

Sunny Hills Utility Company
Docket No. 20220066-WS

Response to Deficiencies Nos. 8, 11, 12, 13

18.4.5 Fire Flow Requirements for Buildings

18.4.5.1 One- and Two-Family Dwellings Not Exceeding 5000 ft² (464.5 m²)

18.4.5.1.1

The minimum fire flow and flow duration requirements for one- and two-family dwellings having a fire flow area that does not exceed 5000 ft²(464.5 m²) shall be 1000 gpm (3785 L/min) for 1 hour.

18.4.5.1.2*

A reduction in required fire flow of 75 percent shall be permitted where the one- and two-family dwelling is provided with an approved automatic sprinkler system.

18.4.5.1.3*

Where one- and two-family dwellings are proposed to be constructed in areas where water distribution systems providing fire flow were designed and installed prior to the effective date of this Code, the AHJ shall be authorized to accept the previously designed system fire flow where the one- and two-family dwellings are provided with approved automatic sprinkler systems.

18.4.5.1.4

A reduction in fire flow shall be permitted for building separation distance in accordance with 18.4.5.1.4 and Table 18.4.5.1.4.

Table 18.4.5.1.4 Permitted Fire Flow Reduction for Building Separation

Separation Distance Between Buildings on a Single Lot		Separation Distance to Lot Line or Easement ^a		Permitted Fire Flow Reduction
ft	m	ft	m	
>30 and ≤50	>9.1 and ≤15.2	>15 and ≤25	>4.6 and ≤7.6	25%
>50	>15.2	>25	>7.6	40%

^a See 18.4.5.1.4.3.

18.4.5.1.4.1

Where multiple buildings are located on a single lot, the building separation distance shall be the distance between the buildings.

18.4.5.1.4.2

Where a building abuts a lot line, the building separation distance shall be the distance between the building and the lot line.

18.4.5.1.4.3

Where a building is contiguous to a public right of way or no-build easement, the separation distance shall be the distance between the building to the opposite side of the right of way or no-build easement.

18.4.5.1.4.4

Where multiple buildings are located on a single lot and abut a lot line, the building separation distance for determining fire flow reduction shall be the smallest of the two distances.

18.4.5.1.5*

The reductions in 18.4.5.1.2, 18.4.5.1.3, and 18.4.5.1.4 shall not reduce the required fire flow to less than 500 gpm (1900 L/min).

18.4.5.2 One- and Two-Family Dwellings Exceeding 5000 ft² (464.5 m²)**18.4.5.2.1**

Fire flow and flow duration for dwellings having a fire flow area in excess of 5000 ft² (464.5 m²) shall not be less than that specified in Table 18.4.5.2.1.

Table 18.4.5.2.1 Minimum Required Fire Flow and Flow Duration for Buildings

Fire Flow Area ft ² (× 0.0929 for m ²)					Fire Flow gpm† (× 3.785 for L/min)	Flow Duration (hours)
I(443), I(332), II(222)*	II(111), III(211)*	IV(2HH), V(111)*	II(000), III(200)*	V(000)*		
0—22,700	0—12,700	0—8200	0—5900	0—3600	1500	2
22,701—30,200	12,701—17,000	8201—10,900	5901—7900	3601—4800	1750	
30,201—38,700	17,001—21,800	10,901—12,900	7901—9800	4801—6200	2000	
38,701—48,300	21,801—24,200	12,901—17,400	9801—12,600	6201—7700	2250	
48,301—59,000	24,201—33,200	17,401—21,300	12,601—15,400	7701—9400	2500	
59,001—70,900	33,201—39,700	21,301—25,500	15,401—18,400	9401—11,300	2750	
70,901—83,700	39,701—47,100	25,501—30,100	18,401—21,800	11,301—13,400	3000	3
83,701—97,700	47,101—54,900	30,101—35,200	21,801—25,900	13,401—15,600	3250	
97,701—112,700	54,901—63,400	35,201—40,600	25,901—29,300	15,601—18,000	3500	
112,701—128,700	63,401—72,400	40,601—46,400	29,301—33,500	18,001—20,600	3750	
128,701—145,900	72,401—82,100	46,401—52,500	33,501—37,900	20,601—23,300	4000	4
145,901—164,200	82,101—92,400	52,501—59,100	37,901—42,700	23,301—26,300	4250	
164,201—183,400	92,401—103,100	59,101—66,000	42,701—47,700	26,301—29,300	4500	
183,401—203,700	103,101—114,600	66,001—73,300	47,701—53,000	29,301—32,600	4750	
203,701—225,200	114,601—126,700	73,301—81,100	53,001—58,600	32,601—36,000	5000	
225,201—247,700	126,701—139,400	81,101—89,200	58,601—65,400	36,001—39,600	5250	
247,701—271,200	139,401—152,600	89,201—97,700	65,401—70,600	39,601—43,400	5500	
271,201—295,900	152,601—166,500	97,701—106,500	70,601—77,000	43,401—47,400	5750	
Greater than 295,900	Greater than 166,500	106,501—115,800	77,001—83,700	47,401—51,500	6000	
		115,801—125,500	83,701—90,600	51,501—55,700	6250	
		125,501—135,500	90,601—97,900	55,701—60,200	6500	
		135,501—145,800	97,901—106,800	60,201—64,800	6750	
		145,801—156,700	106,801—113,200	64,801—69,600	7000	
		156,701—167,900	113,201—121,300	69,601—74,600	7250	
		167,901—179,400	121,301—129,600	74,601—79,800	7500	

18.4.5 Fire Flow Requirements for Buildings

	179,401—191,400	129,601—138,300	79,801—85,100	7750
	Greater than 191,400	Greater than 138,300	Greater than 85,100	8000

*Types of construction are based on NFPA 220.

†Measured at 20 psi (139.9 kPa).

18.4.5.2.2

Required fire flow shall be reduced by 75 percent and the duration reduced to 1 hour where the one- and two-family dwelling is provided with an approved automatic sprinkler system.

18.4.5.2.3

A reduction in the required fire flow shall be permitted where a one- and two-family dwelling is separated from all lot lines in accordance with Table 18.4.5.1.4.

18.4.5.2.4

Required fire flow for one- and two-family dwellings protected by an approved automatic sprinkler system shall not exceed 2000 gpm (7571 L/min) for 1 hour.

18.4.5.2.5*

The reductions in 18.4.5.2.2, and 18.4.5.2.3 shall not reduce the required fire flow to less than 500 gpm (1900 L/min) for 1 hour.

18.4.5.3 Buildings Other Than One- And Two-Family Dwellings

18.4.5.3.1

The minimum fire flow and flow duration for buildings other than one- and two-family dwellings shall be as specified in Table 18.4.5.2.1.

18.4.5.3.2

Required fire flow shall be reduced by 75 percent when the building is protected throughout by an approved automatic sprinkler system. The resulting fire flow shall not be less than 1000 gpm (3785 L/min).

18.4.5.3.3

Required fire flow shall be reduced by 75 percent when the building is protected throughout by an approved automatic sprinkler system, which utilizes quick response sprinklers throughout. The resulting fire flow shall not be less than 600 gpm (2270 L/min).

18.4.5.3.4*

Required fire flow for buildings protected by an approved automatic sprinkler system shall not exceed 2000 gpm (7571 L/min) for 2 hours.

18.4.5.3.5

Required fire flow for open parking structures that are not protected throughout by an approved automatic sprinkler system shall be reduced by 75 percent where all of the following conditions are met:

- (1) The structure complies with the building code.
- (2) The structure is of Type I or Type II construction.
- (3) The structure is provided with a Class I standpipe system in accordance with NFPA 14. Class I standpipe systems of the manual dry type shall be permitted.
- (4) The resulting fire flow is not less than 1000 gpm (3785 L/min).

18.4.5.4* Required Fire Flow and Automatic Sprinkler System Demand

For a building with an approved fire sprinkler system, the fire flow demand and the fire sprinkler system demand shall not be required to be added together. The water supply shall be capable of delivering the larger of the individual demands.

Water Distribution										
	Customers	Lots with lines	Growth	U&U Percentages				Commission Approved	Comments	
				Dkt 080121	PAA /AUF	AUF calc.	OPC calc.			
1	Jasmine Lakes	1,511								
	Kings Cove	204						100	Stipulation	
	Ocala Oaks	1,785						100	Stipulation	
	Picciola Island	160						100	Stipulation	
	Silver Lake Est/Western Sh	1,596	1,764	1.00	100.00	100.00	90.50	88.00	80	Stipulation
	Tangerine	289						100	Prior Order	
	Total Customers Band 1	5,545						60	Stipulation	
	Composite U&U%					97.46			97.34	
2	Carlton Village	283								
	Fern Terrace	123						47	Stipulation	
	Grand Terrace	111						100	Stipulation	
	Lake Gibson Estates	826						100	Stipulation	
	Piney Woods	180	213	1.00	100.00	100.00	84.50	89.00	100	Stipulation
	Sunny Hills	578	6,384	1.14	13.00	13.00	10.30	11.00	100	Prior Order
	Valencia Terrace	359						10	AUF Calculation	
	Total Customers Band 2	2,460						100	Stipulation	
	Composite U&U%					73.46			72.76	
3	48 Estates	87								
	Gibsonia Estates	202	206	1.00	100.00	100.00	98.10	84.00	85	Stipulation
	Interlachen/Pk Manor	292	375	1.00	83.00	83.00	77.90	79.00	100	Prior Order
	Lake Osborne Estates	461						78	AUF Calculation	
	Orange Hill/Sugar Crk	246	273	1.00	100.00	100.00	90.10	94.00	100	Stipulation
	Quail Ridge	94						100	Prior Order	
	Ravenswood	46	54	1.00	100.00	100.00	85.20	88.00	100	Stipulation
	Venetian Village	172	219	1.08	72.63	85.00	84.80	81.00	100	Prior Order
	Total Customers Band 3	1,600						85	AUF Calculation	
	Composite U&U%					94.59			93.56	

		Water Treatment Plant U&U																
		FRC (gpm or gpd)		Peak Day (gpm or gpd)		EUW (gpm or gpd)		FF (gpm or gpd)		Growth		U&U Percentages				Commission Approved	Comments	
		AUF	OPC	AUF	OPC	AUF	OPC	AUF	OPC	AUF	OPC	DKT 080121	PAA/AUF	AUF calc.	OPC calc.			
1	Jasmine Lakes																100	Stipulation
	Kings Cove																100	Stipulation
	Ocala Oaks																100	Stipulation
	Picciola Island	150	150	79	79	0.00	0.00	0	0	1.06	1.06	75.00	75.00	52.73	56.00		75	Prior Order; Growth
	Silver Lake Est/Western Sh	1,944,000	1,944,000	1,440,000	1,440,100	0	0	60,000	0	1.00	1.00	93.71	94.00	77.16	74.00		94	Prior Order; AUF
	Tangerine																100	Stipulation
	Band 1																	
	Composite U&U%												97.59				97.55	
2	Carlton Village	200	200	153	153	0.00	0.00	0	0	1.19	1.19	95.00	95.00	76.72	91.00		95	Prior Order; Growth
	Fern Terrace	0	180	122	122	0	0	0	0	1.00	1.00	100.00	100.00	0.00	68.00		100	One well system
	Grand Terrace																100	Stipulation
	Lake Gibson Estates																100	Stipulation
	Piney Woods																100	Stipulation
	Sunny Hills																100	Stipulation
	Valencia Terrace																91	Stipulation
	Band 2																100	Stipulation
	Composite U&U%												97.31				97.31	
3	48 Estates																	
	Gibsonia Estates																100	Stipulation
	Interlachen/Pk Manor	172,800	172,800	131,770	131,764	136	136	0	0	1.00	1.00	100.00	100.00	76.26	76.00		61	Stipulation
	Lake Osborne Estates																100	Prior Order
	Orange Hill/Sugar Crk																NA	Purchased water
	Quail Ridge																100	Stipulation
	Ravenswood																100	Stipulation
	Venetian Village	100	100	58	58	0.00	0.00	0	0	1.08	1.08	74.00	74.00	57.72	63.00		100	Stipulation
	Band 3																74	Prior Order; Growth
	Composite U&U%												89.22				89.16	

Summary of Pro Forma Plant Adjustments					
Rate Band/System	Plant	Retirements	Accumulated Depreciation	Depreciation Expense	Property Taxes
Water Band 1	(\$212,265)	(\$27,607)	(\$24,174)	(\$13,756)	(\$4,275)
Wastewater Band 1	(7,280)	(1,944)	(12,936)	(1,074)	(174)
Water Band 2	38,319	(21,725)	46,180	(424)	(855)
Wastewater Band 2	(215,484)	(144,056)	125,161	(19,609)	(6,171)
Water Band 3	9,749	(7,839)	4,947	(973)	(261)
Wastewater Band 3	(124,748)	0	(8,097)	(3,585)	(2,021)
Water Band 4	\$33,934	(62,985)	79,314	(5,413)	(1,008)
Wastewater Band 4	(216,878)	0	(16,290)	(12,106)	(3,606)
Breeze Hill-Water	(612)	0	(721)	(101)	0
Breeze Hill-Wastewater	(553)	0	(712)	(92)	0
Fairways- Water	(5,684)	0	(2,130)	(948)	0
Fairways- Wastewater	2	0	(1,568)	0	0
Peace River- Water	(501)	0	(549)	(83)	0
Peace River- Wastewater	(347)	0	(542)	(58)	0
Total Adjustments	(\$702,348)	(\$266,157)	187,885	(\$58,222)	(18,369)

PAA ISSUE 4: Do any water systems have excessive unaccounted for water, and, if so, what adjustments are necessary?

STIPULATION: The percentages for excessive unaccounted for water (EUW) for each water rate band and stand-alone system are shown below.

Rate Band/System	Composite EUW %
Rate Band 1	1.05
Rate Band 2	2.10
Rate Band 3	0.09
Rate Band 4	2.94
Breeze Hill	6.09
Peace River	11.47

The adjustment to Purchased Power, Chemicals, and Purchased Water expenses for Rate Band 4 is \$96.

PAA ISSUE 5: What are the appropriate used and useful percentages for water treatment and related facilities of each water system?

STIPULATION: The following table reflects the U&U percentages for the stipulated water treatment and related facilities of each system listed below:

System	WTP%
48 Estates	100
Fairways	100
Gibsonia	61
Grand Terrace	100
Haines Creek	100
Harmony Homes	100
Hermits Cove/St. Johns Highlands	31
Imperial Mobile	100
Jasmine Lakes	100
Kings Cove	100
Lake Gibson Estates	100
Leisure Lakes	100
Morningview	100
Ocala Oaks	100
Orange Hill/Sugar Creek	100
Palm Port	100
Palms MHP	100
Peace River	100
Piney Woods	100
Pomona Park	100
Quail Ridge	100
Ravenswood	100
River Grove	100
Silver Lake Oaks	100
Skycrest	100
Stone Mountain	100
Summit Chase	100
Sunny Hills	91
Tangerine	100
The Woods	100
Valencia Terrace	100
Wootens	100

PAA ISSUE 6: What are the appropriate used and useful percentages for the storage tanks?

STIPULATION: All of the AUF storage tanks shall be considered 100 percent U&U.

PAA ISSUE 7: What are the appropriate used and useful percentages for water distribution systems?

