

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 2295 Victoria Ave, Suite 364, FL Myers, FL 33901-3875

PERMITTEE NAME: K W Resort Utility, Corp.
MAILING ADDRESS: 6630 Front Street
Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
LOCATION: 6630 Front St., Stock Island

LIMIT: Final
CLASS SIZE: N/A
MONITORING GROUP NUMBER: U-001
MONITORING GROUP: two Class V injection wells
DESCRIPTION:

REPORT FREQUENCY: Monthly
PROGRAM: Domestic

Key West, FL 33045


RE-SUBMITTED DMR:
NO DISCHARGE FROM SITE:
MONITORING PERIOD

From: January 1, 2013 To: January 31, 2013

COUNTY: Monroe
OFFICE: South District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - WELLS	Sample Measurement	.230						
PARM Code 50050 Y Mon. Site No. FLW-002	Permit Requirement	0.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - WELLS	Sample Measurement	.304						
PARM Code 50050 I Mon. Site No. FLW-002	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.03				
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement		2.0	2.0	1.3			
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement		60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			3.79				
PARM Code 00530 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement		3.33	3.33	2.61			
PARM Code 00530 A Mon. Site No. EFA-001	Permit Requirement		60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	02-18-2013

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

The 9-25-12 TSS sample had an attachment from our contracted U.S. Water Lab that stated "The TSS sample left a cream colored residual on the TSS pad, usually associated with grease." On 9-21-12 we had B.R.H.A.N. Inc clean several privately owned lift stations.

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FEB 20 2013

D.E.P. Marathon

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP NUMBER: U-001

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: January 1, 2013 To: January 31, 2013

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				<1					
PARM Code 74055 Y Mon. Site No. EFA-001	Permit Requirement				200 (An.Avg.)		#/100mL		Every 2 weeks	Grab
Coliform, Fecal	Sample Measurement				1	<1				
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement				200 (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Every 2 weeks	Grab
pH	Sample Measurement			6.5		7.1				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			0.5						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Total	Sample Measurement				28.9					
PARM Code 00600 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Nitrogen, Total	Sample Measurement			38.8	38.8	30.4				
PARM Code 00600 A Mon. Site No. EFA-001	Permit Requirement			Report (Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement				4.51					
PARM Code 00665 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement			6.03	6.03	5.43				
PARM Code 00665 A Mon. Site No. EFA-001	Permit Requirement			Report (Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC

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FEB 20 2013

D.E.P. Marathon

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Utility Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: RMP-Q
 MONITORING GROUP DESCRIPTION: Biosolids Quantity

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045-

RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD

From: January 1, 2013 To: January 31, 2013

COUNTY: Monroe
 South District

Parameter	Sample Measurement	Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Permit Requirement	5.9	Report (Mo. Total)	dry tons				0	Monthly	Calculated	

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NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		305-295-3301	02-18-2013

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

RECEIVED
 FEB 20 2013
 D.E.P. Marathon

ISSUANCE/REISSUANCE DATE:

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA014951-011-DW2P

Facility: Key West Resort Utility WWTP

Monitoring Period From: January 1, 2013 To: January 31, 2013

	Flow MGD Total	Flow MGD Wells	Flow MGD Pond	Flow MGD MCDC	Chlorine, Total Residual (For Disinfection) mg/L	pH s.u.	Turbidity NTU Reuse	BOD, Carbonaceous 5 day, 20C (Influent) mg/L	Solids, Total Suspended (Influent) mg/L	BOD, Carbonaceous 5 day, 20C mg/L	Solids, Total Suspended mg/L
Code	50050	50050	50050	50050	50060	00400	00070	80082	00530	80082	00530
Mon. Site	FLW-001	FLW-002	FLW-003	FLW-004	EFA-001	EFA-001	EFB-001	INF-001	INF-001	EFA-001	EFA-001
1	.355	.192	.138	.025	3.8	7.1	1.1				
2	.358	.358			1.0	7.1	1.2	286	264.5	<2	2.17
3	.403		.368	.035	3.2	7.0	0.8				
4	.398		.363	.035	2.8	7.0	1.7				
5	.384	.240	.118	.026	5.0	7.0	1.1				
6	.385	.385									
7	.386	.386			3.5	7.0	0.7				
8	.365		.333	.032	4.4	7.1	1.9				
9	.376		.339	.037	2.7	7.0	1.9				
10	.397		.374	.023	2.7	7.1	1.7				
11	.427		.399	.028	2.8	7.1	1.9				
12	.342	.337		.005	2.6	7.0	1.9				
13	.376	.376			2.5	7.0	1.8				
14	.365	.365			1.8	6.9	1.1				
15	.346	.346			1.7	7.0	OPS	289.5	240	<2	2.33
16	.428	.428			0.7	6.8	OPS				
17	.489	.489			0.5	6.9	OPS				
18	.359	.359			0.5	6.9	OPS				
19	.383	.383			0.5	7.0	OPS				
20	.377	.377					OPS				
21	.377	.377			0.6	6.9	OPS				
22	.392	.392			1.3	7.0	OPS				
23	.406	.406			2.5	7.0	OPS				
24	.341	.341			1.6	7.0	OPS				
25	.378	.378			0.6	7.0	OPS				
26	.414	.414			0.5	7.0	OPS				
27	.392	.392					OPS				
28	.393	.393			0.5	6.8	OPS				
29	.434	.434			1.0	6.6	OPS	316	197	2.0	3.33
30	.421	.421			1.0	6.5	OPS				
31	.447	.447			1.2	6.5	OPS				
Total	12.094	9.419	2.432	.246	53.5	194.3	18.8	891.5	701.5	4	7.83
Mo. Avg.	.390	.304	.078	.008	1.91	6.9	1.4	297.2	233.8	1.3	2.61

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FEB 20 2013

U.S.P. [Signature]

STAFFING:
 L. Shift Operator Class: C Certificate No: 20501 Name: Greg Wright
 Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW2P**

Facility: **Key West Resort Utility WWTP**

Monitoring Period From: January 1, 2013 To: January 31, 2013

Code	Solids, Total Suspended mg/L Reuse	Coliform, Fecal #/100mL	Nitrogen, Total mg/L	Phosphorus, Total (as P) mg/L					
00530		74055	00600	00665					
Mon. Site	EFB-001	EFA-001	EFA-001	EFA-001					
1									
2	<0.5	<1	38.8	5.69					
3	1.8	<1							
4									
5									
6									
7	<0.5	<1							
8	<0.5	<1							
9	<0.5	<1							
10	2.0	<1							
11									
12									
13									
14									
15			26.7	6.03					
16		<1							
17									
18									
19									
20									
21									
22									
23									
24									
25									
26									
27									
28									
29			25.6	4.57					
30		<1							
31									
Total			91.1	16.29					
Mo. Avg.			30.4	5.43					

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FEB 20 2013

D.E.P. Marathon

PERSONNEL STAFFING:

Night Shift Operator	Class: <u>C</u>	Certificate No: <u>20501</u>	Name: <u>Greg Wright</u>
Day Shift Operator	Class: _____	Certificate No: _____	Name: _____
Night Shift Operator	Class: _____	Certificate No: _____	Name: _____
Lead Operator	Class: <u>B</u>	Certificate No: <u>5355</u>	Name: <u>Mark Burkemper</u>

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Resort Utility, Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESCRIPTION: reuse storage golf course pond and irrigation system, with Influent

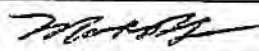
REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

COUNTY: Monroe
 OFFICE: South District

RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: DECEMBER 1, 2014 DECEMBER 31, 2014

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - POND PARM Code 50050 Y Mon. Site No. FLW-003	Sample Measurement		.190							
	Permit Requirement		.499 (An.Avg.)	MGD					5 Days/Week	Flow Totalizer
Flow - POND PARM Code 50050 I Mon. Site No. FLW-003	Sample Measurement		.147							
	Permit Requirement		Report (Mo.Avg.)	MGD					5 Days/Week	Flow Totalizer
Flow - MCDC PARM Code 50050 Q Mon. Site No. FLW-004	Sample Measurement		.011							
	Permit Requirement		(An.Avg.)	MGD					5 Days/Week	Flow Totalizer
Solids, Total Suspended PARM Code 00530 B Mon. Site No. EFB-001	Sample Measurement				1.8					
	Permit Requirement				5.0 (Max.)	mg/L			4 Days/Week	Grab
Coliform, Fecal PARM Code 74055 A Mon. Site No. EFA-001	Sample Measurement				<1					
	Permit Requirement				25 (Max.)	#/100mL			4 Days/Week	Grab
Coliform, Fecal, % less than detection PARM Code 51005 A Mon. Site No. EFA-001	Sample Measurement			100%						
	Permit Requirement			75 (Mo.Total)		percent			4 Days/Week	Calculated

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NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkenper / Lead Operator		(305)295-3301	01-26-2015

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



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 JAN 29 2015
 D.E.P. Marathon

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP R-001

PERMIT NUMBER: FLA014951-011-DW2P

NUMBER:

MONITORING PERIOD From: DECEMBER 1, 2014

DECEMBER 30 2014

To:

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	
pH	Sample Measurement				7.0		7.2				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				1.5						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement				1.0 (Min.)			mg/L		Continuous	Meter
Turbidity	Sample Measurement						2.0				
PARM Code 00070 B Mon. Site No. EFB-001	Permit Requirement						Report (Max.)	NTU		Continuous	Meter
Flow - TOTAL	Sample Measurement	.461									
PARM Code 50050 R Mon. Site No. FLW-001	Permit Requirement	0.499 (An.Avg.)		MGD						5 Days/Week	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement					1.20					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement					20.0 (An.Avg.)		mg/l.		Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				1.0	1.0	1.0				
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement				60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Flow - TOTAL	Sample Measurement	.504	.510								
PARM Code 50050 S Mon. Site No. FLW-001	Permit Requirement	Report (Mo.Avg.)	Report (Ql.Avg.)	MGD						5 Days/Week	Calculated
Percent Capacity, (TMADE/Permitted Capacity) x 100	Sample Measurement						102%	%			
PARM Code 00180 I Mon. Site No. FLW-001	Permit Requirement						Report (Mo.Avg.)	percent		Monthly	Calculated
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement						203				
PARM Code 80082 G Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC
Solids, Total Suspended (Influent)	Sample Measurement						241.5				
PARM Code 00530 Q Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC

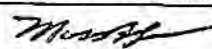
DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 2295 Victoria Ave, Suite 364, Ft. Myers, FL 33901-3875

PERMITTEE NAME: K W Resort Utility, Corp.
MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040
PERMIT NUMBER: FLA014951-011-DW2P
LIMIT: Final
CLASS SIZE: N/A
MONITORING GROUP NUMBER: U-001
MONITORING GROUP DESCRIPTION: two Class V injection wells
REPORT FREQUENCY PROGRAM: Monthly Domestic
FACILITY LOCATION: Key West Resort Utility WWTP
 6630 Front St., Stock Island
 Key West, FL 33045
COUNTY OFFICE: Monroe
 South District
NO DISCHARGE FROM SITE:
MONITORING PERIOD From: DECEMBER 1, 2014 DECEMBER 31 2014

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type	
Flow - WELLS	Sample Measurement	.261							
PARM Code 50050 Y Mon. Site No. FLW-002	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer	
Flow - WELLS	Sample Measurement	.348							
PARM Code 50050 I Mon. Site No. FLW-002	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer	
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.20					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC	
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.0	1.0	1.0			
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			1.15					
PARM Code 00530 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)			mg/L	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			0.25	0.25	0.25			
PARM Code 00530 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC

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Mark Burkemper / Lead Operator		(305)295-3301	01-26-2015

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP NUMBER: U-001

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: DECEMBER 1, 2014 To: DECEMBER 31 2014

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal PARM Code 74055 Y Mon. Site No. EFA-001	Sample Measurement				0.5						
	Permit Requirement				200 (An.Avg.)			#/100mL		Every 2 weeks	Grab
Coliform, Fecal PARM Code 74055 A Mon. Site No. EFA-001	Sample Measurement				0.5	0.5					
	Permit Requirement				200 (Mo.Geo.Mn.)	800 (Max.)		#/100mL		Every 2 weeks	Grab
pH PARM Code 00400 A Mon. Site No. EFA-001	Sample Measurement				7.0						
	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection) PARM Code 50060 A Mon. Site No. EFA-001	Sample Measurement				0.6						
	Permit Requirement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Total PARM Code 00600 Y Mon. Site No. EFA-001	Sample Measurement				20.1						
	Permit Requirement				Report (An.Avg.)			mg/L		Every 2 weeks	8-hr FPC
Nitrogen, Total PARM Code 00600 A Mon. Site No. EFA-001	Sample Measurement				27.6	27.6	21.4				
	Permit Requirement				Report (Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P) PARM Code 00665 Y Mon. Site No. EFA-001	Sample Measurement				6.19						
	Permit Requirement				Report (An.Avg.)			mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P) PARM Code 00665 A Mon. Site No. EFA-001	Sample Measurement				4.79	4.79	4.51				
	Permit Requirement				Report(Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

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 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045-

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: RMP-Q
 MONITORING GROUP DESCRIPTION: Biosolids Quantity

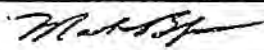
REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

COUNTY: Monroe
 South District

RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: DECEMBER 1, 2014 To: DECEMBER 31 2014

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement		6.7								
PARM Code B0008 Mon; Site No. RMP-1	Permit Requirement		Report (Mo.Total)	dry tons				0	Monthly	Calculated	

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		305-295-3301	01-26-2015

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

ISSUANCE/REISSUANCE DATE:

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW2P**

Facility: **Key West Resort Utility WWTP**

Monitoring Period From: **DECEMBER 1, 2014** To **DECEMBER 31 2014**

	Flow MGD Total	Flow MGD Wells	Flow MGD Pond	Flow MGD MCDC	Chlorine, Total Residual (For	pH s.u.	Turbidity NTU Reuse	BOD, Carbonaceous 5 day, 20C (Influent) mg/L	Solids, Total Suspended (Influent) mg/L	BOD, Carbonaceous 5 day, 20C mg/L	Solids, Total Suspended mg/L
Code	50050	50050	50050	50050	50060	00400	00070	80082	00530	80082	00530
Mon. Site	FLW-001	FLW-002	FLW-003	FLW-004	EFA-001	EFA-001	EFB-001	INF-001	INF-001	EFA-001	EFA-001
1	.466	.466			2.0	7.0	0.5				
2	.520	.303	.206	.011	1.5/1.0	7.0	0.8				
3	.565	.330	.220	.015	1.5/0.7	7.0	0.6				
4	.507	.317	.178	.012	1.5/0.6	7.1	1.0				
5	.523		.489	.034	1.6	7.2	0.7				
6	.505	.505			2.3	7.2	0.8				
7	.515	.515									
8	.515	.515			2.4	7.0	0.7				
9	.479	.479			0.7	7.2	0.6				
10	.518	.302	.203	.013	1.5/0.7	7.2	0.7				
11	.454	.265	.182	.007	1.5/0.6	7.1	0.5				
12	.496	.290	.197	.009	1.5/0.7	7.2	0.5				
13	.500		.468	.032	2.1	7.0	0.4				
14	.475	.475									
15	.475	.475			2.0	7.0	0.5				
16	.488		.457	.031	1.7	7.0	0.5	203	152	<2.0	<0.5
17	.498		.476	.022	1.6	7.2	1.5				
18	.454		.429	.025	1.8	7.2	0.9				
19	.422	.422			2.3	7.1	1.0				
20	.456	.456			1.9	7.1	1.0				
21	.448	.448			2.0	7.1	0.7				
22	.472	.472			1.7	7.0	0.8				
23	.505		.473	.032	2.0	7.0	2.0				
24	.488	.285	.192	.011	1.8	7.1	1.0				
25	.593	.593			0.8	7.0	0.8				
26	.690	.690			1.0	7.0	0.7				
27	.591	.591			1.1	7.0	0.5				
28	.508	.508									
29	.508	.508			1.1	7.1	0.3				
30	.486	.284	.192	.010	1.5/1.0	7.0	0.9	200	241.5	<2.0	<0.5
31	.509	.297	.201	.011	1.5/0.9	7.1	1.0				
Total	15.629	10.791	4.563	.275	40.1	198.2	21.9	403	393.5	2.0	0.50
Mo. Avg.	.504	.348	.147	.009	1.43	7.08	0.78	201.5	196.8	1.0	0.25

PLANT STAFFING:

Day Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 ay Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW2P** Facility: **Key West Resort Utility WWTP**
 Monitoring Period From: **DECEMBER 1, 2014** To **DECEMBER 31 2014**

	Solids, Total Suspended mg/L Reuse	Coliform, Fecal #/100mL	Nitrogen, Total mg/L	Phosphorus, Total (as P) mg/L					
Code	00530	74055	00600	00665					
Mon. Site	EFB-001	EFA-001	EFA-001	EFA-001					
1	<0.5	<1							
2	<0.5	<1							
3	<0.5	<1							
4	<0.5	<1							
5									
6									
7									
8	<0.5	<1							
9	<0.5	<1							
10	<0.5	<1							
11	<0.5	<1							
12									
13									
14									
15	1.2	<1							
16	<0.5	<1	27.6	4.22					
17	<0.5	<1							
18	1.8	<1							
19									
20									
21									
22	1.4	<1							
23	<0.5	<1							
24	<0.5	<1							
25									
26	<0.5	<1							
27									
28									
29	1.0	<1							
30	<0.5	<1	15.2	4.79					
31	<0.5	<1							
Total	9.15	<1	42.8	9.01					
Mo.	0.48	<1	21.4	4.51					

STAFFING:
 District Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

REISSUANCE/REISSUANCE DATE: February 20, 2012

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Resort Utility, Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESCRIPTION: reuse storage golf course pond and irrigation system, with Influent
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:

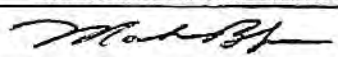
REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

COUNTY: Monroe
 OFFICE: South District

MONITORING PERIOD From: November 1 2014 November 30 2014

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - POND	Sample Measurement	.186						
PARM Code 50050 Y Mon. Site No. FLW-003	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - POND	Sample Measurement	.173						
PARM Code 50050 I Mon. Site No. FLW-003	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - MCDC	Sample Measurement	.011						
PARM Code 50050 Q Mon. Site No. FLW-004	Permit Requirement	0.06 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement			2.60				
PARM Code 00530 B Mon. Site No. EFB-001	Permit Requirement			5.0 (Max.)	mg/L		4 Days/Week	Grab
Coliform, Fecal	Sample Measurement			<1				
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement			25 (Max.)	#/100mL		4 Days/Week	Grab
Coliform, Fecal, % less than detection	Sample Measurement			100%				
PARM Code 51005 A Mon. Site No. EFA-001	Permit Requirement			75 (Mo.Total)	percent		4 Days/Week	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	12-30-2014

