SCANNED

Rhema Business Services, Inc. 1344 Vickers Drive Tallahassee, FL 32303-3041

(850) 562-9886 (850) 562-9887 FAX ORIGINAL

January 8, 1999

Division of Records and Reporting Florida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, Florida 32399-0850

RECEIVED-FPSC -8 AM 9:

Re: Docket No. 981341-WS, Application of CHC VII, LTD. for Grandfather Water and Wastewater Certificates in Polk County, Florida

Gentlemen:

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OP RÒ Enclosed are the original and five (5) copies of the CHC VII, Ltd. response to John D. Williams' letter of November 13, 1998, the original revised map, and the original and two (2) copies of the modified tariff sheets. Each item in that letter is addressed in the order it appeared.

1. Utility Name. The correct name of the utility is CHC VII, Ltd.

Rate Authority. The Board of Commissioners of Polk County considered this utility exempt from its regulation, due to it being subject to the requirements of Chapter 723, Florida Statutes. Polk County, accordingly, did not authorize the current rates.

CHC VII put the current rates into effect on September 30, 1986. A copy of the portion of each current prospectus pertaining to the water and wastewater rate, and a copy of the lease for each park are enclosed. The rate reflected in each prospectus is that after implementation of the regulatory assessment fee pass-through rate adjustment. Management purged all earlier versions to assure that any prospectus issued is the current version.

3. Legal Description and Territory Map. The legal description is correct. A new map is enclosed. To what

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DOCUMENT NUMBER-DATE

UU310

FPSC-BUREAU OF RECORDS

FPSC-RECORDS/REPORTING

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4. Permit Information.

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- a. The date of the utility's water construction permit is August 19, 1986. The utility's current wastewater permit was originally issued on February 19, 1992, and modified on April 30, 1993.
- b. Copies of the water construction permit, the current wastewater permit, Wastewater Permit Application Form 1, and Wastewater Application Form 2A are enclosed.
- c. Copies of the monthly operating reports are enclosed.
- d. The utility is in the Highland Ridge Water Use Caution Area.
- e. There are no unresolved warning letters or current consent orders.
- 5. System Verification. The water systems, and wastewater systems, of the two mobile home parks are connected. The Swiss Golf community is the double-wide section, and the Hidden Golf community is the single-wide section. Both communities were constructed in 1986.
- 6. Tariff Name. The correct name of the utility is CHC VII, Ltd.
- 7. Tariff Address and Phone Number. CHC VII, Ltd. is managed by the Managing General Partner, which is responsible for the day-to-day management of the utility. The General Partner has a pool of employees available, which is in common with General Partners of the other utilities, all of which are located at the same address. This office is approximately twenty miles from the mobile home parks. The business and emergency telephone numbers are local calls for the utility's customers.
- 8. Tariff Rates. CHC VII is making application for grandfather certificates. The application for grandfather certificates is <u>not</u> the appropriate forum in which to modify its rate structure. The Commission can not fairly modify the rate structure without concurrently authorizing an increase in rates to offset the additional costs.

CHC VII respectfully declines to provide the information requested in items a through c. CHC VII does not have the staffing to provide the detailed information that has been requested.

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> Changing the rate structure to separate usage and base facility charges would impose a financial hardship on the utility. The change would require CHC VII to reprogram its billing program. The change would also require CHC VII to change the prospectus for each of the two mobile home parks in its service area pursuant to Chapter 723, Florida Statutes. Amendment of each prospectus entails engaging attorneys to prepare and file each prospectus with the Bureau of Mobile Homes. In addition to the legal costs, CHC VII would have to pay a filing fee equal to ten dollars (\$10.00) per lot. Preparation, filing and processing each prospectus would require approximately three months. CHC VII would then have to give its customers ninety (90) days notice.

> The group which manages CHC VII would have to prepare a prospectus for each of ten (10) different mobile home parks. The expense of changing the prospectus for each of the ten mobile home parks would provide no benefit to the customers.

The Commission can not fairly impose a change of rate structure without concurrently authorizing an increase in rates to offset the additional costs. The application for grandfather certificates is, accordingly, not the proper forum in which to change the rate structure.

- 9. Combined Rates. The utility's rates are for water and wastewater service combined.
- **10. Cost of Service.** CHC VII is making application for grandfather certificates. The application for grandfather certificates is <u>not</u> the appropriate forum in which to modify its rate structure. The Commission can not fairly require CHC VII to separate its water and wastewater charge without concurrently allowing it to recover the cost of separating the charge.

Separating the water and wastewater charge would require CHC VII to reprogram its customer billing program. It would also require CHC VII to change the prospectus for each of the two mobile home parks in its service area pursuant to Chapter 723, Florida Statutes. Amendment of each prospectus entails engaging attorneys to prepare and file each prospectus with the Bureau of Mobile Homes. In addition to the legal costs, CHC VII would have to pay a filing fee equal to ten dollars (\$10.00) per lot. Preparation, filing and processing each prospectus would require approximately three months. CHC VII would then have to give its customers ninety (90) days notice. Division of Records and Reporting January 8, 1999 Page 4

The group which manages CHC VII would have to prepare a prospectus for each of ten (10) different mobile home parks. The expense of changing the prospectus for each of the ten mobile home parks would provide no benefit to the customers.

The Commission can not fairly require CHC VII to separate its water and wastewater charge without concurrently allowing it to recover the costs of separating the charge. This application for grandfather certificates is, accordingly, not the proper forum in which to separate the water and wastewater charge.

11. Miscellaneous Tariff Corrections. Please see the enclosed, modified tariff sheets. In Water Tariff Rule 7.0, we have added the phrase, "without the prior written consent of the Utility", rather than deleting the paragraph.

Please direct any additional questions to me at 562-9886.

Sincerely,

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normano Fineara

Norman F. Mears Senior Utility Consultant

Hand deliver Enclosures cc: Ray Moats

PROSPECTUS

SWISS GOLF & TENNIS CLUB MOBILE HOME PARK

1. THIS PROSPECTUS (OFFERING CIRCULAR) CONTAINS IMPORTANT MATTERS TO BE CONSIDERED IN LEASING A MOBILE HOME LOT.

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- 2. THE STATEMENTS CONTAINED HEREIN ARE ONLY SUMMARY IN NATURE. A PROSPECTIVE LESSEE SHOULD REFER TO ALL REFERENCES, ALL EXHIBITS HERETO, THE CONTRACT DOCUMENTS, AND SALES MATERIALS.
- 3. ORAL REPRESENTATIONS SHOULD NOT BE RELIED UPON AS CORRECTLY STATING THE REPRESENTATIONS OF THE PARK OWNER OR OPERATOR. REFER TO THIS PROSPECTUS (OFFERING CIRCULAR) AND ITS EXHIBITS FOR CORRECT REPRESENTATIONS.
- 4. UPON DELIVERY OF THIS PROSPECTUS TO A PROSPECTIVE LESSEE, THE RENTAL AGREEMENT IS VOIDABLE BY THE LESSEE FOR A PERIOD OF FIFTEEN (15) DAYS.

made, base rent will be increased as set out in VIII(C) above. The mobile home owner shall be notified of the increase in base rent at least ninety (90) days prior to the increase.

F. OTHER FEES CHARGED TO HOME OWNER

Other fees, charges, or assessments that the resident is responsible for are:

(1) Lot and lawn maintenance is the responsibility of the individual mobile home owner. Waterfront lots shall be maintained to the waterfront by the mobile home owner. In the event that lawn maintenance is not performed by the individual mobile home owner, the Park Owner may maintain such lot and the mobile home owner shall be responsible for the cost to the mobile home park of maintaining the lot and lawn. That cost is currently \$ 20.00 per cut .

(2) Water and sewer are the responsibility of the individual mobile home owner. Water and sewage will be paid by the mobile home owner based on a minimum fee of $\frac{15.71}{1000}$ per month for usage up to $\frac{8000}{9}$ gallons per month. For every $\frac{1000}{9}$ gallons or portion thereof in excess of $\frac{8000}{9}$ gallons up to $\frac{10,000}{9}$ gallons. For every $\frac{1000}{9}$ gallons or portion thereof in excess of $\frac{1.31}{9}$ per $\frac{1000}{9}$ gallons. For every $\frac{1000}{9}$ gallons or portion thereof in excess of $\frac{10,000}{9}$ gallons. For every $\frac{1000}{9}$ gallons or portion thereof in excess of $\frac{10,000}{9}$ gallons. For every $\frac{1000}{9}$ gallons or portion thereof in excess of $\frac{10,000}{9}$ gallons. Those mobile home owners living on lots 1001 through 1086 will be charged by the City of Winter Haven in accordance with its current rates.

(3) Tree trimming and/or removal is the responsibility of the individual mobile home owner if that tree is located on the leased lot. Trees will not be trimmed or removed without the manager's written permission. If the mobile home owner refuses to trim and/or remove the tree, then the park Owner may do so and bill the mobile home owner the amount of services in the following month's rent. The charge for tree trimming and/or removal is \$ billed amount.

(4) Late fees of 1.50 per day will accrue after the fifth day of the month on rent or any other charge to the mobile home owner that is not paid by the fifth day of each month. That 1.50 per day will be retroactive to the first day of the month and will continue every day thereafter until such time as the rent or other charge is paid. A 15.00 service fee, plus late charges, will be made for bad checks.

(5) The mobile home owner shall pay an extra resident fee of 10.00 per person per month for guest visiting beyond fifteen consecutive days or more than thirty days per year.

(6) The mobile home owner will be charged a debris removal fee in accordance with Section VIII(K) if the mobile home owner refuses, or for any other reason is unable, to comply with that Section. The charge for that service is \$billed amount.

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SWISS GOLF & TENNIS CLUB MOBILE HOME PARK LEASE AGREEMENT

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THIS LEASE made and entered into this _____ day of _____, 19__, by and between CHC VII, Ltd., known as Swiss Golf & Tennis Club Mobile Home park, hereinafter called the "Community" and _____, hereinafter called the Owner-tenant.

WITNESSETH, that in consideration of the covenants herein contained, on the part of the said Owner-tenant to be kept and performed, the said Community does hereby release to the said Ownertenant the following described property: Street: ______, Lot No.:

TO HAVE AND TO HOLD the same from the _____ day of ______, 19____, until the 31st day of December, the said Owner-tenant paying the initial monthly base rental of \$______ from the beginning of this Lease until the 31st day of December, 19_____. Annual monthly base rental increases for the calendar years 19_____ and subsequent years will be based on no less than \$5.00 or the increase in the Consumer Price Index (defined as the United States Department of Labor Consumer Price Index, U.S. City Average, All Urban Consumers, 1982-84 equals 100) ("CPI"), whichever is greater. Lease renewals and increases will become effective the first day of January of each year thereafter and will be a part of the Lease Agreement for that year.

Base rent will also be increased in calendar years subsequent to the initial year by any increase in real estate or other taxes and assessments by a state or local government. Such increases in taxes and assessments will be based on a prorata computation among all lots in the mobile home park and will be charged to all residents to whom this Prospectus is applicable. The mobile home owner shall be notified of the increase in base rent at least ninety (90) days prior to the increase.

Rental payments are due on or before the 1st day of each month for that month, at the place designated by the Community.

The Owner-tenant covenants and agrees to the following:

1. To make no unlawful, improper, or offensive use of the property.

2. To comply with the Rules & Regulations of the Park. A copy of said Rules & Regulations has been furnished to the Owner-tenant.

3. That the Lease is governed by Chapter 723, Florida Statutes (Florida Mobile Home Act) as currently in effect at the time of execution of this document, the provisions of which are incorporated herein by reference.

4. Actions by the Owner-tenant which constitute grounds for eviction under Section 723.061, Florida Statutes, shall be a violation of this Lease. Failure of the Community to evict a tenant for violation of any one of the grounds set forth in Section 723.061, Florida Statutes, or for any grounds provided for in this Lease, shall not waive the right for the Community to consider any subsequent violation of the same grounds, or the violation of any other grounds, a breach of this Lease by Ownertenant so long as permitted by Chapter 723, Florida Statutes.

5. As provided in the Rules & Regulations, rules and regulations may be modified, eliminated, or additional rules and regulations adopted by the Community upon giving the Owner-tenant notice thereof as required by law and said Rules & Regulations in accordance with Chapter 723, Florida Statutes.

6. This Lease and the privileges contained herein are not assignable, and said Lease is only valid as long as those executing this Lease reside upon the premises set forth in this Lease, and are in full conformance of all provisions of this Lease and the park Rules & Regulations, except that a new home owner may assume, in writing, the balance of the annual Lease through December 31, of the year of purchase in accordance with Chapter 723, Florida Statutes.

7. Owner-tenant expressly understands and agrees that, upon execution of this Lease, all prior leases, rental agreement, negotiations, and other agreements between the parties regarding the lot leased are hereby terminated, void, and of no legal force and effect.