STIPULATION: The following table reflects the U&U percentages for the stipulated water distribution of each system list below:

Sunny Hills WTP Chemicals 2021

System Name	Actual Location Plant #	Chemical	Feed Rate	Cost	Gallons/Units	Cost Per gallon/unit	Date
Sunny Hills	WTP						
	4	Sod Hypochlorite	.012 gpm	\$ 65.00	50	\$ 1.30	1/27/2021
	4	Sod Hypochlorite	.012 gpm	\$ 65.00	50	\$ 1.30	2/23/21
	4	Sod Hypochlorite	.012 gpm	\$ 52.00	40	\$ 1.30	4/21/21
	4	Sod Hypochlorite	.012 gpm	\$ 52.00	40	\$ 1.30	3/25/21
	4	Sod Hypochlorite	.012 gpm	\$ 65.00	50	\$ 1.30	5/19/21
	4	Sod Hypochlorite	.012 gpm	\$ 84.50	65	\$ 1.30	6/18/21
	4	Clear Flow PT	.012 gpm	\$ 237.34	15	\$ 15.83	7/21/21
	4	Sod Hypochlorite	.012 gpm	\$ 77.00	55	\$ 1.40	7/16/21
	4	Sod Hypochlorite	.012 gpm	\$ 105.00	75	\$ 1.40	8/11/21
	1	Sod Hypochlorite	.012 gpm	\$ 56.00	40	\$ 1.40	8/11/21
	4	Sod Hypochlorite	.012 gpm	\$ 42.00	30	\$ 1.40	9/9/21
	4	Sod Hypochlorite	.012 gpm	\$ 124.00	80	\$ 1.55	10/11/21
	1	Sod Hypochlorite	.012 gpm	\$ 140.00	100	\$ 1.40	11/18/21
	4	Sod Hypochlorite	.012 gpm	\$ 62.00	40	\$ 1.55	11/4/21
	4	Sod Hypochlorite	.012 gpm	\$ 84.00	60	\$ 1.40	12/2/21
	4	Sod Hypochlorite	.012 gpm	\$ 126.00	90	\$ 1.40	12/29/21

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: January, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills PWS Identification Number: 1670647

PWS Type: Community Non-Transient Non-Community Transient Non-Community Consecutive

Number of Service Connections at End of Month: #REF! Total Population Served at End of Month: #REF!

PWS Owner: US Water Services Corporation Contact Person's Title: Compliance Manager

Contact Person: Melisa Toteveel City: New Port Richey State: Florida Zip Code: 34652

Contact Person's Mailing Address: 4939 Cross Bayou Blvd Contact Person's Fax Number: 727-849-4219

Contact Person's Telephone Number: 866-753-8292

Contact Person's E-Mail Address: mrotteveel@uswatercorp.net

B. Water Treatment Plant Information

Plant Name: Sunny Hills Wells # 1 Plant Telephone Number: (850) 773-2802

Plant Address: 3810 Gable Blvd City: Chipley State: Florida Zip Code: 32428

Type of Water Treatment by Plant: Raw Ground Water Purchased Finished Water

Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000

Plant Category (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): C

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Utility Manager
Other Operators:	George Randall Weekly	C	23173	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 2/6/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: _____ Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: January, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe): _____

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	0				1.0						0.9	
2	X	24.0	0				1.3						0.5	
3	X	24.0	0				0.7						0.6	
4	X	24.0	0				0.7						0.7	
5		24.0	0											
6	X	24.0	20000				0.9						0.8	
7	X	24.0	3000				0.8						0.9	
8	X	24.0	0				0.8						1.1	
9	X	24.0	0				0.3						0.7	
10	X	24.0	18000				0.2						0.8	
11	X	24.0	0				0.2						0.6	
12		24.0	0											
13	X	24.0	0				1.9						0.8	
14	X	24.0	0				1.9						0.7	
15	X	24.0	19000				1.3						0.9	
16	X	24.0	0				1.0						0.7	
17	X	24.0	0				0.7						0.7	
18	X	24.0	0				1.1						0.5	
19		24.0	0											
20	X	24.0	20000				1.0						0.7	
21	X	24.0	0				1.0						0.7	
22	X	24.0	0				0.8						0.5	
23	X	24.0	19000				1.0						0.6	
24	X	24.0	0				1.3						0.5	
25	X	24.0	0				1.2						0.8	
26		24.0	0											
27	X	24.0	62000				1.0						0.5	
28	X	24.0	20000				0.9						0.6	
29	X	24.0	1000				1.4						0.7	
30	X	24.0	19000				1.1						0.9	
31		24.0	6700											
Total			207,700											
Average			6,700											
Maximum			62,000											

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: January, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 594		Total Population Served at End of Month: 1,827	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Toteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Richey	State: Florida
Contact Person's Telephone Number: 866-753-8292		Contact Person's Fax Number: 727-849-4219	
Contact Person's E-Mail Address: mrotteveel@uswatercorp.net			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Wells # 4		Plant Telephone Number: (850) 773-2802		
Plant Address: 153 Vash Circle		City: Chipley	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Plant Category (per subsection 62-699.310(4), F.A.C.): V				
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Days 1st Shift
Other Operators:	George Randall Weekly	C	23173	Supervisor

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 2/6/2020
 Signature and Date

Sharon Purviance
 Printed or Typed Name

C - 13268
 License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well #4

III. Daily Data for the Month/Year of: January, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²			
1	X	24.0	87,300		1.2									0.9	
2	X	24.0	93,000		1.5									0.5	
3	X	24.0	76,000		1.4									0.6	
4	X	24.0	96,600		1.3									0.7	
5		24.0	89,250												
6	X	24.0	89,250		1.1									0.8	
7	X	24.0	80,000		1.4									0.9	
8	X	24.0	82,000		1.3									1.1	
9	X	24.0	92,100		1.2									0.7	
10	X	24.0	78,500		1.4									0.8	
11	X	24.0	93,400		1.5									0.6	
12		24.0	85,950												
13	X	24.0	85,950		1.5									0.8	
14	X	24.0	88,600		1.8									0.7	
15	X	24.0	90,000		1.3									0.9	
16	X	24.0	82,600		0.9									0.7	
17	X	24.0	77,600		1.3									0.7	
18	X	24.0	83,300		1.4									0.5	
19		24.0	82,100												
20	X	24.0	82,100		1.4									0.7	
21	X	24.0	91,700		1.3									0.7	
22	X	24.0	72,200		1.2									0.5	
23	X	24.0	105,100		1.3									0.6	
24	X	24.0	73,600		1.3									0.6	
25	X	24.0	86,000		1.3									0.8	
26		24.0	75,700												
27	X	24.0	75,700		1.3									0.7	
28	X	24.0	87,100		1.3									0.6	
29	X	24.0	89,900		1.4									0.7	
30	X	24.0	81,400		1.3									0.9	
31		24.0	85,133												
Total			2,639,133												
Average			85,133												
Maximum			105,100												

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: January, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: #REF!		Total Population Served at End of Month: #REF!	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Roteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Rich	State: Florida
		Zip Code: 34652	
Contact Person's Telephone Number: 866-753-8292		Contact Person's Fax Number: 727-849-4219	
Contact Person's E-Mail Address: mroteveel@uswatercorp.net			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802		
Plant Address: 1240 Elkcam Blvd		City:	State: Florida	
		Zip Code: 32428		
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Days 1st Shift
Other Operators:	George Randall Weekly	C	23173	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 2/6/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: January, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostatate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	500		1.1									0.6	
2	X	24.0	600		1.0									0.4	
3	X	24.0	600		1.0									0.4	
4	X	24.0	1200		0.7									0.4	
5		24.0	550												
6	X	24.0	550		0.6									0.5	
7	X	24.0	0		0.6									0.5	
8	X	24.0	700		1.1									0.3	
9	X	24.0	800		1.0									0.2	
10	X	24.0	800		0.4									0.3	
11	X	24.0	800		1.0									0.5	
12		24.0	800												
13	X	24.0	800		0.4									1.0	
14	X	24.0	900		1.1									0.2	
15	X	24.0	800		0.9									0.2	
16	X	24.0	800		0.6									0.2	
17	X	24.0	900		0.5									0.4	
18	X	24.0	800		1.1									0.3	
19		24.0	800												
20	X	24.0	800		0.4									0.2	
21	X	24.0	700		0.5									0.4	
22	X	24.0	800		1.0									0.2	
23	X	24.0	800		1.0									0.4	
24	X	24.0	700		0.3									0.2	
25	X	24.0	700		0.8									0.4	
26		24.0	750												
27	X	24.0	750		0.3									0.3	
28	X	24.0	2500		0.6									0.3	
29	X	24.0	700		0.5									0.7	
30	X	24.0	0		0.6									0.3	
31	X	24.0	700		0.8									0.3	
Total			23,600												
Average			761												
Maximum			2,500												

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: February, 2020

A. Public Water System (PWS) Information

PWS Name: <u>Sunny Hills</u>		PWS Identification Number: <u>1670647</u>	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: <u>#REF!</u>		Total Population Served at End of Month: <u>#REF!</u>	
PWS Owner: <u>US Water Services Corporation</u>			
Contact Person: <u>Melisa Toteveel</u>		Contact Person's Title: <u>Compliance Manager</u>	
Contact Person's Mailing Address: <u>4939 Cross Bayou Blvd</u>		City: <u>New Port Richey</u>	State: <u>Florida</u>
Contact Person's Telephone Number: <u>866-753-8292</u>		Zip Code: <u>34652</u>	
Contact Person's E-Mail Address: <u>mrotteveel@uswatercorp.net</u>		Contact Person's Fax Number: <u>727-849-4219</u>	

B. Water Treatment Plant Information

Plant Name: <u>Sunny Hills Wells # 1</u>		Plant Telephone Number: <u>(850) 773-2802</u>	
Plant Address: <u>3810 Gable Blvd</u>		City: <u>Chipley</u>	State: <u>Florida</u>
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: <u>32428</u>	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>1,224,000</u>			
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>V</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	<u>Sharon Purviance</u>	<u>C</u>	<u>13268</u>	<u>Utility Manager</u>
Other Operators:	<u>George Randall Weekly</u>	<u>C</u>	<u>23173</u>	<u>Days 1st Shift</u>

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 3/4/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: _____ Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: January, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe): _____

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	0		0.2									0.3	
2	X	24.0	0												
3	X	24.0	0		0.2									0.7	
4	X	24.0	0		2.0									0.5	
5		24.0	0		2.0									0.7	
6	X	24.0	20000		2.0									0.6	
7	X	24.0	3000		1.9										
8	X	24.0	0		1.5									0.4	
9	X	24.0	0												
10	X	24.0	18000		0.9									0.5	
11	X	24.0	0		0.3									0.7	
12		24.0	0		0.3									0.6	
13	X	24.0	0		0.2									0.5	
14	X	24.0	0												
15	X	24.0	19000		0.2									0.2	
16	X	24.0	0												
17	X	24.0	0		0.3									0.7	
18	X	24.0	0		0.2									0.3	
19		24.0	0		0.4									0.3	
20	X	24.0	20000		0.3									0.5	
21	X	24.0	0		2.0									0.4	
22	X	24.0	0		0.2									0.2	
23	X	24.0	19000												
24	X	24.0	0		0.2									0.3	
25	X	24.0	0		0.3									0.6	
26		24.0	0		0.2									0.9	
27	X	24.0	62000		0.4									0.8	
28	X	24.0	20000		0.2									0.6	
29	X	24.0	1000		0.6									0.6	
30	X	24.0	19000												
31		24.0	6700												
Total			142,000												
Average			4,897												
Maximum			62,000												

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: February, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 594		Total Population Served at End of Month: 1,827	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Toteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Richey	State: Florida
Contact Person's Telephone Number: 866-753-8292		Zip Code: 34652	
Contact Person's E-Mail Address: mrotteveel@uswatercorp.net		Contact Person's Fax Number: 727-849-4219	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Wells # 4		Plant Telephone Number: (850) 773-2802	
Plant Address: 153 Vash Circle		City: Chipley	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Sharon Purviance	C	13268
Other Operators:	George Randall Weekly	C	23173

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 3/4/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well #4

III. Daily Data for the Month/Year of: February, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	78,800		0.9									0.7	
2		24.0	69,300											0.7	
3	X	24.0	69,300		0.9									0.5	
4	X	24.0	87,900		0.9									0.7	
5	X	24.0	67,800		1.3									0.6	
6	X	24.0	99,000		1.1									0.3	
7	X	24.0	98,100		1.1									0.4	
8	X	24.0	97,400		1.3										
9		24.0	105,100											0.5	
10	X	24.0	105,100		1.5									0.7	
11	X	24.0	129,900		1.2									0.6	
12	X	24.0	83,300		1.3									0.5	
13	X	24.0	100,000		1.5									0.4	
14	X	24.0	99,500		1.4									0.2	
15	X	24.0	100,300		1.5										
16		24.0	98,650											0.7	
17	X	24.0	98,650		1.2									0.3	
18	X	24.0	113,800		1.6									0.3	
19	X	24.0	82,100		1.4									0.5	
20	X	24.0	106,300		1.4									0.4	
21	X	24.0	94,900		1.5									0.2	
22	X	24.0	10,400		1.6										
23		24.0	109,800											0.3	
24	X	24.0	109,800		1.6									0.6	
25	X	24.0	85,700		1.1									0.9	
26	X	24.0	104,700		1.4									0.8	
27	X	24.0	84,600		1.0									0.6	
28	X	24.0	102,600		1.1									0.6	
29	X	24.0	104,400		1.2										
30		24.0													
31		24.0	85,133												
Total			2,782,333												
Average			92,744												
Maximum			129,900												

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: February, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills			PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive				
Number of Service Connections at End of Month: #REF!			Total Population Served at End of Month: #REF!	
PWS Owner: US Water Services Corporation				
Contact Person: Melisa Roteveel			Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd			City: New Port Rich	State: Florida
Contact Person's Telephone Number: 866-753-8292			Contact Person's Fax Number: 727-849-4219	
Contact Person's E-Mail Address: mroteveel@uswatercorp.net				

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802	
Plant Address: 1240 Elkcam Blvd.		City:	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Sharon Purviance	C	13268
Other Operators:	George Randall Weekly	C	23173

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date: Sharon Purviance 3/4/2020

Printed or Typed Name: Sharon Purviance

License Number: C - 13268

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: February, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe): _____

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation.	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	500		0.9									0.4	
2		24.0	600											0.4	
3	X	24.0	600		0.8									0.3	
4	X	24.0	1200		0.6									0.2	
5	X	24.0	550		0.5									0.6	
6	X	24.0	550		0.5									0.4	
7	X	24.0	0		0.8									0.4	
8	X	24.0	700		0.9									0.4	
9		24.0	800											0.3	
10	X	24.0	800		0.8									0.5	
11	X	24.0	800		1.0									0.6	
12	X	24.0	800		0.5									0.5	
13	X	24.0	800		0.5									0.6	
14	X	24.0	900		0.8									0.4	
15	X	24.0	800		0.4									0.4	
16		24.0	800											0.4	
17	X	24.0	900		0.7									0.3	
18	X	24.0	800		0.8									0.5	
19	X	24.0	800		1.2									0.5	
20	X	24.0	800		1.0									0.4	
21	X	24.0	700		0.9									0.3	
22	X	24.0	800		1.0									0.6	
23		24.0	800											0.6	
24		24.0	700		1.2									0.4	
25		24.0	700		0.9									0.6	
26		24.0	750		0.6									0.4	
27		24.0	750		0.8									0.6	
28		24.0	2500		1.0									0.6	
29		24.0	700		1.1									0.6	
30		24.0	0												
31		24.0	700												
Total			14,100												
Average			486												
Maximum			2,500												

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: March, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: #REF!		Total Population Served at End of Month: #REF!	
PWS Owner: US Water Services Corporation		Contact Person's Title: Compliance Manager	
Contact Person: Melisa Toteveel			
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Richey	State: Florida
Contact Person's Telephone Number: 866-753-8292		Zip Code: 34652	
Contact Person's E-Mail Address: mrotteveel@uswatercorp.net		Contact Person's Fax Number: 727-849-4219	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Wells # 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gable Blvd		City: Chipley	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): V			

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Utility Manager
Other Operators:	George Randall Weekly	C	23173	Days 1st Shift

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 4/6/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: _____ Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: March, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe): _____

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1		24.0	0												
2	X	24.0	0		0.2										0.6
3	X	24.0	0		0.3										0.6
4	X	24.0	0		0.8										0.6
5	X	24.0	0		0.8										0.8
6	X	24.0	20000		0.4										0.9
7	X	24.0	3000		0.4										0.6
8		24.0	0												
9	X	24.0	0		0.2										0.7
10	X	24.0	18000		0.5										0.6
11	X	24.0	0		0.7										0.5
12	X	24.0	0		0.3										0.7
13	X	24.0	0		0.3										1.0
14	X	24.0	0		0.2										0.8
15		24.0	19000												
16	X	24.0	0		0.6										0.8
17	X	24.0	0		1.2										0.7
18	X	24.0	0		2.0										0.4
19	X	24.0	0		1.0										0.9
20	X	24.0	20000		0.6										8.0
21	X	24.0	0		0.2										0.6
22		24.0	0												
23	X	24.0	19000		0.2										0.6
24	X	24.0	0		0.2										0.6
25	X	24.0	0		0.3										0.5
26	X	24.0	0		2.0										0.4
27	X	24.0	62000		2.0										5.0
28	X	24.0	20000		1.9										0.6
29		24.0	1000												
30	X	24.0	19000		2.0										0.6
31	X	24.0	6700		1.9										0.6
Total			56,000												
Average			1,806												
Maximum			62,000												

