measurement	First Customer	Water, oc	if Applicable	min/L	UV Dose,	mW-	Concentration at	Taking Water System Components Out of
100					Before or at First	Point During	During Peak				mW-sec/cm <sup>2</sup>	sec/cm <sup>2</sup>	Remote Point in	Operation
					Customer During	Peak Flow,	Flow, mg-			STEET	S 1 189		Distribution	
					Peak Flow, mg/L	minutes	min/L	HARRIS B	EMETER BY			The second	System, mg/L	A LOS APRENOS CONTRACTOR LA CO
1	X	24.0	22,000		6.6								3.1 4.3	-
2	X	24.0	20,500		6.1								2.6	
3	X	24.0	16,300		4.0 5.3						-		3.7	
5	X	24.0 24.0	65,100 44,700		6.4								3.9	
6	Α	24.0	44,700		0.4									
7	X	24.0	81,000		7.5								3.6	BWN - 1248 Lake Josephine
8	X	24.0	23,100		6.4				2		-		3.5	
9	X	24.0	23,900		5.7								3.4	
10	X	24.0	19,900		4.5								3.8	
-11	X	24.0	21,000		4.4		f.						3.7	Rescinded
12	X	24.0	91,150		3.8								2.4	
13		24.0	91,150										2.4	
14	X	24.0	21,800		3.2								3.4	
15	X	24.0	23,100		3.6 3.8								1.7	
17	X	24.0 24.0	17,900 15,200		3.1								2.7	
18	X	24.0	33,200		3.2				-				2.3	
19	X	24.0	24,300		3.4								1.8	
20		24.0	24,300											
21	X	24.0	29,400		4.1								1.8	
22	X	24.0	25,500		4.3								1.0	
23	X	24.0	23,000		2.7								0.4	
24	X	24.0	29,800		4.0								2.1	
25	X	24.0	26,800		4.5					-			2.1	
26	X	24.0	19,400		3.4								2.1	
28	v	24.0	19,400		1.6							F	0.4	
29	X	24.0 24.0	23,900 25,600		1.6 3.6								1.0	
30	X	24.0	22,500		4.9								1.6	
31	X	24.0	22,500		6.7								2.0	
Total	STATION HAN	10/10/00/2015	992,200											

Avgerage 32,006

Maximum 91,150

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



# MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED-WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE TREATMENT PLANTS

	ty Water System ( ater System (PWS			6280162							
UDIIC VV		Plant 2 Name:		Plant 4 Name:	Plant 5 Name:	Plant 6 Name:	Plant 7 Name:	Plant 8 Name:	Plant 9 Name:	Plant 10 Name:	DEPLATION AND
	Plant I Name.	Flant 2 Name.	Flatte 3 Ivallie.	Flair 4 Name.	Flant 5 Name.	Talant o Italino.	Tidite / Tidition	1,000,000		1/2	
	Plant 3	Lake Josephine Plant 4								[S	
	Fiditio	Fidill	Por	mitted Maximum	Day Operating Co	anacity of Each F	lant gallons per	dav		SAME SAME SAME	Total
Day of	300,000	280,000	rei	I I I I I I I I I I I I I I I I I I I	Day Operating Co	apacity of Lacif i	lant, gallons per	I			580,000
Month	300,000	200,000		Net Quantity of	Finished Water F	Produced by Eac	h Plant, gallons	KILD TO THE	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		Total
1	143,000	22,000	11/27 8	Tier Quantity of	T IIIIOTOG TTGGGT						165,000
2	105,000	20,500									125,500
3	96,000	16,300									112,300
4	32,000	65,100									97,100
5	148,500	44,700									193,200
6	148,500	44,800									193,300
7	132,000	81,000		-							213,000
8	104,000	23,100									127,100
9	87,000	23,900									110,900
10	94,000	19,900									113,900
11	118,000	21,000									139,000
12	14,000	91,150						-			105,150
13	43,000	91,150									134,150
14	43,000	21,800									64,800
15	90,000	23,100									113,100
16	84,000	17,900									101,900
17	91,000	15,200									106,200
18	94,000	33,200									127,200
19	93,000	24,300									117,300
20	92,000	24,300									116,300
21	92,000	29,400									121,400
22	74,000	25,500									99,500
23	78,000	23,000									101,000
24	85,000	29,800									114,800
25	69,000	26,800									95,800
26	88,500	19,400						<u></u>			107,900
27	88,500	19,400									107,900
28	130,000	23,900									153,900
29	111,000	25,600						1			136,600
30	102,000	22,500									124,500
<b>HURN</b>	108,000	22,500						č			130,500
otal			742								3,870,200
vg.											124,845
ax.									1   图		213,000

Dist #1
GALLONS
x 1000
143,000
105,000
96,000
32,000
148,500
148,500
132,000
104,000
87,000
94,000
118,000
14,000
43,000
43,000
90,000
84,000
91,000
94,000
93,000
92,000
92,000
74,000
78,000
85,000
69,000
88,500
88,500
130,000
111,000
102,000
108,000
2,878,000

92,839

GALLONS
x 100
22,000
20,500
16,300
65,100
44,700
44.800
81,000
23,100
23,900
19,900
21,000
91,150
91,150
21,800
23,100
17,900
15,200
33,200
24,300
24,300
29,400
25,500
23,000
29,800
26,800
19,400
19,400
23,900
25,600
22,500
22,500
992,200

3,870,200

total

32,006



See Pages 4 for Insti									
I. General Information	n for the Month/Y	Year of: July, 2	013						
A. Public Water Systen	n (PWS) Informa	tion							
PWS Name:	Leisure Lakes/Cover					PWS Identification	Number:	6280064	
PWS Type:	✓ Community	Non-Transient Non-Cor	mmunity 17	Fransient Non-Com	munity	Consecutive			
Number of Service Connec						Population Served at	End of Month:	632	
PWS Owner:	US Water Services C	Corporation				3200 100 100 100 100 100 100 100 100 100			
Contact Person:	Melisa Rotteveel	E			Conta	ct Person's Title:	Compliance	Manager	
Contact Person's Mailing A	ddress:	4939 Cross Bayou Blvd			City: New Port Rich	State: Florida		Zip Code:	34652
Contact Person's Telephone	e Number:	866-753-8292			Conta	ct Person's Fax Numb	per: 727-849-421	9	
Contact Person's E-Mail Ac	61/25/02/06/05/02/03/03/03	mrotteveel@uswatercor	rp.net						
Water Treatment Pl	ant Information		-						
Plant Name:	Leisure Lakes/Cover	ed Bridge				Plant Telephone Nu	ımber:	941-377-945	6
Plant Address:	140 Woodside Drive	PART PROPERTY.			City: Lake Placid	State: Florida		Zip Code:	33852
Type of Water Treatment b	y Plant:	✓ Raw Ground Water	Purchased Fin	ished Water					
Permitted Maximum Day C	perating Capacity of P	lant, gallons per day:		72,000					
Plant Category (per subsect	ion 62-699.310(4), F.A	L.C.):	V		Plant	Class (per subsection	62-699.310(4), F.A.C	C.): C	
Licensed Operators	White the state of	Name		License Class	License Number		Day(s) / Shift(	(s) Worked	
Lead/Chief Operator:	Ron Derossett			A	3531	Operation Manager	Days 1st Shift	***	
ther Operators:	Howard Short			A	3304	Operator	Days 1st Shift		
Contification by Land	VChi-f Ot			CONTRACTOR OF STREET					
Certification by Lead			STATE OF THE PARTY				TO SHAPE SHOW		A RESERVED
		operator licensed in Florida							
nformation provided i	in this report is tru	ie and accurate to the best of	of my knowledge an	d belief. I certify	y that all drinking v	vater treatment cl	hemicals used at	this plant con	form to NSF
nternational Standard	60 or other applic	cable standards referenced i	in subsection 62-55:	5.320(3), F.A.C.	I also certify that	the following add	ditional operation	s records for	this plant we
repared each day that	a licensed operate	or staffed or visited this pla	int during the month	indicated above	: (1) records of an	nounts of chemic	als used and chen	nical feed rate	es; and (2) if
		s performance records. Fur							
		7,000,000,000,000,000	rationalists, ragics to	provide these th	autional operation	s records to the r	Wo owner so an	or wo owner	carretain
1 Jelloa	J HOW	eve	Ron Derossett					A 3531	Long
Signature and Date	1	11/21/2014	Printed or Typ	ned Name				License Num	ber