8. Storm Drainage is included in the lot rental amount and charged in accordance with Sections VII and VII(J) of the Prospectus.

9. Other financial obligations of the Owner-tenant, not including user fees, are as follows:

Fees or Charges

			rees or Charges
Yard Maintenance (n fails to maintain yard)		s owner	\$ <u>20.00</u> per cut
Water and Sewer	excess per 100 excess per 100	up to <u>8000 gallons</u> 00 gai. over <u>8000</u> up to <u>10,000</u> 00 gai. over <u>10,000</u>	s 15.71 s 1.31 s 2.09
	lots 10	001 through 1086	charged by the City of Winter Haven in accordance with its current rates
Tree Trimming/Remo (not charged unless C to provide services hi)wner-tenant fail	ioval s	s <u>billed</u> amount
Late Check Charge at	fter 5th day		\$ <u>1.50</u> per day
Bad Check Charge			\$
Extra Resident Fee			<u>\$ 10.00</u> per person
Debris Removal		charged in accordance with Section V of the Prospectus	Ш(К)
Governmental Assess Fees, Surcharges, Cha	•	charged in accordance with Section V of the Prospectus	Ш(J)

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The fees will be charged and increased as set out in Sections VIII(F) through (K) of the Prospectus. No services are included in the lot rental amount other than those services stated above.

10. The Community reserves the right to pass on and pass through charges in accordance with the Prospectus and Chapter 723, Florida Statutes.

11. Owner-tenant(s) acknowledge that they have read the foregoing, the Rules & Regulations, and the Prospectus, and that Owner-tenant was offered the foregoing Lease prior to occupancy.

We have read and understand this Agreement and agree to the terms set out herein.

WITNESS our hands and seals of the date set out above.

Owner-tenant

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Community Representative

Owner-tenant

PROSPECTUS

HIDDEN GOLF CLUB MOBILE HOME PARK

1. THIS PROSPECTUS (OFFERING CIRCULAR) CONTAINS IMPORTANT MATTERS TO BE CONSIDERED IN LEASING A MOBILE HOME LOT.

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- 2. THE STATEMENTS CONTAINED HEREIN ARE ONLY SUMMARY IN NATURE. A PROSPECTIVE LESSEE SHOULD REFER TO ALL REFERENCES, ALL EXHIBITS HERETO, THE CONTRACT DOCUMENTS, AND SALES MATERIALS.
- 3. ORAL REPRESENTATIONS SHOULD NOT BE RELIED UPON AS CORRECTLY STATING THE REPRESENTATIONS OF THE PARK OWNER OR OPERATOR. REFER TO THIS PROSPECTUS (OFFERING CIRCULAR) AND ITS EXHIBITS FOR CORRECT REPRESENTATIONS.
- 4. UPON DELIVERY OF THIS PROSPECTUS TO A PROSPECTIVE LESSEE, THE RENTAL AGREEMENT IS VOIDABLE BY THE LESSEE FOR A PERIOD OF FIFTEEN (15) DAYS.

event that lawn maintenance is not performed by the individual mobile home owner, the Park Owner may maintain such lot and the mobile home owner shall be responsible for the cost to the mobile home park of maintaining the lot and lawn. That cost is currently \$20.00 per cut____.

(2) Water and sewer are the responsibility of the individual mobile home owner. Water and sewage will be paid by the mobile home owner based on a minimum fee of \$ 15.71 per month for usage up to 8000 gallons per month. For every 1000 gallons or portion thereof in excess of 8000 gallons up to 10,000 gallons, the rate shall be an additional \$ 1.31 per 1000 gallons. For every 1000 gallons or portion thereof in excess of 10,000 gallons, the rate shall be an additional \$ 2.09 per 1000 gallons.

(3) Tree trimming and/or removal is the responsibility of the individual mobile home owner if that tree is located on the leased lot. Trees will not be trimmed or removed without the manager's written permission. If the mobile home owner refuses to trim and/or remove the tree, then the park Owner may do so and bill the mobile home owner the amount of services in the following month's rent. The charge for tree trimming and/or removal is sbilled amount.

(4) Late fees of \$1.50 per day will accrue after the fifth day of the month on rent or any other charge to the mobile home owner that is not paid by the fifth day of each month. That \$1.50 per day will be retroactive to the first day of the month and will continue every day thereafter until such time as the rent or other charge is paid. A \$15.00 service fee, plus late charges, will be made for bad checks.

(5) The mobile home owner shall pay an extra resident fee of \$ 10.00 per person per month for guest visiting beyond fifteen consecutive days or more than thirty days per year.

(6) The mobile home owner will be charged a debris removal fee in accordance with Section VIII(K) if the mobile home owner refuses, or for any other reason is unable, to comply with that Section. The charge for that service is $\frac{billed amount}{billed}$

(7) The mobile home owner shall also be responsible for governmental assessments, fees, surcharges, and charges in accordance with Section VIII(J). Such taxes and/or assessments shall be allocated equally among all lots and shall be billed annually to the mobile home owner.

G. FACTORS USED TO INCREASE LOT RENTAL AMOUNT EXCLUDING BASE RENT

Fees, charges, and other costs to the mobile home owner will be charged or increased, as the case may be, as a result of increased costs to the Park Owner attributable to increases in utility rates and usage, tap-in fee requirement(s) into a utility

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HIDDEN GOLF CLUB MOBILE HOME PARK LEASE AGREEMENT

THIS LEASE made and entered into this _____ day of _____, 19___, by and between CHC VII, Ltd., known as Hidden Golf Club Mobile Home park, hereinafter called the "Community" and ______, hereinafter called the Owner-tenant.

WITNESSETH, that in consideration of the covenants herein contained, on the part of the said Owner-tenant to be kept and performed, the said Community does hereby release to the said Ownertenant the following described property: Street: ______, Lot No.:

TO HAVE AND TO HOLD the same from the ______ day of ______, 19____, until the 31st day of December, the said Owner-tenant paying the initial monthly base rental of from the beginning of this Lease until the 31st day of December, 19_____. Annual monthly base rental increases for the calendar years 19_____ and subsequent years will be based on no less than \$5.00 or the increase in the Consumer Price Index (defined as the United States Department of Labor Consumer Price Index, U.S. City Average, All Urban Consumers, 1982-84 equals 100) ("CPI"), whichever is greater. Lease renewals and increases will become effective the first day of January of each year thereafter and will be a part of the Lease Agreement for that year.

Base rent will also be increased in calendar years subsequent to the initial year by any increase in real estate or other taxes and assessments by a state or local government. Such increases in taxes and assessments will be based on a prorata computation among all lots in the mobile home park and will be charged to all residents to whom this Prospectus is applicable. The mobile home owner shall be notified of the increase in base rent at least ninety (90) days prior to the increase.

Rental payments are due on or before the 1st day of each month for that month, at the place designated by the Community.

The Owner-tenant covenants and agrees to the following:

1. To make no unlawful, improper, or offensive use of the property.

2. To comply with the Rules & Regulations of the Park. A copy of said Rules & Regulations has been furnished to the Owner-tenant.

3. That the Lease is governed by Chapter 723, Florida Statutes (Florida Mobile Home Act) as currently in effect at the time of execution of this document, the provisions of which are incorporated herein by reference.

4. Actions by the Owner-tenant which constitute grounds for eviction under Section 723.061, Florida Statutes, shall be a violation of this Lease. Failure of the Community to evict a tenant for violation of any one of the grounds set forth in Section 723.061, Florida Statutes, or for any grounds provided for in this Lease, shall not waive the right for the Community to consider any subsequent violation of the same grounds, or the violation of any other grounds, a breach of this Lease by Ownertenant so long as permitted by Chapter 723, Florida Statutes.

5. As provided in the Rules & Regulations, rules and regulations may be modified, eliminated, or additional rules and regulations adopted by the Community upon giving the Owner-tenant notice thereof as required by law and said Rules & Regulations in accordance with Chapter 723, Florida Statutes.

6. This Lease and the privileges contained herein are not assignable, and said Lease is only valid as long as those executing this Lease reside upon the premises set forth in this Lease, and are in full conformance of all provisions of this Lease and the park Rules & Regulations, except that a new home owner may assume, in writing, the balance of the annual Lease through December 31, of the year of purchase in accordance with Chapter 723, Florida Statutes.

7. Owner-tenant expressly understands and agrees that, upon execution of this Lease, all prior leases, rental agreement, negotiations, and other agreements between the parties regarding the lot leased are hereby terminated, void, and of no legal force and effect.

8. Storm drainage is included in the lot rental amount and charged in accordance with Sections VII and VIII(J) of the Prospectus.

9.

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Other financial obligations of the Owner-tenant, not including user fees, are as follows:

			Fees or Charges
Yard Maintenance (not charge fails to maintain yard)	ed unless owner	÷	\$ _20.00 per cut
Water and Sewer		<u>8000</u> gallons over <u>8000</u> up to <u>10,00</u> over1 <u>0,000</u>	\$ <u>15.71</u> 20\$ <u>1.31</u> \$ <u>2.09</u>
Tree Trimming/Removal, Deb (not charged unless Owner-ter to provide services himself)			<pre>\$billed amount</pre>
Late Check Charge after 5th d	lay		\$ <u>1.50</u> per day
Bad Check Charge			\$ <u>15.00</u>
Extra Resident Fee			<u>\$ 10.00</u> per person
Debris Removal		charged in accordance of the Prospectus	with Section VIII(K)
Governmental Assessments, Fees, Surcharges, and Charges		charged in accordance of the Prospectus	with Section VIII(J)

The fees will be charged and increased as set out in Sections VIII(F) through (K) of the Prospectus. No services are included in the lot rental amount other than those services stated above.

10. The Community reserves the right to pass on and pass through charges in accordance with the Prospectus and Chapter 723, Florida Statutes.

11. Owner-tenant(s) acknowledge that they have read the foregoing, the Rules & Regulations, and the Prospectus, and that Owner-tenant was offered the foregoing Lease prior to occupancy.

Exhibit E-2, Page 2 of 3

We have read and understand this Agreement and agree to the terms set out herein.

WITNESS our hands and seals of the date set out above.

Owner-tenant

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Community Representative

Owner-tenant

STATE OF FLORIDA

DEPARTMENT OF ENVIRONMENTAL COULATION

SOUTHWEST DISTRICT 7601 HIGHWAY 301 NORTH TAMPA, FLORIDA 33610-9544

August 200 August an anna an August an Au



BOB GRAHAM GOVERNOR

VICTORIA J. TSCHINKEL SECRETARY

7-16-86 #78268 \$45. citt.

RICHARD D. GARRITY, PH.D. DISTRICT MANAGER

APPLICATION TO CONSTRUCT A PUBLIC DRINKING WATER SYSTEM

INSTRUCTIONS: All of the application forms, including engineering plans and specifica-tions, must be completed and submitted. For construction of facilities consisting solely of pumping and disinfection, Parts A, B, C, D, and E 1 and 2, (d) through (f), as well as engineering plans and specifications, must be completed and submitted. When using this form for distribution systems alone, only Part B and applicable sections of Part A need to be completed. Submission of any false statement or representation in this application is a violation of the law. Attach additional sheets as necessary.

System Name: <u>SW1/55 Golf CLUB</u>	County: Blk
System Address: Street OLD LUCERNE PARK ROAD	City: WINTER HAVEN
Applicant's Name and Title: EDWARD E. DOUGHEBTY	GENERAL PARTNER
Applicant's Address: P.O. Box SZSZ, LARELAND A	PORIDA 33803
Utility Supplying Water: Name: SUNSS 604F CLUB	
Utility Address: OLD COCERNE PARK ROAD, WINTE.	R HAVEN FLORIDA
Owner/Operator After Construction, if different:	
Owner/Operator Address:	
Type of Proposed Facility: EXTENSION OF THE DISTRIBUTION SY	SETO Serve: TRAKER PAR
Latitude <u>28°05'4/</u> "N Longitude <u>8/°4/'98</u> "W	(Subdivision, trailer park, school, etc.)
A. Applicant:	
I, the owner/authorized representative* of <u>SW155</u> am fully aware that the statements made in this application a <u>OISTERBUTION SYSTEM</u> are true, correct and knowledge and beliet. Further, the undersigned agrees to facility in such a manner as to comply with the provisi Statutes, and all the rules of the department. The under appropriate for a granted by the department, will be non-tra retributed also accepts responsibility for retaining the	on for a permit to construct d complete to the best of my to maintain and operate the ons of Chapter 403, Florida signed also understands that
With engineering plany as As whith red.	the project is in accordance
Date *Attach letter Of NAL authorizationerial No. 5386-324-4 Signed: Edward Wher/Auth	C. Standburtt orized Representative
ENVIRONMENTAL ENGINEERING ADVINISTRATION	itle (Please type)
DER FORTE 17-1.20 SHTENDED TO COVER STRUCTURAL DESIGN.	Telephone No. <u>647-1581</u>
Effective November 30, 1982 Page 1 of 7	

Page 1 of 7

Owner/Authorized Representative of Utility Supplying Water (if applicable)

and the connection of the proposed project will not be in violation of any condition of said permit.