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: March, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 594		Total Population Served at End of Month: 1,827	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Toteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Richey	State: Florida
Contact Person's Telephone Number: 866-753-8292		Zip Code: 34652	
Contact Person's E-Mail Address: mrotteveel@uswatercorp.net		Contact Person's Fax Number: 727-849-4219	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Wells # 4		Plant Telephone Number: (850) 773-2802		
Plant Address: 153 Vash Circle		City: Chipley	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428		
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Days 1st Shift
Other Operators:	George Randall Weekly	C	23173	Supervisor

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 4/6/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well #4

III. Daily Data for the Month/Year of: March, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1		24.0	10,200												
2	X	24.0	10,200		1.4									0.6	
3	X	24.0	105,800		1.4									0.6	
4	X	24.0	86,700		1.0									0.6	
5	X	24.0	94,700		1.4									0.8	
6	X	24.0	101,900		1.3									0.9	
7	X	24.0	102,100		1.4									0.6	
8		24.0	110,400												
9	X	24.0	110,400		1.5									0.7	
10	X	24.0	129,000		0.9									0.6	
11	X	24.0	104,600		0.9									0.5	
12	X	24.0	87,500		0.7									0.7	
13	X	24.0	95,600		1.0									1.0	
14	X	24.0	89,000		1.0									0.8	
15		24.0	91,455												
16	X	24.0	91,450		1.0									0.8	
17	X	24.0	106,500		0.7									0.7	
18	X	24.0	84,600		0.9									0.4	
19	X	24.0	95,900		1.1									0.9	
20	X	24.0	11,300		1.0									0.8	
21	X	24.0	109,900		1.1									0.6	
22		24.0	111,100												
23	X	24.0	111,100		0.7									0.6	
24	X	24.0	93,000		1.2									0.6	
25	X	24.0	131,800		1.0									0.5	
26	X	24.0	87,000		1.2									0.4	
27	X	24.0	116,900		1.3									0.5	
28	X	24.0	109,600		1.0									0.6	
29		24.0	128,600												
30	X	24.0	128,600		1.3									0.6	
31	X	24.0	111,300		1.3									0.6	
Total			2,958,205												
Average			95,426												
Maximum			131,800												

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: March, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: #REF!		Total Population Served at End of Month: #REF!	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Roteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Rich	State: Florida
		Zip Code: 34652	
Contact Person's Telephone Number: 866-753-8292		Contact Person's Fax Number: 727-849-4219	
Contact Person's E-Mail Address: mroteveel@uswatercorp.net			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802		
Plant Address: 1240 Elkcarn Blvd.		City:	State: Florida	
		Zip Code: 32428		
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Days 1st Shift
Other Operators:	George Randall Weekly	C	23173	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 4/6/2020
 Signature and Date

Sharon Purviance
 Printed or Typed Name

C - 13268
 License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: **1670647** Plant Name: **Sunny Hills Well # 5**

III. Daily Data for the Month/Year of: **March, 2020**

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe): _____

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1		24.0	500										
2	X	24.0	600		1.4								0.6
3	X	24.0	600		1.0								0.6
4	X	24.0	1200		0.4								0.6
5	X	24.0	550		1.0								0.4
6	X	24.0	550		1.1								0.5
7	X	24.0	0		1.4								0.7
8		24.0	700										
9	X	24.0	800		0.9								0.4
10	X	24.0	800		0.4								0.4
11	X	24.0	800		0.3								0.4
12	X	24.0	800		0.7								0.3
13	X	24.0	800		0.9								0.3
14		24.0	900										
15		24.0	800										
16	X	24.0	800		0.7								0.5
17	X	24.0	900		1.4								0.4
18	X	24.0	800		1.2								0.3
19	X	24.0	800		1.0								0.8
20	X	24.0	800		1.0								0.5
21	X	24.0	700		1.0								0.6
22		24.0	800										
23	X	24.0	800		0.8								0.4
24	X	24.0	700		1.0								0.6
25	X	24.0	700		0.2								0.5
26	X	24.0	750		0.6								0.8
27	X	24.0	750		0.9								0.4
28	X	24.0	2500		1.0								5.0
29		24.0	700										
30	X	24.0	0		6.0								0.5
31	X	24.0	700		0.4								0.7
Total			15,800										
Average			510										
Maximum			2,500										

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: April, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 594		Total Population Served at End of Month: 1,827	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Roteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Richey	State: Florida
		Zip Code: 34652	
Contact Person's Telephone Number: 866-753-8292		Contact Person's Fax Number: 727-849-4219	
Contact Person's E-Mail Address: mroteveel@uswatercorp.net			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Wells # 1		Plant Telephone Number: (850) 773-2802		
Plant Address: 3810 Gable Blvd		City: Chipley	State: Florida	
		Zip Code: 32428		
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Utility Manager
Other Operators:	George Randall Weekly	C	23173	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 5/1/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OF PURCHASED FINISHED WATER

PWS Identification Number: 6 167-0647

Plant Name: Sunny Hills

Well #1

III. Daily Data for the Month/Year of: April-20				X Free Chlorine		Chlorine Dioxide		Ozone		Combined Chlorine (Chloramines)			
Means of Achieving Four-Log Virus Inactivation/Removal: *				Other (Describe)									
Type of Disinfectant Residual Maintained in Distribution System				X Free Chlorine		Combined Chlorine (Chloramines)		Chlorine Dioxide					
Day of the Month	Date First Sampled or Visited by Operator (Place "K")	Hours Plant in Operation	Net Quantity of Finished Water Produced, Gal.	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Maximum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	X		-		1.3							0.6	
2	X	24	3,000		1.5							0.5	
3	X		-		1.0							0.4	
4	X		-		1.5							0.6	
5			-										
6	X	24	20,000		1.9							0.5	
7	X		-		1.5							0.4	
8	X		-		1.7							0.5	
9	X		-		1.4							0.5	
10	X		-		0.7							0.5	
11	X		-		1.0							0.6	
12			-										
13	X		-		1.0							0.5	
14	X		-		1.2							0.9	
15	X		-		0.6							0.6	
16	X		-		0.7							0.7	
17	X		-		0.3							0.4	
18	X		-		0.3							0.5	
19			-										
20	X	24	18,000		0.2							0.5	
21	X		-		0.4							0.5	
22	X		-		0.2							0.3	
23	X		-		0.3							0.4	
24	X		-		0.3							0.5	
25	X		-		0.4							0.6	
26			-										
27	X		-		0.5							0.5	
28	X		-		0.5							0.6	
29	X		-		0.3							0.5	
30	X		-		0.3							0.6	
31			-										
Total			41,000										
Average			1,367										
Maximum			20,000										

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



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See Pages 4 for Instructions.

I. General Information for the Month/Year of: April, 2020

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills			PWS Identification Number:	1670647
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	594			Total Population Served at End of Month:	1,827
PWS Owner:	US Water Services Corporation				
Contact Person:	Melisa Roteveel			Contact Person's Title:	Compliance Manager
Contact Person's Mailing Address:	4939 Cross Bayou Blvd	City:	New Port Richey	State:	Florida
Contact Person's Telephone Number:	866-753-8292			Zip Code:	34652
Contact Person's E-Mail Address:	mroteveel@uswatercorp.net				

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Wells # 4			Plant Telephone Number:	(850) 773-2802	
Plant Address:	153 Vash Circle	City:	Chipley	State:	Florida	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator:	Sharon Purviance	C	13268	Days 1st Shift		
Other Operators:	George Randall Weekly	C	23173	Supervisor		

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 5/1/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OF PURCHASED FINISHED WATER

Identification Number: 167-0647

Plant Name: Sunny Hills

Well #4

III. Daily Data for the Month/Year of: April-20				X Free Chlorine			Chlorine Dioxide			Ozone			Combined Chlorine (Chloramines)				
Means of Achieving Four-Log Virus Inactivation/Removal *				Other (Describe):													
Ultraviolet Radiation				X Free Chlorine			Combined Chlorine (Chloramines)			Chlorine Dioxide							
Type of Disinfectant Residual Maintained in Distribution System				X Free Chlorine													
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable*													
				CT Calculations						UV Dose						Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	g/L of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mJ/cm ²	Minimum UV Dose Required, mJ/cm ²					
1	X	24	108,300		1.1										0.6		
2	X	24	98,400		1.0										0.5		
3	X	24	106,700		1.1										0.4		
4	X	24	126,500		1.3										0.6		
5		24	110,150														
6	X	24	110,150		1.0										0.5		
7	X	24	93,000		1.1										0.4		
8	X	24	102,100		1.0										0.5		
9	X	24	107,800		1.0										0.5		
10	X	24	108,600		1.1										0.5		
11	X	24	108,500		1.1										0.6		
12		24	104,000														
13	X	24	104,000		1.3										0.5		
14	X	24	92,300		1.4										0.9		
15	X	24	110,900		1.4										0.6		
16	X	24	86,900		1.1										0.7		
17	X	24	113,000		1.0										0.4		
18	X	24	122,700		1.2										0.5		
19		24	111,250														
20	X	24	111,250		1.6										0.5		
21	X	24	88,800		1.0										0.5		
22	X	24	102,700		0.9										0.3		
23	X	24	96,900		1.0										0.4		
24	X	24	104,100		1.1										0.5		
25	X	24	101,800		1.1										0.6		
26		24	111,950														
27	X	24	111,950		0.2										0.5		
28	X	24	120,600		1.2										0.6		
29	X	24	96,400		1.0										0.5		
30	X	24	113,500		1.2										0.6		
31																	
Total			3,185,200														
Average			106,173														
Maximum			126,500														

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: April, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 594		Total Population Served at End of Month: 1,827	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Roteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Rich	State: Florida
Contact Person's Telephone Number: 866-753-8292		Zip Code: 34652	
Contact Person's E-Mail Address: mroteveel@uswatercorp.net		Contact Person's Fax Number: 727-849-4219	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802	
Plant Address: 1240 Elkcam Blvd.		City:	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Days 1st Shift
Other Operators:	George Randall Weekly	C	23173	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 5/1/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OF PURCHASED FINISHED WATER

PWS Identification Number: 167-0647

Plant Name: Sunny Hills

Well #5

III. Daily Data for the Month/Year of: April-20				Type of Disinfectant Residual Maintained in Distribution System												
Means of Achieving Four-Log Virus Inactivation/Removal: * Ultraviolet Radiation				Other (Describe)	X Free Chlorine	Chlorine Dioxide	Ozone	Combined Chlorine (Chloramines)								
				X Free Chlorine			Combined Chlorine (Chloramines)			Chlorine Dioxide						
				CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*												
				CT Calculations						UV Dose						
Day of the Month	Days Plant Staffed or Verified by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gal	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
1	X	24	600		0.4								0.6			
2	X	24	600		0.8								0.6			
3	X	24	700		0.7								0.4			
4	X	24	600		1.0								0.5			
5		24	350										0.5			
6	X	24	350		0.5								0.8			
7	X	24	600		0.8								0.5			
8	X	24	700		0.7								0.3			
9	X	24	600		0.8								0.8			
10	X	24	700		0.5								0.7			
11	X	24	600		1.0								0.6			
12		24	300										1.0			
13	X	24	300		1.0								0.7			
14	X	24	700		1.1								0.6			
15	X	24	700		1.0								0.5			
16	X	24	600		1.0								0.5			
17	X	24	600		0.5								0.5			
18	X	24	600		0.8								0.5			
19		24	650										0.9			
20	X	24	650		0.9								1.0			
21	X	24	600		1.0								0.5			
22	X	24	700		0.5								0.4			
23	X	24	600		0.8								0.7			
24	X	24	600		0.5								0.5			
25	X	24	600		0.7								0.5			
26		24	600										0.5			
27	X	24	600		1.1								0.8			
28	X	24	600		1.0								0.8			
29	X	24	500		0.3								0.6			
30	X	24	600		1.2								0.5			
31																
Total			17,500													
Average			583													
Maximum			700													

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



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See Pages 4 for Instructions.

I. General Information for the Month/Year of: May, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: #REF!		Total Population Served at End of Month: #REF!	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Toteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Richey	State: Florida
Contact Person's Telephone Number: 866-753-8292		Zip Code: 34652	
Contact Person's E-Mail Address: mroteveel@uswatercorp.net		Contact Person's Fax Number: 727-849-4219	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Wells # 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gable Blvd		City: Chipley	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): V			

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Utility Manager
Other Operators:	George Randall Weekly	C	23173	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 6/3/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: _____ Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: May, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe): _____

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	0		0.3										0.5	
2	X	24.0	0		0.5										0.4	
3		24.0	0												0.5	
4	X	24.0	0		0.4										0.5	
5	X	24.0	0		0.3										0.6	
6	X	24.0	20000		0.5										0.4	
7	X	24.0	3000		1.0										0.5	
8	X	24.0	0		0.7										0.6	
9	X	24.0	0		0.8											
10		24.0	18000												0.3	
11	X	24.0	0		0.2										0.4	
12	X	24.0	0		0.6										0.6	
13	X	24.0	0		0.3										0.3	
14	X	24.0	0		0.2										0.5	
15	X	24.0	19000		0.3										0.5	
16	X	24.0	0		0.3											
17		24.0	0												0.5	
18	X	24.0	0		0.3										0.4	
19	X	24.0	0		0.2										5.0	
20	X	24.0	20000		0.2										0.4	
21	X	24.0	0		0.2										0.5	
22	X	24.0	0		0.3										0.6	
23	X	24.0	19000		0.6											
24		24.0	0												0.4	
25	X	24.0	0		0.6										0.5	
26	X	24.0	0		0.2										0.3	
27	X	24.0	0		1.6										0.5	
28	X	24.0	0		1.0										0.4	
29	X	24.0	0		2.2										0.6	
30	X	24.0	0		2.0											
31		24.0	0													
Total			81,000													
Average			2,613													
Maximum			62,000													

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: May, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 594		Total Population Served at End of Month: 1,827	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Toteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Richey	State: Florida
Contact Person's Telephone Number: 866-753-8292		Zip Code: 34652	
Contact Person's E-Mail Address: mtoteveel@uswatercorp.net		Contact Person's Fax Number: 727-849-4219	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Wells # 4		Plant Telephone Number: (850) 773-2802	
Plant Address: 153 Vash Circle		City: Chipley	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Sharon Purviance	C	13268
Other Operators:	George Randall Weekly	C	23173

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 6/3/2020
 Signature and Date

Sharon Purviance
 Printed or Typed Name

C - 13268
 License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well #4

III. Daily Data for the Month/Year of: May, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	98,900		1.0								0.5	
2	X	24.0	103,200		1.5								0.4	
3		24.0	121,000											
4	X	24.0	121,000		1.0								0.5	
5	X	24.0	114,600		1.6								0.5	
6	X	24.0	106,600		1.6								0.6	
7	X	24.0	119,800		1.0								0.4	
8	X	24.0	138,500		1.1								0.5	
9	X	24.0	112,600		1.2								0.6	
10		24.0	132,650											
11	X	24.0	132,650		0.9								0.3	
12	X	24.0	124,500		1.2								0.4	
13	X	24.0	117,200		0.9								0.6	
14	X	24.0	131,900		0.9								0.3	
15	X	24.0	119,700		0.3								0.5	
16	X	24.0	128,200		0.9								0.5	
17		24.0	157,050											
18	X	24.0	157,050		1.4								0.5	
19	X	24.0	92,300		0.8								0.4	
20	X	24.0	119,100		1.3								0.5	
21	X	24.0	83,300		0.9								0.4	
22	X	24.0	93,800		0.6								0.5	
23	X	24.0	104,100		1.0								0.6	
24		24.0	114,650											
25	X	24.0	114,650		1.5								0.4	
26	X	24.0	93,600		1.3								0.5	
27	X	24.0	92,000		0.9								0.3	
28	X	24.0	86,900		1.3								0.5	
29	X	24.0	106,700		0.6								0.4	
30	X	24.0	113,700		0.6								0.3	
31		24.0	98,900											
Total			3,550,800											
Average			114,542											
Maximum			157,050											

