

State of Florida



Public Service Commission

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

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

DATE: February 11, 2019

TO: Adam J. Teitzman, Commission Clerk, Office of Commission Clerk

FROM: Luis Salvador, Engineering Specialist I, Division of Engineering *LS*

RE: Docket No. 20180218-SU - Application for staff-assisted rate case in Brevard County by TKCB, Inc.

Please file the attached email communications between staff and Mr. Small, in the above mentioned docket file.

Thank you.

LS/jp

Attachment

Luis Salvador

From: Emily Knoblauch
Sent: Monday, February 11, 2019 10:07 AM
To: Luis Salvador; Jeff Doehling
Cc: Robert Graves
Subject: FW: TKCB Follow Up Response to Sludge Haul Question
Attachments: Response Sludge Question.pdf

Regarding the sludge removal expense.

From: Jeff Small [mailto:jeffsmall@ocboa.net]
Sent: Monday, February 11, 2019 10:02 AM
To: Emily Knoblauch
Cc: Jeff Small
Subject: TKCB Follow Up Response to Sludge Haul Question

Good morning Emily,

Please see the attached response to questions that you had during our telephone conversation last Friday (2/8). If you need any additional information please let me know.

Thanks

--

Jeffery Small
OCBOA Consulting, LLC
407-377-5400

Associate Member of the Florida Rural Water Association

TKCB, Inc.
Docket No. 20180218-SU
Staff Assisted Rate Case

**Follow-up response to Staff's inquire of TKCB's Sludge Hauling
activities during July 2017**

Our initial response to Staff's First Data Request Item Number 3 indicates that FPL paid for the transport of two sludge hauls due to electrical issues at the wastewater plant due to the effects of Hurricane Irma. After further review of this issue TKCB wishes to correct our initial response.

Hurricane Irma impacted the State of Florida and TKCB's service area on September 10-11, 2017. This event has no relation to the issue discussed below.

On July 24, 2017, TKCB's wastewater plant suffered a power failure that lasted multiple days due to an FPL transformer failure. Due to this failure it was necessary to pump the plant. The operator negotiated the hauling of two loads of sludge by FPL.

The All Service Sanitation support provided to Staff for this incident is an "Estimate" document that was given to FPL by TKCB. A copy was retained for our record. The original invoice was sent to FPL for payment.

Supporting Documents

- Attached July 2017 DMR with operator notes filed with DEP.
- July 28, 2017, All Service sanitation "Estimate" included in response to Staff's Data Request No. 1 Item No. 3
- August 2017 Operator Invoice with notes included in response to Staff's Data Request No. 1 Item No. 3

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, 3319 Maguire Blvd, Suite 232, Orlando, FL 32803-3767

PERMITTEE NAME: Sun Lake Estates Homeowners Association
 MAILING ADDRESS: 5600 N US Highway 1
 Cocoa, Florida 32927-

PERMIT NUMBER:

FLA010353-006-DW3P

Effective Date:

October 28, 2015

FACILITY: Sun Lake Estates WWTP
 LOCATION: 616 Emerald Lake Drive
 Cocoa, FL 32926-4648

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

Final
 N/A
 R-001
 Rapid Infiltration Basin, including Influent

Expiration Date:
 REPORT FREQUENCY:
 PROGRAM:

October 27, 2020
 Monthly
 Domestic

COUNTY: Brevard
 OFFICE: Central District

From: 07-01-17 To: 07-31-17

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow (Flow to R-001)	Sample Measurement	.036	MGD			9	5 Days/Week	Flow Totalizer
PARM Code 50050 Y Mon. Site No. FLW-1	Permit Requirement	0.099 (An. Avg.)	MGD			9	5 Days/Week	Flow Totalizer
Flow (Flow to R-001)	Sample Measurement	.029	MGD			9	5 Days/Week	Flow Totalizer
PARM Code 50050 1 Mon. Site No. FLW-1	Permit Requirement	Report (Mo. Avg.)	MGD			9	5 Days/Week	Flow Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement			5.07	mg/L	9	Monthly	Grab
PARM Code 80082 Y Mon. Site No. EFA-1	Permit Requirement			20.0 (An. Avg.)	mg/L	9	Monthly	Grab
BOD, Carbonaceous 5 day, 20C	Sample Measurement			42	mg/L	9	Monthly	Grab
PARM Code 80082 A Mon. Site No. EFA-1	Permit Requirement			60.0 (Max.)	mg/L	9	Monthly	Grab
Solids, Total Suspended	Sample Measurement			42	mg/L	9	Monthly	Grab
PARM Code 00530 Y Mon. Site No. EFA-1	Permit Requirement			45.0 (Max. Wk. Avg.)	mg/L	9	Monthly	Grab
Solids, Total Suspended	Sample Measurement			1.49	mg/L	9	Monthly	Grab
PARM Code 00530 Y Mon. Site No. EFA-1	Permit Requirement			20.0 (An. Avg.)	mg/L	9	Monthly	Grab
Solids, Total Suspended	Sample Measurement			15	mg/L	9	Monthly	Grab
PARM Code 00530 A Mon. Site No. EFA-1	Permit Requirement			60.0 (Max.)	mg/L	9	Monthly	Grab

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)
Jerry Padrick operator	<i>[Signature]</i>	321-508-4714	8-24-17

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

Please Note: Lab could not run fecal due to residual was too high. FPL Transformer blew on Sunday 24th & plant was off a day and half. I increased Cl₂ to compensate for that problem. Effluent was real cloudy.

RECEIVED

AUG 28 2017
 DEP Central Dist.

[Signature] 9/19/17

ISSUANCE/REISSUANCE DATE: August 6, 2015
 DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Sun Lake Estates WWTF

MONITORING GROUP NUMBER: R-001

PERMIT NUMBER: FLA010353-006-DW3P

MONITORING PERIOD From: 07-01-17 To: 07-31-17

Parameter		Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement				L	#/100mL	0	Monthly	Grab
PARM Code 74055 Y Mon. Site No. EPA-1	Permit Requirement				200 (An.Avg.)	#/100mL	0	Monthly	Grab
Coliform, Fecal	Sample Measurement			See Pg (1)	Not Run	#/100mL	0	Monthly	Grab
PARM Code 74055 A Mon. Site No. EPA-1	Permit Requirement				Report (Mo. Geo. Mn.) 800 (Max.)	#/100mL	0	Monthly	Grab
pH	Sample Measurement			7.1	7.3	5.0-8.5	0	5 Days/Week	Grab
PARM Code 00400 A Mon. Site No. EPA-1	Permit Requirement			6.0 (Min.)	8.5 (Max.)	5.0-8.5	0	5 Days/Week	Grab
Chlorine, Total Residual (For Disinfection)	Sample Measurement			0.9		mg/L	0	5 Days/Week	Grab
PARM Code 50060 A Mon. Site No. EPA-1	Permit Requirement			0.5 (Min.)		mg/L	0	5 Days/Week	Grab
Nitrogen, Nitrate, Total (as N)	Sample Measurement				See pg (1) -> 26	mg/L	14	Monthly	Grab
PARM Code 00620 A Mon. Site No. EPA-1	Permit Requirement				12.0 (Max.)	mg/L	0	Monthly	Grab
Nitrogen, Total	Sample Measurement			4.04		mg/L	0	Monthly	Grab
PARM Code 00600 Y Mon. Site No. EPA-1	Permit Requirement				Report (An.Avg.)	mg/L	0	Monthly	Grab
Nitrogen, Total	Sample Measurement				26	mg/L	0	Monthly	Grab
PARM Code 00600 A Mon. Site No. EPA-1	Permit Requirement				Report (Mo.Avg.)	mg/L	0	Monthly	Grab
Phosphorus, Total (as P)	Sample Measurement			7.10		mg/L	0	Monthly	Grab
PARM Code 00665 Y Mon. Site No. EPA-1	Permit Requirement				Report (An.Avg.)	mg/L	0	Monthly	Grab
Phosphorus, Total (as P)	Sample Measurement				13	mg/L	0	Monthly	Grab
PARM Code 00665 A Mon. Site No. EPA-1	Permit Requirement				Report (Mo.Avg.)	mg/L	0	Monthly	Grab
Flow (Total Through Plant)	Sample Measurement		MGD				0	5 Days/Week	Flow Totalizer
PARM Code 50050 P Mon. Site No. FLW-1	Permit Requirement	0.099 (An.Avg.)	MGD				0	5 Days/Week	Flow Totalizer

(See Pg 1) Comments

RECEIVED

AUG 28 2017

Central Dist.