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP NUMBER: R-001

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: November 1, 2014 To: November 30 2014

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	
pH	Sample Measurement				7.0		7.2				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grb
Chlorine, Total Residual (For Disinfection)	Sample Measurement				1.5						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement				1.0 (Min.)			mg/L		Continuous	Meter
Turbidity	Sample Measurement						4.0				
PARM Code 00070 B Mon. Site No. EFB-001	Permit Requirement						Report (Max.)	NTU		Continuous	Meter
Flow - TOTAL	Sample Measurement		.450								
PARM Code 50050 R Mon. Site No. FLW-001	Permit Requirement		0.499 (An.Avg.)	MGD						5 Days/Week	calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement					1.20					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement					20.0 (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				1.0	1.0	1.0				
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement				60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Flow - TOTAL	Sample Measurement	.490	.509								
PARM Code 50050 S Mon. Site No. FLW-001	Permit Requirement	Report (Mo.Avg.)	Report (Qt.Avg.)	MGD						5 Days/Week	Calculated
Percent Capacity, (TMADP/Permitted Capacity) x 100	Sample Measurement						102%	%			
PARM Code 00180 I Mon. Site No. FLW-001	Permit Requirement						Report (Mo.Avg.)	percent		Monthly	Calculated
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement						183.5				
PARM Code 80082 G Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC
Solids, Total Suspended (Influent)	Sample Measurement						166.0				
PARM Code 00530 Q Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 2295 Victoria Ave, Suite 364, Ft. Myers, FL 33901-3875

PERMITTEE NAME: K W Resort Utility, Corp.
MAILING ADDRESS: 6630 Front Street
Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
LOCATION: 6630 Front St., Stock Island
Key West, FL 33045

LIMIT: Final
CLASS SIZE: N/A
MONITORING GROUP NUMBER: U-001
MONITORING GROUP: two Class V injection wells
DESCRIPTION:


REPORT FREQUENCY: Monthly
PROGRAM: Domestic

COUNTY: Monroe
OFFICE: South District

RE-SUBMITTED DMR:
NO DISCHARGE FROM SITE:
MONITORING PERIOD From: November 1, 2014 To: November 30, 2014

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - WELLS	Sample Measurement	.253						
PARM Code 50050 Y Mon. Site No. FLW-002	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - WELLS	Sample Measurement	.306						
PARM Code 50050 I Mon. Site No. FLW-002	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.20				
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.0	1.0	1.0		
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			1.17				
PARM Code 00530 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			0.25	0.25	0.25		
PARM Code 00530 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	Every 2 weeks	8-hr FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	12-30-2014

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

RECEIVED
JAN 07 2015
D.E.P. Marathon

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP U-001
NUMBER:

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: November 1, 2014 To: November 30 2014

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				0.5					
PARM Code 74055 Y Mon. Site No. EFA-001	Permit Requirement				200 (An.Avg.)		#/100mL		Every 2 weeks	Grab
Coliform, Fecal	Sample Measurement				0.5	0.5				
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement				200 (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Every 2 weeks	Grab
pH	Sample Measurement			6.8		7.1				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			0.5						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Total	Sample Measurement				19.72					
PARM Code 00600 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Nitrogen, Total	Sample Measurement			28.20	28.20	23.4				
PARM Code 00600 A Mon. Site No. EFA-001	Permit Requirement			Report (Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement				6.75					
PARM Code 00665 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement			5.95	5.95	5.62				
PARM Code 00665 A Mon. Site No. EFA-001	Permit Requirement			Report(Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Utility Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045-

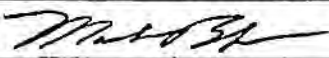
LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: RMP-Q
 MONITORING GROUP DESCRIPTION: Biosolids Quantity
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: November 1, 2014 To: November 30 2014

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

COUNTY: Monroe
 South District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	5.4						
PARM Code B0008 + Mon. Site No. RMP-1	Permit Requirement	Report (Mo.Total)	dry tons			0	Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		305-295-3301	12-22-2014

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

ISSUANCE/REISSUANCE DATE:

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA014951-011-DW2P

Facility: Key West Resort Utility WWTP

Monitoring Period From: November 1, 2014 To November 30 2014

	Flow MGD Total	Flow MGD Wells	Flow MGD Pond	Flow MGD MCDC	Chlorine, Total Residual (For	pH s.u.	Turbidity NTU Reuse	BOD, Carbonaceous 5 day, 20C (Influent) mg/L	Solids, Total Suspended (Influent) mg/L	BOD, Carbonaceous 5 day, 20C mg/L	Solids, Total Suspended mg/L
Code	50050	50050	50050	50050	50060	00400	00070	80082	00530	80082	00530
Mon. Site	FLW-001	FLW-002	FLW-003	FLW-004	EFA-001	EFA-001	EFB-001	INF-001	INF-001	EFA-001	EFA-001
1	.478	0.0	.435	.043	2.2	7.0	0.4				
2	.453	.453	0.0	0.0							
3	.453	.453	0.0	0.0	2.4	7.0	4.0				
4	.436	0.0	.422	.014	1.7	7.2	0.6	182.5	166.0	<2.0	<0.5
5	.425	0.0	.393	.032	1.5	7.0	0.3				
6	.468	0.0	.432	.036	2.2	7.1	0.5				
7	.533	.533	0.0	0.0	1.5	7.1	0.4				
8	.452	.452	0.0	0.0	1.5	7.0	0.4				
9	.532	.532	0.0	0.0							
10	.516	.516	0.0	0.0	0.6	7.0	0.5				
11	.455	0.0	.420	.035	1.6	7.1	1.0				
12	.516	.322	.182	.012	1.5/0.7	7.1	1.0				
13	.508	.508	0.0	0.0	1.2	7.0	0.9				
14	.448	0.0	.438	.010	3.0	7.1	0.9				
15	.496	.496	0.0	0.0	1.5	7.0	0.7				
16	.481	.481	0.0	0.0							
17	.481	.481	0.0	0.0	1.5	7.0	1.2				
18	.511	0.0	.467	.044	1.9	7.0	1.0	183.5	145.0	<2.0	<0.5
19	.549	0.0	.520	.029	3.0	7.0	1.3				
20	.465	.465	0.0	0.0	2.0	7.0	0.7				
21	.480	0.0	.454	0.26	1.7	7.0	0.8				
22	.500	.500	0.0	0.0	2.2	7.0	0.8				
23	.536	.536	0.0	0.0							
24	.536	.536	0.0	0.0	1.6	7.1	0.7				
25	.565	0.0	.536	.029	1.6	7.0	0.9				
26	.514	0.0	.490	.024	1.5	7.0	0.6				
27	.520	.520	0.0	0.0	1.0	7.0	0.5				
28	.506	.506	0.0	0.0	1.1	6.8	0.5				
29	.497	.497	0.0	0.0	1.0	6.9	0.5				
30	.381	.381	0.0	0.0	2.5	7.0	0.5				
31											
Total	14.691	9.168	5.189	.334	44.2	182.5	21.6	366	311	2.0	0.50
Mo. Avg.	.490	.306	.173	.011	1.70	7.02	0.83	183	155.5	1.0	0.25

PLANT STAFFING:

Day Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 ay Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW2P**

Facility: **Key West Resort Utility WWTP**

Monitoring Period From: November 1, 2014 To November 30 2014

	Solids, Total Suspended mg/L Reuse	Coliform, Fecal #/100mL	Nitrogen, Total mg/L	Phosphorus, Total (as P) mg/L					
Code	00530	74055	00600	00665					
Mon. Site	EFB-001	EFA-001	EFA-001	EFA-001					
1									
2									
3	0.5	<1							
4	1.6	<1	28.20	5.95					
5	<0.5	<1							
6	<0.5	<1							
7									
8									
9									
10	<0.5	<1							
11	<0.5	<1							
12	<0.5	<1							
13	<0.5	<1							
14									
15									
16									
17	2.6	<1							
18	1.6	<1	18.60	5.28					
19	1.0	<1							
20	1.0	<1							
21									
22									
23									
24	<0.5	<1							
25	<0.5	<1							
26	<0.5	<1							
27	2.4	<1							
28									
29									
30									
31									
Total	12.70	<1	46.8	11.23					
Mo.	0.79	<1	23.4	5.62					

NIGHT STAFFING:
 Shift Operator Class: B Certificate No: 13317 Name: Tod Yarboro
 Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Resort Utility, Corp.
 MAILING: 6630 Front Street
 ADDRESS: Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESCRIPTION: reuse storage golf course pond and irrigation system, with Influent
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

COUNTY: Monroe
 OFFICE: South District

MONITORING PERIOD From: November 1 2014 November 30 2014


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Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - POND	Sample Measurement	.186						
PARM Code 50050 Y Mon. Site No. FLW-003	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - POND	Sample Measurement	.173						
PARM Code 50050 I Mon. Site No. FLW-003	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - MCDC	Sample Measurement	.011						
PARM Code 50050 Q Mon. Site No. FLW-004	Permit Requirement	0.06 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement			2.60				
PARM Code 00530 B Mon. Site No. EFB-001	Permit Requirement			5.0 (Max.)	mg/L		4 Days/Week	Grab
Coliform, Fecal	Sample Measurement			<1				
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement			<1 25 (Max.)	#/100mL		4 Days/Week	Grab
Coliform, Fecal, % less than detection	Sample Measurement			100%				
PARM Code 51005 A Mon. Site No. EFA-001	Permit Requirement			75 (Mo.Total)	percent		4 Days/Week	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	12-22-2014

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

OTH: NO LAB RESULTS FOR COMPOSITE OF 11-18-2014
 WILL SUBMIT WHEN RESULTS ARRIVE

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP NUMBER: R-001

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: November 1, 2014 To: November 30 2014

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	
pH	Sample Measurement				7.0		7.2				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				1.5						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement				1.0 (Min.)			mg/L		Continuous	Meter
Turbidity	Sample Measurement						4.0				
PARM Code 00070 B Mon. Site No. EFB-001	Permit Requirement						Report (Max.)	NTU		Continuous	Meter
Flow - TOTAL	Sample Measurement		.450								
PARM Code 50050 R Mon. Site No. FLW-001	Permit Requirement		.0499 (An.Avg.)	MGD						5 Days/Week	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement					oth					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement					20.0 (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				oth	oth	oth				
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement				60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Flow - TOTAL	Sample Measurement	.490	.509								
PARM Code 50050 S Mon. Site No. FLW-001	Permit Requirement	Report (Mo.Avg.)	Report (QL.Avg.)	MGD						5 Days/Week	Calculated
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						102%	%			
PARM Code 00180 I Mon. Site No. FLW-001	Permit Requirement						Report (Mo.Avg.)	percent		Monthly	Calculated
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement						oth				
PARM Code 80082 G Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC
Solids, Total Suspended (Influent)	Sample Measurement						oth				
PARM Code 00530 Q Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC

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Docket No. 150071-SU
 Engineering MFRS
 Exhibit CAJ-2, Page 110 of 346


DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 2295 Victoria Ave, Suite 364, Ft. Myers, FL 33901-3875

PERMITTEE NAME: K W Resort Utility, Corp. PERMIT NUMBER: FLA014951-011-DW2P
 MAILING ADDRESS: 6630 Front Street Key West, Florida 33040
 FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island Key West, FL 33045
 COUNTY: Monroe
 OFFICE: South District
 LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: U-001
 MONITORING GROUP DESCRIPTION: two Class V injection wells
 REPORT FREQUENCY: Monthly
 PROGRAM: Domestic
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: _ November 1, 2014 _ November 30 2014 _

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type	
Flow - WELLS	Sample Measurement	.253							
PARM Code 50050 Y Mon. Site No. FLW-002	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer	
Flow - WELLS	Sample Measurement	.306							
PARM Code 50050 I Mon. Site No. FLW-002	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer	
BOD, Carbonaceous 5 day, 20C	Sample Measurement			oth					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC	
BOD, Carbonaceous 5 day, 20C	Sample Measurement			oth	oth	oth			
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			oth					
PARM Code 00530 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)			mg/L	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			oth	oth	oth			
PARM Code 00530 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	12.22.2014

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

OTH = No LAB RESULTS For composite of 11-18-2014
 Will Resubmit when results arrive
 PAS

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 D.E.P. Marathon

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP U-001

PERMIT NUMBER: FLA014951-011-DW2P

NUMBER:

MONITORING PERIOD From: November 1, 2014 To: November 30 2014

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				<1					
PARM Code 74055 Y Mon. Site No. EFA-001	Permit Requirement				200 (An.Avg.)		#/100mL		Every 2 weeks	Grab
Coliform, Fecal	Sample Measurement				<1	<1				
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement				200 (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Every 2 weeks	Grab
pH	Sample Measurement			6.8		7.1				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			0.5						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Total	Sample Measurement			oth						
PARM Code 00600 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Nitrogen, Total	Sample Measurement			oth	oth	oth				
PARM Code 00600 A Mon. Site No. EFA-001	Permit Requirement			Report (Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement				oth					
PARM Code 00665 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement				oth	oth				
PARM Code 00665 A Mon. Site No. EFA-001	Permit Requirement			Report(Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC

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DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Utility Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045-


LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: RMP-Q
 MONITORING GROUP DESCRIPTION: Biosolids Quantity
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: November 1, 2014 To: November 30 2014

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

COUNTY: Monroe
 South District

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement		5.4								
P.A.R.M. Code B0008 Mon. Site No. RMP-1	Permit Requirement		Report (Mo. Total)	dry tons				0	Monthly	Calculated	

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		305-295-3301	12-22-2014

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

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Docket No. 150071-SU
 Engineering MFRs
 Exhibit CAJ-2, Page 113 of 346

ISSUANCE/REISSUANCE DATE:

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW2P**

Facility: **Key West Resort Utility WWTP**

Monitoring Period **From: November 1, 2014 To November 30 2014**

Code	Flow MGD Total	Flow MGD Wells	Flow MGD Pond	Flow MGD MCDC	Chlorine, Total Residual (For	pH s.u.	Turbidity NTU Reuse	BOD, Carbonaceous 5 day, 20C (Influent) mg/L	Solids, Total Suspended (Influent) mg/L	BOD, Carbonaceous 5 day, 20C mg/L	Solids, Total Suspended mg/L
Mon. Site	FLW-001	FLW-002	FLW-003	FLW-004	EFA-001	EFA-001	EFB-001	INF-001	INF-001	EFA-001	EFA-001
1	.478	0.0	.435	.043	2.2	7.0	0.4				
2	.453	.453	0.0	0.0							
3	.453	.453	0.0	0.0	2.4	7.0	4.0				
4	.436	0.0	.422	.014	1.7	7.2	0.6	182.5	166.0	<2.0	<0.5
5	.425	0.0	.393	.032	1.5	7.0	0.3				
6	.468	0.0	.432	.036	2.2	7.1	0.5				
7	.533	.533	0.0	0.0	1.5	7.1	0.4				
8	.452	.452	0.0	0.0	1.5	7.0	0.4				
9	.532	.532	0.0	0.0							
10	.516	.516	0.0	0.0	0.6	7.0	0.5				
11	.455	0.0	.420	.035	1.6	7.1	1.0				
12	.516	.322	.182	.012	1.5/0.7	7.1	1.0				
13	.508	.508	0.0	0.0	1.2	7.0	0.9				
14	.448	0.0	.438	.010	3.0	7.1	0.9				
15	.496	.496	0.0	0.0	1.5	7.0	0.7				
16	.481	.481	0.0	0.0							
17	.481	.481	0.0	0.0	1.5	7.0	1.2				
18	.511	0.0	.467	.044	1.9	7.0	1.0	oth	oth	oth	oth
19	.549	0.0	.520	.029	3.0	7.0	1.3				
20	.465	.465	0.0	0.0	2.0	7.0	0.7				
21	.480	0.0	.454	0.26	1.7	7.0	0.8				
22	.500	.500	0.0	0.0	2.2	7.0	0.8				
23	.536	.536	0.0	0.0							
24	.536	.536	0.0	0.0	1.6	7.1	0.7				
25	.565	0.0	.536	.029	1.6	7.0	0.9				
26	.514	0.0	.490	.024	1.5	7.0	0.6				
27	.520	.520	0.0	0.0	1.0	7.0	0.5				
28	.506	.506	0.0	0.0	1.1	6.8	0.5				
29	.497	.497	0.0	0.0	1.0	6.9	0.5				
30	.381	.381	0.0	0.0	2.5	7.0	0.5				
31											
Total	14.691	9.168	5.189	.334	44.2	182.5	21.6				
Mo. Avg.	.490	.306	.173	.011	1.70	7.02	0.83				

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PLANT STAFFING:

Day Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW2P**

Facility: **Key West Resort Utility WWTP**

Monitoring Period From: November 1, 2014 To November 30 2014

Code	Solids, Total Suspended mg/L Reuse	Coliform, Fecal #/100mL	Nitrogen, Total mg/L	Phosphorus, Total (as P) mg/L					
00530		74055	00600	00665					
Mon. Site	EFB-001	EFA-001	EFA-001	EFA-001					
1									
2									
3	0.5	<1							
4	1.6	<1	28.20	5.95					
5	<0.5	<1							
6	<0.5	<1							
7									
8									
9									
10	<0.5	<1							
11	<0.5	<1							
12	<0.5	<1							
13	<0.5	<1							
14									
15									
16									
17	2.6	<1							
18	1.6	<1							
19	1.0	<1							
20	1.0	<1							
21									
22									
23									
24	<0.5	<1							
25	<0.5	<1							
26	<0.5	<1							
27	2.4	<1							
28									
29									
30									
31									
Total	12.70	<1							
Mo.	0.79	<1							

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PLANT STAFFING:

Day Shift Operator	Class: <u>B</u>	Certificate No: <u>13317</u>	Name: <u>Ted Yarboro</u>
Shift Operator	Class: _____	Certificate No: _____	Name: _____
Night Shift Operator	Class: _____	Certificate No: _____	Name: _____
Lead Operator	Class: <u>B</u>	Certificate No: <u>5355</u>	Name: <u>Mark Burkemper</u>