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: May, 2020

A. Public Water System (PWS) Information

PWS Name: <u>Sunny Hills</u>		PWS Identification Number: <u>1670647</u>	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: <u>#REF!</u>		Total Population Served at End of Month: <u>#REF!</u>	
PWS Owner: <u>US Water Services Corporation</u>		Contact Person's Title: <u>Compliance Manager</u>	
Contact Person: <u>Melisa Roteveel</u>		City: <u>New Port Rich</u> State: <u>Florida</u> Zip Code: <u>34652</u>	
Contact Person's Mailing Address: <u>4939 Cross Bayou Blvd</u>		Contact Person's Fax Number: <u>727-849-4219</u>	
Contact Person's Telephone Number: <u>866-753-8292</u>			
Contact Person's E-Mail Address: <u>mroteveel@uswatercorp.net</u>			

B. Water Treatment Plant Information

Plant Name: <u>Sunny Hills Well # 5</u>		Plant Telephone Number: <u>(850) 773-2802</u>	
Plant Address: <u>1240 Elkcam Blvd.</u>		City: <u></u> State: <u>Florida</u> Zip Code: <u>32428</u>	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>1,224,000</u>			
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>V</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>	
Licensed Operators	Name	License Class	License Number / Day(s) / Shift(s) Worked
Lead/Chief Operator:	<u>Sharon Purviance</u>	<u>C</u>	<u>13268</u> / Days 1st Shift
Other Operators:	<u>George Randall Weekly</u>	<u>C</u>	<u>23173</u> / Days 1st Shift

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 6/3/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: May, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	600		0.9								0.4	
2	X	24.0	500		1.0								0.6	
3		24.0	300											
4	X	24.0	300		0.7								0.4	
5	X	24.0	1,200		0.7								0.3	
6	X	24.0	600		1.0								0.7	
7	X	24.0	500		0.3								0.2	
8	X	24.0	600		1.3								0.6	
9	X	24.0	500		1.0								0.4	
10		24.0	500											
11	X	24.0	600		0.5								0.3	
12	X	24.0	500		0.7								0.3	
13	X	24.0	600		0.5								0.3	
14	X	24.0	1,100		0.6								0.4	
15	X	24.0	500		0.5								0.4	
16	X	24.0	500		0.7								0.5	
17		24.0	500											
18	X	24.0	600		0.6								0.5	
19	X	24.0	1,000		0.4								0.5	
20	X	24.0	500		0.9								0.4	
21	X	24.0	500		0.5								0.5	
22	X	24.0	600		0.4								0.3	
23	X	24.0	500		0.5								0.4	
24		24.0	900											
25	X	24.0	900		0.5								0.5	
26	X	24.0	900		1.0								0.5	
27	X	24.0	500		0.4								0.3	
28	X	24.0	600		0.9								0.6	
29	X	24.0	500		0.4								0.5	
30	X	24.0	500		0.4								0.5	
31		24.0	500											
Total			18,900											
Average			610											
Maximum			1,200											

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: June, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills PWS Identification Number: 1670647

PWS Type: Community Non-Transient Non-Community Transient Non-Community Consecutive

Number of Service Connections at End of Month: #REF! Total Population Served at End of Month: #REF!

PWS Owner: US Water Services Corporation Contact Person's Title: Compliance Manager

Contact Person: Melisa Toteveel City: New Port Richey State: Florida Zip Code: 34652

Contact Person's Mailing Address: 4939 Cross Bayou Blvd Contact Person's Fax Number: 727-849-4219

Contact Person's Telephone Number: 866-753-8292

Contact Person's E-Mail Address: mrotteveel@uswatercorp.net

B. Water Treatment Plant Information

Plant Name: Sunny Hills Wells # 1 Plant Telephone Number: (850) 773-2802

Plant Address: 3810 Gable Blvd City: Chipley State: Florida Zip Code: 32428

Type of Water Treatment by Plant: Raw Ground Water Purchased Finished Water

Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000 Plant Class (per subsection 62-699.310(4), F.A.C.): C

Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Utility Manager
Other Operators:	George Randall Weekly	C	23173	Days 1st Shift

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 7/8/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

Plant Name: Sunny Hills Well # 1

PWS Identification Number:

June, 2020

III. Daily Data for the Month/Year of:

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations						UV Dose			Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²		
1	X	24.0	0		2.0								0.3	
2	X	24.0	0		1.5								0.5	
3	X	24.0	0		2.0								0.4	
4	X	24.0	0		2.0								0.4	
5	X	24.0	0		2.0								0.6	
6	X	24.0	20000		2.0								0.4	
7		24.0	3000										0.7	
8	X	24.0	0		2.2								0.5	
9	X	24.0	0		2.0								0.4	
10	X	24.0	18000		2.0								0.5	
11	X	24.0	0		2.2								0.6	
12	X	24.0	0		2.0								0.5	
13	X	24.0	0		1.9									
14		24.0	0										0.5	
15	X	24.0	19000		2.2								0.6	
16	X	24.0	0		2.0								0.7	
17	X	24.0	0		2.0								0.7	
18	X	24.0	0		2.0								0.6	
19	X	24.0	0		2.0								0.6	
20	X	24.0	20000		1.9									
21		24.0	0										0.8	
22	X	24.0	0		2.0								0.8	
23	X	24.0	19000		2.0								0.6	
24	X	24.0	0		2.0								0.7	
25	X	24.0	0		1.8								0.7	
26	X	24.0	0		2.2								0.6	
27	X	24.0	62000		2.0									
28		24.0	20000										0.5	
29	X	24.0	1000		2.0								0.4	
30	X	24.0	19000		2.0									
31		24.0	6700											
Total			39,000											
Average			1,300											
Maximum			62,000											

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



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See Pages 4 for Instructions.

I. General Information for the Month/Year of: June, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 594		Total Population Served at End of Month: 1,827	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Toteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Richey	State: Florida
Contact Person's Telephone Number: 866-753-8292		Zip Code: 34652	
Contact Person's E-Mail Address: mrotteveel@uswatercorp.net		Contact Person's Fax Number: 727-849-4219	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Wells # 4		Plant Telephone Number: (850) 773-2802	
Plant Address: 153 Vash Circle		City: Chipley	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V			
Licensed Operators		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Lead/Chief Operator:	Name	License Class	License Number
	Sharon Purviance	C	13268
Other Operators:	George Randall Weekly	C	23173

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 7/8/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well #4

III. Daily Data for the Month/Year of: June, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Type of Disinfectant Residual Maintained in Distribution System: Ultraviolet Radiation Other (Describe): Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*							Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose				
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L		
1	X	24.0	118,000		0.6						0.3	
2	X	24.0	99,300		0.8						0.5	
3	X	24.0	87,900		0.8						0.4	
4	X	24.0	88,200		0.8						0.4	
5	X	24.0	99,800		0.6						0.6	
6	X	24.0	107,700		1.1						0.4	
7		24.0	92,650								0.7	
8	X	24.0	92,650		1.0						0.5	
9	X	24.0	91,400		1.0						0.4	
10	X	24.0	103,100		0.9						0.5	
11	X	24.0	81,600		1.0						0.6	
12	X	24.0	104,300		1.2						0.5	
13	X	24.0	95,100		1.2							
14		24.0	126,050								0.5	
15	X	24.0	126,050		1.0						0.6	
16	X	24.0	132,200		1.1						0.7	
17	X	24.0	104,700		1.0						0.7	
18	X	24.0	124,600		1.2						0.6	
19	X	24.0	114,900		1.1						0.6	
20	X	24.0	128,000		1.0							
21		24.0	135,100								0.8	
22	X	24.0	135,100		1.2						0.8	
23	X	24.0	106,800		1.2						0.6	
24	X	24.0	98,500		1.1						0.7	
25	X	24.0	99,100		1.0						0.7	
26	X	24.0	91,800		1.0						0.6	
27	X	24.0	123,700		0.9							
28		24.0	126,850								0.5	
29	X	24.0	126,850		0.6						0.4	
30	X	24.0	126,850		0.6							
31		24.0										
Total			3,288,850									
Average			109,628									
Maximum			135,100									

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: June, 2020

A. Public Water System (PWS) Information 6/1/2020

PWS Name: <u>Sunny Hills</u>		PWS Identification Number: <u>1670647</u>	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: <u>#REF!</u>		Total Population Served at End of Month: <u>#REF!</u>	
PWS Owner: <u>US Water Services Corporation</u>		Contact Person's Title: <u>Compliance Manager</u>	
Contact Person: <u>Melisa Roteveel</u>		City: <u>New Port Rich</u> State: <u>Florida</u> Zip Code: <u>34652</u>	
Contact Person's Mailing Address: <u>4939 Cross Bayou Blvd</u>		Contact Person's Telephone Number: <u>866-753-8292</u>	
Contact Person's Telephone Number: <u>866-753-8292</u>		Contact Person's Fax Number: <u>727-849-4219</u>	
Contact Person's E-Mail Address: <u>mroteveel@uswatercorp.net</u>			

B. Water Treatment Plant Information

Plant Name: <u>Sunny Hills Well # 5</u>		Plant Telephone Number: <u>(850) 773-2802</u>	
Plant Address: <u>1240 Elkcam Blvd.</u>		City: <u></u> State: <u>Florida</u> Zip Code: <u>32428</u>	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>1,224,000</u>			
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>V</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	<u>Sharon Purviance</u>	<u>C</u>	<u>13268</u>	<u>Days 1st Shift</u>
Other Operators:	<u>George Randall Weekly</u>	<u>C</u>	<u>23173</u>	<u>Days 1st Shift</u>

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 7/8/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: June, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/l.	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	500		0.5										0.4	
2	X	24.0	600		0.6										0.5	
3	X	24.0	600		0.2										0.3	
4	X	24.0	1200		0.6										0.4	
5	X	24.0	550		0.5										0.3	
6	X	24.0	550		0.6										0.4	
7		24.0	0													
8	X	24.0	700		0.4										0.3	
9	X	24.0	800		0.7										0.5	
10	X	24.0	800		0.8										0.4	
11	X	24.0	800		0.6										0.5	
12	X	24.0	800		0.6										0.4	
13	X	24.0	800		0.5										0.5	
14		24.0	900													
15	X	24.0	800		0.9										0.5	
16	X	24.0	800		0.3										0.4	
17	X	24.0	900		0.9										0.5	
18	X	24.0	800		0.4										0.4	
19	X	24.0	800		0.6										0.5	
20	X	24.0	800		0.6										0.6	
21		24.0	700													
22	X	24.0	800		0.6										0.5	
23	X	24.0	800		0.5										0.3	
24	X	24.0	700		0.4										0.4	
25	X	24.0	700		0.3										0.5	
26	X	24.0	750		0.4										0.4	
27	X	24.0	750		0.6										0.5	
28		24.0	2500													
29	X	24.0	700		1.3										0.2	
30	X	24.0	0		0.8										0.4	
31		24.0	700													
Total			26,200													
Average			970													
Maximum			2,500													

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: July, 2020

A. Public Water System (PWS) Information

PWS Name: <u>Sunny Hills</u>		PWS Identification Number: <u>1670647</u>	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: <u>#REF!</u>		Total Population Served at End of Month: <u>#REF!</u>	
PWS Owner: <u>US Water Services Corporation</u>			
Contact Person: <u>Melisa Toteveel</u>		Contact Person's Title: <u>Compliance Manager</u>	
Contact Person's Mailing Address: <u>4939 Cross Bayou Blvd</u>		City: <u>New Port Richey</u> State: <u>Florida</u> Zip Code: <u>34652</u>	
Contact Person's Telephone Number: <u>866-753-8292</u>		Contact Person's Fax Number: <u>727-849-4219</u>	
Contact Person's E-Mail Address: <u>mrotteveel@uswatercorp.net</u>			

B. Water Treatment Plant Information

Plant Name: <u>Sunny Hills Wells # 1</u>		Plant Telephone Number: <u>(850) 773-2802</u>		
Plant Address: <u>3810 Gable Blvd</u>		City: <u>Chipley</u> State: <u>Florida</u> Zip Code: <u>32428</u>		
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>1,224,000</u>				
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>V</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	<u>Sharon Purviance</u>	<u>C</u>	<u>13268</u>	<u>Utility Manager</u>
Other Operators:	<u>George Randall Weekly</u>	<u>C</u>	<u>23173</u>	<u>Days 1st Shift</u>

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 8/1/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: July, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		Total Population Served at End of Month: 1,827	
Number of Service Connections at End of Month: 594		Contact Person's Title: Compliance Manager	
PWS Owner: US Water Services Corporation		Contact Person's Name: Melisa Toteveel	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Richey	State: Florida
Contact Person's Telephone Number: 866-753-8292		Zip Code: 34652	
Contact Person's E-Mail Address: mrotteveel@uswatercorp.net		Contact Person's Fax Number: 727-849-4219	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Wells # 4		Plant Telephone Number: (850) 773-2802	
Plant Address: 153 Vash Circle		City: Chipley	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Day(s) / Shift(s) Worked	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Days 1st Shift
Other Operators:	George Randall Weekly	C	23173	Supervisor

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 8/1/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well #4

III. Daily Data for the Month/Year of: July, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable*							Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L			Lowest Operating UV Dose, mW-sec/cm ²
1	X	24.0	104,500		1.0							0.7	
2	X	24.0	94,000		0.9							0.7	
3	X	24.0	105,200		1.3							0.5	
4	X	24.0	108,300		1.0							0.7	
5		24.0	107,650									0.8	
6	X	24.0	107,650		0.9							0.5	
7	X	24.0	187,500		1.0							0.7	
8	X	24.0	97,900		1.0							0.6	
9	X	24.0	118,900		1.0							0.9	
10	X	24.0	96,400		0.9							0.8	
11	X	24.0	95,200		1.1								
12		24.0	114,150									0.8	
13	X	24.0	114,150		0.9							0.5	
14	X	24.0	102,000		1.0							0.7	
15	X	24.0	111,400		0.4							0.6	
16	X	24.0	93,300		1.0							0.5	
17	X	24.0	103,100		1.1							0.4	
18	X	24.0	99,600		1.0								
19		24.0	123,800									0.5	
20	X	24.0	123,800		1.1							0.7	
21	X	24.0	95,700		0.8							0.4	
22	X	24.0	107,400		0.9							0.6	
23	X	24.0	119,400		0.8							0.6	
24	X	24.0	97,700		0.9							0.6	
25	X	24.0	112,300		1.0								
26		24.0	111,000									0.5	
27	X	24.0	111,000		1.1							0.4	
28	X	24.0	97,500		0.8							0.5	
29	X	24.0	93,500		0.9							0.5	
30	X	24.0	107,300		1.1							0.4	
31	X	24.0	92,500		0.9								
Total			3,353,800										
Average			108,187										
Maximum			187,500										

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: July, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: #REF!		Total Population Served at End of Month: #REF!	
PWS Owner: US Water Services Corporation		Contact Person's Title: Compliance Manager	
Contact Person: Melisa Roteveel		City: New Port Rich State: Florida Zip Code: 34652	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		Contact Person's Fax Number: 727-849-4219	
Contact Person's Telephone Number: 866-753-8292		Contact Person's E-Mail Address: mroteveel@uswatercorp.net	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802	
Plant Address: 1240 Elkcam Blvd.		City: State: Florida Zip Code: 32428	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): V			

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Days 1st Shift
Other Operators:	George Randall Weekly	C	23173	Days 1st Shift