*Attach letter of authorization

8.

Signed:	·

Name and Title (Please Type)

Date:_____ Phone No.:_____

C. Owner/Operator* After Construction (if different from applicant)

I, the undersigned, do certify that I will become the owner/operator of the proposed facility after construction. Further, I certify that I am fully aware that the statements made in this application are true, correct and complete to the best of my knowledge. Also, I agree to operate and maintain the facilities in such a manner as to comply with the provisions of Chapter 403, Florida Statutes, and all rules of the department. I understand the permit is non-transferable and will promptly notify the department upon sale or legal transfer of the permitted establishment.

*Attach letter of authorization

Signed:____

Name and Title (Please Type)

Date: Phone No.

0. Professional Engineer Registered in Florida

This is to certify that the engineering features of this public drinking water system have been designed/examined by me and found to be in conformity with modern engineering principles, applicable to the treatment and distribution of drinking water characterized in this application. There is reasonable assurance in my professional judgment that the facility, when constructed as planned and properly maintained and operated, will comply with all applicable statutes of the State of Florida and the rules of the department.

	IVAN D. KING PE
	Name (Please Type)
(Affix Seal)	<u>LING ENGINEERING SERVICE</u> Company Name (Please Type)
	427 E. (ENTRAL AVE, WINTER HAVEN, FLA 33880 Mailing Address (Please Type)
Florida Registration No	

DER Form 17-1.208(1) Effective November 30, 1982

Page 2 of 7

ن.	147 10 PART A - GENERAL
1.	Estimated total cost of project # 111 750 Describe all water treatment DUAL GAS CHLORINATION SYSTEM AUTOMATIC SWITCH OVER 1100 #1044
2.	Existing plant capacity (MGD) <u>0,72</u> Plant capacity increase (MGD) <u>NOVE</u>
3.	Previous DER permit number(s), if any <u>SERIAL NO. 5385-324</u>
4.	Present population of area served <u>932 PHASE ONE</u> Per capita consumption <u>1006PL</u>
5.	Design population (additional served by this project) <u>894 PHASE TWO</u>
6.	Total ERC's* served 267 Total ERC's approved 267.
	Additional ERC's 255. [ERC (Equivalent Residential Connection) = 3.5 persons]
7.	Give any industrial users of abnormal demands <u>NONE</u>
8.	Current system water demand, in MGD (from plant operation report)
	Average day 0.045 Maximum day 0.06 Maximum hour (GPH) $4/.66$
	Additional water demand, MGD: Avg. day 0.275 Hax. day 0.3668 Hax. Hr. (GPM) 254
9.	Is plant designed for 24-hour operation or what portion? YES
10.	Give characteristics of raw water (attach chemical analysis)
11.	Give source proposed water (deep well, shallow well, spring, surface)
12.	Sewage disposal SW155 GOLF CLUB
	(Name and Address of sewerage utility)
13.	Finished water storage: Elevated Ground Ground
• •	Existing Capacity Capacity Increase
14.	Existing Service pump capacity (MGD) Additional service pump cap. (MGD)
	Static head in relation to pumping plant
16.	Well permit from water management district? Yes Permit No
	No Explain
١	PART B - DISTRIBUTION SYSTEM
1.	Interconnection with other system <u>NONE</u> Minimum size pipe <u>2</u> Maximum size pipe <u>6</u> Minimum system pressure <u>25P5/</u>
<u> </u>	Maximum size pipe <u>601751</u>
3.	Is fire control provided in design? \underline{YES}
4.	Describe dead-end conditions and necessity for flushing including number of such
	conditions and flushing schedule <u>NONE</u>
	condicions and riusning schedule /YUNC

			•	
5.	Describe cross-connection control program	NONE	•	
5.	Describe corrosion control program as necessary	NONE	, F	
7.	Water demand for additional connections (MGD)	NONE		
8.	Number of each type of additional connections () $dd7 \mod R/F$	residential, co	mmercial, agricult:	ural,

15

PART C - WELL SUPPLY

Existing Wells

Well_Identification					
Size of Casing	 				
Depth of Casing					۰.
Depth of Well		 		 	
Pump (type)			,		
Pump Capacity (GPM)					

Proposed Wells

Well Identification				
Size of Casing	 	 		
Depth of Casing				
Depth of Well				
Pump (type)	 			
Pump Capacity (GPM)				·

Type of well construction_____

Casing material____

. . .

Aquifer_____

Give all geological data, including log of test wells or wells in vicinity.

Describe possible sources of contamination (particularly those within 100' of well).

PART D - SURFACE SUPPLIES

1. Name of stream, lake, or pond_____

 Show by attached map watershed, towns or communities above intake, industrial plants, and in immediate vicinity, farm house, picnic ground, abattoirs and other sources of pollution, with distance from intake. Locate intake on map.

DER Form 17-1.208(1) Effective November 30, 1982

Page 4 of 7 "

POLK COUNTY HEALTH DEPARTMENT PROVISOS

1. Construction of this project must be commenced within one year from the date of this application; otherwise plans and specifications must be resubmitted for approval by this Department. The engineer of record in this application is responsible for supervision of the construction of this project and upon completion shall inspect for complete conformity to the plans and specifications as approved. A report of such inspection in writing and signed by the engineer shall be rendered to the interested County Health Department and to the Department of Environmental Regulation.

2. This approval is given with the understanding that upon the installation of such works, its operations shall be placed under the care of a competent person, whose qualifications are approved by the Department and the operation shall be carried out according to best accepted practice and in accordance with the requirements of the rules and regulations of the Department. This includes not only the provision of continuing essential funds for operation and maintenance of chemical supplies for plant operation; but also the funds for maintenance equipment and supplying the needs of a suitable water plant laboratory which is required for proper operation of this water treatment facility.

3. Water supply facilities including mains shall be installed, cleaned, disinfected, and bacteriologically cleared for service, in accordance with the latest applicable AWWA Standards and Department rules and regulations.

4. Where water and sewer mains cross with less than 18" vertical clearance, the sewer will be 20' of either cast iron pipe or concrete encased vitrified clay pipe centered at the point of crossing. When a water main parallels a sewer main, a separation of at least 10' should be maintained where practical.

5. An auxiliary gas chlorination unit with automatic switch over and second booster pump must be provided to satisfy the dual chlorination requirement in Chapter 17-22 of the Florida Administrative Code.

6. Satisfactory bacteriological main clearance samples must be submitted for two (2) consecutive days from lots No. 37, 60, 80, 320, 340, 380, 400, 625, 745 and 775.

NAME _Swiss Golf & Tennis Club	S35 T 27 R 26 DATE 10/28/85
LOCATION LUCTENE Park Road	••••••••••••••••••••••••••••••••••••••
PUMP	1001 101
WELL DEPTH	153' 12" CASEING <u>240' 8" Steel</u>
WATER LEVEL	
7-9 white clay	
9-16 yellow clay & orange clay 16-72 fine white sand	
72-84 dark brown sand & muck 84-90 brownish gray sand	
90-98 muck 98-173 large white sand & silt	
173-175 light tan clay	-

175-179 dark gray clay & shell 179-240 broken ocala 240-241 hard tan limestone 241-300 ocala 300-351 john sand 351-382 tan limestone 382-418 ocala 418-453 john sand 453-464 ocala 464-480 hard tan limestone

set 12" casing to 153' Set 8" to 240' cement to top

DUNHAM WELL DRILLING, INC. 1341 42ml St. N.W. WINTER HAVEN, FL 33891

#2

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PUMPS • IRRIGATION

Ace Phone (813) 967-0656 (55 Recker Hwy. Auburndale, Florida 33823 MAJLING ADDRESS P.O. Box 518 Auburndale, Florida 33823

May 20, 1985

っ # /

Mr. Bob Archer Swiss Village Golf & Tennis Club P. O. Box 5252 Lakeland, FL 33803

Dear Mr. Archer:

Following is the information you requested on the 12" well drilled for Russell Snively in Section 35, Township 275, Range 26 E by Saddler-Taylor Company.

Date: 6/18/68 Casing: 118' of 12" B.T.&C. steel 177' of 10" B.T.&C. steel liner, top at 108' bottom at 285' Depth: 546' Water Level: 13'

There is no other information available on this well unless Russell Snively may have a copy of the driller's log showing the depths and types of formations.

Very truly yours,

James H. Courson Bob Taylor Well Drilling, Inc.

JHC/1w



Department of Environmental Protection

Lawton Chiles Governor Southwest District 3804 Coconut Palm Drive Tampa, Florida 33619

Virginia B. Wetherell Secretary

March 13, 1996

Polk County-DW Swiss Golf Club WWTP GMS ID No. 4053P10039

Revision and Modification of Conditions Permit No. D053-200395

Dear Mr. Moats:

Mr. Raymond Moats

Lakeland, FL. 33807-5252

Vice President

CHC VII, Ltd. P.O. Box 5252

In accordance with Chapters 62-4, 62-620 and 62-640, Florida Administrative Code, the Department is hereby modifying the permit conditions for the above-referenced wastewater permit, originally issued on February 19, 1992. The conditions are changed as follows:

Condition

From

Expiration Date Specific Condition 9 Specific Condition 9a 04/30/93 02/19/97 Delete Current *See Below Delete Current *See Below

<u>T0</u>

*9. The domestic wastewater residuals for this facility are classified as stabilization Class B.

**9a. The domestic wastewater residuals shall be land applied only at the following sites, as referenced below:

Site Name Acreage Latitude Longitude Section Township Range County

Waverly30.027°59'03" 81°35'30"129S27EPolkLawson Gr.1.028°20'00" 80°75'00"2924S30EOrange

This permit modification, D053-200395B, authorizing the above changes must be attached to your original permit and becomes a part of that Permit.

Sincerely,

Michael S. Hickey, P.E. Water Facilities Administrator FDEP Southwest District

MSH/mhh cc: Steve Thompson, FDEP Michele Hennessy, FDEP



Lawton Chiles

Governor

Department of Environmental Protection

Southwest District 3804 Coconut Palm Drive Tampa, Florida 33619 January 5, 1996

Virginia B. Wetherell Secretary

Polk County Swiss Golf Club WWTP GMS ID No.: 4053P10039

Revision and Modification of Conditions Permit No: DO53-200395

Dear Mr. Moats:

Mr. Raymond Moats

Vice President

CHC VII, Ltd.

P.O. Box 5252 Lakeland, FL 33807

We are in receipt of your request, application #53-264618, for a modification of the above-referenced domestic wastewater treatment plant, and a modification of the permit conditions of the above operation permit, originally issued on 02/19/92. The conditions are hereby changed as follows:

<u>Condition</u>	From	<u>To</u>	
Facility Description	As entered	See * below	

* Operation of an existing 0.176 mgd annual average daily flow Type II extended aeration domestic wastewater treatment plant with chlorinated and filtered effluent routed into a polishing pond then to dual drainfields of 73,181 square feet. Construction and operation of an additional drainfield area of 350' x 125' to provide additional effluent reuse and disposal. The additional area will be located on the west end of the golf course between Fairway Circle South and Greenview Drive as specified in the Florida Testing & Environmental, Inc., Report dated January 1995.

By this plant modification and permit revision, you are authorized to perform the work and modify the plant in accordance with drawings, plans, documents or specifications submitted to and retained on file at the FDEP Southwest District Office. These are hereby incorporated by reference and made a part hereof. A Notification of Completion of Construction, DEP Form 62-620.910(12) is required prior to placing the modifications into operation.

This permit modification, DO53-200395A, authorizing the above changes must be attached to your original permit and, together with any other preceding modification(s), becomes a part of that Permit.

Sincerely,

Michael Shi

Michael S. Hickey, P.E. Water Facilities Administrator FDEP Southwest District

MSH/sgt

c: Sonny Gulati, P.E.