PWS II	):			6280064		Plant Name:	Leisure Lak	es/Covere	d Bridge					
111 (4)	Marie 2	2 'W' XX'		W N										
			nth/Year of:			July, 2013							Π	
	of Achieving aviolet Radia		/irus Inactivati			ree Chlorine		L Chlor	rine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
			al Maintained		Other (Describe):	✓ Free Chlori	пе По	`ombined (	Chlorine (Chlo	oramines)	Chlo	rine Dioxide		
Type o	Distillecte	In residue	I Wantaniec	I Distribu	CT Calculations, o	r IIV Dose to	Demostate							
100					C1 Culculations, (		culations	Y Our LOE	, , , , , , , , , , , , , , , , , , , ,		UV	Dose		
10 - E		Secret is		E 16	1 - 1 - 1 - 1 - 1 - 1	CI Can	Total California		Province of	F.S.	0.	0030		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>O</sup> C	pH of Water, if Applicable		Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	140,000		1.7								0.5	
2	X	24.0	63,400		1.6								0.6	
3	X	24.0	42,500		1.6								0.5	
4	X	24.0	52,800		1.5								0.5	
5	X	24.0	110,800		1.4								0.4	
6		24.0	41,000											
7	X	24.0	41,000		1.5								0.5	
8	X	24.0	49,600		1.4						j i		0.6	
9	X	24.0	49,600		3.1								0.3	
10	X	24.0	51,400		1.2								0.6	
11	X	24.0	105,300		0.8								0.6	
12	X	24.0	59,200		2.9								0.9	
13	X	24.0	48,000		2.6								0.6	
14	-	24.0	36,200			1 1			7			Ţ.		
15	X	24.0	36,200		2.4								0.8	
16	X	24.0	27,900		1.8								0.7	
17	X	24.0	45,800		3.4								2.2	
19	X	24.0	35,600		3.0								2.1 0.8	
20	X	24.0	39,200		3.4					-			2.7	
21	Α	24.0 24.0	45,500		3,6			-			_		2.1	
22	X	24.0	45,450 45,450		2.0								1.0	
23	X	24.0	39,000		1.6								0.6	
24	X	24.0	58,000		3.7								1.6	
25	X	24.0	33,700		3.6								1.4	
26	X	24.0	46,600		3.9								1.5	The second second
27	X	24.0	48,000		2.6						-		1.7	
28	Α.	24.0	47,250		2.0									
29	Х	24.0	47,250		2.1								1.6	
30	X	24.0	42,300		2.0								1.1	
31	X	24.0	52,100		4.2								2.1	
otal	and the politic	10,150,2	1,626,100											
voerage			52.455											

<sup>\*</sup> Refer to the instructions for this report to determine which plants must provide this information.



Public Water Systen						4	
PWS Name:	Leisure Lakes/Cove					PWS Identification Number:	6280064
WS Type:	✓ Community	Non-Transient Non-Com	munity 📋	Transient Non-Com		Consecutive	
lumber of Service Connec					Total	Population Served at End of Month:	632
WS Owner:	US Water Services	Corporation					
ontact Person:	Melisa Rotteveel	- Paris				Victorial Control of the Control of	ance Manager
ontact Person's Mailing A		4939 Cross Bayou Blvd			City: New Port Rich		Zip Code: 34652
ontact Person's Telephone		866-753-8292			Conta	ct Person's Fax Number: 727-849	9-4219
ontact Person's E-Mail Ac		mrotteveel@uswatercorp	o.net_				
Vater Treatment Pla							
ant Name:	Leisure Lakes/Cove					Plant Telephone Number:	941-377-9456
ant Address:	140 Woodside Drive				City: Lake Placid	State: Florida	Zip Code: 33852
pe of Water Treatment by		✓ Raw Ground Water	Purchased Fin	ished Water			***************************************
rmitted Maximum Day O	perating Capacity of	Plant, gallons per day:		72,000			
nt Category (per subsect	ion 62-699.310(4), F.		(		Plant	Class (per subsection 62-699.310(4), I	F.A.C.): C
Licensed Operators		Name	NEW TOTAL STEEL	License Class	License Number	Day(s)/S	hift(s) Worked
ad/Chief Operator:	Ron Derossett			A	3531	Operation Manager Days 1st Shift	7
her Operators:	Howard Short			A	3304	Operator Days 1st Shift	
ormation provided in ernational Standard epared each day that	er treatment plant n this report is tru 60 or other appli a licensed operat	operator licensed in Florida, are and accurate to the best of cable standards referenced in or staffed or visited this plan	my knowledge an subsection 62-55. t during the month	d belief. I certify 5.320(3), F.A.C. indicated above:	that all drinking v I also certify that t (1) records of an	nt identified in part I of this reparted treatment chemicals used the following additional operation on the following additional operation of chemicals used and control of the PWS owner so	at this plant conform to N tions records for this plant themical feed rates; and (2)
Tunn	Melle	11/21/2014	Ron Derossett Printed or Typ				A 3531

PWS II	):			6280064		Plant Name:	Leisure Lak	es/Covere	d Bridge					
III. D	aily Data f	or the Mo	onth/Year of:	(E/ATE/49)		August, 2013								
Means	of Achieving	Four-Log	Virus Inactivat	ion/Removal:	√ F	ree Chlorine		Chlor	rine Dioxide		Ozone		Combined (	Chlorine (Chloramines)
Ultr	aviolet Radia	ition			Other (Describe):									
Type o	f Disinfecta	ant Residu	al Maintained			✓ Free Chlori	пе По	Combined	Chlorine (Chlo	oramines)	ПСЫ	orine Dioxide		
21-			I		CT Calculations, o							THE DIOXIG		The state of the s
				SUSSILE DE	C1 Curculations, (		culations	Tour-Log	, virus muc	iivation, ii i		Dose		
				MAZSHI SHEET	Annual Control	T Can	T. Comment	1			O V	Dosc		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>o</sup> C	pH of Water, if Applicable	Minimum CT Required, mg- min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	38,200		2.9	PARIOTOTOPS - 1			HVI WAR	T-41 - HILL TEACHER	HARBORIAN PROPERTY.		1.2	- Printer - Printer
2	X	24.0	38,400		1.8								1.0	
3	X	24.0			2.1								0.6	
4		24.0									(C			
5	X	24.0	54,700		2.4								1.0	
6	X	24.0	55,800		4.2								3.1	
7	X	24.0	62,900		3.2								2.2	
8	X	24.0	50,100		2.8								2.0	
9	X	24.0	40,500		2.0								1.0	
11	X	24.0	76,500		4.1								2.2	
12		24.0	52,850											
13	X	24.0	52,850		3.4								2,6	
14	X	24.0	47,600		2.7								1.6	
15	X	24.0	45,600 54,000		0.8								0.5	
16	X	24.0	50,200		3.4 2.8								1.0	
17	X	24.0	49,500		2.0								1.6	
18	X	24.0	50,100										1.8	
19		24.0	50,100		1.4								1.1	
20	X	24.0	54,000		1.2								0.5	
21	X	24.0	51,000		4.7								0.8	
22	X	24.0	49,000		3.9								2.1	
23	X	24.0	59,600		3.7								2.2	
24	X	24.0	42,900		2.8								1.7	
25	X	24.0	40,103										500	
26		24.0	40,104		2.4				117				1.2	
27	X	24.0	31,000		3.3								1.6	
28	X	24.0	49,000		3,1								2.0	
29	X	24.0	37,000		4.7		<u> </u>						2.9	
30	X	24.0	47,000		2.5								2.1	
31	X	24.0	67,900		4.3								2.6	
otal			1,561,207											
vgerage		THE RESERVE	50,362											

Maximum 76,500 \* Refer to the instructions for this report to determine which plants must provide this information.