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 8/1/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: July, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	800		0.6										0.6	
2	X	24.0	1700		0.8										0.4	
3	X	24.0	700		0.9										0.5	
4	X	24.0	1500		0.6										0.4	
5		24.0	800													
6	X	24.0	700		0.3										0.4	
7	X	24.0	800		0.7										0.3	
8	X	24.0	1,200		1.0										0.4	
9	X	24.0	700		0.9										0.5	
10	X	24.0	800		0.4										0.3	
11	X	24.0	800		0.5										0.4	
12		24.0	700												0.3	
13	X	24.0	700		0.2										0.3	
14	X	24.0	1600		0.3										0.4	
15	X	24.0	800		0.2										0.3	
16	X	24.0	700		1.0										0.4	
17	X	24.0	800		1.0										0.5	
18	X	24.0	700		1.0										0.4	
19		24.0	800													
20	X	24.0	700		0.9										0.4	
21	X	24.0	800		0.4										0.5	
22	X	24.0	800		0.9										0.4	
23	X	24.0	800		0.8										0.4	
24	X	24.0	800		0.7										0.7	
25	X	24.0	800		0.6										0.4	
26		24.0	800													
27	X	24.0	700		1.0										0.5	
28	X	24.0	700		0.6										0.4	
29	X	24.0	1600		0.5										0.2	
30	X	24.0	700		0.6										0.3	
31	X	24.0	800		0.4										0.3	
Total			27,300													
Average			881													
Maximum			1,700													

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: August, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: #REF!		Total Population Served at End of Month: #REF!	
PWS Owner: US Water Services Corporation		Contact Person's Title: Compliance Manager	
Contact Person: Melisa Toteveel			
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Richey	State: Florida
Contact Person's Telephone Number: 866-753-8292		Contact Person's Fax Number: 727-849-4219	
Contact Person's E-Mail Address: mrotteveel@uswatercorp.net		Zip Code: 34652	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Wells # 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gable Blvd		City: Chipley	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	

Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Plant Category (per subsection 62-699.310(4), F.A.C.): V				
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Utility Manager
Other Operators:	George Randall Weekly	C	23173	Days 1st Shift

II Certification by Lead/Chief Operator
 I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 9/1/2020
 Signature and Date

Sharon Purviance
 Printed or Typed Name

C - 13268
 License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: _____ Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: August, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe): _____

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	0		1.2								0.6	
2		24.0	0										0.4	
3	X	24.0	0		1.6								0.7	
4	X	24.0	5000		1.8								0.6	
5	X	24.0	0		1.0								0.7	
6	X	24.0	0		1.0								0.6	
7	X	24.0	0		1.0								0.7	
8	X	24.0	0		1.1								0.6	
9		24.0	0										0.7	
10	X	24.0	19000		1.2								0.6	
11	X	24.0	2000		1.3								0.7	
12	X	24.0	0		1.0								0.6	
13	X	24.0	0		0.9								0.5	
14	X	24.0	211000		1.3								0.5	
15	X	24.0	28000		1.1								0.5	
16		24.0	31000										0.7	
17	X	24.0	31000		0.9								0.6	
18	X	24.0	20000		0.3								0.5	
19	X	24.0	18000		0.2								0.5	
20	X	24.0	0		0.2								0.3	
21	X	24.0	0		0.2								0.3	
22	X	24.0	0		0.2								0.3	
23		24.0	0										0.3	
24	X	24.0	0		0.3								0.3	
25	X	24.0	28000		1.8								0.5	
26	X	24.0	0		1.5								0.5	
27	X	24.0	18000		0.6								0.6	
28	X	24.0	0		0.2								0.5	
29	X	24.0	0		0.2								0.5	
30		24.0	0										0.3	
31	X	24.0	0		0.5								0.3	
Total			411,000											
Average			13,258											
Maximum			211,000											

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: August, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 594		Total Population Served at End of Month: 1,827	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Toteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Richey	State: Florida
Contact Person's Telephone Number: 866-753-8292		Contact Person's Fax Number: 727-849-4219	
Contact Person's E-Mail Address: mrotteveel@uswatercorp.net		Zip Code: 34652	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Wells # 4		Plant Telephone Number: (850) 773-2802	
Plant Address: 153 Vash Circle		City: Chipley	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): V			
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Sharon Purviance	C	13268
Other Operators:	George Randall Weekly	C	23173

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 8/1/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well #4

III. Daily Data for the Month/Year of: August, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	99,600		1.2								0.6	
2		24.0	114,350											
3	X	24.0	114,350		0.9								0.4	
4	X	24.0	107,900		0.9								0.7	
5	X	24.0	107,300		0.9								0.6	
6	X	24.0	116,600		1.1								0.7	
7	X	24.0	112,400		1.0								0.6	
8	X	24.0	126,300		1.1								0.7	
9		24.0	126,450											
10	X	24.0	126,450		0.8								0.6	
11	X	24.0	116,900		1.0								0.8	
12	X	24.0	112,900		0.9								0.6	
13	X	24.0	114,200		0.8								0.5	
14	X	24.0	163,800		1.0								0.5	
15	X	24.0	114,500		1.1								0.5	
16		24.0	148,700											
17	X	24.0	148,700		0.9								0.7	
18	X	24.0	135,800		1.1								0.6	
19	X	24.0	103,500		0.9								0.5	
20	X	24.0	130,800		1.0								0.5	
21	X	24.0	122,200		1.0								0.3	
22	X	24.0	171,100		0.8								0.3	
23		24.0	121,200											
24	X	24.0	121,200		1.0								0.3	
25	X	24.0	126,200		0.9								0.3	
26	X	24.0	103,800		0.6								0.5	
27	X	24.0	121,200		0.9								0.5	
28	X	24.0	116,800		0.9								0.6	
29	X	24.0	99,700		0.4								0.5	
30		24.0	123,600											
31	X	24.0	123,600		0.7								0.3	
Total			3,792,100											
Average			122,326											
Maximum			171,100											

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: August, 2020

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills			PWS Identification Number:	1670647
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	#REF!			Total Population Served at End of Month:	#REF!
PWS Owner:	US Water Services Corporation				
Contact Person:	Melisa Roteveel			Contact Person's Title:	Compliance Manager
Contact Person's Mailing Address:	4939 Cross Bayou Blvd	City:	New Port Rich	State:	Florida
Contact Person's Telephone Number:	866-753-8292			Zip Code:	34652
Contact Person's E-Mail Address:	mroteveel@uswatercorp.net			Contact Person's Fax Number:	727-849-4219

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Well # 5			Plant Telephone Number:	(850) 773-2802	
Plant Address:	1240 Elkcam Blvd.	City:		State:	Florida	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator:	Sharon Purviance	C	13268	Days 1st Shift		
Other Operators:	George Randall Weekly	C	23173	Days 1st Shift		

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 9/1/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: August, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L.	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L.	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L.	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	500		0.6										0.3	
2		24.0	600													
3	X	24.0	600		0.6										0.4	
4	X	24.0	1200		1.1										0.4	
5	X	24.0	550		0.2										0.4	
6	X	24.0	550		0.9										0.4	
7	X	24.0	0		0.8										0.4	
8	X	24.0	700		0.9										0.3	
9		24.0	800												0.4	
10	X	24.0	800		0.8											
11	X	24.0	800		0.9										0.3	
12	X	24.0	800		1.0										0.4	
13	X	24.0	800		0.3										0.5	
14	X	24.0	900		0.8										0.4	
15	X	24.0	800		0.8										0.4	
16		24.0	800												0.5	
17	X	24.0	900		0.6											
18	X	24.0	800		0.7										0.5	
19	X	24.0	800		0.5										0.4	
20	X	24.0	800		0.6										0.3	
21	X	24.0	700		0.4										0.4	
22	X	24.0	800		0.9										0.3	
23		24.0	800												0.3	
24	X	24.0	700		0.7										0.3	
25	X	24.0	700		1.1										0.3	
26	X	24.0	750		0.8										0.3	
27	X	24.0	750		1.0										0.3	
28	X	24.0	2500		0.8										0.3	
29	X	24.0	700		0.8										0.6	
30		24.0	0												0.5	
31	X	24.0	700		1.0											
Total			25,300												0.3	
Average			816													
Maximum			2,500													

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

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: _____ Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: September, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe): _____

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L.	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L.	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L.	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	3000		0.8								0.3	
2	X	24.0	0		0.8								0.4	
3	X	24.0	30000		0.8								0.5	
4	X	24.0	0		0.9								0.6	
5	X	24.0	0		0.8								0.2	
6		24.0	0											
7	X	24.0	0		0.7								0.5	
8	X	24.0	0		0.4								0.3	
9	X	24.0	0		0.5								0.2	
10	X	24.0	0		0.5								0.3	
11	X	24.0	0		0.5								0.5	
12	X	24.0	0		0.2								0.8	
13		24.0	0											
14	X	24.0	0		0.2								0.3	
15	X	24.0	0		0.3								0.4	
16	X	24.0	0		0.6								0.3	
17	X	24.0	0		0.5								0.5	
18	X	24.0	0		0.2								0.4	
19	X	24.0	0		0.2								0.2	
20		24.0	0											
21	X	24.0	0		0.6								0.2	
22	X	24.0	0		0.4								0.4	
23	X	24.0	16000		0.4								0.3	
24	X	24.0	0		0.5								0.4	
25	X	24.0	0		0.3								0.5	
26	X	24.0	0		0.5								0.4	
27		24.0	0											
28	X	24.0	0		0.2								0.5	
29	X	24.0	0		0.2								0.4	
30	X	24.0	0		0.2								0.5	
31		24.0	0											
Total			49,000											
Average			1,581											
Maximum			30,000											

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: September, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 594		Total Population Served at End of Month: 1,827	
PWS Owner: US Water Services Corporation		Contact Person's Title: Compliance Manager	
Contact Person: Melisa Toteveel			
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Richey	State: Florida
Contact Person's Telephone Number: 866-753-8292		Zip Code: 34652	
Contact Person's E-Mail Address: mrotteveel@uswatercorp.net		Contact Person's Fax Number: 727-849-4219	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Wells # 4		Plant Telephone Number: (850) 773-2802	
Plant Address: 153 Vash Circle		City: Chipley	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): V			

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Days 1st Shift
Other Operators:	George Randall Weekly	C	23173	Supervisor

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 10/2/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW"Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well #4

III. Daily Data for the Month/Year of: September, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	115,400		0.8								0.3	
2	X	24.0	106,100		1.0								0.4	
3	X	24.0	129,000		1.0								0.5	
4	X	24.0	110,900		1.1								0.6	
5	X	24.0	118,600		1.0								0.2	
6		24.0	138,450											
7	X	24.0	138,450		1.1								0.5	
8	X	24.0	142,500		0.8								0.3	
9	X	24.0	120,900		0.7								0.2	
10	X	24.0	97,100		0.7								0.3	
11	X	24.0	91,400		1.0								0.5	
12	X	24.0	84,600		1.2								0.8	
13		24.0	101,450											
14	X	24.0	101,450		1.0								0.3	
15	X	24.0	91,800		0.9								0.4	
16	X	24.0	91,200		0.8								0.3	
17	X	24.0	99,900		0.6								0.5	
18	X	24.0	91,200		1.0								0.4	
19	X	24.0	95,400		1.0								0.2	
20		24.0	130,050											
21	X	24.0	130,050		1.0								0.2	
22	X	24.0	89,000		0.9								0.4	
23	X	24.0	92,500		1.1								0.3	
24	X	24.0	113,100		1.0								0.4	
25	X	24.0	83,000		0.9								0.5	
26	X	24.0	103,600		1.0								0.4	
27		24.0	94,150											
28	X	24.0	94,150		1.4								0.5	
29	X	24.0	109,600		0.8								0.4	
30	X	24.0	96,500		0.8								0.5	
31		24.0												
Total			3,201,500											
Average			106,717											
Maximum			142,500											

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: September, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: #REF!		Total Population Served at End of Month: #REF!	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Roteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Rich	State: Florida
Contact Person's Telephone Number: 866-753-8292		Zip Code: 34652	
Contact Person's E-Mail Address: mroteveel@uswatercorp.net		Contact Person's Fax Number: 727-849-4219	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802	
Plant Address: 1240 Elkcam Blvd		City:	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Days 1st Shift
Other Operators:	George Randall Weekly	C	23173	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 10/2/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: September, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe): _____

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations				UV Dose		Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable		
1	X	24.0	500		0.9						
2	X	24.0	600		1.0						
3	X	24.0	600		1.1					0.3	
4	X	24.0	1200		0.7					0.3	
5	X	24.0	550		0.8					0.4	
6		24.0	550							0.4	
7	X	24.0	0							0.3	
8	X	24.0	700		1.0						
9	X	24.0	800		2.0					0.5	
10	X	24.0	800		1.2					0.4	
11	X	24.0	800		0.7					0.7	
12	X	24.0	800		1.1					0.5	
13		24.0	800		1.0					0.4	
14	X	24.0	900							0.4	
15	X	24.0	800		0.6						
16	X	24.0	800		0.9					0.5	
17	X	24.0	900		0.7					0.2	
18	X	24.0	800		1.3					0.3	
19	X	24.0	800		1.2					0.4	
20		24.0	800		0.2					0.4	
21	X	24.0	700							0.2	
22	X	24.0	800		1.5						
23	X	24.0	800		2.0						
24	X	24.0	700		1.5					0.6	
25	X	24.0	700		1.5					0.5	
26	X	24.0	700		1.7					0.4	
27		24.0	750		1.4					0.4	
28	X	24.0	2500							0.2	
29	X	24.0	700		1.0					0.3	
30	X	24.0	0		1.9						
31		24.0	700		1.8					0.4	
Total			24,600							0.4	
Average			820							0.8	
Maximum			2,500								

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: October, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: #REF!		Total Population Served at End of Month: #REF!	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Toteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Richey	State: Florida
Contact Person's Telephone Number: 866-753-8292		Contact Person's Fax Number: 727-849-4219	
Contact Person's E-Mail Address: mrotteveel@uswatercorp.net			
Zip Code: 34652			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Wells # 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gable Blvd		City: Chipley	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Utility Manager
Other Operators:	George Randall Weekly	C	23173	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

<p><u>Sharon Purviance 11/2/2020</u> Signature and Date</p>	<p>Sharon Purviance Printed or Typed Name</p>	<p>C - 13268 License Number</p>
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: _____ Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: October, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe): _____

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L.	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	0			0.2									0.6	
2	X	24.0	0			0.6									0.7	
3	X	24.0	0			0.5									5.0	
4		24.0	0													
5	X	24.0	0			0.6									0.5	
6	X	24.0	16000			0.6									0.3	
7	X	24.0	0			0.7									0.6	
8	X	24.0	0			1.0									0.7	
9	X	24.0	0			1.0									0.7	
10	X	24.0	0			1.0									0.8	
11		24.0	0													
12	X	24.0	0			1.8									0.2	
13	X	24.0	0			1.1									0.7	
14	X	24.0	0			1.2									0.9	
15	X	24.0	0			1.0									0.6	
16	X	24.0	0			0.5									0.3	
17	X	24.0	0			0.3									0.4	
18		24.0	0													
19	X	24.0	0			2.0									0.3	
20	X	24.0	0			2.0									0.5	
21	X	24.0	0			2.0									0.5	
22	X	24.0	0			1.9									0.8	
23	X	24.0	20000			1.0									0.5	
24	X	24.0	0			0.9									0.7	
25		24.0	0													
26	X	24.0	0			0.9									0.6	
27	X	24.0	0			2.0									0.5	
28	X	24.0	0			2.0									0.4	
29	X	24.0	18000												0.5	
30		24.0	16000													
31	X	24.0	22400			2.0									0.8	
Total			92,400													
Average			2,981													
Maximum			22,400													

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: October, 2020

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills			PWS Identification Number:	1670647
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	594			Total Population Served at End of Month:	1,827
PWS Owner:	US Water Services Corporation				
Contact Person:	Melisa Toteveel			Contact Person's Title:	Compliance Manager
Contact Person's Mailing Address:	4939 Cross Bayou Blvd	City:	New Port Richey	State:	Florida
Contact Person's Telephone Number:	866-753-8292			Zip Code:	34652
Contact Person's E-Mail Address:	mrotteveel@uswatercorp.net			Contact Person's Fax Number:	727-849-4219

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Wells #4			Plant Telephone Number:	(850) 773-2802
Plant Address:	153 Vash Circle	City:	Chipley	State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	
				C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked	
Lead/Chief Operator:	Sharon Purviance	C	13268	Days 1st Shift	
Other Operators:	George Randall Weekly	C	23173	Supervisor	

