

State of Florida



Public Service Commission

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

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

DATE: February 1, 2016

TO: Carlotta S. Stauffer, Commission Clerk, Office of Commission Clerk

FROM: Clayton K. Lewis, US Engineering Specialist, Division of Engineering *CKL*

RE: **Docket No. 140219-WU** - Application for staff-assisted rate case in Polk County by Alturas Utilities, LLC.

Please file the attached documents received from Alturas Utilities, LLC in response to Staff's Seventh Set of Data Requests in the above- referenced docket file. Please title "Results and Invoice for 2015 Triennial water testing – Alturas Utilities, LLC"

Thank you.

CKL

Clayton Lewis

From: Wiley Pratt <wileypratt@netscape.net>
Sent: Thursday, January 28, 2016 4:13 PM
To: Clayton Lewis
Subject: Alturas Report
Attachments: 521284_Alturas_010816 DW.pdf; ATT00001.txt

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

PUBLIC WATER SYSTEM INFORMATION (to be completed by sampler – please type or print legibly)

System Name: Alturas Utilities PWS I.D. #: 6530057
System Type (check one): Community Nontransient Noncommunity Transient Noncommunity
Address: Packing House Rd.
City: Alturas ZIP Code: 33820
Phone # 863-510-1318 Fax #: _____ E-Mail Address: _____

SAMPLE INFORMATION (to be completed by sampler)

Sample Number: 1 Sample Date: 12/15/15 Sample Time: 11:00 AM
Sample Location (be specific) : Point of Entry Location Code: _____
Disinfectant Residual (Required when reporting results for trihalomethanes and haloacetic acids): 0.6 mg/L Field pH: 7.1
Sample Type (Check Only One) Reason(s) for Sample (Check all that apply)
 Distribution Routine Compliance with 62-550 Replacement (of Invalidated Sample)
 Entry Point (to Distribution) Confirmation of MCL Exceedance* Special (not for compliance with 62-550)
 Plant Tap (not for compliance with 62-550) Composite of Multiple Sites** Clearance (permitting)
 Raw (at well or intake) Other: _____
 Max Residence Time
 Ave Residence Time
 Near First Customer
Sampling Procedure Used or Other Comments: _____

*See 62-550.500(6) for requirements and restrictions.
And 62-550.512(3) for nitrate or nitrite exceedances.

**See 62-550.550(4) for requirements and
attach a results page for each site.

SAMPLER CERTIFICATION

I, Wiley Pratt, _____, Operator, _____, do HEREBY CERTIFY
(Print Name) (Print Title)

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

Signature: _____ Date: 12/15/15

Certified Operator #: C-7831 Phone #: 863-651-0259 Sampler's Fax #: _____

Sampler's E-mail: wileypratt@netscape.net

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

LABORATORY CERTIFICATION INFORMATION (to be completed by lab – please type or print legibly)

Lab Name: FTS Analytical Services Florida DOH Certification #: E84098 Certification Expiration Date: 06/30/16

ATTACH CURRENT DOH ANALYTE SHEET*

Address: 5675 New Tampa Hwy, Ste. 1, Lakeland, FL 33815 Phone #: 863-646-8526

Were any analyses subcontracted? Yes No If yes, please provide DOH certification number(s): E871002, E87688

ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB*

ANALYSIS INFORMATION (to be completed by lab)

Date Sample(s) Received: 12/15/15

PWS ID (From Page 1): 6530057 Sample Number (From Page 1): 1 Lab Assigned Report # or Job ID: 521284

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

<u>Inorganics</u>	<u>Synthetic Organics</u>	<u>Volatile Organics</u>	<u>Disinfection Byproducts</u>	<u>Radionuclides</u>	<u>Secondaries</u>
<input checked="" type="checkbox"/> All Except Asbestos	<input type="checkbox"/> All 30	<input checked="" type="checkbox"/> All 21	<input type="checkbox"/> Trihalomethanes	<input checked="" type="checkbox"/> Single Sample	<input checked="" type="checkbox"/> All 14
<input type="checkbox"/> Partial	<input checked="" type="checkbox"/> All Except Dioxin	<input type="checkbox"/> Partial	<input type="checkbox"/> Haloacetic Acids	<input type="checkbox"/> Qtrly Composite**	<input type="checkbox"/> Partial
<input type="checkbox"/> Nitrate	<input type="checkbox"/> Partial		<input type="checkbox"/> Chlorite		
<input type="checkbox"/> Nitrite	<input type="checkbox"/> Dioxin Only		<input type="checkbox"/> Bromate		
<input type="checkbox"/> Asbestos					