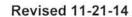


See Pages 4 for Inst	ructions.							
I. General Informatio	n for the Month/	Year of: Septembe	r, 2013					
A. Public Water Syster								
PWS Name:	Leisure Lakes/Cove	red Bridge				PWS Identification Number	6280064	
PWS Type:	✓ Community	Non-Transient Non-Commu	inity	Transient Non-Com	munity	Consecutive		
Number of Service Conne	ctions at End of Month	276				Population Served at End of I	Month: 632	
PWS Owner:	US Water Services	Corporation				22.0 • 0.0 (0.0 (0.0 (0.0 (0.0 (0.0 (0.0 (		
Contact Person:	Melisa Rotteveel				Conta	ct Person's Title:	Compliance Manager	
Contact Person's Mailing A		4939 Cross Bayou Blvd			City: New Port Rich	State: Florida	Zip Code: 346.	52
Contact Person's Telephon		866-753-8292				ct Person's Fax Number:	727-849-4219	
Contact Person's E-Mail A		mrotteveel@uswatercorp.n	net				57.50 (F. 10.5)	
3. Water Treatment Pl	ant Information							
Plant Name:	Leisure Lakes/Cover	red Bridge				Plant Telephone Number:	941-377-9456	
Plant Address:	140 Woodside Drive				City: Lake Placid	State: Florida	Zip Code: 338:	52
Type of Water Treatment b	*	✓ Raw Ground Water	Purchased Fin	ished Water			1-1-1-1	
Permitted Maximum Day (	Operating Capacity of I	Plant, gallons per day:		72,000				
Plant Category (per subsect	tion 62-699.310(4), F.A	V.C.): V			Plant	Class (per subsection 62-699.	310(4), F.A.C.): C	
Licensed Operators	KINT VERS	Name	<b>建筑基础加加</b>	License Class	License Number		(s) / Shift(s) Worked	7-1-1
Lead/Chief Operator:	Ron Derossett	· · · · · · · · · · · · · · · · · · ·	14	A	3531		1st Shift	
Other Operators:	Howard Short			A	3304		st Shift	
. Certification by Lead	/Chief Operator		COSTRUCTOR CONS	DEV HILLEY	DY OR SHEWAR	WEST STATE OF THE STATE OF	K GO GO STATE	
I, the undersigned wat	er treatment plant	operator licensed in Florida, ar	n the lead/chief	operator of the u	ater treatment plan	at identified in part Laf	this remort I seed Gother that the	
information provided	n this report is tru	e and accurate to the best of m	v knowledge en	d baliaf Lastify	that all drinking w	rates treatment about	uns report. I certify that the	. Mon
International Standard	co e e	cable standards referenced in su	basetion (2.55	5 220(2) FAC	that an urthking v	vater treatment chemical	is used at this plant conform	to NSF
meeriational Standard	full or other applic	able standards referenced in st	ibsection 62-33.	5.320(3), F.A.C.	i also certify that t	he following additional	operations records for this p	plant were
propored analy doublest	60 or other applic							
prepared each day that	a licensed operate	or staffed or visited this plant d	uring the month	indicated above:	(1) records of am	ounts of chemicals used	d and chemical feed rates; an	d (2) if
prepared each day that	a licensed operate	or staffed or visited this plant d	uring the month	indicated above:	: (1) records of am Iditional operation:	ounts of chemicals used s records to the PWS ov	d and chemical feed rates; and when so the PWS owner can be	id (2) if retain
prepared each day that	a licensed operate	or staffed or visited this plant d	uring the month	indicated above:	(1) records of am Iditional operations	ounts of chemicals used s records to the PWS ov	d and chemical feed rates; an wner so the PWS owner can	ıd (2) if retain
prepared each day that	a licensed operate	or staffed or visited this plant d	uring the month more, I agree to	indicated above:	(1) records of am ditional operations	ounts of chemicals used s records to the PWS ov	d and chemical feed rates; an wner so the PWS owner can	nd (2) if retain
prepared each day that	a licensed operate	or staffed or visited this plant d	uring the month	indicated above provide these ad	(1) records of am	sounts of chemicals used s records to the PWS ov	d and chemical feed rates; an wner so the PWS owner can A 3531	nd (2) if retain

PWS II	);			6280064		Plant Name:	Leisure Lak	es/Covere	d Bridge					
III. D	aily Data f	or the Mo	nth/Year of:			September, 20	13							
	of Achieving aviolet Radia		Virus Inactivati		Other (Describe):	ree Chlorine		Chlor	rine Dioxide		Ozone		Combined 0	Chlorine (Chloramines)
			al Maintained			✓ Free Chlori	пе По	Combined I	Chlorine (Chlo	ramines)	Chlc	rine Dioxide		
-21					CT Calculations, o							TITLE DIOXIGE		SECULATION OF THE PARTY OF THE
-11			the rate of	200	C1 Curculations, (		culations	T Our -LOE	, Thus much	iration, ir	UV	Doca		
					AND THE RESERVE	Ci Calc	In the state of the state of			297	OV	Dosc	- 6 MARS 2	
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>o</sup> C	pH of Water, if Applicable	Minimum CT Required, mg- min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1		24.0	100,000											
2	X	24.0	100,000		2.7								1.2	
3	X	24.0			2.7								1.5	
4	X	24.0			2.6								1.2	
5	X	24.0		7-,	4.1								1.8	
6	X	24.0	91,600		2.3								1.5	
7	X	24.0	51,200		1.8				2 1				1.0	
8		24.0	37,550											
10	X	24.0	39,550		3.0								0.8	
11	X	24.0	27,570		4.3					g			0,6	
12	X	24.0 24.0	42,000		4.1								0.9	
13	X	24.0	47,000 38,300		4.2								1.8	
14	X	24.0	39,000		2.1								1.3	
15	^	24.0	38,000		1.9								0.9	
16	X	24.0	38,000		1.8								1.2	
17	X	24.0	33,800		0.8								0.3	
18	X	24.0	37,000		2.4				_				1.7	
19	X	24.0	28,300		3.9								2.2	
20	X	24.0	37,800		2.0								1.8	
21	X	24.0	37,100		4.3								3.1	
22		24.0	33,050		3.00								3.1	
23	X	24.0	33,050		3.6								2.0	
24	X	24.0	47,400		3.9								2.2	
25	X	24.0	45,000		3.8								3.1	
26	X	24.0	33,000		3.0								1.8	
27	X	24.0	37,000		3.5			MALE					2.6	
28	X	24.0	29,000		3.2								2.3	
29		24.0	34,900											
30	X	24.0	34,900		4.1								2.4	
1		24.0												
otal	A MET DESCRIPTION		1,319,570											
vgerage	CILYSTAN SE	SHIP SHE	43,986											