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 10/2/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well #4

III. Daily Data for the Month/Year of: October, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	97,100				1.2						0.6	
2	X	24.0	108,400				0.8						0.7	
3	X	24.0	91,400				0.8						0.5	
4		24.0	107,450											
5	X	24.0	107,450				0.6						0.5	
6	X	24.0	100,900				0.7						0.3	
7	X	24.0	102,700				0.6						0.6	
8	X	24.0	111,700				0.9						0.7	
9	X	24.0	94,000				0.7						0.7	
10	X	24.0	103,900				0.8						0.8	
11		24.0	102,550											
12	X	24.0	102,550				0.9						0.2	
13	X	24.0	103,300				1.0						0.7	
14	X	24.0	92,500				1.0						0.9	
15	X	24.0	106,300				1.1						0.6	
16	X	24.0	109,800				0.9						0.3	
17	X	24.0	99,300				1.0						0.4	
18		24.0	110,550											
19	X	24.0	110,550				0.8						0.3	
20	X	24.0	103,000				0.8						0.5	
21	X	24.0	118,500				0.9						0.5	
22	X	24.0	126,500				1.2						0.8	
23	X	24.0	110,500				0.8						0.5	
24	X	24.0	86,400				1.0						0.7	
25		24.0	104,850											
26	X	24.0	104,850				1.1						0.6	
27	X	24.0	100,000				1.0						0.5	
28	X	24.0	114,800				0.7						0.4	
29	X	24.0	129,700				1.1						0.5	
30		24.0	119,600				0.5							
31	X	24.0	149,100				1.0						0.8	
Total			3,330,200											
Average			107,426											
Maximum			129,700											

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: October, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community
Number of Service Connections at End of Month: #REF!		Total Population Served at End of Month: #REF!	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Roteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address:	4939 Cross Bayou Blvd	City: New Port Rich	State: Florida
			Zip Code: 34652
Contact Person's Telephone Number:	866-753-8292	Contact Person's Fax Number:	727-849-4219
Contact Person's E-Mail Address:	mroteveel@uswatercorp.net		

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802		
Plant Address: 1240 Elkcam Blvd		City:	State: Florida	
			Zip Code: 32428	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:		1,224,000		
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Days 1st Shift
Other Operators:	George Randall Weekly	C	23173	Days 1st Shift

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 11/2/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: October, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	X	24.0	500		1.1							0.6	
2	X	24.0	600		1.0							0.4	
3	X	24.0	600		1.0							0.4	
4	X	24.0	1200		0.7							0.4	
5		24.0	550										
6	X	24.0	550		0.6							0.5	
7	X	24.0	0		0.6							0.5	
8	X	24.0	700		1.1							0.3	
9	X	24.0	800		1.0							0.2	
10	X	24.0	800		0.4							0.3	
11	X	24.0	800		1.0							0.5	
12		24.0	800										
13	X	24.0	800		0.4							1.0	
14	X	24.0	900		1.1							0.2	
15	X	24.0	800		0.9							0.2	
16	X	24.0	800		0.6							0.2	
17	X	24.0	900		0.5							0.4	
18	X	24.0	800		1.1							0.3	
19		24.0	800										
20	X	24.0	800		0.4							0.2	
21	X	24.0	700		0.5							0.4	
22	X	24.0	800		1.0							0.2	
23	X	24.0	800		1.0							0.4	
24	X	24.0	700		0.3							0.2	
25	X	24.0	700		0.8							0.4	
26		24.0	750										
27	X	24.0	750		0.3							0.3	
28	X	24.0	2500		0.6							0.3	
29	X	24.0	700		0.5							0.4	
30	X	24.0	0		0.6							0.3	
31	X	24.0	700		0.8							0.3	
Total			23,600										
Average			761										
Maximum			2,500										

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of:	November, 2020
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A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: #REF!		Total Population Served at End of Month: #REF!	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Toteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd	City: New Port Richey	State: Florida	Zip Code: 34652
Contact Person's Telephone Number: 866-753-8292	Contact Person's Fax Number: 727-849-4219		
Contact Person's E-Mail Address: mrotteveel@uswatercorp.net			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Wells # 1		Plant Telephone Number: (850) 773-2802		
Plant Address: 3810 Gable Blvd		City: Chipley	Zip Code: 32428	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Utility Manager
Other Operators:	George Randall Weekly	C	23173	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 12/7/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: _____ Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: November, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe): _____

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1		24.0	0											
2	X	24.0	0		2.5								0.5	
3	X	24.0	0		0.2								0.4	
4	X	24.0	0		0.2								0.5	
5	X	24.0	0		0.2								0.4	
6	X	24.0	0		0.2								0.5	
7	X	24.0	0		0.2								0.5	
8		24.0	0											
9	X	24.0	0		0.2								0.7	
10	X	24.0	0		0.2								0.8	
11	X	24.0	0		0.2								0.7	
12	X	24.0	1000		1.2								0.6	
13	X	24.0	0		1.0								0.6	
14	X	24.0	41000		2.0								5.0	
15		24.0	0											
16	X	24.0	145000		0.3								0.5	
17	X	24.0	41000		0.2								0.5	
18	X	24.0	0		0.2								0.6	
19	X	24.0	14000		0.2								0.3	
20	X	24.0	6000		2.0								0.6	
21	X	24.0	22000		1.7								0.5	
22		24.0	0											
23	X	24.0	40000		0.9								0.7	
24	X	24.0	0		2.0								0.6	
25	X	24.0	19000		1.9								0.5	
26	X	24.0	0		1.2								0.5	
27	X	24.0	0		1.0								0.5	
28	X	24.0	0		1.1								0.5	
29		24.0	0											
30	X	24.0	0		0.5								0.5	
31		24.0	0											
Total			329,000											
Average			10,613											
Maximum			30,000											

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: November, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 594		Total Population Served at End of Month: 1,827	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Toteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Richey	State: Florida
		Zip Code: 34652	
Contact Person's Telephone Number: 866-753-8292		Contact Person's Fax Number: 727-849-4219	
Contact Person's E-Mail Address: mrotteveel@uswatercorp.net			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Wells # 4		Plant Telephone Number: (850) 773-2802		
Plant Address: 153 Vash Circle		City: Chipley	State: Florida	
		Zip Code: 32428		
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Days 1st Shift
Other Operators:	George Randall Weekly	C	23173	Supervisor

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 12/7/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well #4

III. Daily Data for the Month/Year of: November, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²			
1		24.0	122,150												
2	X	24.0	122,150		0.7									0.5	
3	X	24.0	96,600		0.8									0.4	
4	X	24.0	89,900		1.0									0.5	
5	X	24.0	108,300		1.1									0.4	
6	X	24.0	95,200		1.0									0.5	
7	X	24.0	110,000		1.1									0.5	
8		24.0	117,750											0.5	
9	X	24.0	117,750		1.8									0.7	
10	X	24.0	114,900		1.7									0.8	
11	X	24.0	110,000		1.1									0.7	
12	X	24.0	121,100		1.0									0.6	
13	X	24.0	90,600		1.0									0.6	
14	X	24.0	75,600		1.2									0.5	
15		24.0	42,650												
16	X	24.0	42,650		1.2									0.5	
17	X	24.0	88,600		1.0									0.5	
18	X	24.0	106,500		1.0									6.0	
19	X	24.0	138,300		0.9									0.3	
20	X	24.0	104,000		1.0									0.6	
21	X	24.0	126,800		1.1									0.5	
22		24.0	158,000												
23	X	24.0	158,000		1.0									0.7	
24	X	24.0	161,900		1.0									0.6	
25	X	24.0	163,800		1.0									0.5	
26	X	24.0	191,700		1.0									0.5	
27	X	24.0	126,800		1.2									0.5	
28	X	24.0	118,400		1.4									0.5	
29		24.0	116,150											0.5	
30	X	24.0	116,150		1.2									0.5	
31		24.0													
Total			3,452,400												
Average			115,080												
Maximum			191,700												

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



See Pages 4 for Instructions.

I. General Information for the Month/Year of: November, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: #REF!		Total Population Served at End of Month: #REF!	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Roteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Rich State: Florida Zip Code: 34652	
Contact Person's Telephone Number: 866-753-8292		Contact Person's Fax Number: 727-849-4219	
Contact Person's E-Mail Address: mroteveel@uswatercorp.net			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802	
Plant Address: 1240 Elkcam Blvd.		City: State: Florida Zip Code: 32428	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number / Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268 / Days 1st Shift
Other Operators:	George Randall Weekly	C	23173 / Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 12/7/2020
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: November, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1		24.0	2500										
2	X	24.0	2500		1.4								
3	X	24.0	2600		0.7							0.8	
4	X	24.0	900		1.0							1.0	
5	X	24.0	800		2.0							0.8	
6	X	24.0	900		1.9							1.4	
7	X	24.0	0		1.4							1.3	
8		24.0	850									1.0	
9	X	24.0	850		1.8								
10	X	24.0	900		1.5							1.1	
11	X	24.0	900		1.4							1.0	
12	X	24.0	800		1.3							0.9	
13	X	24.0	0		1.3							1.0	
14	X	24.0	900		1.1							0.8	
15		24.0	850									0.8	
16	X	24.0	850		1.0								
17	X	24.0	800		1.5							0.8	
18	X	24.0	800		1.4							0.9	
19	X	24.0	800		0.8							0.8	
20	X	24.0	700		0.8							0.8	
21	X	24.0	800		0.9							0.6	
22		24.0	750									0.6	
23	X	24.0	750		1.0								
24	X	24.0	800		0.9							0.6	
25	X	24.0	0		0.8							0.5	
26	X	24.0	900		0.9							0.5	
27	X	24.0	800		1.0							0.6	
28	X	24.0	800		0.9							0.4	
29		24.0	850									0.4	
30	X	24.0	850		0.6								
31		24.0										0.7	
Total			27,500										
Average			917										
Maximum			2,500										

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



Polymer Page 3 Due in December

See Pages 4 for Instructions.

I. General Information for the Month/Year of: December, 2020

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills	PWS Identification Number:	1670647
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	#REF!	Total Population Served at End of Month:	#REF!
PWS Owner:	US Water Services Corporation		
Contact Person:	Melisa Toteveel	Contact Person's Title:	Compliance Manager
Contact Person's Mailing Address:	4939 Cross Bayou Blvd	City:	New Port Richey State: Florida Zip Code: 34652
Contact Person's Telephone Number:	866-753-8292	Contact Person's Fax Number:	727-849-4219
Contact Person's E-Mail Address:	mrotteveel@uswatercorp.net		

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Wells # 1	Plant Telephone Number:	(850) 773-2802
Plant Address:	3810 Gable Blvd	City:	Chipley State: Florida Zip Code: 32428
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Utility Manager
Other Operators:	George Randall Weekly	C	23173	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 1/7/2021
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: _____ Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: December, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe): _____

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	20000		0.4										0.3
2	X	24.0	86000		0.2										0.4
3	X	24.0	69000		0.3										0.3
4	X	24.0	76000		0.5										1.0
5	X	24.0	7000		2.0										0.9
6		24.0	0												
7	X	24.0	41000		1.6										0.8
8	X	24.0	24000		2.0										0.4
9	X	24.0	0		2.0										1.2
10	X	24.0	19000		2.0										0.7
11	X	24.0	0		2.0										0.6
12	X	24.0	0		2.0										0.6
13		24.0	0												
14	X	24.0	0		2.0										1.3
15	X	24.0	0		1.0										1.0
16	X	24.0	0		1.9										1.0
17	X	24.0	0		1.8										0.9
18	X	24.0	0		1.8										0.9
19	X	24.0	0		1.5										0.9
20		24.0	0												
21	X	24.0	0		1.3										0.6
22	X	24.0	0		1.2										0.6
23	X	24.0	0		0.5										0.5
24	X	24.0	0		0.5										0.5
25	X	24.0	0		0.5										0.4
26	X	24.0	0		0.2										0.5
27		24.0	0												
28	X	24.0	0		0.6										0.7
29	X	24.0	0		0.6										0.5
30	X	24.0	0		0.4										0.8
31	X	24.0	0		0.4										0.3
Total			342,000												
Average			11,032												
Maximum			86,000												

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



Polymer Page 3 Due in December

See Pages 4 for Instructions.

I. General Information for the Month/Year of: December, 2020

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills			PWS Identification Number:	1670647
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	594			Total Population Served at End of Month:	1,827
PWS Owner:	US Water Services Corporation				
Contact Person:	Melisa Toteveel			Contact Person's Title:	Compliance Manager
Contact Person's Mailing Address:	4939 Cross Bayou Blvd	City:	New Port Richey	State:	Florida
				Zip Code:	34652
Contact Person's Telephone Number:	866-753-8292			Contact Person's Fax Number:	727-849-4219
Contact Person's E-Mail Address:	mrotteveel@uswatercorp.net				

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Wells # 4			Plant Telephone Number:	(850) 773-2802
Plant Address:	153 Vash Circle			City:	Chipley
				State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked	
Lead/Chief Operator:	Sharon Purviance	C	13268	Days 1st Shift	
Other Operators:	George Randall Weekly	C	23173	Supervisor	

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 1/7/2021
 Signature and Date

Sharon Purviance
 Printed or Typed Name

C - 13268
 License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well #4

III. Daily Data for the Month/Year of: December, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	114,900		0.7									0.3	
2	X	24.0	57,200		0.8									0.4	
3	X	24.0	39,700		0.9									0.6	
4	X	24.0	37,800		1.1									1.0	
5	X	24.0	82,900		1.0									0.9	
6		24.0	79,550												
7	X	24.0	79,550		1.1									0.8	
8	X	24.0	90,500		1.0									0.4	
9	X	24.0	99,500		0.9									1.2	
10	X	24.0	98,000		0.8									0.7	
11	X	24.0	104,100		0.9									0.6	
12	X	24.0	113,500		1.2									0.6	
13		24.0	95,500												
14	X	24.0	95,500		0.6									1.3	
15	X	24.0	91,000		0.6									1.0	
16	X	24.0	100,800		0.9									1.0	
17	X	24.0	93,000		1.0									0.9	
18	X	24.0	92,900		0.9									0.9	
19	X	24.0	95,000		1.0									0.8	
20		24.0	113,750												
21	X	24.0	113,750		0.9									0.6	
22	X	24.0	117,600		1.1									0.6	
23	X	24.0	78,700		1.2									0.5	
24	X	24.0	86,800		1.1									0.5	
25	X	24.0	93,700		1.0									0.4	
26	X	24.0	102,600		1.0									0.5	
27		24.0	97,850												
28	X	24.0	97,850		0.9									0.7	
29	X	24.0	94,800		0.8									0.5	
30	X	24.0	92,800		1.5									0.8	
31		24.0	105,300		1.1									0.3	
Total			2,856,400												
Average			92,142												
Maximum			117,600												

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER



Polymer Page 3 Due in December

See Pages 4 for Instructions.