ISSUANCE/REISSUANCE DATE: August 6, 2015

DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

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, 3319 Maguire Blvd, Suite 232, Orlando, FL 32803-3767

PERMITTEE NAME: Sun Lake Estates Homeowners Association
 MAILING ADDRESS: 5600 N US Highway 1
 Cocoa, Florida 32927-

PERMIT NUMBER: FLA010353-006-DW3P

FACILITY: Sun Lake Estates WWTP
 LOCATION: 616 Emerald Lake Drive
 Cocoa, FL 32926-4648

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

REPORT FREQUENCY: Monthly
 PROGRAM: Domestic

COUNTY: Brevard
 OFFICE: Central District

RE-SUBMITTED DMR:
 NO DISCHARGE FROM SITE:
 MONITORING PERIOD From: 07-01-17 To: 07-31-17

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Transferred) PARM Code B0007 + Mon. Site No. RMP-1	Sample Measurement		0	dry tons						Monthly	Calculated
	Permit Requirement		Report (Mo. Total)	# tons						Monthly	Calculated
Biosolids Quantity (Landfilled) PARM Code B0008 + Mon. Site No. RMP-1	Sample Measurement		0	dry tons						Monthly	Calculated
	Permit Requirement		Report (Mo. Total)	dry tons						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 ensure 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)
Jerry Padrick operator	<i>[Signature]</i>	721-508-4711	8-24-17

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

RECEIVED
AUG 28 2017
 DEP Central Dist

ISSUANCE/REISSUANCE DATE: August 6, 2015
 DMR EFFECTIVE DATE: 1st day of the 2nd month following effective date of permit - Permit expiration

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FLA010353-006-DW3P
From: 07-01-17 To: 07-31-17

Facility: Sun Lake Estates WWTF

Code	BOD, Carbonaceous 5 day, 20C mg/L	Chlorine, Total Residual (For Disinfection) mg/L	Coliform, Fecal #/100ml	Nitrogen, Nitrate, Total (as N) mg/L	Nitrogen, Total mg/L	Phosphorus, Total (as P) mg/L	Solids, Total Suspended mg/L	pH a.u.	Flow (Flow to R-001) MGD
Mon. Site	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	EFA-1	FLW-1
1		1.0						7.2	1.027
2									
3		1.4						7.2	1.038
4		1.3						7.2	1.020
5		1.3						7.2	1.033
6		1.3						7.2	1.028
7		1.2						7.2	1.022
8		1.2						7.2	1.033
9									
10		1.2						7.2	1.025
11		1.2						7.2	1.027
12		1.2						7.2	1.028
13		1.1						7.2	1.025
14		1.1						7.2	1.028
15		1.1						7.2	1.025
16									
17		1.0						7.2	1.019
18		1.0						7.2	1.043
19		1.0						7.2	1.040
20		1.0						7.2	1.028
21		1.0						7.2	1.025
22		1.0						7.2	1.025
23									
24									
25		1.0						7.1	1.019
26	42	2.0	not Run	0.103	2.1	13	15	7.3	1.022
27		1.9	not Run					7.3	1.042
28		1.4	not Run					7.3	1.027
29		0.9	not Run					7.3	1.038
30									
31		0.8						7.3	1.039
Total									1.726
Mo. Avg.	42		Not Run	0.63	2.6	13	15		1.029

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____
 Evening Shift Operator Class: _____ Certificate No: _____ Name: _____
 Night Shift Operator Class: _____ Certificate No: _____ Name: _____
 Lead Operator Class: 1 Certificate No: 7051 Name: Jerome Padrick

RECEIVED

AUG 28 2017
DEP Central Dist.