Maximum 100,000

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





Total Population Served at End of Month: 632  WS Owner: US Water Services Corporation  Ontact Person: Melisa Rotteveel  Ontact Person's Mailing Address: 4939 Cross Bayou Blvd  Ontact Person's Telephone Number: 866-753-8292  Ontact Person's E-Mail Address: mrotteveel@uswatercorp.net  Water Treatment Plant Information  ant Name: Leisure Lakes/Covered Bridge  Total Population Served at End of Month: 632  Total Population Served at End of Month: 632  Total Population Served at End of Month: 632  Compliance Manager  Compliance Manager  City: New Port Rich State: Florida  Contact Person's Fax Number: 727-849-4219  Total Population Served at End of Month: 632  Tota	PWS Name:	Leisure Lakes/Cov	ered Bridge				PWS Identification	Number:	6280064	
March   1976	PWS Type:	✓ Community	Non-Transient Non-Com	munity	Transient Non-Comr	nunity	Consecutive			
	Number of Service Connec					Т	otal Population Served at	End of Month:	632	
Ontact Person's Mailing Address: 4939 Cross Bayou Blvd   City   New Port Rich   State:   Florida   Florida   Sip Code:   34652   Ontact Person's Telephone Number: 866-753-8292   Contact Person's Fax Number: 727-849-4219   Ontact Person's E-Mail Address: mrotteveel@uswatercorp.net  Water Treatment Plant Information  ant Name: Leisure Lakes/Covered Bridge   Plant Telephone Number: 941-377-9456   Ontact Person's E-Mail Address: mrotteveel@uswatercorp.net  Water Treatment Plant Information  ant Name: Leisure Lakes/Covered Bridge   Plant Telephone Number: 941-377-9456   Ontact Person's Fax Number: 727-849-4219   Ontact Perso	PWS Owner:	US Water Services	Corporation							
Contact Person's Telephone Number: 866-753-8292   Contact Person's Fax Number: 727-849-4219	Contact Person:	Melisa Rotteveel						Compliance	Manager	
water Treatment Plant Information ant Name: Leisure Lakes/Covered Bridge	Contact Person's Mailing A	Address:	4939 Cross Bayou Blvd			City: New Port	Rich State: Florida		Zip Code:	34652
Ant Name: Leisure Lakes/Covered Bridge	Contact Person's Telephon	e Number:	866-753-8292			C	ontact Person's Fax Numb	er: 727-849-421	9	
Ant Name: Leisure Lakes/Covered Bridge  ant Address: 140 Woodside Drive  Ant Address: 140 Woodside Drive  Appendix Treatment by Plant: A ground Water  Appendix Treatment by Plant: A ground Water  A ground Water Treatment by Plant: A ground Water  A purchased Finished Water  Tay,000  A ground Water Treatment by Plant: A ground Water  A ground Water Treatment by Plant: A ground Water  Tay,000  A ground Water Treatment by Plant: A ground Water  A ground Water Treatment by Plant: A ground Water  Tay,000  Tay,000	Contact Person's E-Mail A	ddress:	mrotteveel@uswatercor	p.net_						
Ant Address: 140 Woodside Drive	Water Treatment Pl	ant Information								
when the proper of Water Treatment by Plant:    Purchased Finished Water	Plant Name:	Leisure Lakes/Cove	ered Bridge				Plant Telephone Nu	mber:	941-377-945	56
rmitted Maximum Day Operating Capacity of Plant, gallons per day:  ant Category (per subsection 62-699.310(4), F.A.C.):  V  Plant Class (per subsection 62-699.310(4), F.A.C.):  C  Licensed Operators  Name  License Class  License Number  Day(s) / Shift(s) Worked  ther Operators:  Howard Short  A  3304  Operator  Days 1st Shift  Days 1st Shift	Plant Address:	140 Woodside Driv	/e			City: Lake Plac	id State: Florida		Zip Code:	33852
ant Category (per subsection 62-699,310(4), F.A.C.):  V Plant Class (per subsection 62-699,310(4), F.A.C.): C Licensed Operators Name License Class License Number Day(s) / Shift(s) Worked ead/Chief Operator: Ron Derossett A 3531 Operation Manager Days 1st Shift ther Operators: Howard Short A 3304 Operator Days 1st Shift	Type of Water Treatment b	y Plant:	✓ Raw Ground Water	Purchased Fi	nished Water					
Licensed Operators Name License Class License Number Day(s) / Shift(s) Worked ead/Chief Operator: Ron Derossett ther Operators: Howard Short A 3531 Operation Manager Days 1st Shift A 3304 Operator Days 1st Shift					72,000					
ead/Chief Operator: Ron Derossett A 3531 Operation Manager Days 1st Shift ther Operators: Howard Short A 3304 Operator Days 1st Shift		tion 62-699.310(4), F		V						
ther Operators: Howard Short A 3304 Operator Days 1st Shift			Name		License Class	STATE OF THE PARTY	ber	, , , , , , , , , , , , , , , , , , , ,	s) Worked	
		Ron Derossett	100		A	3531	Operation Manager	Days 1st Shift	THE REPORT OF	H
Alfred Gregg  A 14324 Operator Days 1st Shift	Other Operators:	Howard Short			A	3304	Operator			
		Alfred Gregg			A	14324	Operator	Days 1st Shift		
					-					
							_			
						-				
		-				-				
		2			_					
			The state of the s	THE RESERVE OF THE PERSON NAMED IN				T Call		
ertification by Lead/Chief Operator										
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the										
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to	nternational Standard	60 or other appl	icable standards referenced in	n subsection 62-55	55.320(3), F.A.C.	I also certify t	hat the following add	itional operation	s records for	this plant
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the	repared each day that	a licensed opera	tor staffed or visited this plan	nt during the mont	th indicated above	: (1) records o	f amounts of chemica	als used and cher	nical feed rate	es; and (2
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant										
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant epared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2)	\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	7	)	\	- P		to 3.00% of 2.7 % to 2.2 % to 3.00% of			
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant	V I I I	1	/	1						
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant epared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2)	1	- 1/								
the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the formation provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to ternational Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant epared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2)	1 1,000	a) K	Alexander /	Ron Derosse					Δ 3531	

PWS II	);			6280064		Plant Name:	Leisure Lak	es/Covere	d Bridge					
III. D	aily Data f	or the Mo	nth/Year of:		Vol. 10 をおける	January, 2014								
Means	of Achieving	Four-Log V	Virus Inactivat	ion/Removal:	✓ F	ree Chlorine		Chlor	rine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
Ultr	aviolet Radia	tion			Other (Describe):									
			al Maintainec			Free Chlori	ne 🗸 c	ombined (	Chlorine (Chlo	oramines)	Chlo	rine Dioxide	3	
Турс о	Distillecti	The residue	I Mannaniec	I in District	CT Calculations, o		Demostate	Four-Log	Virus Inac	tivation, if A		Time Browner	71 1 4 9 16 1	Kwestames emiliar a Si
					er curculations, c		culations	Tour Bog	, , , , , ,	elen stelle	UV	Dose	9.4	
						Ci Can		Total eval		Transmission of	5.280476	1		
Day of the Month	Days Plant Staffed or Visited by Operator	Hours plant in Operation	Water	Peak Flow	Lowest Residual Disinfectant	Disinfectant Contact Time (T) at C	Lowest CT Provided Before or at First		pH of Water,			Minimum	Lowest Residual Disinfectant	
	(Place "X")		Produced, gal.	Rate, gpd.	Concentration (C) Before or at First Customer During Peak Flow, mg/L	Measurement Point During Peak Flow, minutes	Customer During Peak Flow, mg- min/L	Temp of Water, OC	if Applicable	Minimum CT Required, mg- min/L	Operating UV Dose, mW-sec/cm <sup>2</sup>	UV Dose Required, mW- sec/cm <sup>2</sup>	Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	43,900		4.0								2.0	
2	X	24.0	43,800		4.1								2.4	
3	X	24.0	79,300		4.0								2.4	
4	X	24.0	42,100		3.6								2.2	
6	v	24.0			1.0								1.4	
7	X	24.0 24.0	50,850 65,000		1.8								0.8	
8	X	24.0	44,300		3.2								2.4	
9	X	24.0	60,500		3.4								1.6	
10	X	24.0	55,200		2.6								1.5	
11	X	24.0	60,700		2.1								0.8	
12		24.0	68,450											
13	X	24.0	68,450		2.4								1.6	
15	X	24.0	48,900		1.4		_						0.9	
16	X	24.0 24.0	70,500 54,600		3.2 3.4								2.6	
17	X	24.0	67,700		3.2			_					2.4	
18	X	24.0	58,200		2.7								3.2	
19	- 1	24.0	64,300											
20	X	24.0	64,300		1.2								0.8	
21	X	24.0	64,700		3.1								2.6	
22	X	24.0	67,600		2.9								1.0	
23	X	24.0	65,300		2.4								2.2	
24	X	24.0	62,700		3.2								3.0	
25	X	24.0	58,600		2.8								1.8	
26		24.0	64,750											
27	X	24.0	64,750		2.7								2.4	
28	X	24.0	60,800		2.9								2.2	
30	X X	24.0 24.0	69,600 62,800		1.7								1.5	
31	X	24.0	62,800		1.8								1.6	
otal		24.0	1,867,300		1.0								1.2	
vaerage			60.225											

Avgerage 60,235

Maximum 79,300

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



## Revised 11-21-14

See Pages 4 for Instr						
I. General Information	for the Month/Ye	ar of: February, 2014	<b>9</b>			
A. Public Water System						
PWS Name:	Leisure Lakes/Covered	Bridge			PWS Identification Number:	6280064
PWS Type:	✓ Community	Non-Transient Non-Community	☐ Transient Non-Comm		Consecutive	
Number of Service Connec		276		Total	Population Served at End of Month	1: 632
PWS Owner:	US Water Services Con	poration				
Contact Person:	Melisa Rotteveel					pliance Manager
Contact Person's Mailing A		939 Cross Bayou Blvd		City: New Port Rich		Zip Code: 34652
Contact Person's Telephone		66-753-8292		Conta	ct Person's Fax Number: 727-8	849-4219
Contact Person's E-Mail Ac		nrotteveel@uswatercorp.net				
B. Water Treatment Pla					•	
Plant Name:	Leisure Lakes/Covered	Bridge			Plant Telephone Number:	941-377-9456
Plant Address:	140 Woodside Drive			City: Lake Placid	State: Florida	Zip Code: 33852
Type of Water Treatment b			Purchased Finished Water			
Permitted Maximum Day C			72,000			
Plant Category (per subsect					Class (per subsection 62-699.310(4	
Licensed Operators		Name	License Class	License Number		Shift(s) Worked
Lead/Chief Operator:			A	3531	Operation Manager Days 1st Sl	
Other Operators:	Howard Short	- 7.71	A	3304	Operator Days 1st Sh	
	Alfred Gregg		A	14324	Operator Days 1st Sh	ift
首首 对 在 法重要 经相同						
I Cartification by I and	/Chief Operator	WENTER TO THE RESERVE		No. of the Park Line	DIE TON NO DES	13456741.57
I. Certification by Lead		TOTAL IN CONTRACTOR OF THE PARTY OF THE PART		MAN DE LA CASA		
		perator licensed in Florida, am th				
						sed at this plant conform to NSF
						erations records for this plant were
prepared each day that	a licensed operator	staffed or visited this plant during	ng the month indicated above	: (1) records of an	nounts of chemicals used an	d chemical feed rates; and (2) if
applicable, appropriate	e treatment process	performance records. Furthermo	ore, I agree to provide these ac	dditional operation	s records to the PWS owner	so the PWS owner can retain
	().		9 125 <b>t</b> )	19		
\	- V . N					
1/elloa	O hotto	week	Ron Derossett			A 3531
Signature and Date	1		Printed or Typed Name			License Number