LAB CERTIFICATION

I, Amy Atkins, Project Manager, do HEREBY CERTIFY
(Print Name) (Print Title)

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

Signature:  Date: 01/08/16

* Failure to provide a valid and current Florida DOH lab certification number and a current Analyte Sheet for the attached analysis results will result in rejection of the report, possible enforcement against the public water system for failure to sample, and may result in notification of the DOH Bureau of Laboratory Services.

** Please provide radiological sample dates & locations for each quarter.

**CONFIRMATION & NOTIFICATION IS REQUIRED WITHIN 24 HRS FOR NITRATE OR NITRITE MCL EXCEEDANCES
NON-DETECTS ARE TO BE REPORTED AS THE MDL WITH A "U" QUALIFIER.** (Non-detects reported as "BDL" or with a "<" are not acceptable.)

COMPLIANCE DETERMINATION (to be completed by DEP or DOH -- attach notes as necessary)

Sample Collection & Analysis Satisfactory: Yes No _____ Replacement Sample or Report Requested (circle or highlight group(s) above)

Person Notified: _____ Date Notified: _____ DEP/DOH Reviewing Official: _____

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

INORGANIC CONTAMINANTS
62-550.310(1)

Report Number / Job ID: 521284

PWS ID (From Page 1): 6530057

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification #
1040	Nitrate (as N)	10	mg/L	0.145	I	E300	0.00400	12/16/15	14:49	E871002
1041	Nitrite (as N)	1	mg/L	0.187	I	E300	0.00800	12/16/15	14:49	E871002
1005	Arsenic	0.010	mg/L	0.00152	I	E200.8	0.000396	12/29/15	01:40	E871002
1010	Barium	2	mg/L	0.00859		E200.8	0.000472	12/29/15	01:40	E871002
1015	Cadmium	0.005	mg/L	0.000115	U	E200.8	0.000115	12/29/15	01:40	E871002
1020	Chromium	0.1	mg/L	0.000880	VI	E200.8	0.000283	12/29/15	01:40	E871002
1024	Cyanide	0.2	mg/L	0.00198	U	E335.4	0.00198	12/21/15	16:52	E871002
1025	Fluoride	4.0	mg/L	0.0997	I	E300	0.0360	12/16/15	14:49	E871002
1030	Lead	0.015	mg/L	0.000510	VI	E200.8	0.000152	12/29/15	01:40	E871002
1035	Mercury	0.002	mg/L	0.0000263	U	E245.1	0.0000263	12/18/15	13:15	E871002
1036	Nickel	0.1	mg/L	0.000600	I	E200.8	0.000139	12/29/15	01:40	E871002
1045	Selenium	0.05	mg/L	0.000368	U	E200.8	0.000368	12/29/15	01:40	E871002
1052	Sodium	160	mg/L	12.5		E200.7	0.0667	12/17/15	15:42	E871002
1074	Antimony	0.006	mg/L	0.000380	U	E200.8	0.000380	12/29/15	01:40	E871002
1075	Beryllium	0.004	mg/L	0.000166	U	E200.8	0.000166	12/29/15	01:40	E871002
1085	Thallium	0.002	mg/L	0.000250	VI	E200.8	0.000187	12/29/15	01:40	E871002
1094	Asbestos	7 MFL	MFL							E