"Protect, Conserve and Manage Florida's Environment and Natural Resources"



Florida Department of Environmental Regulation

Southwest District Lawton Chiles, Governor

4520 Oak Fair Boulevard 813-620-6100

Tampa, Florida 33610-7347 Carol M. Browner, Secretary

PERMITTEE: CHC VII, Ltd. P.O. Box 5252 Lakeland, FL 33807 PERMIT/CERTIFICATION GMS ID No: 4053P10039 Permit No: D053-200395 Date of Issue: 02/19/92 Expiration Date: April 30, 1993 County: Polk Lat/Long: 28° 05' 44" 81° 41' 09" Sec/Town/Range: 35/27S/26E Project: Swiss Golf Club WWTP Processor: S.G. Thompson

Attn: Raymond Moats Vice President:

This permit is issued under the provisions of Chapter 403, Florida Statutes, and Florida Administrative Code Rule(s) 17-3, 17-4 and 17-600 Series. The above named permittee is hereby authorized to perform the work or operate the facility shown on the application and approved drawing(s), plans, and other documents, attached hereto or on file with the department and made a part hereof and specifically described as follows:

Operation of a 0.176 MGD Type II extended aeration sewage treatment plant with chlorinated and filtered effluent to a polishing pond then to dual drainfields of 73,181 square feet total area each side.

Location: Old Lucerne Park Road, North of Winter Haven, Florida

Replaces Permit No.: D053-175364 Expired: 09/30/91

SPECIFIC CONDITIONS:

1. Drawings, plans, documents or specifications submitted by the permittee, not attached hereto, but retained on file at the Southwest District Office, are made a part hereof.

2. The zone of discharge boundary shall extend horizontally 100 feet from the site boundary or to the installation's property boundary, whichever is less, and vertically to the base of the shallow water table aquifer. (Rule 17-28.700, F.A.C.)

3. The water quality standards for Class G-II groundwater shall not be exceeded at the boundary of the zone of discharge. (Rule 17-3.402, Rule 17-3.404, F.A.C.)

4. In accordance with Chapter 17-602, F.A.C., the required certified operator on site time is: a Class C or better operator for 1/2 hour, 5 days a week and a weekend visit.

5. The discharge from the chlorine contact chamber shall be sampled in accordance with Chapter 17-601, F.A.C. and shall meet the following limitations:

		Min-		Туре	
Parameter	Unit	imum	Maximum	Sample	Frequency
Permitted Capaci	ty				
(flow) pH CBOD5	mgd std un mg/L		0.176 average 8.50 20 annual avg. 8	grab hr. com	Daily,5/wk Daily,5/wk posite two weeks
			30 monthly avg. 45 weekly avg. 60 any one sample	-	
Total Suspended mg/l	Solids	0	5.0 any one samp	le 8 hr. very two	
Nitrate (as N)	mg/L	0	12	-	composite
Cl2 Fecal coliform	mg/L #/100	0.5 0	200 Annual Average 200 Monthly Avg.	grab	Daily,5/wk

The results shall be reported monthly on DER Form 17-601.900(1).

6. The sludge shall be sampled after final treatment in accordance with Rule 17-640.700(1)(b) F.A.C. but prior to land application for the parameters listed below every 6 months. A copy of the analyses shall be submitted with the monthly operation report for the following parameters:

SPECIFIC CONDITIONS: (cont'd)

6. (con't):

Total Nitrogen - % dry weight Total Phosphorus - % dry weight Total Potassium - % dry weight Cadmium - mg/kg dry weight Copper - mg/kg dry weight Lead - mg/kg dry weight Nickel- mg/kg dry weight Zinc - mg/kg dry weight pH - standard units Total Solids - %

7. Direct discharge from the polishing pond or the drainfields to area surface waters is not allowed. Surface discharge shall be considered a violation of this permit and the permittee shall immediately report any such discharge to the SW District Office of the Department of Environmental Regulation.

8. If historical or archaeological artifacts, such as Indian canoes, are discovered at any time within the project site, the permittee shall notify the DER Southwest District office and the Bureau of Historic Preservation, Division of Archives, History and Records Management, R.A. Gray Building, Tallahassee, Florida 32301, telephone number (904) 487-2073.

9. The domestic wastewater residuals for this facility are classified as stabilization Class C.

a. The domestic wastewater residuals shall be land applied only at Lawson Groves (as identified in the Agricultural Use plan or Dedicated Site plan submitted with the application).

b. Annual update reports, summaries, and revised agricultural site plans are due not later than one year from the issuance of the permit. The reports shall be submitted annually thereafter, and not later than this anniversary date to the Department and the Local Program (if applicable).

c. The permittee shall comply with all provisions of Chapter 17-640, F.A.C. and shall report any non-compliance or changes from the approved use plan to the Department and Local Program (if applicable).

10. The permittee shall provide an approved flow measurement device on the sewage treatment plant to monitor the influent (ahead of any return flows) and/or effluent flow, as appropriate. For plants with design flow equal to or greater than 0.100 MGD, flow measurement shall be with a flow meter equipped with a recorder and an integrator or totalizer. The flow measurement device shall be calibrated at least annually, with evidence of calibration kept at the site of flow measurement, and submitted to the Department upon request.

11. The permittee shall provide a weatherproof location for an on/site log book to monitor the daily activities of the certified operator. This log book shall record sign in/out times of the certified operator, list any maintenance performed and contain the signature and certification number of the operator.

12. The permittee shall maintain all audible and visual alarm systems on the lift station(s) in operating condition at all times.

13. A reduced pressure zone backflow preventer shall be installed on any potable water supply to the treatment facility. No potable water outlet intended for human contact shall be located down-line of the backflow preventer.

14. The disinfection system shall be operated to maintain a minimum chlorine residual of 0.5 mg/l at the outfall from the chlorine contact chamber. A metering device for dosing chlorine to the effluent shall be utilized and the chlorine supply tank shall be inspected regularly to ensure proper operation.

15. Prior to sixty days before the expiration of this permit, the permittee shall apply for a renewal of the permit on forms and in a manner prescribed by the Department of Environmental Regulation.

16. Daily checks of the plant shall be performed by the permittee, or supplier, or his representative or agent five (5) days per week for all Class C and D plants pursuant to Rule 17-602.375(1), F.A.C.

17. If after twelve months of operation the facility is maintained in compliance to these permit conditions the permittee may request an extension of the permit for 48 additional months.

18. The permittee shall be aware of and operate under the attached "General Permit Conditions #1 thru #15". General Permit Conditions are binding upon the permittee and enforceable pursuant to Chapter 403 of the Florida Statutes.

GROUND WATER MONITORING PLAN (OPERATION)

1. In accordance with Rule 17-28.700, Florida Administrative Code (F.A.C.), the permittee has installed and placed into operation a ground water Monitoring System. The Ground Water Monitoring System is designed and constructed in accordance with the plans on file in the Southwest District office.

2. The ground water monitoring wells are located as follows:

Well Number	Aquifer	Location
MW-1	Surficial	Golf Course
MW-2	Surficial	Golf Course
MW-3	Surficial	Golf Course

The wells are to be clearly labelled and easily visible at all times.

3. If any monitoring well becomes damaged or inoperable, the permittee shall notify the Department immediately and a detailed written report shall follow within 7 days. The written report shall detail what problem has occurred and remedial measures that have been taken to prevent the recurrence. All monitoring well design and replacement shall be approved by the Department prior to installation of the replacement well.

4. Sixty days prior to the submittal of the renewal application of this permit, the permittee shall sample all ground water monitor wells for the Florida Primary and Secondary Drinking Water parameters included in Rule 17-550, F.A.C., Public Drinking Water Systems, fecal coliform and EPA Method 608. The analyses shall be submitted to the Department with the renewal application.

5. Sixty days prior to the submittal of the renewal application of this permit, the permittee shall provide a 24 hour composite effluent sample prior to discharge to the plant percolation ponds. The composite sample shall be analyzed for the Florida Primary and Secondary Drinking Water Standards in accordance with Rule 17-550, F.A.C., the EPA Priority Pollutants and fecal coliform. The effluent analysis shall be submitted to the Department with the renewal application.

6. All ground water monitor wells shall be sampled and analyzed quarterly for the following parameters. However, additional sample(s), well(s), and parameter(s) may be required based upon subsequent analyses.

PRIMARY			
Nitrate	(as	Nitrogen)	mg/l
Sodium			mg/l
Turbidit	зу		NTU

SECONDARY STANDARDS

Sulfate	e			mg/L	
Chlorid	le			mg/l	
Total I	Dissolved	Solids	(TDS)	mg/l	
рH				std.	units

OTHERS

Temperature	°C
Total Organic Carbon (TOC)	mg/l
Specific Conductance	umhos/cm
Fecal Coliform	cts/100 ml
Water Levels (M.S.L.)	feet

7. Following the initial analysis of the ground water monitor wells, the wells shall be sampled and analyzed according to the following schedule:

Sample Period		Report Due Date
2nd Quarter 3rd Quarter	(January-March) (April-June) (July-September) (October-December)	April 15 July 15 October 15 January 15

The permittee shall submit to the Department the results of the water quality analyses no later than the 15 day of the month immediately following the end of the sampling period. The results shall be sent to the Department of Environmental Regulation, Southwest District Office, 4520 Oak Fair Boulevard, Tampa, Florida 33610-7347.

8. If, at any time, background ground water standards are exceeded at the edge of the zone of discharge, the permittee has 15 days in which to resample the monitor well(s) to verify the original analysis. The monitoring test results must be submitted to the Department within fifteen days of receipt of the analysis from the laboratory. Should the permittee choose not to resample, the Department will consider the water quality analysis as representative of current ground water conditions at the facility.

9. The field testing, sample collection and preservation and laboratory testing, including quality control procedures, shall be in accordance with methods approved by the Department in accordance with Rule 17-4.246 and 17-3.401, F.A.C. Approved methods as published by the Department or as published in Standard Methods, A.S.T.M. or EPA methods shall be used. Approved methods for chemical analyses are summarized in the Federal Register, December 1, 1976 (41FR52780) except that turbidity shall be measured by the Nephelometric Method.

10. Ground water sampling shall be reported on the attached Parameter Monitoring Report Forms [DER Form 17-1.216(2)]. In order to facilitate entry of this data into the State computer system, these forms or an exact replica must be used and must not be altered as to content. The original copies should be retained so that the necessary information is available to properly complete future reports. The report forms received from the laboratory must be submitted along with the DER Parameter Monitoring Report Forms described above.

11. The permittee shall ensure that the water quality standards for Class G-II ground waters will not be exceeded at the boundary of the zone of discharge according to Rule 17-3.402 and 17-3.404, F.A.C.

12. The permittee shall ensure that the minimum criteria for ground water specified in Rule 17-3.402, F.A.C. shall not be violated within the zone of discharge.

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL REGULATION

Richard D. Garrity, Ph.D. Director of District Management



WASTEWATER PERMIT APPLICATION FORM 1 GENERAL INFORMATION

I IDENTIFICATION NUMBER:

Facility ID 4053P10039

II CHARACTERISTICS:

INSTRUCTIONS: Complete the questions below to determine whether you need to submit any permit application forms to the Department of Environmental Protection. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the blank in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if you activity is excluded from permit requirements. See Section B of the instructions. See also, Section C of the instructions for definitions of the terms used here.

SPECIFIC QUESTIONS	YES	NO	FORM ATTACHED
A. Is this facility a domestic wastewater facility which results in a discharge to surface or ground waters?		the second s	X
B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters?	1000 - 22 1020 - 320 - 3 1020 - 3	X	
C. Does or will this facility (other than those describe in A. or B.) discharge process wastewater, or non-process wastewater regulated by effluent guidelines or new source performance standards, to surface waters?		н <u>і</u> 1	
D. Does or will this facility (other than those described in A. or B.) discharge process wastewater to ground waters?		x	
E. Does or will this facility discharge non-process wastewater, not regulated by effluent guidelines or new source performance standards, to surface waters?		X	
F. Does or will this facility discharge non-process wastewater to ground waters?		x	
G. Does or will this facility discharge stormwater to surface waters?		X	
H. Is this facility a non-discharging/closed loop recycle system?		х	

III NAME OF FACILITY: (40 characters and spaces)

CHC VII LTD; SWISS GOLF CLUB

DEP Form 62-620.910(1) (Effective November 29, 1994)

Facility ID 4053P10039

IV FACILITY CONTACT: (A. 30 characters and spaces)

A. Name and Title (Last, first, & title)		B. Phone (area code & no.)
Moats, Raymond,	President ·	941-647-1581

V FACILITY MAILING ADDRESS: (A. 30 characters and spaces; B. 25 characters and spaces)

A. Street or P.O. Bo	x: P. O. Box 5252	<u></u>	
B. City or Town:	Lakeland	State: FL	Zip Code: 33807

VI FACILITY LOCATION: (A. 30 characters and spaces; B. 24 characters and spaces; C. 3 spaces (if known); D. 25 characters and spaces; E. 2 spaces; F. 9 spaces)

A. Street, Route or Other Specific Identifier: Old Lucerne Park Road		
B. County Name: Polk		C. County Code (if known):
D. City or Town:	Winter Haven	E. State: FL F. Zip Code: 33881

VII SIC CODES: (4-digit, in order of priority)

2 1. Code #:	(Specify)	2. Code #:	(Specify)
3. Code #:	(Specify)	4. Code #: 0444	(Specify)

VIII OPERATOR INFORMATION: (A. 40 characters and spaces; B. 1 character; C. 1 character (if other, specify); D. 12 characters; E. 30 characters and spaces; F. 25 characters and spaces; G. 2 characters; H. 9 characters)

A. Name: Raymond Moats	B. Is the name in VIII A. the owner? Yes: No:	
C. Status of Operators (code)	(specify)	D. Phone No.:
F = Federal; S = State; P = Private; $O = Other; M = Public (other than F or S)P$	Private	941-647-1581
E. Street or P. O. Box: P. O. Box 5252		
F. City or Town: Lakeland	Code: 33807	

IX INDIAN LAND: Is the facility located on Indian lands? Yes: __ No: X

Facility ID _4053P10039

X EXISTING ENVIRONMENTAL PERMITS:

A. NPDES Permit No.	B. UIC Permit No.	C. Other (specify)	D. Other (specify)
N/A	N/A	, DEP D053-200395	

XI MAP: Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII NATURE OF BUSINESS (provide a brief description)

Private Retirement Manufactured Home Community

XIII CERTIFICATION (see instructions)

ş

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application. I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

B. Signature

Official Title (type or print)

A. Name (type or print)

Raymond Moats

President

C. Date Signed

DEP Form 62-620.910(1) (Effective November 29, 1994) 1-15



WASTEWATER APPLICATION FORM 2A

FOR A DOMESTIC WASTEWATER FACILITY PERMIT

Instructions for selected items are included in the "INSTRUCTIONS FOR FORM 2A". Refer to these instructions before filling out each item.