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K. W Resort Utility, Corp.
 MAILING: 6630 Front Street
 ADDRESS: Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island

LIMIT:
 CLASS SIZE:
 MONITORING GROUP NUMBER:
 MONITORING GROUP

Final
 N/A
 R-001
 REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

reuse storage golf course pond and irrigation system, with Influent

Key West, FL 33045

DESCRIPTION:
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:

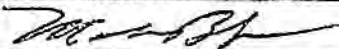
COUNTY: Monroe

MONITORING PERIOD From: October_1 2014 OCTOBER 31 2014

OFFICE: South District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - POND	Sample Measurement	.182						
PARM Code 50050 Y Mon. Site No. FLW-003	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - POND	Sample Measurement	.124						
PARM Code 50050 I Mon. Site No. FLW-003	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - MCDC	Sample Measurement	.011						
PARM Code 50050 Q Mon. Site No. FLW-004	Permit Requirement	0.06 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement			1.8	0			
PARM Code 00530 B Mon. Site No. EFB-001	Permit Requirement			5.0 (Max.)	mg/L		4 Days/Week	Grab
Coliform, Fecal	Sample Measurement			<1				
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement			25 (Max.)	#/100mL		4 Days/Week	Grab
Coliform, Fecal, % less than detection	Sample Measurement		100%					
PARM Code 51005 A Mon. Site No. EFA-001	Permit Requirement		75 (Mo.Total)		percent		4 Days/Week	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	11-25-2014

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

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D.E.P. Marathon

ISSUANCE/REISSUANCE DATE: February 20, 2012

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

Docket No. 150071-SU
 Engineering MFRs
 Exhibit CAJ-2, Page 116 of 346

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP NUMBER: R-001

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: October 1, 2014 To October 31 2014

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	
pH	Sample Measurement				7.0		7.3				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				1.5						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement				1.0 (Min.)			mg/L		Continuous	Meter
Turbidity	Sample Measurement						3.0				
PARM Code 00070 B Mon. Site No. EFB-001	Permit Requirement						Report (Max.)	NTU		Continuous	Meter
Flow - TOTAL	Sample Measurement	.441									
PARM Code 50050 R Mon. Site No. FLW-001	Permit Requirement	0.499 (An.Avg.)		MGD						5 Days/Week	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement					1.20					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement					20.0 (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				1.98	1.98	1.49				
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement				60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Flow - TOTAL	Sample Measurement	.535	.508								
PARM Code 50050 S Mon. Site No. FLW-001	Permit Requirement	Report (Mo.Avg.)	Report (Q1.Avg.)	MGD						5 Days/Week	Calculated
Percent Capacity, (TMADP/Permitted Capacity) x 100	Sample Measurement						102	%			
PARM Code 00180 I Mon. Site No. FLW-001	Permit Requirement						Report (Mo.Avg.)	percent		Monthly	Calculated
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement						217.5				
PARM Code 80082 G Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC
Solids, Total Suspended (Influent)	Sample Measurement						185				
PARM Code 00530 Q Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC

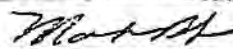
DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 2295 Victoria Ave, Suite 364, Ft. Myers, FL 33901-3875

PERMITTEE NAME: K W Resort Utility, Corp. **PERMIT NUMBER:** FLA014951-011-DW2P
MAILING ADDRESS: 6630 Front Street **CLASS SIZE:** Final **REPORT FREQUENCY:** Monthly
 Key West, Florida 33040 **MONITORING GROUP NUMBER:** N/A **PROGRAM:** Domestic
FACILITY: Key West Resort Utility WWTP **DESCRIPTION:** two Class V injection wells
LOCATION: 6630 Front St., Stock Island **RE-SUBMITTED DMR:**
 Key West, FL 33045 **NO DISCHARGE FROM SITE:**
COUNTY: Monroe **MONITORING PERIOD** From: October 1, 2014 October 31 2014
OFFICE: South District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type	
Flow - WELLS	Sample Measurement	.248							
PARM Code 50050 Y Mon. Site No. FLW-002	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer	
Flow - WELLS	Sample Measurement	.402							
PARM Code 50050 I Mon. Site No. FLW-002	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer	
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.20					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC	
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.98	1.98	1.49			
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			1.21					
PARM Code 00530 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)			mg/L	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			3.60	3.60	1.93			
PARM Code 00530 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Bunkeper / Lead Operator		(305)295-3301	11-25-2014

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP NUMBER: U-001

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: October 1, 2014 To:

October 31 2014

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				0.5						
PARM Code 74055 Y Mon. Site No. EFA-001	Permit Requirement				200 (An.Avg.)		#/100mL			Every 2 weeks	Grab
Coliform, Fecal	Sample Measurement				0.5	0.5					
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement				200 (Mo.Geo.Mn.)	800 (Max.)	#/100mL			Every 2 weeks	Grab
pH	Sample Measurement				6.8	7.1					
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement				6.0 (Min.)	8.5 (Max.)	su.			5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				0.5						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement				0.5 (Min.)		mg/L			5 Days/Week	Grab
Nitrogen, Total	Sample Measurement				19.56						
PARM Code 00600 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L			Every 2 weeks	8-hr FPC
Nitrogen, Total	Sample Measurement				27.6	27.6	23.1				
PARM Code 00600 A Mon. Site No. EFA-001	Permit Requirement				Report (Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement				6.63						
PARM Code 00665 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L			Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement				4.96	4.96	4.96				
PARM Code 00665 A Mon. Site No. EFA-001	Permit Requirement				Report(Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Utility Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: RMP-Q
 MONITORING GROUP DESCRIPTION: Biosolids Quantity
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: October 1, 2014 To: October 31 2014

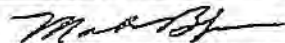
REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045-

COUNTY: Monroe
 South District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	3.0						
PARM Code B0008 + Mon. Site No. RMP-1	Permit Requirement	Report (Mo. Total)	dry tons			0	Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		305-295-3301	11-25-2014

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

ISSUANCE/REISSUANCE DATE:

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

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW2P**

Facility: **Key West Resort Utility WWTP**

Monitoring Period From: **October 1, 2014** To **October 31 2014**

	Flow MGD Total	Flow MGD Wells	Flow MGD Pond	Flow MGD MCDC	Chlor Inc, Total Residual (For	pH s.u.	Turbidity NTU Reuse	BOD, Carbonaceous 5 day, 20C (Influent) mg/L	Solids, Total Suspended (Influent) mg/L	BOD, Carbonaceous 5 day, 20C mg/L	Solids, Total Suspended mg/L
Code	50050	50050	50050	50050	50060	00400	00070	80082	00530	80082	00530
Mon. Site	FLW-001	FLW-002	FLW-003	FLW-004	EFA-001	EFA-001	EFB-001	INF-001	INF-001	EFA-001	EFA-001
1	.506	.506	0.0	0.0	1.3	6.9	2.0				
2	.441	0.0	.409	.032	1.8	7.0	2.0				
3	.502	.502	0.0	0.0	1.8	7.1	0.9				
4	.562	.562	0.0	0.0	1.6	7.0	0.6				
5	.525	.525	0.0	0.0							
6	.525	.525	0.0	0.0	1.6	6.9	0.5				
7	.487	0.0	.457	.030	1.5	7.0	0.5	130.9	151	<2.0	3.60
8	.517	.517	0.0	0.0	1.6	7.0	1.6				
9	.543	.543	0.0	0.0	0.7	6.8	0.4				
10	.480	.480	0.0	0.0	0.9	6.9	0.6				
11	.555	.555	0.0	0.0	0.6	6.9	0.4				
12	.500	.500	0.0	0.0							
13	.500	.500	0.0	0.0	2.0	6.8	0.9				
14	.495	0.0	.466	.029	1.7	7.3	1.3				
15	.474	0.0	.454	.020	1.7	7.3	1.7				
16	.470	0.0	.447	.023	1.6	7.3	1.3				
17	.453	0.0	.430	.023	1.6	7.2	1.3				
18	.484	.303	.170	.011	1.9	7.0	0.7				
19	.442	.442	0.0	0.0							
20	.442	.442	0.0	0.0	0.7	7.1	3.0				
21	.488	.305	.174	.009	1.5/0.9	7.1	0.8	217.5	185	1.98	<0.5
22	.665	.416	.233	.016	1.5/0.6	7.0	1.0				
23	.850	.850	0.0	0.0	0.5	6.9	0.7				
24	.846	.846	0.0	0.0	1.4	6.8	0.3				
25	.677	.677	0.0	0.0	2.7	6.8	0.4				
26	.591	.591	0.0	0.0							
27	.546	.546	0.0	0.0	0.8	6.9	0.3				
28	.538	.336	.164	.038	1.5/0.6	7.0	1.1				
29	.494	.494	0.0	0.0	1.5	7.0	0.7				
30	.510	.510	0.0	0.0	1.5	7.0	0.5				
31	.484	0.0	.453	.031	1.7	7.1	0.3				
Total	16.592	12.473	3.857	.262	35.36	189.1	25.8	348.4	336	2.98	3.85
Mo. Avg.	.535	.402	.124	.009	1.31	7.00	0.95	174.2	168	1.49	1.93

PLANT STAFFING:

Day Shift Operator Class: B Certificate No: 13317 Name: Ted Yarbora
 Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA014951-011-DW2P

Facility: Key West Resort Utility WWTP

Monitoring Period From: October 1, 2014 To October 31 2014

	Solids, Total Suspended mg/L Reuse	Coliform, Fecal #/100mL	Nitrogen, Total mg/L	Phosphorus, Total (as P) mg/L					
Code	00530	74055	00600	00665					
Mon. Site	EFB-001	EFA-001	EFA-001	EFA-001					
1	<0.5	<1							
2	1.4	<1							
3									
4									
5									
6	<0.5	<1							
7	<0.5	<1	27.60	4.96					
8	1.8	<1							
9	1.0	<1							
10									
11									
12									
13	<0.5	<1							
14	<0.5	<1							
15	<0.5	<1							
16	<0.5	<1							
17									
18									
19									
20	<0.5	<1							
21	<0.5	<1	18.60	4.95					
22	1.0	<1							
23	<0.5	<1							
24									
25									
26									
27	1.8	<1							
28	1.0	<1							
29	1.2	<1							
30	1.0	<1							
31									
Total	12.7	9	46.2	9.91					
Mo.	0.71	0.5	23.1	4.96					

PLANT STAFFING:

Day Shift Operator Class: B Certificate No: 13317 Name: Ted Yarbora
 Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

ISSUANCE/REISSUANCE DATE: February 20, 2012

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

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Ovcascas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K.W. Resort Utility, Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESCRIPTION: reuse storage golf course pond and irrigation system, with Influent
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

COUNTY: Monroe
 OFFICE: South District

MONITORING PERIOD From: SEPTEMBER 1 2014 SEPTEMBER 30 2014

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - POND	Sample Measurement	.189						
PARM Code 50050 Y Mon. Site No. FLW-003	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - POND	Sample Measurement	.126						
PARM Code 50050 I Mon. Site No. FLW-003	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - MCDC	Sample Measurement	.012						
PARM Code 50050 Q Mon. Site No. FLW-004	Permit Requirement	0.05 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement			2.20	0			
PARM Code 00530 B Mon. Site No. EFB-001	Permit Requirement			5.0 (Max.)	mg/l.		4 Days/Week	Grab
Coliform, Fecal	Sample Measurement			0.5				
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement			25 (Max.)	#/100mL		4 Days/Week	Grab
Coliform, Fecal, % less than detection	Sample Measurement			100%				
PARM Code 51005 A Mon. Site No. EFA-001	Permit Requirement			75 (Mo.Total)	percent		4 Days/Week	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	10/22/2014

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP R-001

PERMIT NUMBER: FLA014951-011-DW2P

NUMBER:

MONITORING PERIOD From: SEPTEMBER 1, 2014

SEPTEMBER 30 2014

To:

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	
pH	Sample Measurement				6.8		7.1				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement				6.0 (Min.)		8.5 (Max.)	sat.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				1.5						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement				1.0 (Min.)			mg/L		Continuous	Meter
Turbidity	Sample Measurement						1.9				
PARM Code 00070 B Mon. Site No. EFB-001	Permit Requirement						Report (Max.)	NTU		Continuous	Meter
Flow - TOTAL	Sample Measurement	.438									
PARM Code 50050 R Mon. Site No. FLW-001	Permit Requirement	0.499 (An.Avg.)		MGD						5 Days/Week	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement					1.20					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement					20.0 (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				1.0	1.0	1.0				
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement				60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Flow - TOTAL	Sample Measurement	.503	.476								
PARM Code 50050 S Mon. Site No. FLW-001	Permit Requirement	Report (Mo.Avg.)	Report (Ql.Avg.)	MGD						5 Days/Week	Calculated
Percent Capacity, (TMADP/Permitted Capacity) x 100	Sample Measurement						95%	%			
PARM Code 00180 I Mon. Site No. FLW-001	Permit Requirement						Report (Mo.Avg.)	percent		Monthly	Calculated
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement						310.5				
PARM Code 80082 G Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC
Solids, Total Suspended (Influent)	Sample Measurement						223				
PARM Code 00530 Q Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 2295 Victoria Ave, Suite 364, Ft. Myers, FL 33901-3875

PERMITTEE NAME: K W Resort Utility, Corp.
MAILING ADDRESS: 6630 Front Street
Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

LIMIT: Final
CLASS SIZE: N/A
MONITORING GROUP NUMBER: U-001
MONITORING GROUP DESCRIPTION: two Class V injection wells

REPORT FREQUENCY: Monthly
PROGRAM: Domestic


FACILITY: Key West Resort Utility WWTP
LOCATION: 6630 Front St., Stock Island
Key West, FL 33045

COUNTY: Monroe
OFFICE: South District

RE-SUBMITTED DMR:
NO DISCHARGE FROM SITE:
MONITORING PERIOD From: SEPTEMBER 1, 2014 SEPTEMBER 31 2014

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - WELLS	Sample Measurement		.238								
PARM Code 50050 Y Mon. Site No. FLW-002	Permit Requirement		.499 (An.Avg.)	MGD						5 Days/Week	Flow Totalizer
Flow - WELLS	Sample Measurement		.370								
PARM Code 50050 I Mon. Site No. FLW-002	Permit Requirement		Report (Mo.Avg.)	MGD						5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement				1.20						
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement				20.0 (An.Avg.)		mg/L			Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				1.0	1.0	1.0				
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement				60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement				1.18						
PARM Code 00530 Y Mon. Site No. EFA-001	Permit Requirement				20.0 (An.Avg.)		mg/L			Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement				6.0	6.0	3.10				
PARM Code 00530 A Mon. Site No. EFA-001	Permit Requirement				60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkenper / Lead Operator		(305)295-3301	10/22/2014

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

RECEIVED
OCT 24 2014
D.E.P. Monitoring

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP NUMBER: U-001

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: SEPTEMBER 1, 2014 To: SEPTEMBER 30 2014

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement			0.5						
PARM Code 74055 Y Mon. Site No. EFA-001	Permit Requirement			200 (An.Avg.)			#/100mL		Every 2 weeks	Grab
Coliform, Fecal	Sample Measurement			0.5						
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement			200 (Mo.Geo.Mn.)	800 (Max.)		#/100mL		Every 2 weeks	Grab
pH	Sample Measurement		6.8			7.1				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement		6.0 (Min.)			8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			0.5						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Total	Sample Measurement			19.01						
PARM Code 00600 Y Mon. Site No. EFA-001	Permit Requirement			Report (An.Avg.)			mg/L		Every 2 weeks	8-hr FPC
Nitrogen, Total	Sample Measurement		27.50	27.50	20.80					
PARM Code 00600 A Mon. Site No. EFA-001	Permit Requirement		Report (Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement			6.73						
PARM Code 00665 Y Mon. Site No. EFA-001	Permit Requirement			Report (An.Avg.)			mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement		6.00	6.00	5.08					
PARM Code 00665 A Mon. Site No. EFA-001	Permit Requirement		Report (Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)		mg/L		Every 2 weeks	8-hr FPC

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Utility Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045-

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: RMP-Q
 MONITORING GROUP DESCRIPTION: Biosolids Quantity

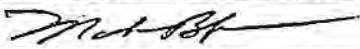
REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

COUNTY: Monroe
 South District

RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: SEPTEMBER 1, 2014 To: SEPTEMBER 30 2014

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement		4.4								
PARM Code: B0008 Mon: Site No: RMP-1	Permit Requirement		Report (Mo. Total)	dry tons				0	Monthly	Calculated	

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		305-295-3301	10/22/2014

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

ISSUANCE/REISSUANCE DATE:

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

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA014951-011-DW2P

Facility: Key West Resort Utility WWTP

Monitoring Period From: SEPTEMBER 1, 2014 To SEPTEMBER 30 2014

	Flow MGD Total	Flow MGD Wells	Flow MGD Pond	Flow MGD MCDC	Chlorine, Total Residual (For	pH s.u.	Turbidity NTU Reuse	BOD, Carbonaceous 5 day, 20C (Influent) mg/L	Solids, Total Suspended (Influent) mg/L	BOD, Carbonaceous 5 day, 20C mg/L	Solids, Total Suspended mg/L
Code	50050	50050	50050	50050	50060	00400	00070	80082	00530	80082	00530
Mon. Site	FLW-001	FLW-002	FLW-003	FLW-004	EFA-001	EFA-001	EFB-001	INF-001	INF-001	EFA-001	EFA-001
1	.468	.468	0.0	0.0	1.5	7.0	0.6				
2	.493	0.0	.468	.025	1.5	7.1	1.9				
3	.472	0.0	.450	.022	1.9	7.0	0.8				
4	.478	0.0	.453	.025	1.5	7.0	0.2				
5	.459	.306	.146	.007	2.0	6.9	0.7				
6	.449	.449	0.0	0.0	3.6	7.1	0.5				
7	.457	.457	0.0	0.0	-	-	-				
8	.457	.457	0.0	0.0	1.5	6.9	2.3				
9	.481	0.0	.455	.026	1.6	7.0	1.8	162	119	<2.0	<0.5
10	.473	0.0	.452	.021	1.6	7.0	0.9				
11	.503	0.0	.480	.023	2.3	6.9	0.4				
12	.482	.482	0.0	0.0	3.1	6.8	0.5				
13	.485	.485	0.0	0.0	0.8	6.9	0.7				
14	.651	.651	0.0	0.0	-	-	-				
15	.651	.651	0.0	0.0	0.8	6.9	4.0				
16	.541	.541	0.0	0.0	0.7	7.0	0.6				
17	.461	.461	0.0	0.0	1.0	6.9	0.2				
18	.455	0.0	.421	.034	1.6	7.0	0.3				
19	.437	.437	0.0	0.0	1.0	7.0	1.0				
20	.481	.481	0.0	0.0	1.0	7.1	0.9				
21	.482	.482	0.0	0.0	-	-	-				
22	.460	.460	0.0	0.0	1.0	7.0	2.0				
23	.492	0.0	.456	.036	1.7	7.0	0.9	310.5	223	<2.0	6.0
24	.641	.641	0.0	0.0	0.5	6.9	1.7				
25	.669	.669	0.0	0.0	1.6	7.0	0.9				
26	.533	.533	0.0	0.0	0.8	6.8	0.7				
27	.517	.517	0.0	0.0	1.7	7.0	0.5				
28	.503	.503	0.0	0.0	-	-	-				
29	.503	.503	0.0	0.0	0.9	7.0	0.7				
30	.453	.453	0.0	0.0	1.0	6.9	0.9				
31											
Total	15.087	11.087	3.781	.219	38.2	181.1	26.6	472.5	342	2	6.25
Mo. Avg.	.503	.370	.126	.007	1.47	6.97	1.02	236.3	171	1	3.10