PWS II	);			6280064		Plant Name:	Leisure Lak	es/Covere	d Bridge					
III. D	aily Data f	or the Mo	nth/Year of:	ACL CAS		February, 2014								
Means	of Achieving	Four-Log V	irus Inactivati	ion/Removal:	√ F	ree Chlorine		Chlor	ine Dioxide		Ozone		Combined C	chlorine (Chloramines)
	aviolet Radia				Other (Describe):									
			1 Maintainas		tion System:	Free Chlori	no [/] c	ombined (	Chlorine (Chlo	oraminec)	Chlo	rine Dioxide		-
Type o	Disintecta	nt Residua	i Maintainec	i in Distribu	CT Calculations, of			Cour Los	Virus Inac	tivation if A		Title Dioxide	SOCIETA SOCIO	I San Explorer
200					Ci Calculations, c			rour-Log	, virus mac	tivation, ii r	UVI	loca		
		18001120-				C1 Cal	culations				OVI	2036		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>O</sup> C	pH of Water, if Applicable	Minimum CT Required, mg- min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	64,400		1.6								0.9	
2		24.0	73,250											
3	X	24.0	73,250		2.4								1.9	
4	X	24.0	61,500		2.6								1.9	
5	X	24.0	73,600		2.7								1.8	
6	X	24.0	68,500		2.0								1.4	
7	X	24.0	69,500		1.7								0.9	
8	X	24.0	80,800		3.2								2.4	
9		24.0	66,250										1.4	
10	X	24.0	66,250		2.0								0.9	
11	X	24.0	74,300		1.3								1.3	
13	X	24.0 24.0	64,000 60,300	-	1.6								0.9	100
14	X	24.0	58,300		2.2								1.1	
15	X	24.0	46,300		2.0						-		1.3	
16	^	24.0	49,900		2.0			-					1.5	
17	X	24.0	49,900		3.4								0.2	
18	X	24.0	60,000		2.2			Ĉ.					1.9	
19	X	24.0	52,600		2.0								1.7	
20	X	24.0	51,500		2.6								1.7	
21	Х	24.0	120,800		3.6								2.4	
22	Х	24.0	60,000		2.6								1.3	
23		24.0	59,750											
24	X	24.0	59,750		3.2								2.4	
25	Х	24.0	77,600		2.0								0.9	
26	X	24.0	81,600		2.4				S				1.7	i
27	X	24.0	80,300		2.0								1.7	
28	X	24.0	65,500		5.6								2.3	
1		24.0												
AREW.		24.0											ALL PROPERTY.	
XXXIII POX		24.0												
Total			1,869,700											

Avgerage 66,775

Maximum 120,800

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



Public Water System	CONTION TO A CONTINUE OF THE C						
	(PWS) Information						
PWS Name:	Leisure Lakes/Covered Bridge			PWS Identification N	lumber:	6280064	
PWS Type:	✓ Community Non-Transient Non-Community	Transient Non-Com	munity	Consecutive			
Number of Service Connect	tions at End of Month: 276		Total	Population Served at E	nd of Month:	632	
PWS Owner:	US Water Services Corporation						
Contact Person:	Melisa Rotteveel		Conta	ct Person's Title:	Compliance l	Manager	
Contact Person's Mailing A	ddress: 4939 Cross Bayou Blvd		City: New Port Rich	State: Florida		Zip Code:	34652
Contact Person's Telephone	Number: 866-753-8292		Conta	ct Person's Fax Number	r: 727-849-4219	9	
Contact Person's E-Mail Ad	ldress: mrotteveel@uswatercorp.net						
Water Treatment Pla	ent Information						
Plant Name:	Leisure Lakes/Covered Bridge			Plant Telephone Nun	nber:	941-377-94	56
Plant Address:	140 Woodside Drive		City: Lake Placid	State: Florida		Zip Code:	33852
Type of Water Treatment by	y Plant:	nished Water		5.			
	perating Capacity of Plant, gallons per day:	72,000					
Plant Category (per subsecti	ion 62-699.310(4), F.A.C.): V		Plant	Class (per subsection 6	2-699.310(4), F.A.C	.): C	
Licensed Operators	Name	License Class	License Number	NO AND ASSESSMENT	Day(s) / Shift(	s) Worked	
_ead/Chief Operator:	Ron Derossett	A	3531	Operation Manager	Days 1st Shift		
Other Operators:	Howard Short	A	3304	Operator	Days 1st Shift		
	Alfred Gregg	A	14324	Operator	Days 1st Shift		

PWS II	);			6280064		Plant Name:	Leisure Lak	es/Covere	d Bridge					
III B	" D		.10: 0			1 2014								
_			nth/Year of:			March, 2014					Ozone			N. (. )
			Virus Inactivat			ree Chlorine		Chlor	rine Dioxide		☐ Ozone		Combined C	Chlorine (Chloramines)
	eviolet Radia		al Maintainas		Other (Describe):	Free Chlori	no [7]	Sambinad i	Chlorine (Chlo	raminos)	Chlo	rine Dioxide	Y.	
Type o	Disintecta	int Kesidua	al Maintained	in Distribu	CT Calculations, of							ille Dioxide		The State of the Control of the Cont
		120-1			C1 Calculations, o			LOUI-LOE	virus iliac	uvation, ii A	LINI I	D		
13.7						CT Cal	culations			dis title	UV	Dose		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg- min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	31,200		4.0								2.6	
2		24.0	31,360											
3	X	24.0	31,360		1.8								3.7	
4	X	24.0	65,000		3.6								2.5	
5	X	24.0	52,800		1.1								3.2	
6	X	24.0	73,900		3.7								2.4	
7	X	24.0	51,900		3.9								2.8	
8	X	24.0	60,000		3.6								2.7	
9		24.0	65,450											
10	X	24.0	65,450		1.4								0.9	
11	X	24.0	64,000		4.8								4.4	
12	X	24.0	137,700		3.8								3.2	
13	X	24.0	78,000		2.8								1.9	
14	X	24.0	64,900		2.3								2.7	
16	X	24.0 24.0	88,000 52,750		2.5						_		2.4	
17	Х	24.0	52,750		4.2								3.6	
18	X	24.0	76,800		3.5								3.0	
19	X	24.0	57,100		3.8								3.0	
20	X	24.0	72,800		4.0								2.8	
21	X	24.0	68,600		2.6								1.8	
22	X	24.0	74,700		2.5								2.0	
23		24.0	70,900											
24	X	24.0	70,900		3.4								1.4	
25	X	24.0	74,000		3.0								1.8	
26	X	24.0	70,800		1.8								1.3	
27	X	24.0	78,300		1.7								1.4	
28	X	24.0	77,200		3.6								1.7	
29	X	24.0	69,500		3.6								1.8	
30		24.0	69,250											
31	X	24.0	69,250		3.5								1.4	
otal			2,066,620											
veerage		The second second second	66 665											

Maximum 137,700 

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



PWS Type: [Number of Service Connection PWS Owner: U:	Community s at End of Month: S Water Services Co	Non-Transient Non-Co	mmunity	Transient Non-Comn	nunity	PWS Identification 1 Consecutive	Number:	6280064	
Number of Service Connection PWS Owner: U:	s at End of Month:	276	mmunity	Transient Non-Comn	nunity	Consecutive			
PWS Owner: U								(22	
	S Water Services Co	rporation			Total	Population Served at I	and of Month:	632	
Contact Person: M		aporation			Ta	B 1 m 1	G 15 1		
	lelisa Rotteveel					ct Person's Title:	Compliance	Zip Code:	34652
Contact Person's Mailing Addre		4939 Cross Bayou Blvd				State: Florida	r: 727-849-421	1 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	34032
Contact Person's Telephone Nu		866-753-8292			Conta	ct Person's Fax Number	727-849-421	9	
Contact Person's E-Mail Addre	770	mrotteveel@uswaterco	rp.net						
Water Treatment Plant	Information					In m t t t		941-377-945	
Plant Name: Le	eisure Lakes/Covered	d Bridge				Plant Telephone Nur	nber:		33852
	0 Woodside Drive				City: Lake Placid	State: Florida		Zip Code:	33632
Type of Water Treatment by Pl		✓ Raw Ground Water	Purchased F	inished Water					
Permitted Maximum Day Oper				72,000	DI.	Cl. / L. V	22 600 310/4) E A C	:): C	
Plant Category (per subsection	62-699.310(4), F.A.		V			Class (per subsection	Day(s) / Shift(		
Licensed Operators		Name	A SHEET WAS A SHEET OF	License Class	License Number		Day(S) / Shift	s) worked	
	on Derossett			A	3531	Operation Manager			
ASSESSMENT OF THE PARTY OF THE	oward Short			A	3304	Operator	Days 1st Shift		
Al	fred Gregg			A	14324	Operator	Days 1st Shift		
				_					
			THE REAL PROPERTY.						
SOUTH THE REAL STATE				la l		1			