I. General Information for the Month/Year of: December, 2020

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: #REF!		Total Population Served at End of Month: #REF!	
PWS Owner: US Water Services Corporation			
Contact Person: Melisa Roteveel		Contact Person's Title: Compliance Manager	
Contact Person's Mailing Address: 4939 Cross Bayou Blvd		City: New Port Rich	State: Florida
Contact Person's Telephone Number: 866-753-8292		Zip Code: 34652	
Contact Person's E-Mail Address: mroteveel@uswatercorp.net		Contact Person's Fax Number: 727-849-4219	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802		
Plant Address: 1240 Elkcam Blvd.		City:	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428		
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Sharon Purviance	C	13268	Days 1st Shift
Other Operators:	George Randall Weekly	C	23173	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Sharon Purviance 1/7/2021
Signature and Date

Sharon Purviance
Printed or Typed Name

C - 13268
License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: December, 2020

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	700		0.8										0.7	
2	X	24.0	3900		0.9										0.8	
3	X	24.0	700		0.9										0.7	
4	X	24.0	800		1.1										0.6	
5	X	24.0	800		1.0										0.6	
6		24.0	800												0.6	
7	X	24.0	800		0.9										0.5	
8	X	24.0	800		0.4										0.7	
9	X	24.0	800		0.4										0.6	
10	X	24.0	800		0.7										0.8	
11	X	24.0	800		1.4										0.9	
12	X	24.0	800		1.3										0.8	
13		24.0	850												0.8	
14	X	24.0	850		0.8										0.8	
15	X	24.0	900		0.6										0.7	
16	X	24.0	0		0.8										0.8	
17	X	24.0	1000		1.0										0.8	
18	X	24.0	700		0.9										0.8	
19	X	24.0	700		0.8										0.7	
20		24.0	0												0.7	
21	X	24.0	800		0.9										0.5	
22	X	24.0	1,800		1.2										0.6	
23	X	24.0	600		0.8										0.7	
24	X	24.0	1000		0.7										0.7	
25	X	24.0	600		0.8										0.7	
26	X	24.0	800		0.8										0.3	
27		24.0	0												0.4	
28	X	24.0	700		1.0										0.6	
29	X	24.0	1600		0.6										0.6	
30	X	24.0	800		1.0										0.6	
31	X	24.0	800		1.1										0.6	
Total			27,000												0.9	
Average			871													
Maximum			2,500													

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

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS ID:	1670647	Plant Name:	Sunny Hills
---------	---------	-------------	-------------

IV. Summary of Use of Polymer Containing Acrylamide, Polymer Containing Epichlorohydrin, and Iron or Manganese Sequestrant for the Year: * 2020

A. Is any polymer containing the monomer acrylamide used at the water treatment plant? No Yes, and the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose ppm =		Acrylamide Level, % ¹ =	
--------------------	--	------------------------------------	--

B. Is any polymer containing the monomer epichlorohydrin used at the water treatment plant? No Yes, and the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose ppm =		Epichlorohydrin Level, % ¹ =	
--------------------	--	---	--

C. Is any iron or manganese sequestrant used at the water treatment plant? No Yes, and the type of sequestrant, sequestrant dose, ect., are as follows:

Type of Sequestrant (polyphosphate or sodium silicate):	Aqua Dene
Sequestrant Dose, mg/L of phosphate as PO ₄ or mg/L of silicate as SiO ₂ =	
If sodium silicate is used, the amount of added plus naturally occurring silicate, in mg/L as SiO ₂ =	

* Complete and submit Part IV of this report only with the monthly operation report for December of each year and only for water treatment plants using polymer containing acrylamide, polymer containing epichlorohydrin, and/or an iron and manganese sequestrant.

¹ Acrylamide and epichlorohydrin levels may be based on the polymer manufacturer's certification or on third-party certification.



Florida Department of Environmental Protection

470 Harrison Avenue
Panama City, Florida 32401

Rick Scott
Governor

Carlos Lopez-Cantera
Lt. Governor

Jonathan P. Steverson
Secretary

February 3, 2016

Mr. Gary Deremer, President
U.S. Water Services Corporation
4939 Cross Bayou Boulevard
New Port Richey, Florida 34652
gderemer@uswatercorp.net

Re: Sunny Hills Water System
PWS ID# 1670647
Washington County

Dear Mr. Deremer:

Department personnel conducted a sanitary survey of the above-referenced facility on January 7, 2016. Based on the information provided during the inspection, the system was determined to be in compliance with the Department's rules and regulations. A copy of the inspection report is attached for your records.

The Department appreciates your effort to maintain this system in compliance with state and federal rules. If you have any questions or comments, please contact Mark Sumner at (850) 767-0046 or by e-mail mark.c.sumner@dep.state.fl.us.

Sincerely,

A handwritten signature in cursive script that reads "Josie Penton".

Josie Penton
Environmental Manager

JP/cms

Enclosure: Sanitary Survey Report

c: Scott Grubbs, DEP NWD Pensacola scott.grubbs@dep.state.fl.us
Craig Freeman, NFWFMD Craig.Freeman@nwfwater.com
Ron Derossett rderossett@uswatercorp.net
Randall Weekly gweekly@uswatercorp.net



STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

SANITARY SURVEY REPORT

GROUND WATER COMMUNITY SYSTEMS

SYSTEM AND OWNER INFORMATION

System Sunny Hills Utilities County Washington PWS ID # 1670647
Address 3810 Gables Blvd. City Sunny Hills
Phone 850-258-1424 Fax 850-773-2626 E-mail gderemer@uswatercorp.net
Owner U.S. Water Services Corporation Phone 727-848-8292
Address 4939 Cross Bayou Boulevard, Florida 34659

INSPECTION AND CONTACT INFORMATION

Date of this survey January 7, 2016 Date of last survey May 23, 2013
DEP Representative(s) Mark Sumner
Person(s) Contacted Randall Weekley
Emergency Number 850-258-1424 Cell 850-258-1424 Pager Other

CERTIFIED OPERATORS AND CERTIFICATION NUMBER

Randall Weekley "C"23173; Back-up operators Jimmy Finch "C" 4545 and Jimmy Cook "B"8335

DIRECTIONS TO PLANT OR OFFICE (provide general directions to the office and/or plant)

From Panama City take 77 north for approximately 24 miles, turn right onto Sunny Hills Blvd., approximately 1 mile turn left on to Gables Blvd., water plant is approximately 0.25 miles on left.

SERVICE AREA

Service Area Characteristics Residential community
Population Served 1827 Basis Billing
Service Connections 594 % Metered 100
Design Capacity (gallons) 2,799,360
Design Capacity without best well 1,166,400
Storage Capacity 177,500 Avg. Day 159,441
Max. Day (GPD) 368,200 % Design Capacity 13
25% Max. Day 92,050 % Storage Capacity 52

EMERGENCY MEDIA CONTACT NUMBERS

Table with 3 columns: NAME, PHONE NUMBER. Rows include Television (WMBB channel 13, WJHG channel 7), Radio FM (Magic Broadcasting), Newspaper (News Herald).

EMERGENCY PREPAREDNESS/STANDBY POWER

Emergency Preparedness Plan On file: [X]Yes []No []Not Rqd
The plan includes the following:
[X]Communication Chart []Written Agreements [X]Disaster Plan [X]Standby Power Info []Inventories []Other
Avg. Day Percentage of Auxiliary Supply 5.6%
Standby Equipment Operated at Least Monthly? [X]Yes []No
Any Interconnects []Yes [X]No
If yes, which systems:
Comments:

PERMANENT SOURCES OF RAW WATER:

[X]Ground How Many Wells 3
[]Purchased PWS #'s. NA
Purchase Limit (GPD) NA
Avg Purchased (GPD) NA

TREATMENT IN USE AT THIS PLANT: (CHECK ALL THAT APPLY)

Number of Plants 3
[]Aeration []E.D. []Iron Removal []pH Adjustment [X]Chlorination
[]Filtration []Lime Softening []T&O Control []Chlorination-Pre []Filt. Hi-Rate
[]Recarbonation []Settling []Chlorination-Post []Fluoridation []Reverse Osmosis
[]Zeolite Softener []Coagulation [X]Orthophosphate []Aqua Mag []Other-Specify
Any additional treatment is needed? No For control of what deficiencies? N/A

OPERATOR STAFFING REQUIREMENTS

Number of Licensed Operators 2 Plant Cat/Class IV/C Staffing compliant? [X]Yes []No Actual visits per week: 6

SOURCE

Well Name or Source		1	4	5
	Street name of well	Gables Blvd.	Cash Circle	Elkam Blvd.
	Year Drilled	1971	1973	1977
W	Depth Drilled (feet)	433	436	400
E	Drilling Method	Rotary	Rotary	Rotary
L	Length, Outside Casing (feet)	433	204	199
L	Diameter, Outside Casing (inches)	18	12	6
	Material, Outside Casing	Steel	Steel	Steel
D	Type of Strainer	None	None	None
A	Depth to Top of Strainer	NA	NA	NA
T	Type of Grout	Cement	Cement	Cement
A	Depth to Static Water Level (feet)	86	198	156
	Normal Suction Lift (working level-ft)	94	205	158
P	Pump Type	turbine	turbine	submersible
U	Horse Power	30	60	20
M	Normal Yield (GPM/GPD if purchased)	500	517	250
P	Capacity (GPM / GPD if purchased)	510	600	300
R	Protection From Surface Water	Yes	Yes	Yes
O	Is Inundation of Well Possible?	No	No	No
U	Well Ever Been Contaminated?	No	No	No
T	Check Valve Present in Line?	Yes	Yes	Yes
I	Proper Venting?	Yes	Yes	No
N	Meter Accuracy and Year of Test	-13.2% 3/24/15	+2.9% 3/24/15	-1.9% 3/24/15
E	Date of Last Servicing?	2014	2015	2016
A	Auxiliary Capability (if yes, list type)	Yes (LP gas generator)	Yes (Kohler diesel)	Yes (Diesel)
U	Manual or Automatic?	Manual	Automatic	Manual
X	Capacity (GPM)	500	600	200
	Florida Unique ID# (GPS well tag)	AAA5155	AAA5156	AAA1095
Comments:				

TREATMENT

• CHLORINATOR

PLANT NUMBER (OR NAME)→	1	2	3	comment
Type of chlorination (if hypo list strength)	Hypo (12.5%)	Hypo (12.5%)	Hypo (12.5%)	
Condition of Chlorination Equipment	Good	Good	Good	
Capacity (PPD, GPD)	30 gpd	30 gpd	30 gpd	
Chlorine Feed Rate (PPD, GPD)	2 gpd	1 gpd	0.17 gpd	
Adequate Housing and Security?	Yes	Yes	Yes	
Associated Well(s) (if any)	1	4	5	
Auxiliary Power Capability?	Yes	Yes	Yes	
O & M Log/Manual Onsite?	Yes	Yes	Yes	
Chlorine Residual (mg/L) / pH	2.0/7.4	1.26/7.4	1.70/7.4	
G Chlorine Alarms Functional?	NA	NA	NA	
G Auto Switchover	NA	NA	NA	
G Dual System	NA	NA	NA	
G Evidence of Leaks	NA	NA	NA	
A Air-Pack Respirator Adequate?	NA	NA	NA	
A Ammonia Smells Fresh	NA	NA	NA	
A <i>Chained</i> Cylinders	NA	NA	NA	
S Fitted Wrench	NA	NA	NA	
S Proper Ventilation	NA	NA	NA	
S Scale Condition	NA	NA	NA	

Spare Parts/Backups Operative? Yes No Spare Parts Not Retained More capacity needed? Yes No

Comments:

AERATOR	
Type of Aerator	_____
Tray Area or Weir Length	_____
Condition of Screens	_____
Bloodworms _____	Condition of aerator _____
Adequate for Fe, H2S control	_____
COAGULATION	
Chemical used	_____
Purpose	_____
Blanket visible _____	Flocculation good or poor _____
Settling good? _____	Carryover _____
LIME SOFTENING	
Quicklime or hydrated	_____
Name of unit	_____
Size and type	_____
Any auxiliary chemicals used	_____
Points of application (in unit)	_____
Nature and abundance of flux	_____
Appearance of sludge blanket	_____
Is settling good? _____	Excessive carryover _____
Any filter cementation	_____
Effluent stability	_____
Turbidity in clear well _____	Secondary precipitation _____
Recarbonation type	_____
Sludge recirculation Used	_____
FLUORIDATION	
Chemical Used Is Dilution	_____
Strength if Acid _____	Used(acid) _____
Corrosion Noted Feeder	_____
Gelling or Plugging	_____
Make and Model	_____
Split Sample Agreement	_____
Sufficient Analysis	_____
Feeder Condition	_____

STABILIZATION	
Is pH control Practiced?	_____
Is an index computed? <input type="checkbox"/> Yes <input type="checkbox"/> No (if so, check below)	
<input type="checkbox"/> Langelier <input type="checkbox"/> Ryznar <input type="checkbox"/> Puckorius <input type="checkbox"/> Larson	
<input type="checkbox"/> Stiff <input type="checkbox"/> Odde <input type="checkbox"/>	
Other	_____
Results of index	_____
Chemical(s) used	_____
FILTERS & FILTRATION N/A	
Type of filters	_____
Size and number	_____
Length of filter runs	_____
Can you see filter media? _____	Clean after backwash? _____
Are mud balls visible? _____	Binding? _____
What is the normal filter rate	_____
What is the usual backwash rate	_____
Capacity of filters _____	Filters overloaded? _____
Loss in head gauge present?	_____
At what head loss is BW done?	_____
Cracks and channeling? _____	Cementation ever occurred? _____
Where in relation to filtration is stabilization done?	_____
If high rate, what is turbidity at interface Range of turbidity In effluent	_____
Can you observe algae in filters?	_____
Distance from top of media to trough overflow	_____
REVERSE OSMOSIS	
Make and type of units	_____
Pressure required	_____
Auxiliary chemicals	_____
Proportion of waste used to product streams	_____
Quality of effluent _____	Stabilization _____
Type of Pre-treatment _____	Booster pump _____
Type of membranes	_____
ZEOLITE SOFTENING	
Unit mfg. & model	_____
Resin capacity _____	Disinfection of beds _____
Grade of salt for regen.	_____
Stability of effluent _____	Resin prevented from escaping? _____

PUMPS AND PUMP CONTROLS							
PUMP CATEGORY	High service at Well #1						
PUMP NUMBER →	1	2	3				
PUMP TYPE	Peerless	Peerless	Peerless				
MOTOR HP	10	25	25				
DATE INSTALLED	6/72	6/72	6/72				
CAPACITY (GPM)	100	200	200				
AUXILIARY CAPACITY?	No	No	Yes				
PROPER SECURITY?	Yes	Yes	Yes				
CONDITION OF PUMP	Good	Good	Good				
MAINT. SCHEDULE	2012	2012	2012				
DATE LAST SERVICED	2012	2012	2012				

STORAGE FACILITIES:							
TANK NUMBER →	1A	1B	1C	4 NEWER	5	6	Comment
TYPE (GROUND, ELEVATED, HYPO)	GROUND	GROUND	HYDRO	HYDRO	HYDRO	GROUND	
Year of Construction				2007	1977	2012	
CAPACITY (GALLONS)	30,000	30,000	10,000	10,000	7,500	150,000	
MATERIAL	STEEL	STEEL	STEEL	STEEL	STEEL	STEEL	
GRAVITY DRAIN CAPACITY/DIAMETER	6"	6"	6"	6"	6"	4"	
OVERFLOW STRUCTURES PROPER?	NA	NA	NA	NA	NA	YES/6"	
BYPASS CAPACITY	YES	YES	YES	YES	YES	YES	
COVERED/SCREENED OPENINGS	NA	NA	NA	NA	NA	FLAPPER	
PRESSURE GAUGE	YES	YES	YES	YES	YES	NO	
ON/OFF PRESSURE (PSI)	NA	NA	50/60	50/60	42/52	45/55	
ALTITUDE VALVE UTILIZED?	NA	NA	NA	NA	NA	NA	
HGT. TO BOTTOM OF EL. TANK (FT)	NA	NA	NA	NA	NA	NA	
HGT. TO MAX. WTR. LEVEL (FT)	NA	NA	NA	NA	NA	NA	
DATE OF LAST ANNUAL INSPECTION	SYSTEM PERSONNEL INSPECT TANKS ON AN ONGOING BASIS						
YEAR OF LAST 5-YEAR INSPECTION	2008	2008	11/2015	11/2015	11/2015	11/2015	
YEAR OF LAST WASHOUT	2008	2008	11/2015	11/2015	11/2015	11/2015	
Does system provide fire protection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Security Adequate? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Low Level Alarm? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Does current storage capacity comply with requirements in FAC 62-555? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
COMMENTS: The two 30,000 gallon hydro tanks failed a 2008 inspection and are no longer in use. A new 150,000 gallon ground storage was installed in 2012.							