SECTION 1. APPLICANT AND FACILITY DESCRIPTION

- 1. Application Type
- 2. Facility Type

3.	Treatment	Faci	lity]	Info	mati	on
2						

- a. Name
- b. Facility Identification Number
- c. Location

Number and Street City/State/Zip Code Telephone

Latitude Longitude Dates Coordinates Determined Method Used to Obtain Coordinates

d. Ownership Type

- ____ New ____ Substantial Modification X Permit Renewal
- X Wastewater Treatment
- X Reuse or Disposal
- Limited Wet Weather Discharge
- ____ Residuals/Septage Management
 - SWISS GOLF CLUB

4053P10039

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Geod	etic	<u>Qua</u>	id Ma	<u>p</u>	12400-2005
·					

- _ Municipal County
- ____ Count
- X Private

e. Contact

Raymond Moats Name (941) 647-1581 Telephone f. Facility Mailing Address P. O. Box 5252 Number and Street Lakeland, Fl 33807 City/State/Zip Code 1985 g. Year Facility Began Operation 1996 h. Year of Facility's Last Substantial Modification 4. Applicant or Authorized Representative CHC VII, Ltd. Legal Name P. O. Box 5252 Number and Street Lakeland, Fl 33807 City/State/Zip Code Telephone 941) 647-1581 5. Applicant's Authorized Agent Raymond Moats, President Name and Title Number and Street P. O. Box 5252 City/State/Zip Code Lakeland, Fl 33807 Telephone (941) 647-1581 5. Project Name and Description SWISS GOLF CLUB WASTEWATER TREATMENT FACILITY: WASTEWATER . . -TREATMENT AND TREATED EFFLUENT REUSE حدارية وحصر البنارية المتمليمة ردار أرادته 7. Collection System Length 6 miles 8. Industrial Wastewater Contributions a. Average Daily Flow N/A mgd b. Does this facility have an approved pretreatment program? Yes ____ No N/A Coordinator Name Number and Street City/State/Zip Code Telephone

DEP Form 62-620.910(2) Effective November 29, 1994

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2A-2

9. Municipalities or Areas Served

Name of Municipality or Area	Population Served		
Swiss Golf Club Mobile Home Community	:700		
	1700		
Total Population Served			

10. Reclaimed Water Reuse and Effluent Disposal

Method of Reuse or Disposal	Number of Reuse or Disposal Points	Total Design Capacity (mgd)	Basis of Design Flow
Surface Waters - Excluding Ocean Outfalls and Wetlands (Rule 62-600.510, F.A.C.)			
Ocean Outfalls (Rule 62-600.520, F.A.C.)			
Wetlands (Rule 62-600.620, F.A.C.)			
Reuse of Reclaimed Water and Land Application (Rule 62-600.530, F.A.C.)	2	0.176	Annual Average Daily Flow
Ground Water Disposal by Underground Injection (Rule 62-600.540, F.A.C.)			
Other (Describe.)			
Total Item 7	2	0.176	

11. Number of Seasonal or Periodic Discharges

N/A

12. Flows to Another Wastewater Facility

a. Does part of the facility's flow go into a collection/transmission system or reclaimed water distribution system under another responsible organization?

___Yes X_No

DEP Form 62-620.910(2) Effortive November 29, 1994 2A-3

b. If yes, which one? N/A	Collection/Transmission System Reclaimed Water Distribution System
c. Responsible Organization Receiving the Flow	
Name Number and Street City/State/Zip Code	N/A
d. Name of Facility Which Receives the Flow	N/A
e. Facility Identification Number of Facility Which Receives the Flow	N/A
f. Average Daily Flow Discharged to the Receiving Facility	N/A mgd
13. Residuals Use or Disposal	
a. Amount of Residuals Generated by the Facility	_1.25 dry tons/year
b. Does this facility receive residuals from another facility for further treatment and disposal?	Yes <u>X</u> No

; **a**

c. Method of Residuals Use or Disposal

Method	Number of Sites or Number of Receiving Facilities	Dry Tons Used or Disposed Per Year
Land Application (Chapter 62-640, F.A.C.)	i	1.25
Distribution and Marketing (Chapter 62-640, F.A.C.)		
Landfill Disposal (Chapter 62-701, F.A.C.)		
Incineration (Chapter 62-200 Series, F.A.C.)		
Transport to Another Treatment Facility		
Other (Describe.)		
• . . _	Total	1.25

d. If residuals are transported to another facility for landfill disposal, incineration, or treatment, provide the facility name, Facility identification number and address.

¥ .

Name Facility Identification Number	N/A
Number and Street City/State/Zip Code County Telephone	N/A
Treatment Codes for Receiving Facility	
14. Permits and Applications	
a. Expiration Date of Current NPDES Permit	N/A //
b. Expiration Date of Current DEP Permit	2 / 19 / 97

c. Existing, Pending, or Denied Permits and Permit Applications

Issuing Agency	Permit Type	Permit Number	Date Filed	Date Issued	Date Denied	Date of Expiration
FDEP	Operation	D053 200395	7 /30/91	2 / 19/ 92	/ /	2/19/97
			11	11	11	11
			11	11	1 1	11
a 90			11	11	11	11

d. Orders and Notices N/A

Type or Order or Notice	Issuing Agency	Date of Order or Notice
Notice or Violation		
Consent Order		
Administrative Order		
Other (Describe.)		

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SECTION 2. TREATMENT FACILITY DESCRIPTION

1. Description

Surge tank prior to extended aeration,
clarification, chlorine contact, sand
filters, subsurface irrigation system
with rapid infiltration basin for back-
up. Sludge is aerobically digested,
lime stabilized and hauled wet to an
agricultural use site.
JS OA ASE N P

DD

mgd

mgd

mgd

X Annual Average Daily Flow

Maximum Monthly Average Daily Flow Three-Month Average Daily Flow

DL

ID

0.176

0.176

Other

0

FS

- 2. Treatment Codes
- 3. Design Capacity of the Treatment Facility

Current Design Capacity Proposed Incremental Design Capacity Proposed Total Design Capacity

4. Basis of Design Flow

If other, specify.

?

5. Design Treatment Levels

Parameter	Effluent Concentration	Units	Basis	Percent Removal
рH	6.0 - 8.5	Standard Units		
CBOD,	20	mg/L	Annual Average	90%
TSS	10	mg/L	Single Sample	95%
CBOD5	30 45	mg/L mg/L	Monthly Average Weekly Average	
	60	mg/L	Single Sample	
Fecal Coliform	200	#/100 mL	Monthly or Annual Average	
Nitrate (as N)	12	mg/L	Single Sample	
_				

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6. Disinfection Level Provided

If the facility disinfects by chlorination and the discharge is to surface waters, is dechlorination provided?

7. Residuals Treatment

a. Class of Residuals

If other, describe.

b. Parameter Concentrations

· Total Nitrogen

Cadmium

Total Solids

Copper

Lead Nickel

Zinc

pН

ы.

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Total Phosphorus

Total Potassium

High-level Alternative N/A _Yes __No ____ Class AA (Rule 62-640.850, F.A.C.) Class A (Rule 62-640.600, F.A.C.) X Class B (Rule 62-640.600, F.A.C.) Other i5.4 % dry weight 3.3 % dry weight 0.6 _ % dry weight 69 mg/kg dry weight 930 mg/kg dry weight 120 mg/kg dry weight 415 mg/kg dry weight 130 mg/kg dry weight 6.5 standard units 0.1 % Selenium - 16 Arsenic - 14

Mercury - 35

3

Class I

Class II X Class III

Chromium - 275

1

19

Other Equivalent Reliability

Molybdenum - 68

96

Low-level

Intermediate High-level

X Basic

Date of Sample

Other Parameters (Describe.)

8. Reliability Class

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SECTION 3. A. DISCHARGES TO SURFACE WATERS (including wetlands)

1. Discharge Serial Number and Name

	Discharge Serial Number Discharge Name Previous Discharge Serial Number	, <u>N/A</u>
2.	Discharge Location	
	County City or Town (if applicable) Street or Description	N/A
	Latitude Longitude Dates Coordinates Determined Method Used to Obtain Coordinates	•, •, •N •, •, •W •//
3.	Discharge Operating Dates	
	Discharge Start Date Discharge End Date	<u>N/A</u> //
?	Reason for Discontinuing the Discharge	
	Design Canadian of the Outfall	
4.	Design Capacity of the Outfall	
	Current Design Capacity Proposed Incremental Design Capacity Proposed Total Design Capacity	
5.	Basis of Design Flow	Annual Average Daily Flow Maximum Monthly Average Daily Flow Three-Month Average Daily Flow Other

If other, specify.

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6. Basis for Effluent Limitations

If other, specify.

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Date Effluent Limitations Established

7. Discharge Point Description

If other, specify.

8. Receiving Waterbody Name

9. Type of Receiving Waterbody

10. Classification of Receiving Waterbody

Is the receiving waterbody contiguous to, or identified as, an Outstanding Florida Water (OFW) or an Outstanding National Resource Water?

If yes, name and locate on a USGS map.

11. Outfall Information

Description of Outfall and Diffuser

Construction Materials Length From Shore Diameter Discharge Depth Below Water Surface Receiving Water Bottom Depth Below Water Surface

TBEL
Level I WQBEL
Level II WQBEL
Other
//
A for the second se
Ocean .
Stream
Estuary
Lake
Wetland
Other
·
Fresh
Brackish or Marine
a 1
Class I
Class II
Class IV
Class V
YesNo
•
<u> </u>

Samel Number

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- 12. Surface Water Improvement and Management (SWIM)
 - a. Will the discharge affect any SWIM plan waterbodies?
 - b. If yes, name the waterbody.
 - c. Has the SWIM plan been approved by a water management district and the Department?
 - d. If yes, attach documentation that the proposed discharge is consistent with the SWIM plan.

1. 1. e

13. Additional Information Required for Seasonal or Periodic Discharges

Frequency
Duration
Volume
Occurrence

?

14.	Additional Information Required for Limited Wet
	Weather Discharges Permitted in Accordance with
	Rule 62-610.860, F.A.C.

a. Downstream Waterbody

Name of nearest downstream lake, estuary, reservoir, OFW, or Class I water. Show location on a USGS map.

Downstream Waterbody Description

<u>Yes</u> <u>No</u>

_Yes __No

Times Per Year
Days
Thousand Gallons Per Incident

Jan	May	Sep
Feb	Jun .	 Oct
Mar	Jul	Nov
Apr	Aug	Dec

- ___ Ocean ___ Stream ___ Estuary __ Lake
- ____ Wetland
- ____ Other

If other, specify.