PWS II	);			6280064		Plant Name:	Leisure Lak	es/Covere	d Bridge					
100	West was to the	N T 2500 1200	20020055	No. of Parts										
STATE OF THE PARTY.	ASSESSMENT OF THE OWNER, WHEN DEPOSIT	THE RESERVE OF THE PARTY OF THE PARTY.	nth/Year of:		E MANAGE	April, 2014			20 124				Combined 6	Chlorine (Chloramines)
			Virus Inactivati	22.1		ree Chlorine		L Chlor	ine Dioxide		Ozone		Combined C	chiorine (Chioramines)
0.000	aviolet Radia	2.4.01207			Other (Describe):									
Type o	f Disinfecta	ant Residua	al Maintained	l in Distribut	tion System:	Free Chlorin	ne 🗸 C	Combined (	Chlorine (Chlo	oramines)		rine Dioxide		THE PROPERTY OF THE PROPERTY O
		1044			CT Calculations, o			Four-Log	Virus Inac	tivation, if A	pplicable			
				THE EVENOR		CT Calc	culations				UV	Jose		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>o</sup> C	pH of Water, if Applicable	Minimum CT Required, mg- min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose Required, mW- sec/cm²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	86,300		3.8								1.4	
2	X	24.0	52,600		1.8								0.9	
3	X	24.0	80,900		1.4								1.4	
4	X	24.0	77,200		3.8								1.0	
5	X	24.0	51,800		4.0			_					1.0	
6		24.0	72,750										1.0	
7	X	24.0	72,750		2,1			_					0.8	
8	X	24.0	58,600		2.3							_	1.3	
9	X	24.0	72,700		4.0		-						1.4	
10	X	24.0	95,500		4.2								3.0	
11	X	24.0	101,200		2.9								2.0	
13	X	24.0 24.0	78,100 79,350		2.4								2.0	
14	V	24.0			1.9					141			1.6	
15	X	24.0	79,350 67,700		2.0								1.4	
16	X	24.0	79,200		2.2								1.3	
17	X	24.0	74,900		3.0								2.2	
18	X	24.0	90,900		2.1								1.1	
19	X	24.0	73,000		2.5								1.3	
20	X	24.0	63,400		2.4								1.2	
21		24.0	77,350											
22	X	24.0	77,350		2.7								1.4	
23	X	24.0	50,500		3.2								2.4	
24	X	24.0	67,700		3.7								2.6	13.00
25	X	24.0	62,800		3.6		N.						2.4	
26	X	24.0	63,200		3.4								2.2	
27		24.0	72,500											
28	X	24.0	72,500		2.3								2.0	
29	X	24.0	68,500		2.2								1.2	
30	X	24.0	66,500		2.4								1.6	
1		24.0												
otal		100	2,187,100											

Avgerage 72,903

Maximum 101,200

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



## Revised 11-21-14

PWS Name:	n (PWS) Informa Leisure Lakes/Cove					PWS Identification 1	Number:	6280064	
PWS Type:	✓ Community	Non-Transient Non-C	Community	Transient Non-Comm	nunity	Consecutive			
Number of Service Connec						Population Served at I	End of Month:	632	
PWS Owner:	US Water Services								
Contact Person:	Melisa Rotteveel				Contac	et Person's Title:	Compliance l	Manager	
Contact Person's Mailing A	ddress:	4939 Cross Bayou Blvd			City: New Port Rich	State: Florida		Zip Code:	34652
Contact Person's Telephone	e Number:	866-753-8292			Contac	et Person's Fax Number	er: 727-849-4219	)	
Contact Person's E-Mail Ac	ddress:	mrotteveel@uswatero	orp.net		***				
Water Treatment Pl	ant Information								
Plant Name:	Leisure Lakes/Cover	red Bridge				Plant Telephone Nur	nber:	941-377-94	56
Plant Address:	140 Woodside Drive				City: Lake Placid	State: Florida		Zip Code:	33852
Type of Water Treatment b	y Plant:	✓ Raw Ground Water	Purchased Fin	nished Water					
Permitted Maximum Day C	Operating Capacity of I	Plant, gallons per day:		72,000					
Plant Category (per subsect	tion 62-699.310(4), F.A	A.C.):	V			Class (per subsection			
Licensed Operators	The same of the last of	Name	A PERSONAL PROPERTY.	License Class	License Number		Day(s) / Shift(	s) Worked	SALE OF THE
Lead/Chief Operator:	Ron Derossett			A	3531	Operation Manager	Days 1st Shift		
Other Operators:	Howard Short			A	3304	Operator	Days 1st Shift		
	Alfred Gregg			A	14324	Operator	Days 1st Shift		
		True Sue							

PWS II	):			6280064		Plant Name:	Leisure Lak	es/Covere	d Bridge					
III. D	aily Data f	or the Mo	nth/Year of:	4833		May, 2014								
		The second second	Virus Inactivati		[√] E	ree Chlorine		Chlor	ine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
	aviolet Radia		viius macrivati			ree chlorine					(C)			
_	AND STREET, ST	CONT. 1			Other (Describe):	True Chiese	- 0.		Chlasiaa /Chla	inec)	Псыс	orine Dioxide		
Type o	f Disinfecta	ant Residua	al Maintained	i in Distribu	tion System:	Free Chloris	ue a	ombined (	Chlorine (Chlo	bramines)		Tine Dioxide		Grand Committee of the
					CT Calculations, o			rour-Log	virus mac	iivation, ii A	UVI	Daga	1	
				POST NEWS IN		CT Calc	culations		HERMINGS.		UVI	Dose		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>o</sup> C	pH of Water, if Applicable	Minimum CT Required, mg min/L	Lowest Operating UV Dose, mW-sec/cm²	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	69,100		3.6								1.7	
2	X	24.0	63,300		3.8								1.9	
3	X	24.0	72,500		3.6								1.9	
4		24.0	124,500										1.4	BWN - Highland St & Jasmine St
5	X	24.0	124,500		3.2								2.4	BWIV - Highland St & Jasinine St
6	X	24.0	441,000		3.4								2.6	
7	X	24.0	57,000		2.8								2.2	
8	X	24.0	65,700		2.5								1.9	BWN - Rescinded
9	X	24.0	63,500		3.0 2.6		-						1.7	D III Itooniaa
11	X	24.0	66,400		2.0								1	
12	37	24.0	65,450		2.2								1.4	
13	X	24.0 24.0	65,450 49,600		1.8								1.2	
14	X	24.0	71,700		3.7								1.6	
15	X	24.0	64,800		3.8								1.9	
16	X	24.0	69,700		3.6				0-1-5				2.0	
17	X	24.0	58,200		3.2								1.8	
18		24.0	62,850		57,54									
19	X	24.0	62,850		3.0								1.9	
20	X	24.0	49,600		2.4		7						1.7	
21	X	24.0	65,800		3.4				191				2.2	
22	X	24.0	75,100		2.3								3.0	
23	X	24.0	57,200		1.8								2.0	
24	X	24.0	64,800		4.3								1.4	
25		24.0	70,150											
26	X	24.0	70,150		3.1								2.6	
27	X	24.0	67,300		2.1								1.8	
28	X	24.0	62,100		1.2								1.3	
29	X	24.0	67,000		1.1								0.6	
30	X	24.0	68,300		1.5								0.2	
31	X	24.0	59,000		2.3	(=							0.4	
Total	ALK PARTY OF	- The State of	2,494,600											