PLANT STAFFING:

Day Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 Day Shift Operator Class: C Certificate No: 21394 Name: Robert Bellino
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW2P**

Facility: **Key West Resort Utility WWTP**

Monitoring Period **From: SEPTEMBER 1, 2014 To SEPTEMBER 30 2014**

	Solids, Total Suspended mg/L Reuse	Coliform, Fecal #/100mL	Nitrogen, Total mg/L	Phosphorus, Total (as P) mg/L					
Code	00530	74055	00600	00665					
Mon. Site	EFB-001	EFA-001	EFA-001	EFA-001					
1									
2	<0.5	<1							
3	<0.5	<1							
4	<0.5	<1							
5									
6									
7									
8	1.0	<1							
9	<0.5	<1	14.10	4.16					
10	<0.5	<1							
11	<0.5	<1							
12									
13									
14									
15	<0.5	<1							
16	1.0	<1							
17	2.2	<1							
18	<0.5	<1							
19									
20									
21									
22	<0.5	<1							
23	<0.5	<1	27.50	6.00					
24	1.4	<1							
25	1.6	<1							
26									
27									
28									
29	1.6	<1							
30	<0.5	<1							
31									
Total	11.55	<1	41.60	10.16					
Mo.	0.68	<1	20.80	5.08					

PLANT STAFFING:

Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 Day Shift Operator Class: C Certificate No: 21394 Name: Robert Bellino
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

459 DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Resort Utility, Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESCRIPTION: reuse storage golf course pond and irrigation system, with Influent
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

COUNTY: Monroe
 OFFICE: South District

MONITORING PERIOD From: AUGUST_1 2014 AUGUST 31 2014

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - POND	Sample Measurement	.196						
PARM Code 50050 Y Mon. Site No. FLW-003	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - POND	Sample Measurement	.250						
PARM Code 50050 I Mon. Site No. FLW-003	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - MCDC	Sample Measurement	.012						
PARM Code 50050 Q Mon. Site No. FLW-004	Permit Requirement	0.06 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement			<0.5	0			
PARM Code 00530 B Mon. Site No. EFB-001	Permit Requirement			5.0 (Max.)	mg/L		4 Days/Week	Grab
Coliform, Fecal	Sample Measurement			<1				
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement			25 (Max.)	#/100mL		4 Days/Week	Grab
Coliform, Fecal, % less than detection	Sample Measurement		100%					
PARM Code 51005 A Mon. Site No. EFA-001	Permit Requirement		75 (Mo.Total)		percent		4 Days/Week	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	09-23-2014

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

RECEIVED

SEP 24 2014

DEP. Marathon

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP R-001
NUMBER:

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: AUGUST 1, 2014 To: AUGUST 31 2014

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	
pH	Sample Measurement				6.8		7.1				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				1.50						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement				1.0 (Min.)			mg/L		Continuous	Meter
Turbidity	Sample Measurement						4.9				
PARM Code 00070 B Mon. Site No. EFB-001	Permit Requirement						Report (Max.)	NTU		Continuous	Meter
Flow - TOTAL	Sample Measurement		.433								
PARM Code 50050 R Mon. Site No. FLW-001	Permit Requirement		0.499 (An.Avg.)	MGD						5 Days/Week	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement					1.20					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement					20.0 (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				1.80	1.80	1.40				
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement				60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Flow - TOTAL	Sample Measurement	.486	.452								
PARM Code 50050 S Mon. Site No. FLW-001	Permit Requirement	Report (Mo.Avg.)	Report (Qt.Avg.)	MGD						5 Days/Week	Calculated
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						91%	%			
PARM Code 00180 I Mon. Site No. FLW-001	Permit Requirement						Report (Mo.Avg.)	percent		Monthly	Calculated
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement						215.9				
PARM Code 80082 G Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC
Solids, Total Suspended (Influent)	Sample Measurement						200				
PARM Code 00530 Q Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 2295 Victoria Ave, Suite 364, Ft. Myers, FL 33901-3875

PERMITTEE NAME: K W Resort Utility, Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: U-001
 MONITORING GROUP DESCRIPTION: two Class V injection wells

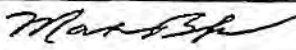
REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

COUNTY: Monroe
 OFFICE: South District

RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: AUGU 1, 2014 To: AUGUST 31 2014

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - WELLS	Sample Measurement	.227						
PARM Code 50050 Y Mon. Site No. FLW-002	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - WELLS	Sample Measurement	.229						
PARM Code 50050 1 Mon. Site No. FLW-002	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.20				
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.80	1.80	1.40		
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			1.03				
PARM Code 00530 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)		mg/L	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			2.00	2.00	1.13		
PARM Code 00530 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	Every 2 weeks	8-hr FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	09-23-2014

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP NUMBER: U-001

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: AUGUST 1, 2014 To: AUGUST 31 2014

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				<1					
PARM Code 74055 Y Mon. Site No. EFA-001	Permit Requirement				200 (An.Avg.)		#/100mL		Every 2 weeks	Grab
Coliform, Fecal	Sample Measurement				<1					
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement				200 (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Every 2 weeks	Grab
pH	Sample Measurement			6.8		7.1				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			0.8						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Total	Sample Measurement				18.54					
PARM Code 00600 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Nitrogen, Total	Sample Measurement			13.10	13.10	10.49				
PARM Code 00600 A Mon. Site No. EFA-001	Permit Requirement			Report (Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/l		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement				6.72					
PARM Code 00665 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement			4.51	4.51	4.38				
PARM Code 00665 A Mon. Site No. EFA-001	Permit Requirement			Report(Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC

Docket No. 150071-SU
 Engineering MFRs
 Exhibit CAJ-2, Page 133 of 346

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Utility Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: RMP-Q
 MONITORING GROUP DESCRIPTION: Biosolids Quantity
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: AUGUST 1, 2014 To: AUGUST 31 2014


REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045-

COUNTY: Monroe
 South District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	6.7						
PARM Code B0008-14 Mon. Site No. RMP-1	Permit Requirement	Report (Mo Total)	dry tons			0	Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Buckemper / Lead Operator		305-295-3301	09.23.2014

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

ISSUANCE/REISSUANCE DATE:

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

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW**

Facility: **Key West Resort Utility WWTP**

Monitoring Period From: **AUGUST 1, 2014** To: **AUGUST 31, 2014**

	Flow MGD Total	Flow MGD Wells	Flow MGD Pond	Flow MGD MCDC	Chlorine, Total Residual (For	pH s.u.	Turbidity NTU Reuse	BOD, Carbonaceous 5 day, 20C (Influent) mg/L	Solids, Total Suspended (Influent) mg/L	BOD, Carbonaceous 5 day, 20C mg/L	Solids, Total Suspended mg/L
Code	50050	50050	50050	50050	50060	00400	00070	80082	00530	80082	00530
Mon. Site	FLW-001	FLW-002	FLV-003	FLW-004	EFA-001	EFA-001	EFB-001	INF-001	INF-001	EFA-001	EFA-001
1	.459	.287	.166	.006	1.7	7.0	0.7				
2	.475	0.00	.458	.017	1.9	6.9	1.0				
3	.497	.497									
4	.503	.503			0.8	7.1	0.7				
5	.636	.636			0.7	6.8	1.2				
6	.492	.492			0.7	6.9	0.9				
7	.497		.489	.008	1.6	6.9	0.5				
8	.558	.451	.104	.003	1.6	6.8	0.6				
9	.546	.546			0.9	6.9	0.7				
10	.547	.547									
11	.462	.462			0.7	7.1	0.7	215.9	200	1.80	2.00
12	.514	.322	.186	.006	1.5/0.8	7.0	0.8				
13	.459		.446	.013	1.6	7.0	0.8				
14	.476		.463	.013	1.5	6.8	0.8				
15	.449		.443	.006	1.5	6.9	1.1				
16	.471		.460	.011	2.2	6.9	2.0				
17	.443	.443									
18	.443	.443			2.9	6.9	5.0				
19	.483		.470	.013	1.9	7.0	0.8				
20	.432		.426	.006	1.7	7.0	0.9				
21	.458		.447	.011	1.6	7.1	2.0				
22	.435	.127	.304	.004	2.6	7.0	4.9/3.5				
23	.448		.448		1.5	7.1	0.8				
24	.446	.446									
25	.446	.446			2.3	6.9	0.3				
26	.497		.493	.004	1.5	6.9	0.3	136.5	134	<2.0	<0.5
27	.484		.465	.019	2.7	6.9	1.8				
28	.536		.513	.023	1.5	7.0	0.3				
29	.483		.463	.020	1.5	7.0	0.5				
30	.521		.498	.023	1.7	7.0	0.9				
31	.468	.468									
Total	15,064	7,116	7,742	.206	41.6	180.8	31.0	352.4	334	2.80	2.25
Mo. Avg.	.486	.229	.250	.007	1.6	6.95	1.19	176.2	167	1.40	1.13

PLANT STAFFING:

Day Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 Night Shift Operator Class: C Certificate No: 21394 Name: Robert Bellino
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

ISSUANCE/REISSUANCE DATE: February 20, 2012

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW2P**

Facility: **Key West Resort Utility WWTP**

Monitoring Period From: AUGUST 1, 2014 To AUGUST 31 2014

	Solids, Total Suspended mg/L Reuse	Coliform, Fecal #/100mL	Nitrogen, Total mg/L	Phosphorus, Total (as P) mg/L					
Code	00530	74055	00600	00665					
Mon. Site	EFB-001	EFA-001	EFA-001	EFA-001					
1									
2									
3									
4	<0.5	<1							
5	<0.5	<1							
6	<0.5	<1							
7	<0.5	<1							
8									
9									
10									
11	<0.5	<1							
12	<0.5	<1	7.88	4.25					
13	<0.5	<1							
14	<0.5	<1							
15									
16									
17									
18	<0.5	<1							
19	<0.5	<1							
20	<0.5	<1							
21	<0.5Q	<1Q							
22									
23									
24									
25	<0.5	<1							
26	<0.5	<1 Q	13.10	4.51					
27	<0.5	<1							
28	<0.5	<1							
29									
30									
31									
Total	4.0	<1	20.98	8.76					
Mo.	0.25	<1	10.49	4.38					

PLANT STAFFING:

Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro

Day Shift Operator Class: C Certificate No: 21394 Name: Robert Bellino

Night Shift Operator Class: Certificate No: Name:

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Resort Utility, Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESCRIPTION: reuse storage golf course pond and irrigation system, with Influent

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

Key West, FL 33045

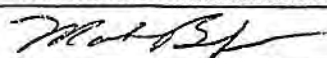
RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:

COUNTY: Monroe
 OFFICE: South District

MONITORING PERIOD From: July_1 2014 JULY 31, 2014

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - POND	Sample Measurement	.193						
PARM Code 50050 Y Mon. Site No. FLW-003	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - POND	Sample Measurement	.279						
PARM Code 50050 I Mon. Site No. FLW-003	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - MCDC	Sample Measurement	.012						
PARM Code 50050 Q Mon. Site No. FLW-004	Permit Requirement	0.06 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement			1.2		0		
PARM Code 00530 B Mon. Site No. EFB-001	Permit Requirement			5.0 (Max.)	mg/L		4 Days/Week	Grab
Coliform, Fecal	Sample Measurement			<1				
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement			25 (Max.)	#/100mL		4 Days/Week	Grab
Coliform, Fecal, % less than detection	Sample Measurement			100%				
PARM Code 51005 A Mon. Site No. EFA-001	Permit Requirement			75 (Mo.Total)	percent		4 Days/Week	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	08/20/2014

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

RECEIVED
 AUG 21 2014
 D.E.P. Marathon

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP R-001
 NUMBER:

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: JULY 1, 2014 To: JULY 31 2014

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	
pH	Sample Measurement				6.8		7.3				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				1.5						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement				1.0 (Min.)			mg/L		Continuous	Meter
Turbidity	Sample Measurement						2.0				
PARM Code 00070 B Mon. Site No. EFB-001	Permit Requirement						Report (Max.)	NTU		Continuous	Meter
Flow - TOTAL	Sample Measurement	.427									
PARM Code 50050 R Mon. Site No. FLW-001	Permit Requirement	0.499 (An.Avg.)		MGD						5 Days/Week	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement					1.17					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement					20.0 (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				1.97	1.97	1.54				
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement				60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Flow - TOTAL	Sample Measurement	.439	.438								
PARM Code 50050 S Mon. Site No. FLW-001	Permit Requirement	Report (Mo.Avg.)	Report (Qt.Avg.)	MGD						5 Days/Week	Calculated
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						88%	88			
PARM Code 00180 I Mon. Site No. FLW-001	Permit Requirement						Report (Mo.Avg.)	percent		Monthly	Calculated
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement						381				
PARM Code 80082 G Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC
Solids, Total Suspended (Influent)	Sample Measurement						236				
PARM Code 00530 Q Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC

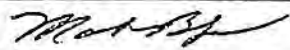
DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 2295 Victoria Ave, Suite 364, Ft. Myers, FL 33901-3875

PERMITTEE NAME: K W Resort Utility, Corp.
MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040
PERMIT NUMBER: FLA014951-011-DW2P
LIMIT: Final
CLASS SIZE: N/A
MONITORING GROUP NUMBER: U-001
MONITORING GROUP DESCRIPTION: two Class V injection wells
REPORT FREQUENCY PROGRAM: Monthly Domestic
FACILITY: Key West Resort Utility WWTP
LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045
COUNTY: Monroe
OFFICE: South District
RE-SUBMITTED DMR:
NO DISCHARGE FROM SITE:
MONITORING PERIOD From: JULY 1, 2014 To: JULY 31 2014

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type	
Flow - WELLS	Sample Measurement	.222							
PARM Code 50050 Y Mon. Site No. FLW-002	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer	
Flow - WELLS	Sample Measurement	.150							
PARM Code 50050 I Mon. Site No. FLW-002	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer	
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.17					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC	
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.97	1.97	1.54			
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			1.03					
PARM Code 00530 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)			mg/L	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			0.25	0.25	0.25			
PARM Code 00530 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	08/20/2014

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP NUMBER: U-001

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: JULY 1, 2014 To:

JULY 31 2014

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				<1					
PARM Code 74055 Y Mon. Site No. EFA-001	Permit Requirement				200 (An.Avg.)		#/100mL		Every 2 weeks	Grab
Coliform, Fecal	Sample Measurement				<1					
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement				200 (Mo.Geo.Min.)	800 (Max.)	#/100mL		Every 2 weeks	Grab
pH	Sample Measurement			7.0		7.1				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			0.7						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Total	Sample Measurement				18.68					
PARM Code 00600 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Nitrogen, Total	Sample Measurement			24.8	24.8	21.0				
PARM Code 00600 A Mon. Site No. EFA-001	Permit Requirement			Report (Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement				6.47					
PARM Code 00665 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement			5.70	5.70	5.33				
PARM Code 00665 A Mon. Site No. EFA-001	Permit Requirement			Report (Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Utility Corp.
MAILING ADDRESS: 6630 Front Street
Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWT
LOCATION: 6630 Front St., Stock Island
Key West, FL 33045-

LIMIT: Final
CLASS SIZE: N/A
MONITORING GROUP NUMBER: RMP-Q
MONITORING GROUP DESCRIPTION: Biosolids Quantity


REPORT FREQUENCY: Monthly
PROGRAM: Domestic

COUNTY: Monroe
South District

RE-SUBMITTED DMR:
NO DISCHARGE FROM SITE:
MONITORING PERIOD From: July 1, 2014 To: July 31 2014

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	5.1						
PARM Code B0008 Mon. Site No. RMP-1	Permit Requirement	Report (Mo. Total)	dry tons			0	Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		305-295-3301	08-20-2014

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

ISSUANCE/REISSUANCE DATE:

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

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA014951-011-DW

Facility: Key West Resort Utility WWTP

Monitoring Period From: JULY 1, 2014 To: JULY 31, 2014

	Flow MGD Total	Flow MGD Wells	Flow MGD Pond	Flow MGD MCDC	Chlor Inc, Total Residual (For	pH s.u.	Turbidity NTU Reuse	BOD, Carbonaceous 5 day, 20C (Influent) mg/L	Solids, Total Suspended (Influent) mg/L	BOD, Carbonaceous 5 day, 20C mg/L	Solids, Total Suspended mg/L
Code	50050	50050	50050	50050	50060	00400	00070	80082	00530	80082	00530
Mon. Site	FLW-001	FLW-002	FLW-003	FLW-004	EFA-001	EFA-001	EFB-001	INF-001	INF-001	EFA-001	EFA-001
1	.420		.375	.045	3.2	7.0	0.4	346.5	141.5	1.97	<0.5
2	.421		.403	.018	5.0	7.0	0.4				
3	.414		.399	.015	5.0	7.1	0.4				
4	.446		.425	.021	1.7	7.0	1.1				
5	.443		.426	.017	5.0	7.1	0.7				
6	.432	.432									
7	.432	.432			2.0	7.0	0.4				
8	.440		.422	.018	2.8	7.1	0.6				
9	.425		.404	.021	1.7	7.0	0.7				
10	.428		.407	.021	1.9	7.1	0.7				
11	.446		.430	.016	1.5	7.0	0.4				
12	.414		.396	.018	1.5	7.1	0.8				
13	.430	.430			0.7	7.0	0.5				
14	.415	.415			0.8	7.1	0.6				
15	.430		.415	.015	3.0	7.0	0.8	380.6	236	<2.0	<0.5
16	.403		.391	.012	1.6	7.1	0.8				
17	.414		.403	.011	1.7	7.1	1.7				
18	.440		.428	.012	1.5	7.1	2.0				
19	.399		.389	.010	1.8	7.0	1.0				
20	.451	.451									
21	.464	.464			2.4	7.0	1.0				
22	.514		.506	.008	2.7	7.1	1.3				
23	.480	.480			1.6	7.2	1.8				
24	.436	.436			1.7	7.2	1.4				
25	.424		.410	.014	2.0	7.2	1.8				
26	.535		.527	.008	1.6	7.0	0.5				
27	.412	.412									
28	.412	.412			1.4	7.1	0.7				
29	.463		.458	.005	1.6	7.3	0.4				
30	.465		.458	.007	1.7	7.3	1.4	193 J2	170	1.65 J2	<0.5
31	.453	.283	.163	.007	2.2	6.8	0.4				
Total	13.601	4.647	8.635	.319	61.3	198.1	24.7	920.1	547.5	4.62	0.75
Mo. Avg.	.439	.150	.279	0.010	2.2	7.1	0.88	307	183	1.54	0.25