DISTRIBUTION SYSTEM

Material of mains? AC, Cast iron & PVC System looped? No How many hydrants? 71
 Any fire hydrants < 6" lines? Yes No Unknown Max. pipe diameter 16" Min. pipe diameter 2"
 General operation pressure 50-60 PSI Lowest pressures 50 PSI Location of low pressure Zinnia Dr.
 Number of dead ends 80 How many without flush hydrants? None Flushing program? Yes
 Number of line valves 470 How often exercised Annually Properly Mapped? Yes Properly Marked? Yes
 System Maps Adequate? Yes Any uncleared permits? Yes Any uncleared and in use? N/A
 Percent water loss 40% Does the system have reuse? No Comments FRWA is working with utility to help identify water loss

CROSS CONNECTION CONTROL

Cross Connection Control Program Meet Requirements? Yes No Comment: CCCP is being followed
 Testing Frequency? Annual Tracking: Hard Copy CPU # of BFDs: 70 Hydrant Meters Lift Stations WWTP
 Date of Last Audit (commercial or residential): 2015 Name of Certified BFD Tester: Independent testers

Chlorine & pH	Remote 1	Remote 2	Remote 3	Remote 4
Chlorine Residual	1.77	1.44		
pH	7.4	7.1		
Location	Birwood Court	Aquarius Drive		

COMPLIANCE MONITORING

Compliance Schedule: The following parameters are due during the year shown.

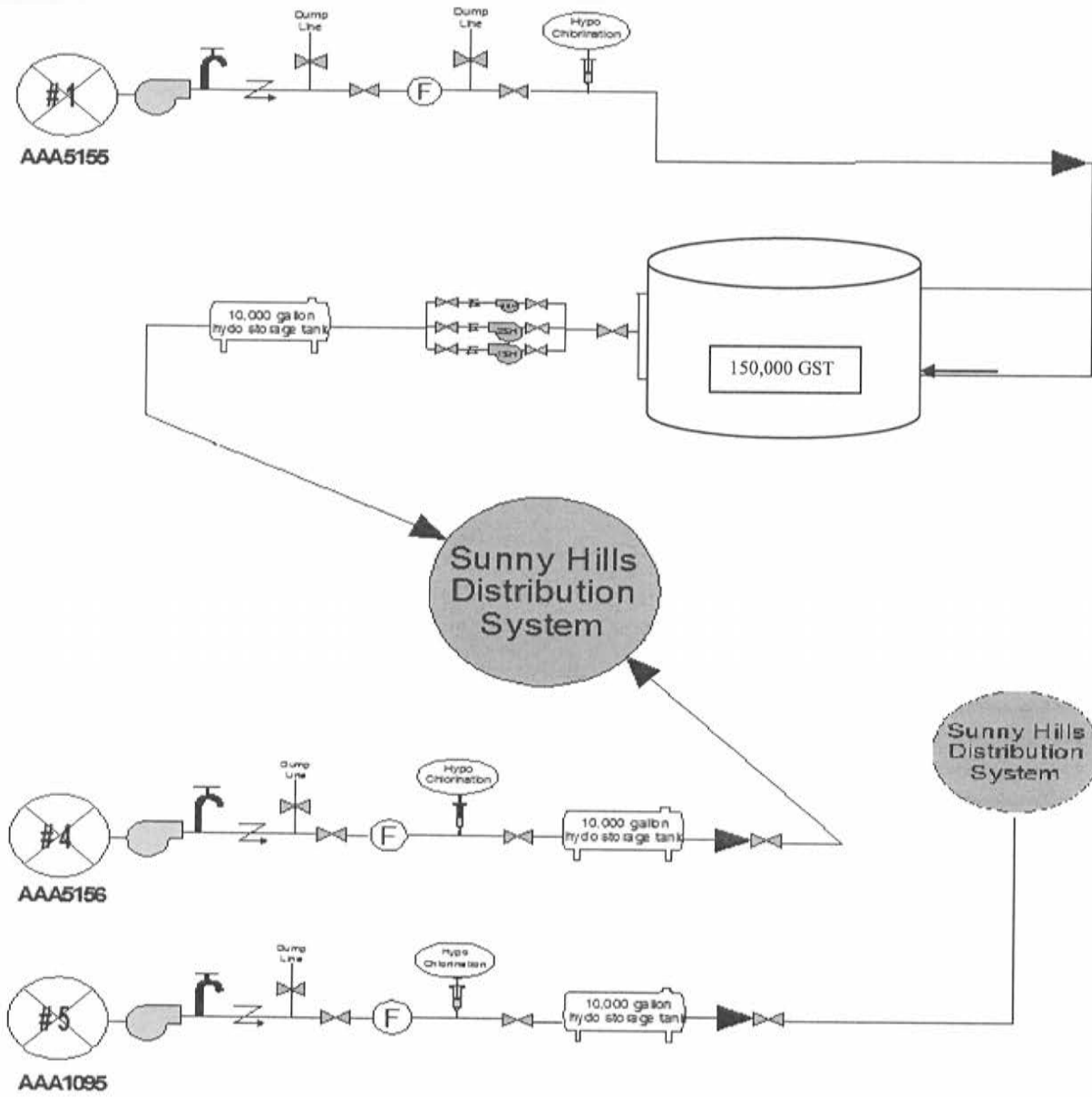
Inorganics	2018	SOCs	2018	TTHMs/HAA5	2016	Asbestos	2021
VOCs	2018	Radiologicals	2018	Secondary's	2018	Pb & Cu	2017
Nitrate/nitrite	2016	UOCs	susp				

System out of compliance with any of the above parameters? No
 Testing Equipment & Reagents Adequate Inadequate Comment: _____
 Bacteriological Sampling Plan: Adequate Inadequate Comment: _____
 Disinfection Byproducts Plan: Adequate Inadequate Comment: _____

MANAGERIAL/FINANCIAL

How is the system structured? Investor Municipal Private Cooperative Other Does the system follow a budget? Yes No
 Preventative Maintenance Program in place? Yes No Is adequate training provided to water system personnel? Yes No
 Comment: _____

FLOW DIAGRAM OF THE SYSTEM



Areas of Concern

Well # 1 flow meter accuracy test conducted on March 24, 2015 was reported at -13.2%. This is above the +/-5% acceptable range. FAC Rule 62 555.350(2)

Recommended Action: Repair or replace the Well #1 flow meter.

Expected date for correction: February 7, 2016

On February 1, 2016, an email was received from the operator stating that a new flow meter has been ordered.

To see any of the above referenced rules, visit <http://www.dep.state.fl.us/legal/Rules/rulelistpro.htm#dw>

RECOMMENDATIONS

#1. CROSS CONNECTION

Effective May 5, 2014, cross-connection control rules were amended to significantly reduce the overall regulatory burden of cross-connection control requirements on community water systems (CWSs) and their residential customers by: (1) allowing a dual check device to be used as backflow protection at service connections from CWSs to residential premises where there is any type of auxiliary or reclaimed water system; and (2) allowing biennial (every other year) instead of annual testing of backflow preventer assemblies required at service connections from CWSs to residential premises. Furthermore, these rules were amended to require large CWSs - i.e., CWSs serving more than 10,000 persons - to submit annual cross-connection control program reports using a brief new two-page form. These annual reports will enable the Department to better ascertain the operational adequacy of large CWSs and to more efficiently conduct sanitary surveys of large CWSs.

#2. OUTSTANDING PERMITS

Our records indicate that the enclosed list of permits have not been cleared by this office.

Please submit a status report for the permits listed below by February 15, 2016.

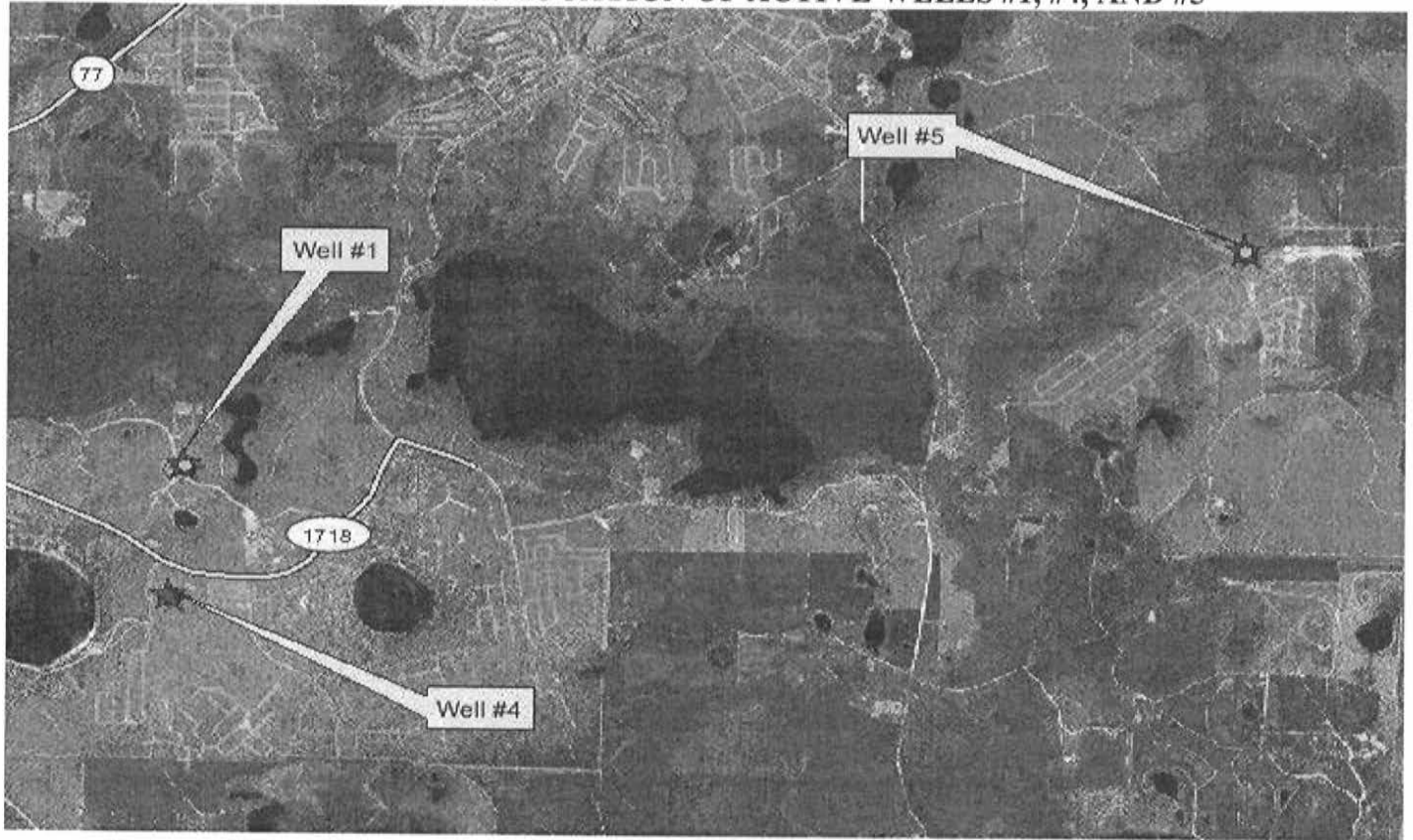
The 'status' would fall into one of the following categories, A, B, C, D, or E:

- A) not started
- B) started, but not completed
- C) completed, but not in use
- D) completed, and in use
- E) project abandoned (will not be built)

For partially-cleared project(s), please indicate the status of the uncleared portion(s) only.

CLEARED	PERMIT NO	PROJECT NAME	DATE ISSUE
No	0275961-002-DSGP/01	Blue Springs Subdivision	June 25, 2007
No	0080182-014-DSGP/01	Washington Blvd Waterline Extension	August 21, 2007

AERIAL VIEW OF SUNNY HILLS & LOCATION OF ACTIVE WELLS #1, #4, AND #5



PHOTOS

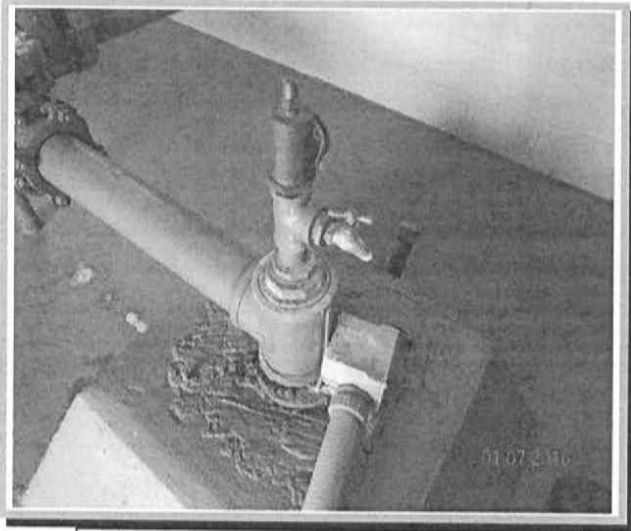


Well #1 (AAA 5155)



Well #4 (AAA 1095)

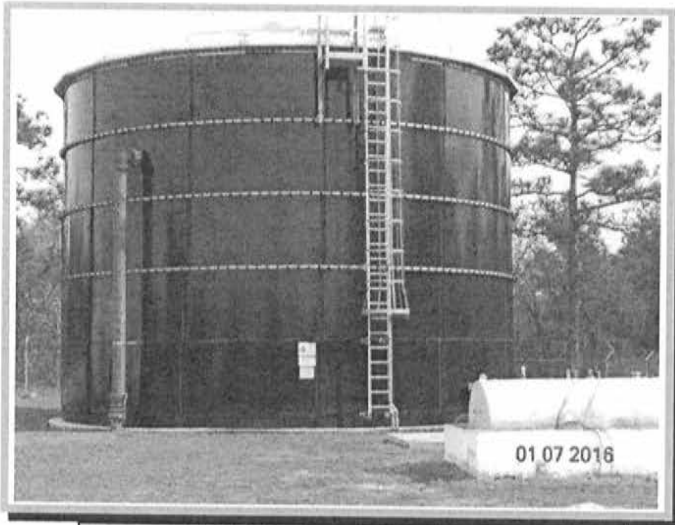
PHOTOS



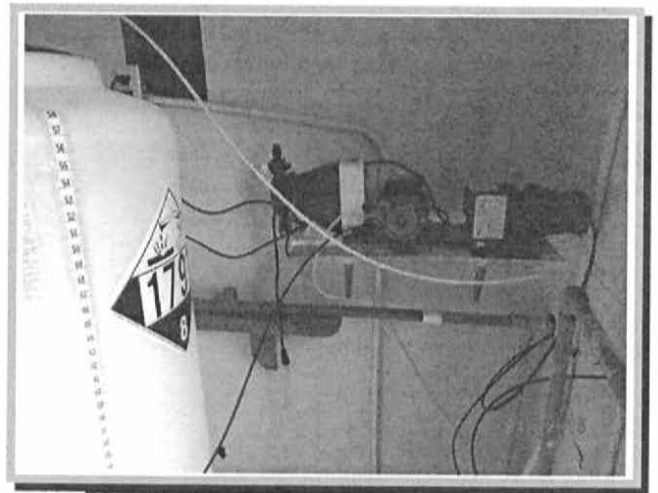
Submersible pump at Well #5 (AAA 5156)



10,000 Gallon Ground Storage Tank at Plant #1

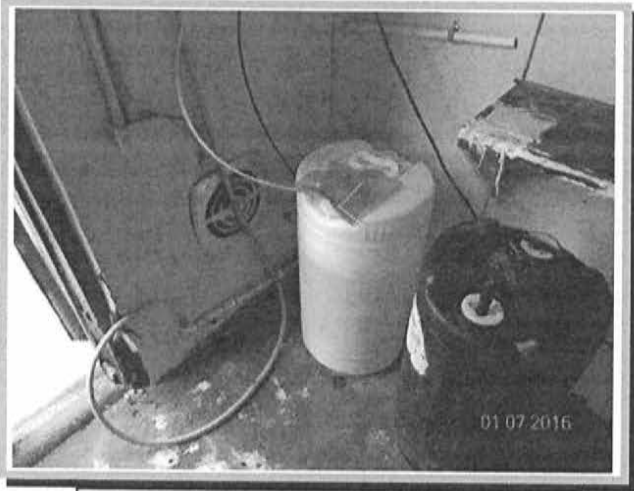


150,000 Ground storage tank



Chlorinator at Plant #1

PHOTOS



Chlorinator at Plant #5



10,000 Gallon Ground Storage Tank at Plant #5

INSPECTOR'S SIGNATURE Mark Sen TITLE ES-3 DATE: 2/2/2016

REVIEWED BY Scott J. Feltz TITLE ES-3 DATE: 2/2/2016