Avgerage 80,471
Maximum 441,000

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



Signature and Date

#### Revised 11-21-14

License Number

See Pages 4 for Instructions. I. General Information for the Month/Year of: June, 2014 A. Public Water System (PWS) Information 6280064 PWS Identification Number: Leisure Lakes/Covered Bridge PWS Name: Consecutive Transient Non-Community PWS Type: ✓ Community Non-Transient Non-Community Total Population Served at End of Month: 632 Number of Service Connections at End of Month: US Water Services Corporation PWS Owner: Contact Person's Title: Compliance Manager Contact Person: Melisa Rotteveel Zip Code: 34652 City: New Port Rich State: Florida 4939 Cross Bayou Blvd Contact Person's Mailing Address: Contact Person's Fax Number 727-849-4219 866-753-8292 Contact Person's Telephone Number: mrotteveel@uswatercorp.net Contact Person's E-Mail Address: B. Water Treatment Plant Information 941-377-9456 Plant Telephone Number Leisure Lakes/Covered Bridge Plant Name: State: Florida Zip Code: 33852 Lake Placid City: Plant Address: 140 Woodside Drive ✓ Raw Ground Water Purchased Finished Water Type of Water Treatment by Plant: 72,000 Permitted Maximum Day Operating Capacity of Plant, gallons per day: Plant Class (per subsection 62-699.310(4), F.A.C.): Plant Category (per subsection 62-699.310(4), F.A.C.): V License Number Day(s) / Shift(s) Worked License Class Name Licensed Operators Utility Manager Days 1st Shift 3531 Lead/Chief Operator: Ron Derossett 20588 Operator Days 1st Shift Other Operators: Jackie Williams II. Certification by Lead/Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain A 3531 Ron Derossett

Printed or Typed Name

PWS II	<b>)</b> :			6280064		Plant Name:	Leisure Lak	es/Covere	d Bridge					
III. D	aily Data f	or the Mo	nth/Year of:	Date Way	· 三年道 / 14660	June, 2014								
AUGUST STREET		Charles and the Charles and the Charles	Virus Inactivat		√ E	ree Chlorine		Chlor	ine Dioxide		Ozone		Combined C	Chlorine (Chloramines)
	aviolet Radia		vitus mactivat	The second secon	Other (Describe):	ree chlorine								
27	Grand State Control of State	ACRES CO.	4-2-2-1								Пен	rine Dioxide		
Type o	f Disinfecta	int Residua	al Maintainec	l in Distribu	tion System:	Free Chlorin	ie 🖸 C	ombined (	Chlorine (Chlo	ramines)	The same of the sa	rine Dioxide		
				DEATH AND A CO	CT Calculations, o			Four-Log	Virus Inaci	ivation, if A	Applicable*			
-14				frager :		CT Calc	ulations			<b>一种是</b>	UVI	Jose		
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg- min/L	Temp of Water, <sup>o</sup> C	pH of Water, if Applicable	Minimum CT Required, mg min/L	Lowest Operating UV Dose, mW-sec/cm²	Minimum UV Dose Required, mW- sec/cm <sup>2</sup>	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1		24.0	66,950											
2	X	24.0	65,700		2.9								1.2	
3	X	24.0	40,700		2.8								1.0	
4	X	24.0	75,500		2.3								0.8	
6	X	24.0	71,300		2.5								2.3	
7	X	24.0	61,800		2.6								2.3	
8	X	24.0	68,650		2.8								Bod.	
9	X	24.0 24.0	68,650 64,200		3.3					-			1.2	
10	X	24.0	64,500		2.9								2.8	
11	X	24.0	75,300		4.1								3.4	
12	X	24.0	71,600		3.9				7				3.6	
13	X	24.0	79,900		3.9								3.8	
14	X	24.0	67,400		2.3						M. C.		1.3	
15		24.0	67,300		2.0									
16	X	24.0	72,000		2.9								2.3	
17	X	24.0	43,900		2.6								2.1	
18	X	24.0	72,500		3.2								2.6	
19	X	24.0	73,200		1.9				3				1.0	
20	X	24.0	87,700		1.2								1.0	
21	X	24.0	69,000		1.5								0.4	
22		24.0	69,000											
23	X	24.0	86,100		5.6								2.5	
24	X	24.0	119,000		3.1								1.5	
25	X	24.0	66,300		3.4								2.9	
26	X	24.0	58,700		1.5								1.3	
27	X	24.0	77,700		3.6								2.4	
28	X	24.0	71,600		2.6								1.0	
29		24.0	71,600						0				2.1	
30	X	24.0	250,000		3.5								2.1	
1 l	HOLES AND AND ADDRESS OF THE PARTY OF THE PA	24.0												
otal			2,297,750											

Avgerage 76,592

Maximum 250,000

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

#### Rate Schedule - Water

#### Florida Public Service Commission

HC Waterworks, Inc.

Revised

(2)

Schedule: E-1w

Docket No. 140158-WS

Page:

1 of 1

Historical Test Year Ending June 30, 2014 Water [ X ] or Sewer [ ]

Preparer: WT Rendell

Explanation: Provide a schedule of present rates and proposed rates.

Line	01	Prior	Proposed
No.	Class/Meter Size	to Filing	Rates
1	Residential	19.02	21 27
	5/8" X 3/4" 3/4"	18.92	21.37
3	1"	28.38	32.06 53.43
5	1-1/2"	47.31 94.61	106.85
6	2"	151.38	170.96
7	3"		
8	4"	302.77 473.07	341.92 534.25
9	6"	946.15	
10	8"		1,068.50
11	10"	1,513.83	1,709.60
		2,176.13	2,457.55
12 13	Gallonage Charge, per 1,00	6.46	7 45
14	0 - 6,000 gal.		7.45
	6,001 - 12,000 gal.	9.71	11.18 14.91
15	Over 12,000 gal.	12.93	14.91
16	General Service		
17		18.00	24.27
18	5/8" X 3/4" 3/4"	18.92	21.37
19		28.38	32.06
20	1"	47.31	53.43
21	1-1/2"	94.61	106.85
22	2" 3"	151.38	170.96
23	4"	302.77	341.92
24 25	6"	473.07 946.15	534.25
26	8"		1,068.50
		1,513.83	1,709.60
27	10"	2,176.13	2,457.55
28	Gallonage Charge	7.25	8.06
29	11		
30	Irrigation	10.00	04.07
31	5/8" X 3/4"	18.92	21.37
32	3/4"	28.38	32.06
33	1"	47.31	53.43
34	1-1/2"	94.61	106.85
35	2"	151.38	170.96
36	3" 4"	302.77	341.92
37 38		473.07	534.25
39	Gallonage Charge, per 1,00 0 - 6,000 gal.		7.45
40	6,001 - 12,000 gal.	6.46	7.45
200		9.71	11.18
41	Over 12,000 gal.	12.93	14.91
43	Private Fire Protection		
44	2"	12.62	14.05
45	3"	12.62	14.25
45	4"	25.23	28.50
47	4 6"	39.43	44.52
	8"	78.85	89.05
48		126.16	142.48
49	10"	181.34	204.81

Rate Schedule - Sewer

#### Florida Public Service Commission

HC Waterworks, Inc.

Revised

Schedule: E-1s

Docket No. 140158-WS

Page: 1 of 1 Preparer:

Historical Test Year Ending June 30, 2014

W T Rendell

Water [ ] or Sewer [ X ]

Explanation: Provide a schedule of present rates and proposed rates.

111	(2)
(   )	(2)
( )	(~)

Line		Prior	Proposed
No.	Class/Meter Size	to Filing	Rates
1	Residential		
2	All Meter Sizes	22.59	14.56
3			
4	Gallonage cap (gallons)	6,000	6,000
5	Gallonage Charge, per 1,000	7.64	4.13
6			
7			
8	General Service		
9	5/8" X 3/4"	22.59	14.56
10	3/4"	33.90	21.84
11	1"	56.50	36.39
12	1-1/2"	112.98	72.79
13	2"	180.78	116.46
14	3"	361.54	232.93
15	4"	564.91	363.95
16	6"	1,129.83	727.90
17	8"	1,807.20	1,164.64
18	10"	2,598.61	1,674.17
19	Gallonage charge	9.16	4.96
20			
21	Flat Rate		
22			
23	Residential Wastewater Onl	y (RWO)	
24	Monthly Flat Rate		21.03
25	Gen. Srvc. Wastewater Only		
26	Monthly Flat Rate	8	14.56

#### Revenue Schedule at Present and Proposed Rates

#### Florida Public Service Commission

(Revised)

E-2w ( 1 of 1 W T Rendell

HC Waterworks, Inc.