2.50

PLANT STAFFING:

Influent Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 Day Shift Operator Class: C Certificate No: 21394 Name: Robert Bellino
 Night Shift Operator Class: Certificate No: Name:
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

ISSUANCE/REISSUANCE DATE: February 20, 2012

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

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA0149S1-011-DW2P** Facility: **Key West Resort Utility WWTP**

Monitoring Period From: JULY 1, 2014 To JULY 31 2014

	Solids, Total Suspended mg/L Reuse	Collform, Fecal #/100mL	Nitrogen, Total mg/L	Phosphorus, Total (as P) mg/L						
Code	00530	74055	00600	00665						
Mon. Site	EFB-001	EFA-001	EFA-001	EFA-001						
1	1.0	<1	24.80	5.70						
2	<0.5	<1								
3	<0.5	<1								
4										
5										
6										
7	<0.5	<1								
8	1.2	<1								
9	1.2	<1								
10	<0.5	<1								
11										
12										
13										
14	<0.5	<1								
15	<0.5	<1 Q	20.90	5.46						
16	<0.5	<1								
17	<0.5	<1								
18										
19										
20										
21	<0.5	<1								
22	<0.5	<1								
23	<0.5	<1								
24	<0.5	<1								
25										
26										
27										
28	1.0	<1								
29	1.0	<1	17.40	4.84						
30	1.0	<1								
31	<0.5	<1								
Total	9.65	<1	63.1	16.0						
Mo. Avg.	0.51	<1	21.0	5.33						

PLANT STAFFING:

Day Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 Night Shift Operator Class: C Certificate No: 21394 Name: Robert Bellino
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

RECEIVED

JUL 23 2014

D.E.P. Marathon

PERMITTEE NAME: K W Resort Utility, Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: R-001

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

reuse storage golf course pond and irrigation system, with Influent

Key West, FL 33045

DESCRIPTION:
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:

COUNTY: Monroe
 OFFICE: South District

MONITORING PERIOD From: JUNE 1 2014 JUNE 30, 2014

Parameter	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - POND Sample Measurement	.184						
PARM Code 50050 Y Mon. Site No. FLW-003 Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - POND Sample Measurement	.230						
PARM Code 50050 I Mon. Site No. FLW-003 Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - MCDC Sample Measurement	.012						
PARM Code 50050 Q Mon. Site No. FLW-004 Permit Requirement	0.06 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Solids, Total Suspended Sample Measurement			11.4		2		
PARM Code 00530 B Mon. Site No. EFB-001 Permit Requirement			5.0 (Max.)	mg/L		4 Days/Week	Grab
Coliform, Fecal Sample Measurement			<1				
PARM Code 74055 A Mon. Site No. EFA-001 Permit Requirement			25 (Max.)	#/100mL		4 Days/Week	Grab
Coliform, Fecal, % less than detection Sample Measurement			100%				
PARM Code 51005 A Mon. Site No. EFA-001 Permit Requirement			75 (Mo.Total)	percent		4 Days/Week	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	07-22-2014

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

2 TSS Ex this month:
 Our Courier has changed his pickup time to early A.M. (usually noon or later)
 I believe we're failing TSS during our morning washdown duties, troughs, filters
 and CCC's. We have changed up our schedule, should be acceptable next month

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP NUMBER: R-001

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: JUNE 1, 2014 To: JUNE 30, 2014

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	
pH	Sample Measurement				7.0		7.2				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				1.73						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement				1.0 (Min.)			mg/L		Continuous	Meter
Turbidity	Sample Measurement						2.10				
PARM Code 00070 B Mon. Site No. EFB-001	Permit Requirement						Report (Max.)	NTU		Continuous	Meter
Flow - TOTAL	Sample Measurement	.427									
PARM Code 50050 R Mon. Site No. FLW-001	Permit Requirement	0.499 (An.Avg.)		MGD						5 Days/Week	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement					1.68					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement					20.0 (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<2.0	<2.0	1.68				
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement				60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Flow - TOTAL	Sample Measurement	.430	.441								
PARM Code 50050 S Mon. Site No. FLW-001	Permit Requirement	Report (Mo.Avg.)	Report (Ql.Avg.)	MGD						5 Days/Week	Calculated
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						88%				
PARM Code 00180 I Mon. Site No. FLW-001	Permit Requirement						Report (Mo.Avg.)	percent		Monthly	Calculated
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement						245				
PARM Code 80082 G Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC
Solids, Total Suspended (Influent)	Sample Measurement						168.3				
PARM Code 00530 Q Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC


DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 2295 Victoria Ave, Suite 364, Ft. Myers, FL 33901-3875

PERMITTEE NAME: K W Resort Utility, Corp.
MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040
PERMIT NUMBER: FLA014951-011-DW2P
LIMIT: Final
CLASS SIZE: N/A
MONITORING GROUP NUMBER: U-001
MONITORING GROUP DESCRIPTION: two Class V injection wells
REPORT FREQUENCY: Monthly
PROGRAM: Domestic
FACILITY: Key West Resort Utility WWTP
LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045
COUNTY: Monroe
OFFICE: South District
NO DISCHARGE FROM SITE:
MONITORING PERIOD From: JUNE 1, 2014 To: JUNE 30 2014

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type	
Flow - WELLS	Sample Measurement	.232							
PARM Code 50050 Y Mon. Site No. FLW-002	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer	
Flow - WELLS	Sample Measurement	.186							
PARM Code 50050 I Mon. Site No. FLW-002	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer	
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.13					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC	
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2.36	2.36	1.68			
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			1.03					
PARM Code 00530 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)			mg/L	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			2.0	2.00	1.13			
PARM Code 00530 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkenper / Lead Operator		(305)295-3301	07-22-2014

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP U-001
 NUMBER:

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: JUNE 1, 2014 To: JUNE 30 2014

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				<1					
PARM Code 74055 Y Mon. Site No. EFA-001	Permit Requirement				200 (An.Avg.)		#/100mL		Every 2 weeks	Grab
Coliform, Fecal	Sample Measurement				<1					
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement				200 (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Every 2 weeks	Grab
pH	Sample Measurement			7.0		7.2				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			0.6						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Total	Sample Measurement				18.17					
PARM Code 00600 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Nitrogen, Total	Sample Measurement			27.8	27.8	24.9				
PARM Code 00600 A Mon. Site No. EFA-001	Permit Requirement			Report (Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement				6.50					
PARM Code 00665 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement			7.28	7.28	6.85				
PARM Code 00665 A Mon. Site No. EFA-001	Permit Requirement			Report(Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC

Docket No. 150071-SU
 Engineering MFRs
 Exhibit CAJ-2, Page 147 of 346

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Utility Corp.
MAILING ADDRESS: 6630 Front Street
Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
LOCATION: 6630 Front St., Stock Island
Key West, FL 33045-

LIMIT: Final
CLASS SIZE: N/A
MONITORING GROUP NUMBER: RMP-Q
MONITORING GROUP DESCRIPTION: Biosolids Quantity


REPORT FREQUENCY: Monthly
PROGRAM: Domestic

COUNTY: Monroe
South District

RE-SUBMITTED DMR:
NO DISCHARGE FROM SITE:
MONITORING PERIOD From: June 1, 2014 To: June 30 2014

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	4.4						
PARAM Code B0008 + Mon Site No. RMP-1	Permit Requirement	Report (Mo Total)	dry tons			0	Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		305-295-3301	07-22-2014

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

ISSUANCE/REISSUANCE DATE:

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

DAILY SAMPLE RESULTS - PART B

mit Number: **FLA014951-011-DW**

Facility: **Key West Resort Utility WWTP**

Monitoring Period From: JUNE 1, 2014 To: JUNE 30, 2014

	Flow MGD Total	Flow MGD Wells	Flow MGD Pond	Flow MGD MCDC	Chlorine, Total Residual (For	pH s.u.	Turbidity NTU Reuse	BOD, Carbonaceous 5 day, 20C (Influent) mg/L	Solids, Total Suspended (Influent) mg/L	BOD, Carbonaceous 5 day, 20C mg/L	Solids, Total Suspended mg/L
Code	50050	50050	50050	50050	50060	00400	00070	80082	00530	80082	00530
Mon. Site	FLW-001	FLW-002	FLW-003	FLW-004	EFA-001	EFA-001	EFB-001	INF-001	INF-001	EFA-001	EFA-001
1	.429	.429	0.0	0.0							
2	.429	.429	0.0	0.0	2.6	7.1	0.8				
3	.444	0.0	.417	.027	3.3	7.2	2.0	181	151	<2.0	2.0
4	.452	0.0	.407	.045	1.8	7.0	1.1				
5	.492	.492	0.0	0.0	0.6	7.1	1.2				
6	.453	.453	0.0	0.0	0.7	7.0	1.1				
7	.436	0.0	.409	.027	1.7	7.0	1.4				
8	.424	.424	0.0	0.0							
9	.425	.425	0.0	0.0	0.8	7.1	1.6				
10	.435	0.0	.408	.027	1.6	7.1	2.1				
11	.418	0.0	.399	.019	1.7	7.1	1.8				
12	.417	0.0	.397	.020	1.6	7.2	1.2				
13	.429	0.0	.408	.021	1.7	7.2	2.1				
14	.393	0.0	.373	.020	1.6	7.1	1.4				
15	.421	.421	0.0	0.0							
16	.421	.421	0.0	0.0	1.0	7.1	1.4				
17	.442	0.0	.416	0.26	1.7	7.1	1.8	245	168.3	236	<0.5
18	.438	0.0	.415	.023	1.6	7.0	1.2				
19	.438	0.0	.411	.027	1.8	7.0	1.2				
20	.420	0.0	.396	.024	3.2	7.1	1.4				
21	.413	.413	0.0	0.0	1.5	7.0	1.0				
22	.413	.413	0.0	0.0	1.5	7.1	1.1				
23	.415	.415	0.0	0.0	1.2	7.2	0.7				
24	.430	0.0	.403	.027	1.6	7.2	1.0				
25	.445	0.0	.428	.017	1.8	7.1	1.0				
26	.430	0.0	.411	.019	1.7	7.2	0.9				
27	.401	0.0	.379	.022	1.7	7.2	1.5				
28	.441	0.0	.415	.026	1.5	7.0	1.3				
29	.422	.422	0.0	0.0							
30	.422	.422	0.0	0.0	3.6	7.0	0.7				
31											
Total	12.888	5.579	6.892	.417	45.1	184.5	34.0	426	319.3	3.36	2.25
Mo. Avg.	.430	.186	.230	.014	1.73	7.10	1.31	213	159.7	1.68	1.13

2.50

STAFFING:

Night Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 Day Shift Operator Class: C Certificate No: 21394 Name: Robert Bellino
 Night Shift Operator Class: Certificate No: Name:
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

ISSUANCE/REISSUANCE DATE: February 20, 2012

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW2P**

Facility: **Key West Resort Utility WWTP**

Monitoring Period From: JUNE 1, 2014 To JUNE 30 2014

	Solids, Total Suspended mg/L Reuse	Coliform, Fecal #/100mL	Nitrogen, Total mg/L	Phosphorus, Total (as P) mg/L					
Code	00530	74055	00600	00665					
Mon. Site	EFB-001	EFA-001	EFA-001	EFA-001					
1									
2	1.6	<1							
3	2.0	<1	21.9	7.28					
4	5.8*	<1							
5	1.0	<1							
6									
7									
8									
9	1.8	<1							
10	1.0	<1							
11	1.8	<1							
12	1.0	<1							
13									
14									
15									
16	<0.5	<1							
17	1.2	<1	27.8	6.41					
18	11.4*	<1							
19	1.2	<1							
20									
21									
22									
23	2.0	<1							
24	1.2	<1							
25	2.4	<1							
26	1.2	<1							
27									
28									
29									
30	0.9	<1							
31									
Total	37.75	8.5	49.7	13.69					
Mo. Avg.	2.22	<1	24.9	6.85					

PLANT STAFFING:

Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro

Lay Shift Operator Class: C Certificate No: 21394 Name: Robert Bellino

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

Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Resort Utility, Corp.
 MAILING: 6630 Front Street
 ADDRESS: Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESCRIPTION: reuse storage golf course pond and irrigation system, with Influent

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

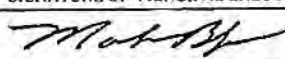
Key West, FL 33045

COUNTY: Monroe
 OFFICE: South District

RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: MAY_1 2014 MAY 31, 2014

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - POND	Sample Measurement	.175..						
PARM Code 50050 - Y Mon. Site No. FLW-003	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - POND	Sample Measurement	.313						
PARM Code 50050 - 1 Mon. Site No. FLW-003	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - MCDC	Sample Measurement	.012						
PARM Code 50050 - Q Mon. Site No. FLW-004	Permit Requirement	0.06 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement			2.5				
PARM Code 00530 - B Mon. Site No. EPB-001	Permit Requirement			5.0 (Max.)	mg/L		4 Days/Week	Grab
Coliform, Fecal	Sample Measurement			<1				
PARM Code 74055 - A Mon. Site No. EFA-001	Permit Requirement			2.5 (Max.)	#/100mL		4 Days/Week	Grab
Coliform, Fecal, % less than detection	Sample Measurement		100%					
PARM Code 51005 - A Mon. Site No. EFA-001	Permit Requirement		75 (Mo.Total)		percent		4 Days/Week	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	06-13-2014

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

Docket No. 150071-SU
 Engineering MFRs
 Exhibit CAJ-2, Page 151 of 346

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP R-001
NUMBER:

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: MAY 1, 2014 To: MAY 31, 2014

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	
pH	Sample Measurement				6.8		7.2				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grib
Chlorine, Total Residual (For Disinfection)	Sample Measurement				1.5						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement				1.0 (Min.)			mg/L		Continuous	Meter
Turbidity	Sample Measurement						2.50				
PARM Code 00070 B Mon. Site No. EFB-001	Permit Requirement						Report (Max.)	NTU		Continuous	Meter
Flow - TOTAL	Sample Measurement	.426									
PARM Code 50050 R Mon. Site No. FLW-001	Permit Requirement	0.499 (An.Avg.)		MGD						5 Days/Week	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<2						
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement				20.0 (An.Avg.)			mg/L		Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<2	<2	<2				
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement				60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Flow - TOTAL	Sample Measurement	.446	.437								
PARM Code 50050 S Mon. Site No. FLW-001	Permit Requirement	Report (Mo.Avg.)	Report (Qt.Avg.)	MGD						5 Days/Week	Calculated
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						88%				
PARM Code 00180 I Mon. Site No. FLW-001	Permit Requirement						Report (Mo.Avg.)	percent		Monthly	Calculated
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement						276.5				
PARM Code 80082 G Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC
Solids, Total Suspended (Influent)	Sample Measurement						141.0				
PARM Code 00530 Q Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 2295 Victoria Ave, Suite 364, Ft. Myers, FL 33901-3875

PERMITTEE NAME: K W Resort Utility, Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: U-001
 MONITORING GROUP DESCRIPTION: two Class V injection wells

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

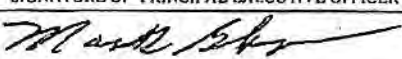
FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045

COUNTY: Monroe
 OFFICE: South District

RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: MAY 1, 2014 To: MAY 31 2014

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - WELLS	Sample Measurement	.240						
PARM Code 50050 Y Mon. Site No. FLW-002	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - WELLS	Sample Measurement	.116						
PARM Code 50050 I Mon. Site No. FLW-002	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.07				
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement			<2	<2	<2		
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks
Solids, Total Suspended	Sample Measurement			1.10				
PARM Code 00530 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)			mg/L	Every 2 weeks
Solids, Total Suspended	Sample Measurement			2.00				
PARM Code 00530 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks
				1.40	<0.5			

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	06-13-2014

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

Docket No. 150071-SU
 Engineering MFRS
 Exhibit CAL-2, Page 153 of 346

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP U-001
 NUMBER:
 MONITORING PERIOD From: MAY 1, 2014 To: MAY 31 2014

PERMIT NUMBER: FLA014951-011-DW2P

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				<1					
PARM Code 74055 Y Mon. Site No. EFA-001	Permit Requirement				200 (An.Avg.)		#/100mL		Every 2 weeks	Grab
Coliform, Fecal	Sample Measurement				<1	<1				
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement				200 (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Every 2 weeks	Grab
pH	Sample Measurement			7.0		7.1				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			1.70						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Total	Sample Measurement				17.39					
PARM Code 00600 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Nitrogen, Total	Sample Measurement			24.40	24.40	22.75				
PARM Code 00600 A Mon. Site No. EFA-001	Permit Requirement			Report (Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement				6.71					
PARM Code 00665 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement			6.93	6.93	6.65				
PARM Code 00665 A Mon. Site No. EFA-001	Permit Requirement			Report(Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Utility Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045-


LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: RMP-Q
 MONITORING GROUP DESCRIPTION: Biosolids Quantity
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: MAY 1, 2014 To: MAY 31 2014

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

COUNTY: Monroe
 South District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement		4.0					
PARM Code: B0008 Mon. Site No: RMP-1	Permit Requirement		Report (Mo. Total)	dry tons		0	Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		305-295-3301	06-13-2014