		Serial Number
	· · · · · · ·	
	Classification of Downstream Waterbody	Class I
		Class II
		Class III
		Class IV
		Class V
	Distance Downstream	miles
	The Transite Design	
	Average Flow Velocity During	fact non concert
	Anticipated Periods of Discharge	feet per second
	Travel Time During Anticipated	
	Periods of Discharge	hours
-	Feriods of Discharge	nours
L	Rainfall Information	
υ.	Raman Difficultation	
	Rainfall Gauging Station Location	
	Kamian Gauging Station Excation	
	Period of Record Analyzed:	
	Beginning Year	
	Ending Year	
	Number of Years	
		inches and used
	Average Annual Rainfall	inches per year
~	Simulation of Operation of the Reuse,	
? .	Storage, and Limited Wet Weather Discharge	• • • • • • • • • • • • • • • • • • •
	for an Average Rainfall Year	
	In an Average realistic real	
	Year Simulated	
<i></i>	Annual Rainfall During Average Year	inches
	Number of Days Limited Wet Weather Discharge	
	is Used During Average Rainfall Year (N)	days
	ي من المركز ا المركز المركز	
	Percent of the Days of the Year that the	
	Limited Wet Weather Discharge will Occur	
	During Average Rainfall Year (P)	<u> </u>
	Note:	
	$\overline{P} = [(N) / (365)] \times 100\%.$	
	P cannot exceed 25% or be less than 1%.	
d.	Reclaimed Water Quality (maximum monthly average)	
	· ·	·
	CBOD ₅	mg/L
	TKN (as Nitrogen)	mg/L
		¢
DE9 5	a G-00.9100 2A-11	
	Novazisticij	

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e. Minimum Acceptable Stream Dilution Factor (SDF)

Note:

 $SDF = P(0.085 \times CBOD_{s} + 0.272 \times TKN - 0.484)$ The values for CBOD, and TKN should be in terms of maximum monthly average limitations as provided in 14.d. above. The value of P should be as calculated in 14.c. above.

f. Adjusted Stream Dilution Factor

Note:

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If the travel time shown in 14.a., above, is less than 24 hours, provide the adjusted minimum acceptable stream dilution factor. Adjusted SDF = SDF x (24 hours)/(travel time in hours)

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15. Additional Information Required for Wetland Discharges

- a. Is the wetland a jurisdictional wetland (i.e. within the landward extent of waters as defined in Rule 62-301.400. F.A.C., or isolated and not owned entirely by one person, or owned entirely by the State)?
- b. Will the wetland be used as a treatment wetland or receiving wetland?

If the wetland is to be used as a treatment wetland, attach documentation showing ownership or the applicant's legal interest in the treatment wetland.

- c. If the wetland is to be used for treatment, identify the type.
- d. Is the wetland herbaceous or woody?
- e. Identify the classification of surface waters within the wetland.
- f. Are the waters within the wetland part of an OFW?

No Yes Treatment Receiving

9796 B 1 1 1 Man-made Hydrologically Altered Unaltered Herbaceous _ Woody Class I Class II Class III Class IV

	• •	
Class	v	

Yes No

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16. Operational Data N/A

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a. Description of Influent and Effluent

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	Influent	Effluent					
Parameter	Annual Average	Annual Average	Lowest Monthly Average	Highest Monthly Average	Frequency of Analysis	Number of Analyses	Sample Type
Flow mgd							
pH Units							
Fecal Coliform Bacteria Number/100 mL							
CBOD 5-day mg/L							•
Chlorine Total Residual mg/L							
Total Suspended Solids mg/L							
Ammonia (as N) mg/L							
Kjeldahl Nitrogen mg/L							
Nitrate (as N) mg/L							•
Total Phosphorus (as P) mg/L			~				
Dissolved Oxygen mg/L							
-							

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a. Description of Influent and Effluent (continued) N/A

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Influent		Effluent					
Annual Average	Annual Average						
			•				
	Annual	Annual Annual	Annual Annual Monthly	Annual Annual Monthly Monthly	Lowest Highest Annual Annual Monthly Monthly Frequency of	LowestHighestAnnualAnnualMonthlyMonthlyFrequency ofNumber of	

b. Additional Wastewater Characteristics

Parameter	Present	Parameter	Present	Parameter	Present
Bromide		Cobalt		Thallium	
Chloride		Chromium		Titanium	
Cyanide		Copper		Tin	
Fluoride		Iron		Zinc	
Sulfide		Lead		Algicides	
Aluminum		Manganese		Chlorinated Organic Compounds	
Алтітолу		Mercury		Oil and Grease	
Arsenic		Molybdenum		Pesticides	
Beryllium		Nickel		Phenols	
Barium		Selenium		Surfactants	
Boron		Silver		Radioactivity	
Cadmium					

* Provide specific compound or element as "Additional Information", if known.

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Serial Number _____ ROO I

SECTION 3. B. REUSE AND LAND APPLICATION SYSTEMS

1. Reuse or Land Application System Serial Number and Name

		•
	Reuse or Land Application System Serial Number	R00 I
	Reuse of Land Application System Name	Swiss Golf Club - Subsurface Irrigation
	Previous Reuse or Land Application System Serial Number	N/A
	Previous Reuse of Land Application of semi conditionation	
2.	Reuse or Land Application System Location	
	County	Polk
	City or Town (if applicable)	Winter Haven
	Street or Description	Old Lucerne Park Road
	Latitude	28 o 05 ' 44 *N
	Longitude	8i o 4i * 09 **
	Dates Coordinates Determined	/ 85
	Method Used to Obtain Coordinates	USGS Quadrangle Map
3.	Reuse or Land Application System Operating Dates	
	System Operation Start Date	3 / 1 / 90
	System Operation End Date	<u> </u>
	System Operation Life Date	
Ś	Reason for Discontinuing System Operation	N/A
4.	Design Capacity of the Reuse or	•
	Land Application System	
.:	Current Design Capacity	0.176 mgd
	Proposed Incremental Design Capacity	+ 0 mgd
	Proposed Total Design Capacity	= 0.176 mgd
5.	Basis of Design Flow	X Annual Average Daily Flow
•••		Maximum Monthly Average Daily Flow
		Three-Month Average Daily Flow
		Other
	If other, specify.	
6.	Underdrains and Perimeter Ditches	

a. Is the reuse or land application system underdrained?

___Yes X_No

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b. Are perimeter ditches used?

If yes, will they be excavated to a depth which will intersect the seasonal high ground water table or the ground water mound during any portion of the year?

___Yes ___No

Yes X No

- 7. Type of Reuse or Land Application System
 - _____ Slow-rate land application system/restricted public access (Chapter 62-610, F.A.C., Part II)
 - Slow-rate land application system/public access areas, residential irrigation, and edible crop irrigation (Chapter 62-610, F.A.C., Part III)
 - X Rapid-rate land application system (Chapter 62-610, F.A.C., Part IV)
 - Absorption field system (Chapter 62-610, F.A.C., Part V)
 - ____ Overland flow system (Chapter 62-610, F.A.C., Part VI)
 - ____ Other land application system with additional levels of preapplication treatment (Rule 62-610.660, F.A.C.)
 - ____ Other land application system with lower levels of preapplication treatment (Rule 62-610.670, F.A.C.)

Site/Use Type/Major User	Area (acres)	Rate (inches/week)	Capacity (mgd)
Golf Course Subsurface Irrigation/Swiss Golf Club	4.4	6.5	0.176
	······		·····
Total	4.4	6.5	0.176

8. Application Areas and Rates

9. Additional Information Required for Reuse Systems Permitted Under Part III of Chapter 62-610, F.A.C.

a. Areas Irrigated

N/A

- ____ Residential lawns
- ____ Golf courses
- ____ Cemeteries
- ____ Parks, playgrounds
- ____ Highway medians, rights-of-way
- ____ Edible crops
- ____ Others

If other, specify.

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	Serial Number <u>R00 i</u>
b. Other Uses of Reclaimed Water N/A	 Toilet flushing Fire protection Construction dust control Aesthetic purposes (decorative ponds, fountains, etc.) Others
If other, specify.	
c. How many hours per day, seven days per week, is or will an operator be on-site at the wastewater treatment facility?	N/A hours per day
If the treatment facility is or will be staffed by an operator less than 24 hrs/day, describe the additional levels of reliability included within the treatment or reuse systems. (See Rule 62-610.462, F.A.C.)	

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d. For permit renewals, list the dates on which the operating protocols (as described in Rule 62-610.463, F.A.C.) were submitted to the Department and the date of the Department's approvals during the last five years. N/A

Date Submitted	Date Approved
1 1	/ /
1 1	1 1
1 1	/ /
1 1	/ /

e. For each site where edible crops are or will be irrigated with reclaimed water, describe the crops grown; the type of application system used; provisions for crop washing and for processing, if any; and provisions for control of public access, if any. (See Rule 62-610.475, F.A.C.)

N/A ; . . 1

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SECTION 3. C. GROUND WATER DISPOSAL BY UNDERGROUND INJECTION

1.	Underground Injection Well Facility Serial Number and N	Kame N/A
	Underground Injection Well Facility Serial Number Underground Injection Well Facility Name Previous Underground Injection Well Facility Serial Number	
2.	Underground Injection Well Facility Location N/A	
	County City or Town (if applicable) Street or Description	
	Latitude Longitude Dates Coordinates Determined Method Used to Obtain Coordinates	•*N •*W •/
3.	Underground Injection Well Facility DEP Identification Number or Permit Application Number	N/A
4.	Discharge Operating Dates	
Ś	Discharge Start Date Discharge End Date	<u>N/A / / / / / / / / / / / / / / / / / / </u>
	Reason for Discontinuing the Discharge	
5.	Design Capacity of the Underground Injection Well Facility	
	Current Design Capacity Proposed Incremental Design Capacity Proposed Total Design Capacity	mgd + mgd = mgd
б.	Basis of Design Flow N/A	Annual Average Daily Flow Maximum Monthly Average Daily Flow Three-Month Average Daily Flow Other
	If other, specify.	
	-	

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	Serial Number				
SECTION 4. SCHEDULED I OF IMPI	MPROVEME LEMENTATI		D SCHEDUL	LES	
1. Improvements Required	r				
a. Discharge Serial Numbers, Reclaimed Water Reuse or Land Application System Serial Numbers, and Underground Injection Well Facility Serial Numbers Affected	r		N/A		
b. Authority Imposing Requirement		Local State Federa Develo Other	l oped by Applica	nt	
If other, specify.				···	
c. Improvement Description:					
3-character General Action Description	·	•		· · ·	
3-character Specific Action Descriptions		/	/	/	
2. Implementation Schedule and Actual Comple	tion Dates				
Implementation Steps	Schedule		Actual Con	mpletion	
a. Preliminary Plans Complete	1 1		1	1	
b. Final Plans and Specifications Complete	1 1		1	1	
c. Financing Complete	1 1		-1	1	
d. Site Acquired	1 1		1	1	
e. Begin Construction	1 1		1	1	
f. End Construction	1 1		1	1	
g. Begin Reuse or Disposal	1 1		1	1	
h. Operational Level Attained	1 1		1	1	

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N/A

SECTION 5. INDUSTRIAL WASTEWATER CONTRIBUTIONS

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1. Significant Industrial User

Name Number and Street City/State/Zip Code County

2.	Primary Standard Industrial	l
	Classification Code	

3. Principal Product or Raw Material

	Description	Quantity per Day	Units (See Table 3)
Product		· ·	
Raw Material		1	••••••

4. Flow -

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Volume			Gallons Per Day
nata seksi ini i	enter de la seconda de la s	· · · · · · · · · · · · · · · · · · ·	
Frequency		· · · · · ·	Intermittent Continuous
5. Pretreatment Pro	vided	. <u>.</u>	YesNo

6. Characteristics of Wastewater

Parameter Name	Value	Units
		in an

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SECTION 6. ADDITIONAL INFORMATION REQUIRED FOR PERMIT RENEWALS

X Yes No

 $\underline{\qquad}$ Yes \underline{X} No

____Yes _<u>X_</u>No

____Yes ____No

__Yes ___No _X_NA

- 1. Have there been any modifications to the treatment facilities or reuse or disposal system, since the issuance of the current permit? If yes, describe on a separate sheet and attach.
- 2. For limited wet weather discharges, have any modifications been made to the operation, frequency of discharge, or stream hydrology since the original limited wet weather discharge permit or the most recent permit. If yes, describe on a separate sheet and attach.
- 3. Have there been any violations during the last six months? If yes, describe on a separate sheet and attach.
- 4. Have there been any treatment facility interferences due to the discharge of industrial wastewater to the treatment facility during the last six months? If yes, describe on a separate sheet and attach.
- 5. Is there any enforcement action pending against these treatment, reuse, or disposal facilities? If yes, describe on a separate sheet and attach.
- 6. Have all previous permit conditions, including pretreatment requirements, monitoring requirements, and operator attendance been complied with? If no, describe on a separate sheet and attach.
- describe on a separate sheet and attach.
 7. For permit renewals involving a limited wet weather discharge permitted under Rule 62-610.860, F.A.C., list the number of days during each of the last five years that the limited wet weather discharge was used. Also, list the total annual rainfall for each year.

Year	Number of Days Used	P (%)	Annual Rainfall (inches)
1.			
2.			
3.			
4.		· · · · · · · · · · · · · · · · · · ·	
5.			
Total/Average			

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	Number of Days the Dilution	Number of Monthsthe Limits Were Exceeded			
Year	Ratio Was Less Than SDF	CBOD,	TKN		
1.					
2.		r			
3.			· · ·		
4.		· · ·	to an an a		
5.					