Docket No. 140158-WS

Historical Test Year Ending June 30, 2014

Water [ X ] or Sewer [ ]

Explanation: Provide a calculation of revenues at present and proposed rates using the billing analysis. Explain any differences between these revenues and booked revenues. If a rate change occurred during the test year, a revenue calculation must be made for each period.

Line	(1)	(2) Test Year	(3) TY Cons	(4) Test	(5) Test Year	(6) Adjusted	(7) Adjusted	(8) Rate Prior	(9) Revenue at	(10) ProForma	(11) Repressed	(12) Proposed	(13) Revenue at
No.	Class/Meter Size	Bills	in 1,000 gal.	Year Rate	Revenue	Bills	Cons	to Filing	Rate Prior	Block Cons	Block Cons	RateW/Rprsn	Rpsn Rates
1	Residential												
2	5/8" X 3/4"	10,998		18.92	208,082	10,998		18.92	208,082			21.37	235,027
3	3/4"	0		28.38	0	0		28.38	0			32.06	0
4	1"	24		47.31	1,135	24		47.31	1,135			53.43	1,282
5	1-1/2"	12		94.61	1,135	12		94.61	1,135			106.86	1,282
6	2"	0		151.38	0	.0		151.38	0			170.97	0
7	3"	0		302.77	0	0		302.77	0			341.94	0
8	4"	0		473.07	0	0		473.07	0			534.28	0
9	Gallonage Charge, per	1 000 gall	ons	2.1		- 7	*****			*********	*********	**************	***********
10	0 - 6,000 gal.	r,coo gain	23,751	6.46	153,431	(49)	23,702	6.46	153,115	0	23,702	7.45	176,580
11	6,001 - 12,000 gal.		3.072	9.71	29.829	(4)	3,068	9.71	29.790	(169)	2,899	11.18	32,412
12	Over 12,000 gal.		1,016	12.93	13,137	(4)	1,016	12.93	13,137	(56)	960	14.91	14,315
		11.024		12.93		44.004		12.93				14.91	
13	Total Residential	11,034	27,839		406,750	11,034	27,786		406,395	(225)	27,561		460,898
14	Average Bill				36.86		2.518		36.83				41.77
15													
16	General Service												
17	5/8" X 3/4"	48		18.92	908	48		18.92	908			21.37	1,026
18	3/4"	0		28.38	0	0		28.38				32.06	0
19	1"	0		47.31	0	0		47.31	0			53.43	0
20	1-1/2"	0		94.61	0	0		94.61	0			106.86	0
21	2"	9		151.38	1,362	9		151.38	1,362			170.97	1,539
22	3"	12		302.77	3,633	12		302.77	3,633			341.94	4,103
23	4"	0		473.07	0	0		473.07	0			534.28	0
24	6"	0		946.15	0	0		946.15	0			1,068.57	0
25	8"	0		1,513.83	0	0		1,513.83	0			1,709.71	0
26		· ·	2,514			U	2.644			2544	2.54.4		
	Gallonage			7.25	18,227		2,514	7.25	18,227	2,514	2,514	8.06	20,263
27	Total General Serv	69	2,514		24,130	69	2,514	1	24,130	2,514	2,514		26,931
28	Average Bill				349.71				349.71				390.30
29													
30	Irrigation												
31	5/8" X 3/4"	0		18.92	0	0	NA	18.92	0			21.37	0
32	Gallonage Charge, per	1,000 gall	ons										
33	0 - 6,000 gal		0	6.46	0		0	6.46	0	0	0	7.45	0
34	6,001 - 12,000 gal.		0	9.71	0		0	9.71	0	0	0	11.18	0
35	Over 12,000 gal.		0	12.93	0		0	12.93	0	0	0	14.91	0
36	Block 4		0	0.7	0		0		0	0			
37	Total Irrigation	0	0		0	0	0		- 0	0	0		0
38	Average Bill					- 0	- 0	40 0		- 0	- 0		
39	Average biii								-				
40	Fire Protection												
	Fire Protection			40.00					1/25				92
41	2"	0	NA	12.62	0	0		12.62	0			14.25	0
42	3"	0	NA	25.23	0	0		25.23	0			28.50	0
43	4"	0	NA	39.43	0	0		39.43	0			44.52	0
44	6"	0	NA	78.85	0	0		78.85	0			89.05	0
45	8"	0	NA	126.16	0	0		126.16	0			142.48	0
46	10"	0	NA	181.34	0	0		181 34	0			204.81	0
47	Total Fire Protect	0	NA	m rumanaliti	0	1	NA		0	NA			0
48	Average Bill				14								
49													
50	Subtot Billd Rev	11,103	30,353		430,881	11,103	30,300	-01	430,525	2,289	30,075		487,829
51	Unbilled Revenues	,100	55,555		(48,000)		00,000	<del>-</del> 8	400,025	2,209	30,073		407,029
52									2444				
	Guaranteed Revenues				2,144				2.144				2,144
53	Misc. Service Charge	0.0000			13,021				13,021				13,021
54	Adjustments to Custon			9	(355)	<u> </u>							
55	Tot Billed Rev			- 6	397,690				445,690				502,993
56	Booked Revenue per (			- 3	390,596								
	Adjustments to Booked	d			0								
57	riajastinonts to booket												
57 58	Bkd Rev Adjstd				390,596								

#### Revenue Schedule at Present and Proposed Rates

#### Florida Public Service Commission

Revised Schedule: E-2s

HC Waterworks, Inc. Docket No. 140158-WS

Historical Test Year Ending June 30, 2014

Water[] or Sewer[X]

Page: 1 of 1
Preparer: WT Rendell Explanation: Provide a calculation of revenues at present and proposed rates using the billing analysis. Explain any differences between these revenues and booked revenues. If a rate change occurred during the test year, a revenue calculation must be made for each period.

Line	(1)	(2) Test Yr	(3) TY Usage	(4) Test	(5) Test Year	(6) Adjusted	(7) Adjusted	(8) Rate Prior	(9) Revenue at	(10) Proposed	(11) Revenue at
No.	Class/Meter Size	Bills	in 1,000 gal.	Year Rate	Revenue	Bills	Usage	to Filing	Rate Prior	Rate	Proposed
1	Residential										
2	All meter Sizes	3,549		22.59	80,172	3,549		22.59	80,172	14.56	51,673
3	Gallonage cap (gallons)		6,000				6,000				
4	Capped Usage	-	5,363	7.64	40,973	(6)	5,357	7.64	40,927	4.13	22,124
5	Usage Above Cap	4	196				196				
6											
7	Total Residential	3,549	5,559		121,145	3,549	5,553		121,099		73,798
8	Average Bill				34.14			-	34.12		20.79
9											
10	General Service										
11	5/8" X 3/4"	0		22.59	0	0		22.59	0	14.56	0
12	3/4"	0		33.90	0	0		33.90	0	21.84	0
13	1"	0		56.50	0	0		56.50	0	36.39	0
14	1-1/2"	0		112.98	0	0		112.98	0	72.79	0
15	2"	0		180.78	0	0		180.78	0	116.46	0
16	3"	0		361.54	0	0		361.54	0	232.93	0
17	4"	0		564.91	0	0		564.91	0	363.95	0
18	7	· ·		504.51	Ü	· ·		004.01			
19	Gallonage		0	9.16	0		0	9.16	0	4.96	0
20	Galloriage		· ·	3.10	U		U	3.10	O	4.50	
21											
22	Total General Serv	0	0	• 9	0	0	0	-	0		0
23	Average Bill	0	- 0	e :	- 0	- 0	- 0	-			
24	Average bill										-
25	Flat Rate										
26	Res. Wastewater Only				0	0			0		
		0	-	100	0	0	•	(,-)	U		
27	Subtot Res Flat Rate	0		1990	0	0	-		0		
29	Cmrl. Wastewater Only	U			U	U		-	0	-	
30	T-1-1 W1 O-1	0			0	0	0				
1505	Total Wastewater Only	- 0	0	-	0	U	0	-	0		0
31	Average Bill										(*)
32											
33											
34		0.540	F 550	-	101.115	2			101.000		70 700
35	Subtotal Billed Rev _	3,549	5,559		121,145				121,099		73,798
36	Unbilled Revenues				0				0		0
37	Guaranteed Revenues				0				0		0
38	Misc. Service Charge				0				0		0
39	Adjust to Customer Bills				(46)	<u></u>			404.000		70 700
40	Total Billed Revenue				121,145	=			121,099		73,798
41	Booked Revenue per GL				111,686	-					
42	Adjustments to Booked				0						
43	Booked Revenue Adjusted				111,686	-					
44	Difference & % Difference				9,460	8.5%					