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

ISSUANCE/REISSUANCE DATE:

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

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW**

Facility: **Key West Resort Utility WWTP**

Monitoring Period From: MAY 1, 2014 To: MAY 31, 2014

	Flow MGD Total	Flow MGD Wells	Flow MGD Pond	Flow MGD MCDC	Chlorine, Total Residual (For	pH s.u.	Turbidity NTU Reuse	BOD, Carbonaceous 5 day, 20C (Influent) mg/L	Solids, Total Suspended (Influent) mg/L	BOD, Carbonaceous 5 day, 20C mg/L	Solids, Total Suspended mg/L
Code	50050	50050	50050	50050	50060	00400	00070	80082	00530	80082	00530
Mon. Site	FLW-001	FLW-002	FLW-003	FLW-004	EFA-001	EFA-001	EFB-001	INF-001	INF-001	EFA-001	EFA-001
1	.478	0	.459	.019	1.7	7.0	2.5				
2	.469	0	.449	.020	1.6	7.1	0.8				
3	.463	0	.428	.035	1.5	7.0	1.0				
4	.476	.476	0	0	0	0	0				
5	.476	.476	0	0	1.7	7.0	0.7				
6	.472	0	.442	.030	1.6	7.2	0.4	276.5	129	<2	<0.5
7	.431	0	.412	.019	1.8	7.2	0.8				
8	.457	0	.436	.021	1.8	7.2	1.3				
9	.401	0	.381	.020	1.7	7.1	2.1				
10	.426	0	.387	.039	1.7	6.8	2.1				
11	.445	.445	0	0	0	0	0				
12	.445	.445	0	0	2.3	7.0	2.0				
13	.456	0	.432	.024	1.7	7.1	1.4				
14	.477	0	.459	.018	2.0	7.2	0.8				
15	.482	0	.459	.023	1.7	7.2	1.1				
16	.481	0	.455	.026	1.7	7.1	1.4				
17	.414	0	.385	.029	2.4	7.0	0.80				
18	.440	.440	0	0	0	0	0				
19	.440	.440	0	0	2.8	7.1	0.5				
20	.448	0	.420	.028	2.0	7.2	0.6				
21	.438	0	.423	.015	1.7	7.2	0.8	165.5	141	<2	<0.5
22	.444	0	.418	.026	1.8	7.2	0.8				
23	.454	0	.433	.021	1.6	7.1	2.1				
24	.378	0	.357	.021	2.0	7.0	0.5				
25	.434	.434	0	0	0	0	0				
26	.434	.434	0	0	3.0	7.1	1.1				
27	.448	0	.423	.025	1.7	7.1	0.8				
28	.420	0	.404	.016	1.6	7.1	0.5				
29	.441	0	.423	.018	1.7	7.2	0.7				
30	.442	0	.404	.018	3.0	7.2	0.6				
31	.431	0	.410	.021	1.5	7.1	0.5				
Total	13.821	3.590	9.699	0.532	51.3	191.8	28.7	442	270	2	0.5
Mo. Avg.	.446	.116	.313	.017	1.90	7.10	1.06	221	135	1	<0.5

2.50

PLANT STAFFING:

Day Shift Operator	Class: <u> B </u>	Certificate No: <u> 13317 </u>	Name: <u> Ted Yarboro </u>
Chief Operator	Class: <u> C </u>	Certificate No: <u> 21394 </u>	Name: <u> Robert Bellino </u>
Night Shift Operator	Class: <u> </u>	Certificate No: <u> </u>	Name: <u> </u>
Lead Operator	Class: <u> B </u>	Certificate No: <u> 5355 </u>	Name: <u> Mark Burkemper </u>

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JUN 17 2014

D.E.P. Marathon

ISSUANCE/REISSUANCE DATE: February 20, 2012

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

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA014951-011-DW2P

Facility: Key West Resort Utility WWTP

Monitoring Period From: MAY 1, 2014 To MAY 31 2014

	Solids, Total Suspended mg/L Reuse	Coliform, Fecal #/100mL	Nitrogen, Total mg/L	Phosphorus, Total (as P) mg/L						
Code	00530	74055	00600	00665						
Mon. Site	EFB-001	EFA-001	EFA-001	EFA-001						
1	1.0	<1								
2										
3										
4										
5	<0.5	<1								
6	<0.5	<1	21.10	6.37						
7	1.0	<1								
8	<0.5	<1								
9	0	0								
10	0	0								
11	0	0								
12	<0.5	<1								
13	<0.5	<1								
14	<0.5	<1								
15	<0.5	<1								
16	0	0								
17	0	0								
18	0	0								
19	<0.5	<1								
20	<0.5	<1								
21	<0.5	<1	24.40	6.93						
22	<0.5	<1								
23	0	0								
24	0	0								
25	0	0								
26	0	0								
27	2.0	<1								
28	1.2	<1								
29	1.0	<1								
30	0	0								
31	0	0								
Total	8.95	8	45.5	13.3						
Mo. Avg	0.56	<1	22.75	6.65						

PLANT STAFFING:

Day Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 Day Shift Operator Class: C Certificate No: 21394 Name: Robert Bellino
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Resort Utility, Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESCRIPTION: reuse storage golf course pond and irrigation system, with Influent
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: APRIL_1 2014 APRIL_30, 2014

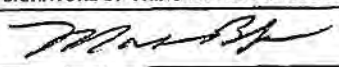
FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island

Key West, FL 33045

COUNTY: Monroe
 OFFICE: South District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - POND PARM Code 50050 Y Mon. Site No. FLW-003	Sample Measurement	.164						
	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - POND PARM Code 50050 I Mon. Site No. FLW-003	Sample Measurement	.301						
	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - MCDC PARM Code 50050 Q Mon. Site No. FLW-004	Sample Measurement	.010						
	Permit Requirement	0.06 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Solids, Total Suspended PARM Code 00530 B Mon. Site No. EFB-001	Sample Measurement				2.2			
	Permit Requirement				5.0 (Max.)	mg/L	4 Days/Week	Grab
Coliform, Fecal PARM Code 74055 A Mon. Site No. EFA-001	Sample Measurement				<1			
	Permit Requirement				25 (Max.)	#/100mL	4 Days/Week	Grab
Coliform, Fecal, % less than detection PARM Code 51005 A Mon. Site No. EFA-001	Sample Measurement			100%				
	Permit Requirement			75 (Mo.Total)		percent	4 Days/Week	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkenper / Lead Operator		(305)295-3301	05/21/2014

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

RECEIVED

MAY 22 2014

D.E.P. Marathon

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP R-001
 NUMBER:

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: APRIL 1, 2014 To: APRIL 30, 2014

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	
pH	Sample Measurement				7.0		7.2			
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.o.	5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				1.4					
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement				1.0 (Min.)			mg/L	Continuous	Meter
Turbidity	Sample Measurement						2.6			
PARM Code 00070 B Mon. Site No. EFB-001	Permit Requirement						Report (Max.)	NTU	Continuous	Meter
Flow - TOTAL	Sample Measurement	.425								
PARM Code 50050 R Mon. Site No. FLW-001	Permit Requirement	0.499 (An.Avg.)		MGD					5 Days/Week	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement					1.28				
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement					20.0 (An.Avg.)		mg/L	Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<2	<2	<2			
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement				60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC
Flow - TOTAL	Sample Measurement	.448	.441							
PARM Code 50050 S Mon. Site No. FLW-001	Permit Requirement	Report (Mo.Avg.)	Report (Qt.Avg.)	MGD					5 Days/Week	Calculated
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						88			
PARM Code 00180 I Mon. Site No. FLW-001	Permit Requirement						Report (Mo.Avg.)	percent	Monthly	Calculated
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement						.292			
PARM Code 80082 G Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L	Bi-weekly; every 2 weeks	8-hr FPC
Solids, Total Suspended (Influent)	Sample Measurement						214			
PARM Code 00530 Q Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L	Bi-weekly; every 2 weeks	8-hr FPC

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MAY 22 2014

D.E.P. Marathon

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 2295 Victoria Ave, Suite 364, Ft. Myers, FL 33901-3875

PERMITTEE NAME: K W Resort Utility, Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: U-001
 MONITORING GROUP: two Class V injection wells
 DESCRIPTION:
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: APRIL 1, 2014 To: APRIL 30 2014

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

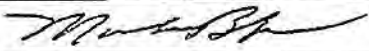
FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island

Key West, FL 33045

COUNTY: Monroe
 OFFICE: South District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type	
Flow - WELLS	Sample Measurement	.233							
PARM Code 50050 Y Mon. Site No. FLW-002	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer	
Flow - WELLS	Sample Measurement	.128							
PARM Code 50050 1 Mon. Site No. FLW-002	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer	
BOD, Carbonaceous 5 day, 20C	Sample Measurement			<2					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC	
BOD, Carbonaceous 5 day, 20C	Sample Measurement			<2					
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement								
PARM Code 00530 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)			mg/L	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			2.0	2.0	2.0			
PARM Code 00530 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	05/21/2014

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

RECEIVED
 MAY 22 2014

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP U-001
 NUMBER:

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: APRIL 1, 2014 To: APRIL 30 2014

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal PARM Code 74055 Y Mon. Site No. EFA-001	Sample Measurement			<1						
	Permit Requirement			200 (An.Avg.)			#/100mL		Every 2 weeks	Grab
Coliform, Fecal PARM Code 74055 A Mon. Site No. EFA-001	Sample Measurement			<1	<1					
	Permit Requirement			200 (Mo.Geo.Mn.)	800 (Max.)		#/100mL		Every 2 weeks	Grab
pH PARM Code 00400 A Mon. Site No. EFA-001	Sample Measurement			7.0		7.0				
	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection) PARM Code 50060 A Mon. Site No. EFA-001	Sample Measurement			1.0						
	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Total PARM Code 00600 Y Mon. Site No. EFA-001	Sample Measurement				17.3					
	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Nitrogen, Total PARM Code 00600 A Mon. Site No. EFA-001	Sample Measurement			22.6	22.6	21.1				
	Permit Requirement			Report (Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P) PARM Code 00665 Y Mon. Site No. EFA-001	Sample Measurement				6.64					
	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P) PARM Code 00665 A Mon. Site No. EFA-001	Sample Measurement			7.54	7.54	6.43				
	Permit Requirement			Report(Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC

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MAY 22 2014

D.E.P. Marathon

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Utility Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045-

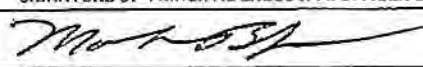
LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: RMP-Q
 MONITORING GROUP DESCRIPTION: Biosolids Quantity
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: APRIL 1, 2014 To: APRIL 30 2014

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

COUNTY: Monroe
 South District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	6.2						
PARM Code: B0008 + Mon Site No: RMP-1	Permit Requirement	Report (Mo. Total)	dry tons			0	Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		305-295-3301	05/21/2014

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

RECEIVED
 MAY 22 2014
 D.E.P. Marathon

ISSUANCE/REISSUANCE DATE:

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

DAILY SAMPLE RESULTS - PART B

mit Number: **FLA014951-011-DW2P**

Facility: **Key West Resort Utility WWTP**

Monitoring Period From: APRIL 1, 2014 To: APRIL 30, 2014

Code	Flow MGD Total	Flow MGD Wells	Flow MGD Pond	Flow MGD MCDC	Chlorine, Total Residual (For	pH s.u.	Turbidity NTU Reuse	BOD, Carbonaceous 5 day, 20C (Influent) mg/L	Solids, Total Suspended (Influent) mg/L	BOD, Carbonaceous 5 day, 20C mg/L	Solids, Total Suspended mg/L
Mon. Site	FLW-001	FLW-002	FLW-003	FLW-004	EFA-001	EFA-001	EFB-001	INF-001	INF-001	EFA-001	EFA-001
1	.437	0	.410	.027	1.6	7.0	1.1				
2	.473	.0	.454	0.19	1.4	7.0	0.7				
3	.446	0	.428	.018	4.4	7.1	2.6				
4	.454	0	.432	.022	3.6	7.0	2.2				
5	.432	.288	.114	.030	1.6	7.0	1.4				
6	.418	.418									
7	.420	.420			1.5	7.0	1.8				
8	.413	0	.388	.025	1.8	7.1	2.0	187	175	<2.0	2.0
9	.487	0	.453	.034	1.6	7.0	1.5				
10	.448	0	.414	.034	2.5	7.0	0.7				
11	.442	0	.418	.024	1.6	7.0	0.8				
12	.401	0	.370	.031	2.9	7.1	0.6				
13	.436	.436									
14	.435	.435			1.8	7.0	0.9				
15	.452	0	.423	.029	1.8	7.1	0.9				
16	.450	0	.429	.021	3.0	7.1	0.7				
17	.446	0	.425	.021	1.6	7.1	0.5				
18	.432	0	.413	.019	1.8	7.1	0.8				
19	.438	0	.411	.027	1.5	7.0	0.7				
20	.446	.446									
21	.446	.446			1.0	7.0	0.4				
22	.450	0	.418	.032	1.5	7.0	0.5	292	214	<2.0	<0.5
23	.460	0	.438	.022	1.7	7.1	0.4				
24	.438	0	.415	.023	1.5	7.0	0.4				
25	.474	0	.442	.032	1.6	7.0	0.4				
26	.452	0	.425	.027	1.7	7.0	0.7				
27	.480	.480									
28	.480	.480			2.4	7.0	1.9				
29	.494	0	.467	.027	1.7	7.2	1.4				
30	.464	0	.446	.018	1.6	7.1	1.3				
31											
Total	13.444	3.849	9.033	.562	50.7	183.1	27.3	479	389	<2	2.25
Mo. Avg.	.448	.128	.301	.019	1.95	7.04	1.05	240	195	<2	1.13

2.50

STAFFING:

Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 Day Shift Operator Class: C Certificate No: 21394 Name: Robert Bellino
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

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MAY 27 2014

D.E.P. Water

ISSUANCE/REISSUANCE DATE: February 20, 2012

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

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW2P**

Facility: **Key West Resort Utility WWTP**

Monitoring Period From: APRIL 1, 2014 To APRIL 30 2014

	Solids, Total Suspended mg/L Reuse	Coliform, Fecal #/100mL	Nitrogen, Total mg/L	Phosphorus, Total (as P) mg/L					
Code	00530	74055	00600	00665					
Mon. Site	EFB-001	EFA-001	EFA-001	EFA-001					
1	1.4	<1							
2	1.0	<1							
3	<0.5	<1							
4									
5									
6									
7	<0.5	<1							
8	<0.5	<1	22.6	7.54					
9	<0.5	<1							
10	<0.5	<1							
11									
12									
13									
14	<0.5	<1							
15	1.6	<1							
16	1.6	<1							
17	1.2	<1							
18									
19									
20									
21	<0.5	<1							
22	1.0	<1	19.5	5.31					
23	1.2	<1							
24	1.4	<1							
25									
26									
27									
28	1.8	<1							
29	1.4	<1							
30	2.2	<1							
31									
Total	17.55	9.0	42.1	12.85					
Mo. Avg.	0.98	<1	21.1	6.43					

RECEIVED
 MAY 22 2014

PLANT STAFFING:

Day Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 Night Shift Operator Class: C Certificate No: 21394 Name: Robert Bellino D.E.P. Marathon
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Resort Utility, Corp.
 MAILING: 6630 Front Street
 ADDRESS: Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: R-001
 DESCRIPTION: reuse storage golf course pond and irrigation system, with Influent
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: March 1 2014

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic


Key West, FL 33045

March 31, 2014

COUNTY: Monroe
 OFFICE: South District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - POND	Sample Measurement	.159						
PARM Code 50050 Y Mon. Site No. FLW-003	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - POND	Sample Measurement	.163						
PARM Code 50050 I Mon. Site No. FLW-003	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - MCDC	Sample Measurement	.010						
PARM Code 50050 Q Mon. Site No. FLW-004	Permit Requirement	0.06 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement			2.2				
PARM Code 00530 B Mon. Site No. EFB-001	Permit Requirement			5.0 (Max.)	mg/L		4 Days/Week	Grab
Coliform, Fecal	Sample Measurement			<1				
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement			25 (Max.)	#/100mL		4 Days/Week	Grab
Coliform, Fecal, % less than detection	Sample Measurement		100%					
PARM Code 51005 A Mon. Site No. EFA-001	Permit Requirement		75 (Mo.Total)		percent		4 Days/Week	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	04-23-2014

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP NUMBER: R-001

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: March 1, 2014 To: March 31, 2014

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	
pH	Sample Measurement				6.9		7.2				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				1.5						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement				1.0 (Min.)			mg/L		Continuous	Meter
Turbidity	Sample Measurement						2.4				
PARM Code 00070 B Mon. Site No. EFB-001	Permit Requirement						Report (Max.)	NTU		Continuous	Meter
Flow - TOTAL	Sample Measurement	.421									
PARM Code 50050 R Mon. Site No. FLW-001	Permit Requirement	0.499 (An.Avg.)		MGD						5 Days/Week	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement					1.3					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement					20.0 (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1	1		1				
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement				60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Flow - TOTAL	Sample Measurement	.418	.419								
PARM Code 50050 S Mon. Site No. FLW-001	Permit Requirement	Report (Mo.Avg.)	Report (Ql.Avg.)	MGD						5 Days/Week	Calculated
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						84%				
PARM Code 00180 I Mon. Site No. FLW-001	Permit Requirement						Report (Mo.Avg.)	percent		Monthly	Calculated
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement						259				
PARM Code 80082 G Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC
Solids, Total Suspended (Influent)	Sample Measurement						233				
PARM Code 00530 Q Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 2295 Victoria Ave, Suite 364, Ft. Myers, FL 33901-3875

PERMITTEE NAME: K W Resort Utility, Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: U-001
 MONITORING GROUP DESCRIPTION: two Class V injection wells

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

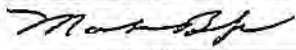
Key West, FL 33045

RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: March 1, 2014 To: March 31 2014

COUNTY: Monroe
 OFFICE: South District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type	
Flow - WELLS	Sample Measurement	.254							
PARM Code 50050 Y Mon. Site No. FLW-002	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer	
Flow - WELLS	Sample Measurement	.243							
PARM Code 50050 1 Mon. Site No. FLW-002	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer	
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.3					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC	
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1					
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			1.30					
PARM Code 00530 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC	
Solids, Total Suspended	Sample Measurement		1.67	0.96		0.96			
PARM Code 00530 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	04-23-2014

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

RECEIVED

APR 23 2014

D.E.P. Marathon

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP U-001
 NUMBER:

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: March 1, 2014 To: March 31 2014

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement					1					
PARM Code 74055 Y Mon. Site No. EFA-001	Permit Requirement					200 (An.Avg.)		#/100mL		Every 2 weeks	Grab
Coliform, Fecal	Sample Measurement					1	1				
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement					200 (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Every 2 weeks	Grab
pH	Sample Measurement				6.8		7.2				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				1.1						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement				0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Total	Sample Measurement					16.80					
PARM Code 00600 Y Mon. Site No. EFA-001	Permit Requirement					Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Nitrogen, Total	Sample Measurement				18.30	18.30	18.20				
PARM Code 00600 A Mon. Site No. EFA-001	Permit Requirement				Report (Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement					6.55					
PARM Code 00665 Y Mon. Site No. EFA-001	Permit Requirement					Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement				10.20	10.20	9.97				
PARM Code 00665 A Mon. Site No. EFA-001	Permit Requirement				Repor(Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Utility Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER:

FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045-

LIMIT:
 CLASS SIZE:
 MONITORING GROUP NUMBER:
 MONITORING GROUP DESCRIPTION:
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD

Final
 N/A
 RMP-Q
 Biosolids Quantity

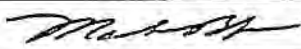
REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

COUNTY: Monroe
 South District

From: March 1, 2014 To: March 31, 2014

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	6.6						
PARM Code: B0008 + Mon. Site No.: RMP-1	Permit Requirement	Report (Mo. Total)	dry tons			0	Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		305-295-3301	04-23-2014

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

ISSUANCE/REISSUANCE DATE:

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

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW2P**

Facility: **Key West Resort Utility WWTP**

Monitoring Period From: March 1, 2014 To: March 31, 2014

	Flow MGD Total	Flow MGD Wells	Flow MGD Pond	Flow MGD MCDC	Chlorine, Total Residual (For	pH s.u.	Turbidity NTU Reuse	BOD, Carbonaceous 5 day, 20C (Influent) mg/L	Solids, Total Suspended (Influent) mg/L	BOD, Carbonaceous 5 day, 20C mg/L	Solids, Total Suspended mg/L
Code	50050	50050	50050	50050	50060	00400	00070	80082	00530	80082	00530
Mon. Site	FLW-001	FLW-002	FLW-003	FLW-004	EFA-001	EFA-001	EFB-001	INF-001	INF-001	EFA-001	EFA-001
1	.321	.321	-	-	1.3	6.8	2.4				
2	.297	.297	-	-	-	-	-				
3	.297	.297	-	-	1.5	6.9	1.2				
4	.305	.305	-	-	3.0	7.0	1.3				
5	.289	-	.259	.030	2.2	7.0	1.1				
6	.310	-	.288	.022	1.7	7.2	1.5				
7	.345	.216	.117	.012	1.8	7.2	1.3				
8	.330	.330	-	-	1.1	7.1	0.5				
9	.297	.297	-	-	-	-	-				
10	.296	.296	-	-	1.6	7.2	1.2				
11	.295	-	.262	.033	3.5	7.1	0.8	259	233	<2.0	1.67
12	.425	-	.392	.033	4.1	7.0	1.4				
13	.502	.314	.176	.012	4.7	7.1	0.8				
14	.568	.355	.200	.013	2.3	7.2	0.8				
15	.466	-	.432	.034	2.8	6.9	0.8				
16	.477	.477	-	-	-	-	-				
17	.477	.477	-	-	3.5	7.2	0.6				
18	.505	-	.466	.039	2.8	7.0	0.8				
19	.456	-	.432	.024	3.8	7.1	0.8				
20	.490	.490	-	-	2.4	7.1	1.0				
21	.474	.474	-	-	2.0	7.0	1.8				
22	.458	-	.426	.032	3.2	7.1	0.6				
23	.451	.451	-	-	-	-	-				
24	.451	.451	-	-	2.4	7.1	0.8				
25	.485	-	.463	.022	1.8	7.0	0.9	153	168	<2.0	<0.5
26	.539	-	.520	.019	1.7	7.1	2.1				
27	.491	-	.453	.038	1.5	7.1	1.6				
28	.495	.495	-	-	1.7	7.1	1.2				
29	.470	.294	.165	.011	1.5	7.0	0.7				
30	.444	.444	-	-	-	-	-				
31	.444	.444	-	-	5.0	7.1	0.8				
Total	12.950	7.525	5.051	.374	64.9	183.7	28.8	412	401	2.0	1.92
Mo. Avg.	.418	.243	.163	0.012	2.50	7.07	1.11	206	201	<2.0	0.96

2.50

PLANT STAFFING:

Day Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 Night Shift Operator Class: C Certificate No: 21394 Name: Robert Bellino
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

ISSUANCE/REISSUANCE DATE: February 20, 2012

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW2P**

Facility: **Key West Resort Utility WWTP**

Monitoring Period From: March 1, 2014 To March 31 2014

	Solids, Total Suspended mg/L Reuse	Coliform, Fecal #/100mL	Nitrogen, Total mg/L	Phosphorus, Total (as P) mg/L					
Code	00530	74055	00600	00665					
Mon. Site	EFB-001	EFA-001	EFA-001	EFA-001					
1									
2									
3	1.0	<1							
4	<0.5	<1							
5	1.4	<1							
6	2.0	<1							
7									
8									
9									
10	1.4	<1							
11	<0.5	<1	18.10	10.2					
12	<0.5	<1							
13	1.6	<1							
14									
15									
16									
17	<0.5	<1							
18	<0.5	<1							
19	1.6	<1							
20	<0.5	<1							
21									
22									
23									
24	1.2	<1							
25	<0.5	<1							
26	2.2	<1	18.30	9.75					
27	<0.5	<1							
28									
29									
30									
31	1.6	<1							
Total	16	8.5	36.40	19.93					
Mo. Avg.	0.94	<1	18.20	9.97					

PLANT STAFFING:

Day Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 Night Shift Operator Class: C Certificate No: 21394 Name: Robert Bellino
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Resort Utility, Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESCRIPTION: reuse storage golf course pond and irrigation system, with Influent

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic


Key West, FL 33045

COUNTY: Monroe
 OFFICE: South District

RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: February_1 2014 February 28, 2014

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - POND	Sample Measurement	.161						
PARM Code 50050 Y Mon. Site No. FLW-003	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - POND	Sample Measurement	.121						
PARM Code 50050 I Mon. Site No. FLW-003	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - MCDC	Sample Measurement	.009						
PARM Code 50050 Q Mon. Site No. FLW-004	Permit Requirement	0.06 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement			3.2				
PARM Code 00530 B Mon. Site No. EFB-001	Permit Requirement			5.0 (Max.)	mg/L		4 Days/Week	Grab
Coliform, Fecal	Sample Measurement			<1				
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement			25 (Max.)	#/100mL		4 Days/Week	Grab
Coliform, Fecal, % less than detection	Sample Measurement			100%				
PARM Code 51005 A Mon. Site No. EFA-001	Permit Requirement			75 (Mo.Total)	percent		4 Days/Week	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	03/25/2014

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

RECEIVED

MAR 26 2014

D.E.P. Marathon

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP NUMBER: R-001

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: February 1, 2014 To: February 28, 2014

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	
pH PARM Code 00400 A Mon. Site No. EFA-001	Sample Measurement				6.9	7.2				
	Permit Requirement				6.0 (Min.)	8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection) PARM Code 50060 A Mon. Site No. EFA-001	Sample Measurement				1.5					
	Permit Requirement				1.0 (Min.)		mg/L		Continuous	Meter
Turbidity PARM Code 00070 B Mon. Site No. EFB-001	Sample Measurement					2.2				
	Permit Requirement					Report (Max.)	NTU		Continuous	Meter
Flow - TOTAL PARM Code 50050 R Mon. Site No. FLW-001	Sample Measurement		.420							
	Permit Requirement		0.499 (An.Avg.)	MGD					5 Days/Week	Calculated
BOD, Carbonaceous 5 day, 20C PARM Code 80082 Y Mon. Site No. EFA-001	Sample Measurement					1.37				
	Permit Requirement					20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C PARM Code 80082 A Mon. Site No. EFA-001	Sample Measurement				1.59	1.30				
	Permit Requirement				60.0 (Max.)	45.0 (Wk.Avg.) 30.0 (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Flow - TOTAL PARM Code 50050 S Mon. Site No. FLW-001	Sample Measurement	.456	.400							
	Permit Requirement	Report (Mo.Avg.)	Report (Ql.Avg.)	MGD					5 Days/Week	Calculated
Percent Capacity, (TMADP/Permitted Capacity) x 100 PARM Code 00180 1 Mon. Site No. FLW-001	Sample Measurement					80%				
	Permit Requirement					Report (Mo.Avg.)	percent		Monthly	Calculated
BOD, Carbonaceous 5 day, 20C (Influent) PARM Code 80082 G Mon. Site No. INF-001	Sample Measurement					220				
	Permit Requirement					Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC
Solids, Total Suspended (Influent) PARM Code 00530 Q Mon. Site No. INF-001	Sample Measurement					165				
	Permit Requirement					Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 2295 Victoria Ave, Suite 364, Ft. Myers, FL 33901-3875

PERMITTEE NAME: K W Resort Utility, Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER:

FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island

LIMIT:
 CLASS SIZE:
 MONITORING GROUP NUMBER:
 MONITORING GROUP DESCRIPTION:
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From:

Final
 N/A
 U-001
 two Class V injection wells

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

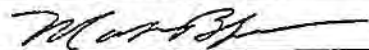
Key West, FL 33045

COUNTY: Monroe
 OFFICE: South District

February 1, 2014 To: February 28, 2014

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type	
Flow - WELLS	Sample Measurement	.251							
PARM Code 50050 Y Mon. Site No. FLW-002	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer	
Flow - WELLS	Sample Measurement	.326							
PARM Code 50050 Y Mon. Site No. FLW-002	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer	
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.37					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC	
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.59	1.59	1.30			
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			1.57					
PARM Code 00530 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)			mg/L	Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			3.20	3.20	1.43			
PARM Code 00530 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L	Every 2 weeks	8-hr FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		(305)295-3301	03/25/2014

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP U-001
 NUMBER:

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: February 1, 2013 To: February 28, 2013

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				1					
PARM Code 74055 Y Mon. Site No. EFA-001	Permit Requirement				200 (An.Avg.)		#/100mL		Every 2 weeks	Grab
Coliform, Fecal	Sample Measurement				1	1				
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement				200 (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Every 2 weeks	Grab
pH	Sample Measurement			6.9		7.2				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			0.8						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Total	Sample Measurement				17.36					
PARM Code 00600 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Nitrogen, Total	Sample Measurement			22.9	22.9	19.2				
PARM Code 00600 A Mon. Site No. EFA-001	Permit Requirement			Report (Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement				6.07					
PARM Code 00665 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement			8.94	8.94	8.13				
PARM Code 00665 A Mon. Site No. EFA-001	Permit Requirement			Report(Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Utility Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER:

FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045-

LIMIT:
 CLASS SIZE:
 MONITORING GROUP NUMBER:
 MONITORING GROUP DESCRIPTION:
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD

Final
 N/A
 RMP-Q
 Biosolids Quantity

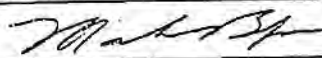
REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

COUNTY: Monroe
 South District

From: February 1, 2014 To: February 28 2014

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	7.2						
PARM Code B0008 Mon Site No: RMP-1	Permit Requirement	Report (Mo.Total)	dry tons			0	Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkeuper / Lead Operator		305-295-3301	03/25/2014

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

ISSUANCE/REISSUANCE DATE:

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

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW2P**

Facility: **Key West Resort Utility WWTP**

Monitoring Period From: February 1, 2013 To: February 28, 2013

	Flow MGD Total	Flow MGD Wells	Flow MGD Pond	Flow MGD MCDC	Chlorine, Total Residual (For	pH s.u.	Turbidity NTU Reuse	BOD, Carbonaceous 5 day, 20C (Influent) mg/L	Solids, Total Suspended (Influent) mg/L	BOD, Carbonaceous 5 day, 20C mg/L	Solids, Total Suspended mg/L
Code	50050	50050	50050	50050	50060	00400	00070	80082	00530	80082	00530
Mon. Site	FLW-001	FLW-002	FLW-003	FLW-004	EFA-001	EFA-001	EFB-001	INF-001	INF-001	EFA-001	EFA-001
1	.400	.400	0	0	3.0	6.9	0.8				
2	.391	.391	0	0	-	-	-				
3	.392	.392	0	0	1.8	7.2	1.0				
4	.380	0	.345	.035	4.1	7.2	1.0				
5	.392	.366	0	.026	4.0	7.1	1.0				
6	.366	.366	0	0	4.0	7.0	0.5				
7	.474	.474	0	0	4.0	6.9	0.5				
8	.487	.487	0	0	2.2	7.0	0.4				
9	.487	.487	0	0	-	-	-				
10	.487	.487	0	0	2.7	7.0	0.5				
11	.479	.479	0	0	3.0	7.0	0.5				
12	.463	.463	0	0	3.0	7.1	0.5	220	165	<2.0	1.67
13	.512	0	.481	.031	2.8	7.0	0.4				
14	.560	.417	.133	.010	1.5	6.9	0.4				
15	.522	.435	.087	0	1.5/0.8	6.9	0.5				
16	.522	.522	0	0	-	-	-				
17	.522	.522	0	0	1.2	7.1	0.4				
18	.516	.516	0	0	2.0	7.0	0.5				
19	.490	.316	.163	.011	1.6	7.1	0.5				
20	.501	.323	.167	.011	1.5	7.1	0.4				
21	.513	0	.483	.030	1.5	7.1	0.5				
22	.571	0	.549	.022	1.5	7.1	0.5				
23	.482	.482	0	0	-	-	-				
24	.482	.482	0	0	1.5	7.0	0.5				
25	.432	0	.407	.025	3.4	7.1	0.6	142.5	63	1.59	1.67
26	.321	.317	0	.004	2.1	7.1	2.2				
27	.325	0	.292	.033	2.2	7.1	2.0				
28	.307	0	.286	.021	1.7	7.0	2.1				
29											
30											
31											
Total	12.776	9.124	3.393	.259	57.1	169	18.2	362.5	228	2.59	3.34
Mo. Avg.	.456	.326	.121	.009	2.38	7.04	0.76	181.3	114	1.30	1.67

PLANT STAFFING:

Day Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 Night Shift Operator Class: C Certificate No: 21394 Name: Robert Bellino
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW2P**

Facility: **Key West Resort Utility WWTP**

Monitoring Period From: February 1, 2013 To February 28, 2013

	Solids, Total Suspended mg/L Reuse	Coliform, Fecal #/100mL	Nitrogen, Total mg/L	Phosphorus, Total (as P) mg/L						
Code	00530	74055	00600	00665						
Mon. Site	EFB-001	EFA-001	EFA-001	EFA-001						
1										
2										
3	2.2	<1								
4	1.6	<1								
5	1.0	<1								
6	<0.5	<1								
7										
8										
9										
10	1.4	<1								
11	<0.5	<1								
12	1.0	<1	22.9	7.31						
13	<0.5	<1								
14										
15										
16										
17	1.6	<1								
18	1.8	<1								
19	2.0	1								
20	1.0	1								
21										
22										
23										
24	2.0	<1								
25	1.2	<1	15.5	8.94						
26	2.2	1								
27	3.2	<1								
28										
29										
30										
31										
Total	22.95	9.5	38.4	16.25						
Mo. Avg.	1.43	<1	19.2	8.13						

PLANT STAFFING:
 Day Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 Night Shift Operator Class: C Certificate No: 21394 Name: Robert Bellino
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Resort Utility, Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESCRIPTION: reuse storage golf course pond and irrigation system, with Inflow
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: January 28, 2014 to January 31, 2014

COUNTY: Monroe
 OFFICE: South District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - POND	Sample Measurement	0.183						
PARM Code 50050 Y Mon. Site No. FLW-003	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - POND	Sample Measurement	0.18						
PARM Code 50050 1 Mon. Site No. FLW-003	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - MCDC	Sample Measurement	0.012						
PARM Code 50050 Q Mon. Site No. FLW-004	Permit Requirement	0.06 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Solids, Total Suspended	Sample Measurement			3.17				
PARM Code 00530 B Mon. Site No. EFB-001	Permit Requirement			5.0 (Max.)	mg/L		4 Days/Week	Grab
Coliform, Fecal	Sample Measurement			<1				
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement			25 (Max.)	#/100mL		4 Days/Week	Grab
Coliform, Fecal, % less than detection	Sample Measurement			100%				
PARM Code 51005 A Mon. Site No. EFA-001	Permit Requirement			75 (Mo.Total)	percent		4 Days/Week	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator	<i>Mark Burkemper</i>	(305)295-3301	2-27-14

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

RECEIVED

MAR 03 2014

D.E.P. Marathon

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP R-001

PERMIT NUMBER: FLA014951-011-DW2P

NUMBER:

MONITORING PERIOD From: January 1, 2014 To: January 31, 2014

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	
pH	Sample Measurement				7.0		7.2				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement				6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement				1.5						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement				1.0 (Min.)			mg/L		Continuous	Meter
Turbidity	Sample Measurement						2.1				
PARM Code 00070 B Mon. Site No. EFB-001	Permit Requirement						Report (Max.)	NTU		Continuous	Meter
Flow - TOTAL	Sample Measurement	.415									
PARM Code 50050 R Mon. Site No. FLW-001	Permit Requirement	0.499 (An.Avg.)		MGD						5 Days/Week	Calculated
BOD, Carbonaceous 5 day, 20C	Sample Measurement					1.34					
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement					20.0 (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement				<2.0	<2.0	<2.0				
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement				60.0 (Max.)	45.0 (Wk.Avg.)	30.0 (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Flow - TOTAL	Sample Measurement	.382	.376								
PARM Code 50050 S Mon. Site No. FLW-001	Permit Requirement	Report (Mo.Avg.)	Report (Ql.Avg.)	MGD						5 Days/Week	Calculated
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						75%				
PARM Code 00180 I Mon. Site No. FLW-001	Permit Requirement						Report (Mo.Avg.)	percent		Monthly	Calculated
BOD, Carbonaceous 5 day, 20C (Influent)	Sample Measurement						281.74				
PARM Code 80082 G Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC
Solids, Total Suspended (Influent)	Sample Measurement						230.00				
PARM Code 00530 Q Mon. Site No. INF-001	Permit Requirement						Report (Max.)	mg/L		Bi-weekly; every 2 weeks	8-hr FPC