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

SECONDARY CONTAMINANTS
62-550.320

Report Number / Job ID: 521284

PWS ID (From Page 1): 6530057

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier *	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification #
1002	Aluminum	0.2	mg/L	0.00255	VI	E200.8	0.00191	12/29/15	01:40	E871002
1017	Chloride	250	mg/L	21.3		E300	0.140	12/16/15	20:04	E871002
1022	Copper	1	mg/L	0.00424		E200.8	0.000129	12/29/15	01:40	E871002
1025	Fluoride	2.0	mg/L	0.0997	I	E300	0.0360	12/16/15	14:49	E871002
1028	Iron	0.3	mg/L	0.251		E200.7	0.0283	12/17/15	15:42	E871002
1032	Manganese	0.05	mg/L	0.0189		E200.8	0.000208	12/29/15	01:40	E871002
1050	Silver	0.1	mg/L	0.000159	U	E200.8	0.000159	12/29/15	01:40	E871002
1055	Sulfate	250	mg/L	1.47		E300	0.0460	12/16/15	14:49	E871002
1095	Zinc	5	mg/L	0.0184	I	E200.8	0.000388	12/29/15	01:40	E871002
1905	Color	15	CU	5.0	U	SM2120B	5.0	12/15/15	17:00	E84098
1920	Odor	3	TON	2		SM2150B		12/15/15	17:05	E84098
1925	pH (field pH from page 1)	6.5 - 8.5		7.54		SM4500-H+B		12/15/15	17:30	E84098
1930	Total Dissolved Solids	500	mg/L	194		SM2540C	1.78	12/19/15	10:50	E84098
2905	Foaming Agents	0.5	mg/L	0.200	U	SM5540C	0.200	12/16/15	15:30	E87688

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

RADIONUCLIDES
62-550.310(6)

Report Number / Job ID: 521284

PWS ID (From Page 1): 6530057

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier *	Analytical Method	Lab MDL	RDL	Analysis Error	Analysis Date	Analysis Time	DOH Lab Certification #
4000	Gross Alpha (Excl Uranium)	15	pCi/L	3.00	U	E900.0	3.00	3	+/- 1.91	12/23/15	16:31	E87688
4002	Gross Alpha (Incl Uranium)	***	pCi/L					3				E
4006	Combined Uranium**** (U-234, U-235, & U-238)	20	pCi/L					.67				E
		30	µg/L					1				E
4020	Radium-226	5	pCi/L	1.08		E903.0	1.00	1	+/- 0.23	01/06/16	09:38	E87688
4030	Radium-228			1.00	U	E904.0	1.00	1	+/- 0.44	01/05/16	13:25	E87688

** If the result exceeds 5 pCi/L, a measurement for radium-226 is required. Uranium is reported separately under Contam ID 4006.

*** If the results exceed 5 pCi/L, a measurement for radium-226 is required. If the results exceed 15 pCi/L, a measurement for Combined Uranium must be reported separately. The DEP/DOH will subtract the U value from the Gross Alpha (ID 4002) to determine compliance with MCL for Gross Alpha (Excl. U) of 15pCi/L. If the result for ID 4002 Gross Alpha (Including Uranium) does not exceed 15pCi/L, Combined Uranium need not be measured nor reported.

**** If using Uranium testing methods ASTM D5174 or EPA 200.8 only, then Analysis Error need not be reported.

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

VOLATILE ORGANICS
62-550.310(4)(a)