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 2295 Victoria Ave, Suite 364, Ft. Myers, FL 33901-3875

PERMITTEE NAME: K W Resort Utility, Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER:

FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island

LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: U-001
 MONITORING GROUP: two Class V injection wells

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

Key West, FL 33045

DESCRIPTION:
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: January 1, 2014 To: January 31, 2014

COUNTY: Monroe
 OFFICE: South District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow - WELLS	Sample Measurement	0.224						
PARM Code 50050 Y Mon. Site No. FLW-002	Permit Requirement	.499 (An.Avg.)	MGD				5 Days/Week	Flow Totalizer
Flow - WELLS	Sample Measurement	0.323						
PARM Code 50050 I Mon. Site No. FLW-002	Permit Requirement	Report (Mo.Avg.)	MGD				5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement			1.34				
PARM Code 80082 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC
BOD, Carbonaceous 5 day, 20C	Sample Measurement			<2.0				
PARM Code 80082 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	mg/L		Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement			1.47				
PARM Code 00530 Y Mon. Site No. EFA-001	Permit Requirement			20.0 (An.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Solids, Total Suspended	Sample Measurement		3.17	1.70				
PARM Code 00530 A Mon. Site No. EFA-001	Permit Requirement			60.0 (Max.)	mg/L		Every 2 weeks	8-hr FPC

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkenper / Lead Operator	<i>Mark Burkenper</i>	(305)295-3301	2-24-14

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

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Key West Resort Utility WWTP

MONITORING GROUP U-001
 NUMBER:

PERMIT NUMBER: FLA014951-011-DW2P

MONITORING PERIOD From: January 1, 2014 To: January 31, 2014

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				1					
PARM Code 74055 Y Mon. Site No. EFA-001	Permit Requirement				200 (An.Avg.)		#/100mL		Every 2 weeks	Grab
Coliform, Fecal	Sample Measurement				1	1				
PARM Code 74055 A Mon. Site No. EFA-001	Permit Requirement				200 (Mo.Geo.Mn.)	800 (Max.)	#/100mL		Every 2 weeks	Grab
pH	Sample Measurement			6.9		7.2				
PARM Code 00400 A Mon. Site No. EFA-001	Permit Requirement			6.0 (Min.)		8.5 (Max.)	s.u.		5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			0.8						
PARM Code 50060 A Mon. Site No. EFA-001	Permit Requirement			0.5 (Min.)			mg/L		5 Days/Week	Grab
Nitrogen, Total	Sample Measurement				17.19					
PARM Code 00600 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Nitrogen, Total	Sample Measurement			20.00	15.09	15.09				
PARM Code 00600 A Mon. Site No. EFA-001	Permit Requirement			Report (Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement									
PARM Code 00665 Y Mon. Site No. EFA-001	Permit Requirement				Report (An.Avg.)		mg/L		Every 2 weeks	8-hr FPC
Phosphorus, Total (as P)	Sample Measurement			7.87	6.40	6.40				
PARM Code 00665 A Mon. Site No. EFA-001	Permit Requirement			Report(Max.)	Report (Wk.Avg.)	Report (Mo.Avg.)	mg/L		Every 2 weeks	8-hr FPC

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, South District Branch Office, 2796 Overseas Highway, Suite 221, Marathon, FL, 33050

PERMITTEE NAME: K W Utility Corp.
 MAILING ADDRESS: 6630 Front Street
 Key West, Florida 33040

PERMIT NUMBER: FLA014951-011-DW2P

FACILITY: Key West Resort Utility WWTP
 LOCATION: 6630 Front St., Stock Island
 Key West, FL 33045-


LIMIT: Final
 CLASS SIZE: N/A
 MONITORING GROUP NUMBER: RMP-Q
 MONITORING GROUP DESCRIPTION: Biosolids Quantity
 RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: January 1, 2014 To: January 31, 2014

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

COUNTY: Monroe
 South District

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Landfilled)	Sample Measurement	4.6						
PARM Code B0008 + Mon Site No: RMP-1	Permit Requirement	Report (Mo.Total)	dry tons			0	Monthly	Calculated

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

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)
Mark Burkemper / Lead Operator		305-295-3301	2-27-14

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

ISSUANCE/REISSUANCE DATE:

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

DAILY SAMPLE RESULTS - PART B

Permit Number: FLA014951-011-DW2P

Facility: Key West Resort Utility WWTP

Monitoring Period From: January 1, 2014 To: January 31, 2014

	Flow MGD Total	Flow MGD Wells	Flow MGD Pond	Flow MGD MCDC	Chlor inc, Total Residual (For	pH s.u.	Turbidity NTU Reuse	BOD, Carbonaceous 5 day, 20C (Influent) mg/L	Solids, Total Suspended (Influent) mg/L	BOD, Carbonaceous 5 day, 20C mg/L	Solids, Total Suspended mg/L
Code	50050	50050	50050	50050	50060	00400	00070	80082	00530	80082	00530
Mon. Site	FLW-001	FLW-002	FLW-003	FLW-004	EFA-001	EFA-001	EPB-001	INF-001	INF-001	EFA-001	EFA-001
1	.339	.212	.115	.012	1.5	7.1	0.6				
2	.356	.356	0.0	0.0	1.0	7.1	0.6				
3	.376	0.0	.364	.012	1.8	7.0	0.5				
4	.345	0.0	.309	.036	1.6	7.0	0.6				
5	.579	.579	0.0	0.0							
6	.579	.579	0.0	0.0	0.9	6.9	0.5				
7	.436	.436	0.0	0.0	1.5	7.1	0.5	185.50	230.00	<2.0	3.17
8	.436	.436	0.0	0.0	1.8	7.1	0.4				
9	.372	.372	0.0	0.0	2.0	7.0	0.3				
10	.394	.394	0.0	0.0	1.3	6.9	0.4				
11	.369	.369	0.0	0.0	1.5	7.1	0.6				
12	.363	.363	0.0	0.0							
13	.363	.363	0.0	0.0	1.5	7.0	0.7				
14	.347	.311	0.0	.036	2.2	7.0	0.6				
15	.345	.313	0.0	.032	3.0	7.2	0.6				
16	.338	.315	0.0	.023	2.5	7.2	0.6				
17	.319	.319	0.0	.000	1.0	7.0	0.8				
18	.400	.364	0.0	.036	2.5	7.0	0.9				
19	.325	.325	0.0	0.0							
20	.325	.325	0.0	0.0	3.0	7.1	1.2				
21	.364	0.0	.329	.035	4.2	7.0	1.4	281.74	200.00	<2.0	1.70
22	.366	.346	0.0	.020	4.4	7.0	1.8				
23	.369	.348	0.0	.021	4.0	7.2	0.4				
24	.339	.307	0.0	.032	1.1/1.5	7.2	0.9				
25	.329	.329	0.0	0.0	1.6	7.1	2.1				
26	.350	.350	0.0	0.0							
27	.350	.350	0.0	0.0	2.0	7.2	0.90				
28	.378	.344	0.0	.034	0.8/1.5	7.1	0.8	262.61	228.00	<2.0	<0.5
29	.380	0.0	.360	.020	5.0	7.0	0.8				
30	.466	.466	0.0	0.0	2.0	7.0	0.7				
31	.443	.440	0.0	.003	2.5	7.0	0.8				
Total	11.840	10.011	1.477	0.352	58.9	190.6	21.00	729.85	658.00	6.0	5.12
Mo. Avg.	0.382	0.323	0.048	0.011	2.2	7.1	0.8	243.28	219.33	2.0	1.71

PLANT STAFFING:

Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro
Day Shift Operator Class: C Certificate No: 21394 Name: Robert Bellino
Night Shift Operator Class: _____ Certificate No: _____ Name: _____
Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper

DAILY SAMPLE RESULTS - PART B

Permit Number: **FLA014951-011-DW2P**

Facility: **Key West Resort Utility WWTP**

Monitoring Period From: **January 1, 2014** To **January 31, 2014**

	Solids, Total Suspended mg/L Reuse	Coliform, Fecal #/100mL	Nitrogen, Total mg/L	Phosphorus, Total (as P) mg/L					
Code	00530	74055	00600	00665					
Mon. Site	EFB-001	EFA-001	EFA-001	EFA-001					
1									
2	<0.5	<1							
3									
4									
5									
6	<0.5	<1							
7	2.6	<1	7.49	4.23					
8	2.0	<1							
9	3.0	<1							
10									
11									
12									
13	<0.5	<1							
14	<0.5	<1							
15	<0.5	<1							
16	<0.5	<1							
17									
18									
19									
20	<0.5	<1							
21	<0.5	<1	17.80	7.87					
22	<0.5	<1							
23	<0.5	<1							
24									
25									
26									
27	1.0	<1							
28	<0.5	<1	20.00	7.11					
29	1.0	<1							
30	<0.5	<1							
31									
Total	12.6	<1	45.29	19.21					
Mo. Avg.	0.74	<1	15.10	6.40					

PLANT STAFFING:

Shift Operator Class: B Certificate No: 13317 Name: Ted Yarboro
 Shift Operator Class: C Certificate No: 21394 Name: Robert Bellino
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: B Certificate No: 5355 Name: Mark Burkemper



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

MARATHON BRANCH OFFICE
2796 OVERSEAS HIGHWAY, SUITE 221
MARATHON, FLORIDA 33050

RICK SCOTT
GOVERNOR

CARLOS LOPEZ-CANTERA
I.T. GOVERNOR

HERSCHEL I. VINYARD JR.
SECRETARY

SENT VIA ELECTRONIC MAIL

November 10, 2014

Mr. Chris Johnson, President
6630 Front Street
Key West, Florida 33040
Email: chriskw@bellsouth.net

RE: Key West Resort Utility Wastewater Treatment Plant
FLA014951
Monroe County

Dear Mr. Johnson:

Department personnel conducted a Reconnaissance Inspection of the above-referenced Facility on September 29, 2014. Based on the information provided during the inspection, the Facility was determined to be in compliance with the Department's rules and regulations. A copy of the inspection report is enclosed.

The Department appreciates your efforts to maintain this Facility in compliance with state and federal rules. Should you have any questions or comments, please contact Devon Villareal at (305)289-7075 or via e-mail at Devon.Villareal@dep.state.fl.us.

Sincerely,

A handwritten signature in cursive script that reads 'Gus Rios'.

Gus Rios
Environmental Administrator
South District Marathon Branch Office

Enclosure

cc: Ted Yarboro, KWRU, (ted@kwru.com)



COMET ENTRY DATE
 10/7/2014 12:22:08 PM

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

@ = Optional

WASTEWATER COMPLIANCE INSPECTION REPORT
 FACILITY AND INSPECTION INFORMATION

Name and Physical Location of Facility Key West Resort Utility 6630 Front St., Stock Island Key West, FL 33045	WAFR ID: FLA014951	County Monroe	Entry Date/Time 9/29/2014
		Phone (305) 289-4161	@ Exit Date/Time 9/29/2014
Name(s) of Field Representatives(s) Ted Yarboro Mark Burkemper	Title Operator Operator	Email ted@kwru.com	Phone 305-481-2138 305-295-3301
Name and Address of Permittee or Designated Representative Christopher Johnson 6630 Front Street Key West, FL 33040	Title President Email chriskw@bellsouth.net	Phone (305) 289-4161	@ Operator Certification # WWB0013317 WWB0005355 WWA0013917
Inspection Type: <input checked="" type="checkbox"/> R <input type="checkbox"/> I <input type="checkbox"/> <input type="checkbox"/>	Samples Taken(Y/N): N	@ Sample ID#:	Samples Split (Y/N): N
<input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Industrial	Were Photos Taken(Y/N): N	@ Log book Volume :	@ Page

FACILITY COMPLIANCE AREAS EVALUATED							
IC: In Compliance; MC: Minor Out of Compliance; NC: Out of Compliance SC: Significant Non-Compliance; NA: Not Applicable; NE or Blank: Not Evaluated							
Significant Non-Compliance Criteria Should be Reviewed When Out of Compliance Ratings Are Given in Areas Marked by a "♦"							
	PERMITS/ORDERS		SELF MONITORING PROGRAM		FACILITY OPERATIONS	EFFLUENT/ DISPOSAL	
IC	1. ♦ Permit	NA	3. Laboratory	IC	6. Facility Site Review	IC	9. ♦ Effluent Quality
NA	2. ♦ Compliance Schedules	MC	4. Sampling	IC	7. Flow Measurement	IC	10. ♦ Effluent Disposal
		IC	5. ♦ Records & Reports	IC	8. ♦ Operation & Maintenance	IC	11. Biosolids/Sludge
						NA	12. Groundwater
NA	14. Other:					NE	13. SSO Survey

Facility and/or Order Compliance Status: In-Compliance Out-Of-Compliance Significant-Out-Of-Compliance

Recommended Actions:

Name(s) and Signature(s) of Inspector(s) Devon Villareal <i>Devon Villareal</i>	District Office/Phone Number SDB/ (305)289-7070	Date 10/28/14
@ Signature of Reviewer Diane Loughlin <i>Diane Loughlin</i>	District Office/Phone Number SD/ (239)344-5641	Date 10/29/2014

INSPECTION REPORT SUMMARY

Facility Name: Key West Resort Utility
Facility ID: FLA014951
Inspection Type: RI
Inspection Date: 9/29/2014

FACILITY BACKGROUND:

Facility Address: 6630 Front St., Stock Island, Key West, FL 33045, Monroe County
Program/ Permit Information: DW, permit issue date: 2/20/2012, expiration date: 2/19/2017
Treatment Summary: Extended aeration with filtration and chlorinated effluent to two Class V wells or reuse
Permitted Capacity: 0.499 MGD

1. **Permit:** RATING – IN COMPLIANCE

1.1 **Observation:** A copy of the permit was onsite and available to plant personnel.

2. **Compliance Schedules:** RATING – NOT APPLICABLE

2.1 **Observation:** No observations were recorded.

3. **Laboratory:** RATING – NOT APPLICABLE

3.1 **Observation:** No observations were recorded.

4. **Sampling:** RATING – IN COMPLIANCE

4.1 **Observation:** Calibrations were performed correctly.

Additional Comments: Need to perform annual primary verification for Field Chlorine.

4.2 **Observation:** Safe and dry access to influent and effluent sampling points are provided.

4.3 **Observation:** Calibration standards/buffers were within the expiration dates.

4.4 **Observation:** Please see specific comment

Additional Comments: Ensure that calibrated thermometers exist in all refrigerated units where composite samples are stored.

4.5 **Observation:** The chain of custody form was not being filled out properly.

Additional Comments: The individual or individuals collecting samples must sign the Chain of Custody prior to releasing the samples to a courier or the laboratory.

5. **Records and Reports:** RATING – IN COMPLIANCE

5.1 **Observation:** *General* – A copy of the current laboratory certification was available at the time of the inspection (62-620.350(1) F.A.C.).

Additional Comments: Need to also place current certification for laboratory analyzing nutrients onsite.

5.2 **Observation:** *General* – Operators' certifications were current and available on-site.

5.3 **Observation:** *General* – The certified operator's daily logbook was complete.

6. **Facility Site Review:** RATING – IN COMPLIANCE

6.1 **Observation:** *General* – The facility grounds were secured properly.

6.2 **Observation:** *General* – The facility grounds were clean and well maintained.

6.3 **Observation:** *General* – Foul odors did not permeate beyond the boundaries of the plant site at the time of the inspection.

Facility Name: Key West Resort Utility
Inspection Date: 9/29/2014

- 6.4 Observation: Alternate Power – An alternative power source is available at the WWTF.
- 6.5 Observation: Alternate Power – The onsite generator is tested under load on a routine basis.
- 6.6 Observation: Alternate Power – A record of testing was available for the onsite generator.
- 6.7 Observation: Aeration Basins/Act. Sludge – The contents in the aeration chambers appeared to be adequately mixed.
- 6.8 Observation: Aeration Basins/Act. Sludge – The air line(s) to the aeration basin was free from leaks at the time of the inspection.
- 6.9 Observation: Blowers/Motors – The blower was operational at the time of the inspection.
- 6.10 Observation: Blowers/Motors – The secondary blower motor was operational.
- 6.11 Observation: Blowers/Motors – The blowers were equipped with belt guards.
- 6.12 Observation: Clarifiers – The clarifier weirs appear to be level.
- 6.13 Observation: Clarifiers – The skimmer appeared to be functioning properly.
- 6.14 Observation: Clarifiers – The clarifier had good settling and clear effluent.
- 6.15 Observation: Filtration – No problems or deficiencies noted.
- 6.16 Observation: Disinfection – The chlorine contact chamber was clean and the effluent leaving the plant was clear.
- Additional Comments: The Facility switched from chlorine gas to liquid chlorine on July 14, 2014 due to concerns regarding chlorine gas leaks. The application for revision currently in house includes liquid chlorine rather than gas.
- 6.17 Observation: Digestors – No problems or deficiencies noted.

7. **Flow Measurement:** RATING – IN COMPLIANCE

- 7.1 Observation: The copy of the flow calibration report is current and satisfactory.
- Additional Comments: Calibrated on March 11, 2014.
- 7.2 Observation: The chart recorder for the flow meter was operational at the time of the inspection.

8. **Operation and Maintenance:** RATING – IN COMPLIANCE

- 8.1 Observation: General – The facility was operated and maintained in accordance with the description in the Permit.
- 8.2 Observation: General – A certified operator as required by Rule 62-602 and the Permit, was operating the WWTF.

9. **Effluent Quality:** RATING – IN COMPLIANCE

- 9.1 Observation: The final effluent chlorine residual was within the acceptable range.
- Additional Comments: Continuous Chlorine meter = 0.76 mg/L
- 9.2 Observation: A review of the Discharge Monitoring Reports revealed the following effluent exceedances.
- Additional Comments: Two exceedances for TSS for reuse were reported in the month of June 2014. No other exceedances have been reported. The current effluent annual averages are as follows: TSS = 1.0 mg/L, CBOD = 1.20 mg/L, and fecal coliform = 0.5 cfu/100 mL.

10. **Effluent Disposal:** RATING – IN COMPLIANCE

- 10.1 Observation: General – The facility was discharging at the time of the inspection.
- 10.2 Observation: General – The effluent was free from visible sheen at the time of the inspection.
- 10.3 Observation: General – The effluent was free from excessive turbidity.
- 10.4 Observation: General – The effluent was free from excessive foam.