Report Number / Job ID: 521284

PWS ID (From Page 1): 6530057

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier *	Analytical Method	Lab MDL	RDL	Analysis Date	Analysis Time	DOH Lab Certification #
2378	1,2,4-Trichlorobenzene	70	µg/L	0.0820	U	E524.2	0.0820	0.5	12/17/15	15:45	E871002
2380	cis-1,2-Dichloroethylene	70	µg/L	0.200	U	E524.2	0.200	0.5	12/17/15	15:45	E871002
2955	Xylenes (total)	10,000	µg/L	0.107	U	E524.2	0.107	0.5	12/17/15	15:45	E871002
2964	Dichloromethane	5	µg/L	0.386	U	E524.2	0.386	0.5	12/17/15	15:45	E871002
2968	o-Dichlorobenzene	600	µg/L	0.0832	U	E524.2	0.0832	0.5	12/17/15	15:45	E871002
2969	para-Dichlorobenzene	75	µg/L	0.0800	I	E524.2	0.0696	0.5	12/17/15	15:45	E871002
2976	Vinyl Chloride	1	µg/L	0.128	U	E524.2	0.128	0.5	12/17/15	15:45	E871002
2977	1,1-Dichloroethylene	7	µg/L	0.200	U	E524.2	0.200	0.5	12/17/15	15:45	E871002
2979	trans-1,2-Dichloroethylene	100	µg/L	0.0812	U	E524.2	0.0812	0.5	12/17/15	15:45	E871002
2980	1,2-Dichloroethane	3	µg/L	0.265	U	E524.2	0.265	0.5	12/17/15	15:45	E871002
2981	1,1,1-Trichloroethane	200	µg/L	0.0992	U	E524.2	0.0992	0.5	12/17/15	15:45	E871002
2982	Carbon tetrachloride	3	µg/L	0.0994	U	E524.2	0.0994	0.5	12/17/15	15:45	E871002
2983	1,2-Dichloropropane	5	µg/L	0.0859	U	E524.2	0.0859	0.5	12/17/15	15:45	E871002
2984	Trichloroethylene	3	µg/L	0.0540	U	E524.2	0.0540	0.5	12/17/15	15:45	E871002
2985	1,1,2-Trichloroethane	5	µg/L	0.0806	U	E524.2	0.0806	0.5	12/17/15	15:45	E871002
2987	Tetrachloroethylene	3	µg/L	0.200	U	E524.2	0.200	0.5	12/17/15	15:45	E871002
2989	Monochlorobenzene	100	µg/L	0.0745	U	E524.2	0.0745	0.5	12/17/15	15:45	E871002
2990	Benzene	1	µg/L	0.0540	U	E524.2	0.0540	0.5	12/17/15	15:45	E871002
2991	Toluene	1,000	µg/L	0.0736	U	E524.2	0.0736	0.5	12/17/15	15:45	E871002
2992	Ethylbenzene	700	µg/L	0.0723	U	E524.2	0.0723	0.5	12/17/15	15:45	E871002
2996	Styrene	100	µg/L	0.0806	U	E524.2	0.0806	0.5	12/17/15	15:45	E871002

NOTE: Results indicating non-detection with a reported lab MDL > .5 µg/L will not be accepted for compliance.

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

SYNTHETIC ORGANICS
62-550.310(4)(b)

Report Number / Job ID: 521284 PWS ID (from Page 1): 6530057

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier *	Analytical Method	Lab MDL	RDL	Extraction Date	Analysis Date	Analysis Time	DOH Lab Certification #
2005	Endrin	2	µg/L	0.106	U	E508	0.106	0.01		01/06/16	06:28	E87688
2010	Lindane	0.2	µg/L	0.106	U	E508	0.106	0.02		01/06/16	06:28	E87688
2015	Methoxychlor	40	µg/L	0.106	U	E508	0.106	0.1		01/06/16	06:28	E87688
2020	Toxaphene	3	µg/L	0.529	U	E508	0.529	1		01/06/16	06:28	E87688
2031	Dalapon	200	µg/L	2.64	U	E515.1	2.64	1		12/30/15	22:42	E87688
2032	Diquat	20	µg/L	2.00	U	E549.2	2.00	0.4		12/21/15	16:23	E87688
2033	Endothall	100	µg/L	200	U	E548.1	200	9		01/06/16	17:29	E87688
2034	Glyphosate	700	µg/L	25.00	U	E547	25.00	6		12/16/15	18:14	E87688
2035	Di(2-ethylhexyl)adipate	400	µg/L	4.32	U	E525.2	4.32	0.6		01/06/16	18:54	E87688
2036	Oxamyl (Vydate)	200	µg/L	1.00	U	E531.2	1.00	2		12/21/15	14:33	E87688
2037	Simazine	4	µg/L	0.108	U	E525.2	0.108	0.07		01/06/16	18:54	E87688
2039	Di(2-ethylhexyl)phthalate	6	µg/L	2.16	U	E525.2	2.16	0.6		01/06/16	18:54	E87688
2040	Picloram	500	µg/L	0.120	U	E515.1	0.120	0.1		12/30/15	22:42	E87688
2041	Dinoseb	7	µg/L	0.600	U	E515.1	0.600	0.2		12/30/15	22:42	E87688
2042	Hexachlorocyclopentadinene	50	µg/L	0.108	U	E525.2	0.108	0.1		01/06/16	18:54	E87688
2046	Carbofuran	40	µg/L	1.00	U	E531.2	1.00	0.9		12/21/15	14:33	E87688
2050	Atrazine	3	µg/L	0.108	U	E525.2	0.108	0.1		01/06/16	18:54	E87688
2051	Alachlor	2	µg/L	0.108	U	E525.2	0.108	0.2		01/06/16	18:54	E87688
2063	2,3,7,8-TCDD (Dioxin)	0.03	ng/L					0.005				E
2065	Heptachlor	0.4	µg/L	0.106	U	E508	0.106	0.04		01/06/16	06:28	E87688
2067	Heptachlor Epoxide	0.2	µg/L	0.106	U	E508	0.106	0.02		01/06/16	06:28	E87688
2105	2,4-D	70	µg/L	0.156	U	E515.1	0.156	0.1		12/30/15	22:42	E87688
2110	2,4,5-TP (Silvex)	50	µg/L	0.528	U	E515.1	0.528	0.2		12/30/15	22:42	E87688
2274	Hexachlorobenzene	1	µg/L	0.108	U	E525.2	0.108	0.1		01/06/16	18:54	E87688
2306	Benzo(a)pyrene	0.2	µg/L	0.108	U	E525.2	0.108	0.02		01/06/16	18:54	E87688
2326	Pentachlorophenol	1	µg/L	0.106	U	E515.1	0.106	0.04		12/30/15	22:42	E87688
2383	Polychlorinated biphenyls (PCBs)	0.5	µg/L		U	E508		0.1				E87688
2931	Dibromochloropropane	0.2	µg/L	0.000565	U	E504.1	0.000565	0.02		12/17/15	18:38	E871002
2946	Ethylene Dibromide (EDB)	0.02	µg/L	0.000342	U	E504.1	0.000342	0.01		12/17/15	18:38	E871002
2959	Chlordane	2	µg/L	0.265	U	E508	0.265	0.2		01/06/15	06:28	E87688

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

Clayton Lewis

From: Wiley Pratt <wileypratt@netscape.net>
Sent: Thursday, January 28, 2016 4:20 PM
To: Clayton Lewis
Subject: Re: 2015 Triennial Testing for Alturas & Sunrise

Mr. Lewis,

I will send a copy of the invoice tonight or Friday morning.

Have you asked Mr. Szabo for this information.

Thanks
Wiley Pratt

Sent from my iPhone

On Jan 28, 2016, at 3:49 PM, Clayton Lewis <CLewis@PSC.STATE.FL.US> wrote:

Mr. Pratt,

Was the triennial testing for primary and secondary water standards completed and filed the PCHD or DEP? If so, please provide staff with those results and corresponding invoices.

Clayton K. Lewis
Division of Engineering
850 413-6578

Clayton Lewis

From: Wiley Pratt <wileypratt@netscape.net>
Sent: Friday, January 29, 2016 4:58 AM
To: Clayton Lewis
Subject: Re: 2015 Triennial Testing for Alturas & Sunrise
Attachments: Invoice Alturus Tri-Annual Samples 2015.xls; Invoice Sunrise Tri-Annual Samples 2015.xls

Please find attached the invoices you requested for Sunrise and Alturas.

Wiley Pratt

-----Original Message-----

From: Clayton Lewis <CLewis@PSC.STATE.FL.US>
To: 'Wiley Pratt' <wileypratt@netscape.net>
Sent: Thu, Jan 28, 2016 4:24 pm
Subject: RE: 2015 Triennial Testing for Alturas & Sunrise

It appears that we did not receive all of the invoices from Mr. Szabo. Please indicate which invoices correspond with each items sampled and tested.

Thank you

From: Wiley Pratt [<mailto:wileypratt@netscape.net>]
Sent: Thursday, January 28, 2016 4:20 PM
To: Clayton Lewis
Subject: Re: 2015 Triennial Testing for Alturas & Sunrise

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Clayton K. Lewis
Division of Engineering
850 413-6578

Remit To:

WILEY PRATT
513 TERRANOVA CIRCLE
WINTER HAVEN, FLORIDA 33884
863-698-6207 fax

Invoice No. 31A

INVOICE

Customer

Name Alturas Utilities
 Owner Leslie Szabo
 Phone (954) 455-0026

Date 9/15/2015
 Order No. _____
 Rep _____
 FOB _____

Date	Description	Hours	Total
	<u>SAMPLES 2015</u>		
	TRI-ANNUAL SAMPLING		\$2,095.00
			Subtotal
			\$2,095.00

Payment Details

- Cash
- Check
- Credit Card

Subtotal \$2,095.00

TOTAL \$2,095.00

Office Use Only