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4. * · ·

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SECTION 6

1.1

Item 1 - The system was modified in 1996. An
 additional 1.5 acre, slow rate
 underground drainfield was installed
 on the #15 fairway of the Swiss
 Golf, golf course.

SECTION 7. ADDITIONAL INFORMATION REQUIRED FOR RESIDUALS/SEPTAGE MANAGEMENT FACILITIES

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1. Location of Residuals Treatment Processes

(Describe in relation to the wastewater treatment processes.)

- -

N/A

2. Type and Amount of Waste Treated at this Facility

Туре		Amount (dry tons/day)	Amount (gallons/day)
Residuals		or	
Septage			
Food Establishment Sludge			· .
Portable Toilet Waste		ante de la construcción de la const Construcción de la construcción de Construcción de la construcción de Construcción de la construcción de Construcción de la construcción de	۰.
Holding Tank Waste			
Boat or Marina Waste			
Other (Describe.)		augo de sector de Or	
	Total	or	

Is the	total amount	estimated	or actual?	?	Estimated
					Actual

3. Information on Treatment Facilities Transporting Residuals

8.	DEP	Permit	Number
----	-----	--------	--------

b. Facility Name Number and Street City/State/Zip Code County Telephone

c. Facility Type

Actual

____ Type I ____ Type II ____ Type III

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				44 - 1
		·		* <u>-</u>
	đ.	Amount of Residuals Received From This Facility	dry tons/day or	gpd
		Is this amount estimate or actual?	Estimated Actual	
			· · ·	
	e.,	Describe the treatment provided by this facility before transport.		
		• • • • • • • • • • • • • • • • • • •		
	f.	Parameter Concentrations		
		Total Nitrogen	% dry weight	
		Total Phosphorus	% dry weight	•
	•	Total Potassium	% dry weight	
:		Cadmium	mg/kg dry weight	·
		Copper	mg/kg dry weight	•
		Nickel	mg/kg dry weight	
		Zinc	mg/kg dry weight	
		pH		
		Total Solids	%	
		Other Parameters (Describe.)		
		a second a s		
				·
		Date of Sample	a series and the series of the	setista y antit
		and a second		
4.		escribe the manifest system used for tracking		
	• '	ne ne version de la constante		
		-		
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				•
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SECTION 8. DOCUMENTATION SUBMITTED

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	Atta	ched
General Application Requirements	Yes	No
a. Process Flow Diagram	x	
b. Site Plan	x	
c. Location Map	x	
d. Agricultural Use Plan or Dedicated Site Plan	Х	
e. Capacity Analysis Report	x	
f. Results of Whole Effluent Biological Toxicity Testing	x	
g. Reuse Feasibility Study	N/A	
h. Binding Agreements and Documentation of Controls on Individual Users of Reclaimed Water	x	

z. <i>A</i>	Additional Application Requirements for New Facilities and Modifications to Existing	· · · · ·	- -
F	Tacilities	Yes	No
2	. Preliminary Design Report		
b	. Documentation of Compliance with Antidegradation Requirements		
C.	Public Service Commission Certification Number and Copy of Certificate or Order Number and Copy of Order		
đ	Letter from the Management and Storage of Surface Waters Permitting Agency		•
C.	. Request for Approval of Monitoring Plans for Discharge of Domestic Wastewater to Wetlands		
f.	Concurrent Application for Ground Water Disposal by Underground Injection		
g	. Application for Monitoring Plan Approval		

. Additional Application Requirements for Permit Renewals	Yes	No
a. Operation and Maintenance Performance Report	X	
b. Reclaimed Water of Effluent Analysis Report	X	
c. Technical Evaluation of Need to Revise Local Pretreatment Limits	N/A	
d. Results of Mechanical Integrity Testing	X	

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SECTION 9. CERTIFICATIONS

1. Certifications for Construction of New Facilities or Modifications to Existing Facilities

a. Applicant or Authorized Representative

I certify that the statements made in this application for a permit and all attachments are true, correct, and complete to the best of my knowledge and belief. I agree to retain the design engineer, or another professional engineer registered in Florida, to conduct on-site observation of construction, to prepare a notification of completion of construction, and to review record drawings for adequacy as referenced in Rule 62-620.630, F.A.C. Further, I agree to provide an appropriate operation and maintenance manual for the facilities pursuant to Rule 62-620.630, F.A.C., and to retain a professional engineer registered in Florida to examine (or to prepare or revise, if necessary) the manual. For projects regulated by Chapter 62-610. F.A.C., I agree to provide the additional operation requirements of that Chapter.

(Signature of Applicant or	Authorized Representativ		(Date)
	and the second second		
Name (please type)		Company Name	• •
Title	•	Company Address	
Phone		City/State/Zip Code	

b. Professional Engineer Registered in Florida

I certify that the engineering features of this domestic wastewater project have been (designed) (examined) by me and found to conform to engineering principles applicable to such projects. In my professional judgement, this facility, when properly constructed, operated, and maintained, will comply with all applicable statutes of the State of Florida and rules of the Department.

			د مي <u>دور.</u> خورنو درستو و	. محمد المسجة . محمد المسجة .		, F iller and the
Name (please type)						
Florida Registration Nu	umber			ور الأحداد وقطوف التي		
Company Name			an an an an		÷	α ²
Company Address	· · · · ·	• • •				
City/State/Zip Code					5 - C 5 - C	
Phone Number ()					

(Seal, Signature, Date, and Registration Number)

c. Professional Engineer Registered in Florida

I certify that this firm or individual has been retained by the applicant to prepare a notification of completion of construction, to prepare operation and maintenance manuals, and to review record drawings for adequacy as referenced in Rules 62-620.630, 62-600.717, and 62-600.720, F.A.C.

Name (please type) _		 	
Florida Registration 1	Number		
Company Name			
Company Address			
City/State/Zip Code			
Phone Number ()	 	

(Seal, Signature, Date, and Registation Number)

DEP Form 62-620.910(7) Effective November 29, 1994

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2A-26

2. Certifications for Permit Renewals

a. Applicant or Authorized Representative

I certify that the statements made in this application for a permit and all attachments are true, correct and complete to the best of my knowledge and belief. I agree to operate and maintain these wastewater facilities in such a manner as to comply with the provisions of Chapter 403, F.S., Chapter 62-600, F.A.C., and all other applicable rules of the Department. Further, an appropriate operation and maintenance manual which has been examined by a professional engineer as certified below is available and located at <u>COrporate Office</u> and can be submitted upon request as part of the permit procedure. A copy of the record drawings or other plans (as applicable) showing modifications to existing facilities, as referenced in Rule 62-600.717, F.A.C., is available at the same location. I also understand that a permit if granted by the Department, is transferable only upon Department approval in accordance with Rule 62-620.340, F.A.C., and I will notify the Department in accordance with this rule upon sale or legal transfer of the permitted facilities. In the event of abandonment or inactivation of the facilities, I will notify the Department and ensure that public health and safety are protected as required by

Rule 62-620.610, F.A.Q. (Signature of Applicant or Authorized Representative')

 	 	-	

Name (please type) Raymond Moats	Company Name CHC VII, Ltd.
Title President	Company Address P. O. Box 5252
Phone 941-647-1581	City/State/Zip Code Lakeland, F1 33807

b. Professional Engineer

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I certify that the engineering features of these domestic wastewater facilities have been examined by me and found to conform to engineering principles applicable to such projects. I certify that the operation and maintenance manual for these wastewater facilities has been prepared or examined by me or by individual(s) under my direct supervision and that there is reasonable assurance, in my professional judgement, that the facilities, when properly operated and maintained in accordance with this manual, will comply with all applicable statutes of the State of Florida and rules of the Department.

Name (please type)	Ivan D. King
Florida Registration Nu	
Company Name Kir	ng Engineering Service
Company Address3	3015 Silverado Terrace
City/State/Zip Code M	Vinter Haven, Fl 33884
Phone Number (941) 325-6146

Signature. and Registration.

'If signed by the authorized representative, attach a letter of authorization.

DEP Form 62-620.910(2) Effective November 29, 1994 2A-27

Department of Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.

GENERAL WATER SYSTEM AND	WATER TREATMENT	PLANTINFORMATI	ON FOR THE MONTH/YEAR OF
OCTOBER 1997			
<u>Arer System Information</u> System Name:Swiss G	olf è Tennis		PWS Identification No.: 6535064
System Owner CRF, Inc. Name: P.0. Box 5 Address: P.0. Box 5 City: Lakeland			Telephone No.: (941) 647-1581
City:Lakeland			State: FL Zip Code: 33807-525
System Type: X community; I non-tr No. of Service Connections at End of	ansient non-community;	o non-community; C Total Population	I consecutive
Vater Treatment Plant Information			
Treatment Plant Name: <u>Swi</u> & Go Address: <u>Old Luce</u>	If & Terris		Telephone No.: (941) 647-1581
City: Winterhou	KA		State: Zip Code:
Permitted Maximum Day Capacity of Plant Category and Class per Rule 6 Lead/Chief Plant Operator.		gpd	
	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s).Worked
Robert A. Byrd		C	14
Other Certified Plant Operators (attac		ecessary):	
Name	Cartificate Number	*** Class (a, 8; C, or D);**	Day(s)/Shift(s):Worked:
		,	
			· · · · · · · · · · · · · · · · · · ·
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STATEMENT BY LEAD/CHIEF W	ang terselation and the strength and the strength of the stren	an german a being being being an an antiger an	and a construction of the second structure and a second structure and a second structure and a second structure

October 1997

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my incidence and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- •records of amounts of chemicals used and chemical feed rates; and
- •if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

115/97

Signature and Date

Name and Cartificate Number (please type or print)

sonthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water

Systems that Treat Their Water System PWS Identification Number: Treatment Plant Name:

5. F

6535064 Swiss Golf & Tennis

114 SUMMARY OF DAILY AWATER IREATMENT DATA FOR THE MONTH YEAR OF Berober 1997

. . .

Type of Residual Disinfectant Maintained in Distribution System Served by Plant: X free chlorine;

combined chlorine (chloramine); ⊂ chlorine dioxide

Jummany of Daily Water Treatment Data for Month:

	1.			Residual	Disinfectant in Distributio		
Day of. the Month	Hours Plant in Operation:	Quantity of Finished Water Produced by Plant	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Lowest Residual. Disin(ectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Totat Coliform Samoling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency of Abnormal Operating Conditions
1		434	3,0	1.5			
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<u>-</u> 5		626	3.0	1.5]
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8		452	3,0	15			ļ
3		0.0	2			<u> </u>	
10		323	3.0	1.5			<u> </u>
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Department of

FLORIDA		Environ	mental Pro	tection	
				nat Use Ground Water a Treat Their Water	nd
INSTRUCTIONS: See Page 4	•				
GENERALWATERSYST		TER TREATMENT	PLANT INFORMATI	ON FOR THE MONTHIYEAR OF	
City:L	RF, In 2,0, Box ake(and a non-trans at End of Mo	C 5252	a non-community. a	PWS Identification No.: <u>65350</u> Telephone No.: <u>(941) 647-14</u> State: <u>FJ</u> Zip Code: <u>33807-</u> consecutive Served at End of Month: <u>870</u>	581 -5252
• <u>Treatment Plant</u> Name: So Address:	Wiss Go O Interlization Interlization	ant: 657,000	Park Koad	Telephone No.: (941) 647-15 State: <u>F1</u> Zip Code: <u>33811</u>	• •
Name	· . · · ·	* Certificate Number.	Class (A, B, C, or D)	Day(s)/Shift(s).Worked	
Rohert A.B.		007483	C	12	
1		Cartificata Number:	Class (a, 8; C, or D):	-	
IL STATEMENT BY LEAD NOVEMBE	(GHI==11/A) 2 199	TER TREATMENT P 7	LANT OPERATOR I	FOR THE MONTH/YEAR OF	

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

•records of amounts of chemicals used and chemical feed rates; and

•if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

2/2/97

Signature and Date

Robert	Α.	Byrd	DW007483	C
Jame and C	artifica	te Numini	er (niesse type or arint)	,

Name and zte Number (please type or print) Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water

Systems that Treat Their Water System PWS Identification Number Treatment Plant Name: _

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6535064 95 f & TENNIS

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ILSUMMARY OF DAILY WATER REATMENT DATA FOR THE MONTHIYEAR OF NOVEMBER

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: X free chlorine; combined chlorine (chloramine); chlorine dioxide

· Summary of Daily Water Treatment Data for Month:

			Lowest Residual	Residual	Disinlectant in Distributio	on System	
Oay of, the Month	Plant in	Quantity of Finished Water	Concentration at Concentration at Entry to Distribution System (mg/L)	Lowest Residual. Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Samoling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported - Emergency or Abnormal Operating - Conditions
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2						1	
3		520,000	3,0	1.5			1
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10		660,000	3.0	1.5			}
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12		509,000	3.0	1,5			
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Department of Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

NSTRUCTIONS:	See	Page	4.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANTINFORMA	ATION FOR THE WONTH YEAR OF
DECEMBER 1997	
Water System Information • System Name: Swiss Golf & Tennis	PWS Identification No.: 6535064
	Telephone No.: (941) 647-1581
Address: P.O. 100X 5252 City: Lakeland	State: FJ Zip Code: 33807-5252
- Sustan Tupo: V community d non-transient non-community d non-community	r, a consecutive ion Served at End of Month: 1870
Water Treatment Plant Information	
• Treatment Plant Swiss Golf & Tennis Name: Old Luceme Park Road	
City: Winterhaven	
Permitted Maximum Day Capacity of Plant <u>657.000</u> gpd	
Plant Category and Class per Rule 62-699.310(4), FA.C.:	
Lead/Chief Plant Operator:	· · · · · · · · · · · · · · · · · · ·
Name Class (A. B. C. or.D)). Day(5)/Shifl(5).Worked
Robert A. Byrd 007483 C	14
 Other Certified Plant Overators (attach additional sheets if necessary): 	·
Name:)

TATEMENTBY LEAD/GHIEF WATER TREATMENTPLANT OPERATOR FOR THE MONTH/YEAR OF DECEMBER 1997

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

•records of amounts of chemicals used and chemical feed rates; and

• if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them

available for review upon request. 012/7/98 Signature and Date

Number (please type or print)

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water

Systems that Treat Their Water System PWS Identification Number. _

Treatment Plant Name: ____

6535064 & Tennis

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ITALE TIM MARTAOLEDAILAYA TREATMENT DATA FOR THE MONTHIVEAR OF DECEMBER 1997 13.

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant X free chlorine;

Summary of Daily Water Treatment Data for Month:

				Residual Disinfectant in Distribution System					
Day of. the Month	Plant in Operation	Quantity of Finished Water	Concentration at Entry to Distribution System (mg/L)	Lowest Residual: Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Tetat Coliforn Samoling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions		
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8		558,000	3.0	1.8		 			
9		707 000	3.0						
10		327,000	5.0	1.5			·		
11		21/ 000	3.0	1.5			· · ·		
12		326,000	3.0	1.5					
14			1			<u> </u>			
14		425,000	3.0	1.5		1			
13		720,000	3.0	1.5	1	1	1		
17		375.000	3.0	1.8	3	1 10			
18		5/5,000	P.0	1.0		1.8) · · · · · · · · · · · · · · · · · · ·		
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Department of Environmental Protection

Monthly Operation Report	for Public Wat	ter Systems th	hat Use G	round Wat	er and
for Consecutive					
<pre>contract of the contract of the contract</pre>					
NSTRUCTIONS: See Page 4.					-
GENERALWATER SYSTEM AND W		ELANTINEORMATI		NONTINE	
JANUARY 1998	<u> </u>				
	······································				
Nater System Information • System Name:Swiss_C	GOIF & TENNI	S	PWS Identific	alion No.: 65	35064
a System Owner					
Name: CRF, File Address: P.0, Baro 52	· · · · · · · · · · · · · · · · · · ·		Telephone No	n: (941)64-	/-/>0/
Address: <u>P.O. Bero 52</u>	.52		Stata: CI	Zip Code: 330	807-5752
• System Type: Community; a non-tran	sient non-community	a non-community: C	I consecutive		
•No. of Service Connections at End of M	Ionth: 950	Total Population	Served at En	d of Month: <u>18</u>	370
Water Treatment Plant Information					
a Treatment Plant				1010)1	in SPI
Name: Swiss Gol Address: Old Luccme	+ & TENNIS	······	Telephone No	D.: <u>(997)</u>	91-1301
Address: <u>010 Luceme</u> City: <u>Winterhove</u>	, PATE ROAD	····	Staté: E/	D.: (941)6	811
•Permitted Maximum Day Capacity of Pl	ant: 657,000	gpd	0(atc. <u></u>		
•Plant Category and Class per Rule 62-	599.310(4), F.A.C.: _	5C			·
Lead/Chief Plant Operator.	· · · · · · · · · · · · · · · · · · ·	<u> </u>			
	· ··Certificate Number···	Class (A, B, C, or D).		iy(s)/Shill(s).Worked	<u>i</u>
Kobert Ar Byrd	007483		/	3	
•Other Certified Plant Coerators (attach				() (C) (C) (C) (C) (C)	(*
Name	(): Caruficate Number	/// Class (a, 8; C, oc U)?//	12	y(s)/Shiil(s):Worked	17
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I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional sperations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

•records of amounts of chemicals used and chemical feed rates; and

•if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review request.

13/98

Signature and Date

BYRD, DW007483C Name and Certificate Number (please type or print)

			a :
8			
Monthly Operation Report for Public	Water Systems that Use Ground Water and	for Consecutive Public Water	
Systems that Treat Their Water System PWS Identification Number	6535064		
Treatment Plant Name:	SWISS GOLF 9 TRANS		/ *
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IL SUMMARY OF DAILY AWATER

IANUMAY 1998

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Departme	nt of
Environmental	Protection

for Consecut	ve Public Water S	Systems that 7	Freat Their Water	
NSTRUCTIONS: See Page 4.				an an ann an
GENERALWATER SYSTEMAN FEBRUARY 1998	D WATER TREATMENT	PLANT INFORMATI		Earof
Water System Information • System Name: Swi	85 Golf & Tenni	Ś	PWS Identification No.:	6535064
• <u>Svstem Owner</u> Name: CRF Address: P.O. City: LMC	Inc BOX 5252		Telephone No.: <u>(94/)</u>	647-1581
City: • System Type: & community;	-transient non-community	🗆 a ana-community C	1 consecutive	· •
Water Treatment Plant Information • Treatment Plant Name:	S Golf & Ten Lucen - PARE Ro RHANN of Plant 657,000 e 62-699.310(4), F.A.C.:	gpd	Telephone No.: <u>(941</u> State: <u>FL</u> Zip Code:	
Name	" Certificate Number."	Class (A, B, C, or D).	·· Day(s)/Shift(s).V	Vorked
Robert A. Byrd	007483	C	12	-
Other Cartified Plant Opérators (al Name:			े करते Day(s)/Shiil(s)ों/	/orked:
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IIS STATEMENTEY, LEADICHIE	WATER TREATMENT P	LANT OPERATOR F	OR THE MONTH/YEAR	OF

Monthly Operation Report for Public Water Systems that Use Ground Water and

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- •records of amounts of chemicals used and chemical feed rates; and
- •if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them

available for review upon-request. 10/98 3

Signature and Date

Name and Certificate Number (please type or print)

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water

Systems that Treat Their Water System PWS Identification Number. Treatment Plant Name:

6535064 GOG TEMIS SWISS đ

A. S. T. 1 23.

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ULS SUMMARY OF DAILY AWATER IREATMENT DATA FOR THE MONTHINEAR OF FEBRO DRY 1498

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: Afree chlorine; I combined chlorine (chloramine); I chlorine dioxide

· Summary of Daily Water Treatment Data for Month:

				Residual	on System	سسة بالمحادث م	- 8	
Day of. the Month	Plant in.	Cuantity of Finished Water	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Lowest Residual. Disinfectant Concentration at Remote Point (mgrL)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Samoling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal, Operating Conditions	
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9		442,000	3.0	1.5			and the second s	
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14							199 8 .	••
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16		567,000	3.0	1.5	<u> </u>			
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18		291,000	3,0	1.5	ļ	N		•
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20		346,000	3.0	1.5	1		<u> </u>	
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22 23	<u> </u>	419,000	3,0	1.5	1	<u> </u>		
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25		323,000	3.0	1.5	3	1.5	· · · · · · · ·	
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Enviroi	nmental	Protection

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Monthly Operation R for Consec	eport for Public Wa utive Public Water S	•		Water	A PARTY A	ak tang tang tan Ang tang tang tang ta
NSTRUCTIONS: See Page 4.					e sente then the terms with the sente	ر ایی و ۲۹ ۱۹۹۱ - ۲۹
GENERALWATER SYSTEM MARCH 199		PLANT INFORMATI	ON FOR THE	NONTHIYE	AR OF	
	Siss Golf & Tem	is	PWS Identifica	ition No.: <u>(</u>	535064	
	RF. 0. Box 5252	<u> </u>	Telephone No.	: (941)6	47-1581	
City:LA •System Type: 🗙 community; 🗆	ICELAND	D non-community; C	State: <u>F1</u> consecutive	,		••••••••••••••••••••••••••••••••••••••
 No. of Service Connections at <u>Mater Treatment Plant Information</u> 	End of Month: <u>990</u>	Total Population	Served at End	. 1		
• <u>Treatment Plant</u> Name: <u>Su</u> Address: <u>01</u>	JISS GOLF GTENI d Lucerne Pork R	nis add	Telephone No			
City: • Permitted Maximum Day Capa	internoven		State: <u>F</u>	Zip Code: _	33811	•
Plant Category and Class per f Lead/Chief Plant Operator:						
Namo	······································	Class (A, B, C, or D)		(s)/Shill(s).Wo	rked	
•Other Certified Plant Operators		ecessary):	/3) 	in the state of th	-
Namo	Cartificate Number	" Class (a. 8: C. or D);"	🗧 🦗 🤐 🖉 Oay	(s)/Shift(s):Wo	rked:	
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TTATEMENT BY LEADICHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTHIVEAR OF MAROH 1998

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my 3 knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- •records of amounts of chemicals used and chemical feed rates; and
- •if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them

available for review upon request. 1/38

Signature and Date

Kobert A Byrd, DW0874831 Name and Certificate Number (please type or print)

· . . .

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water	Jonthly	Operation Report fe	or Public Water Syster	ns that Use Ground Wa	iter and for Consecuti	ve Public Water
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 Systems that Treat Their Water System PWS Identification Number:

Treatment Plant Name: _

6535064 SWISS GOLF FTENNIS

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Sec. Sec.

3 P. R. H. 1

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ILL SUMMARY OF DAILY AWATER REATMENT DATA FOR THE MONTHIVEAR OF 1998 MARCH

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant; free chlorine; · Summary of Daily Water Treatment Data for Month:

CALT BOARDS OF LOSS OF

				Residual	Disinfectant in Distributio	on System		ان معنی کرد. این معنی کرد ا
y of. he מחנודי	Plant in	Quantity of Finished Water	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Lowest Residual: Disinfectant Concentration at Remote Point (mg/L)	Vvnere Residual	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal ar Operating Conditions	
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ō		269,000	3.0	1.5				1975)7
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CENERAL PARTICIPATION FOR THE MONTH VEAROR A PEIL 1998 Nater System Information Swits (colf ξ T chils PWS Identification No.: 6535064 Switem Owner C.R.F. Telephone No.: $(94)(641-1581)$ Name: C.R.F. Telephone No.: $(94)(641-1581)$ Address: P.O. ASX 5252 City: Lakeland State: $F/$ Zip Code: 33807 System Type: A community; a non-transient non-community; a consecutive Non-transient non-community; a non-community; a consecutive Name: System Type: A community; a non-transient non-community; a consecutive Name: System Type: A community; a non-transient non-community; a consecutive Name: System Type: A community; a non-transient non-community; a consecutive Name: System Type: A community; a non-transient non-community; a consecutive Name: System Type: A community; a non-transient non-community; a consecutive Name: System Type: A community; a non-transient non-community; a consecutive <td colspa<="" th=""><th>FLORIDA</th><th>Department of Environmental Pro</th><th></th><th></th></td>	<th>FLORIDA</th> <th>Department of Environmental Pro</th> <th></th> <th></th>	FLORIDA	Department of Environmental Pro		
CENERAL VALER SISTER AND WATER SIGEANMENT OF ANT INFORMATION FOR THE MONTHWEAR OF A PLIC 1998 Mater System Information System Name: Swiss (colf ξ T chils PWS Identification No.: 6535064 System Name: C, R. F. Name: R. F. Name: R. F. Address: P.O. As x 5252 City: Lokeland System Type: A community; a non-transient non-community; a consecutive No. of Service Connections at End of Month: 950 Total Population Served at End of Month: 1870 Water Treatment Plant Information Treatment Plant Name: Swiss Golf ξ Tenn'S Telephone No.: $(G44)$ 647-1581 Address: Gld Luceme Part Road City: Gld Luceme Part Road City: Glass of Colf ξ Tenn'S Telephone No.: $(G44)$ 647-1581 Address: Gld Luceme Part Road City: Glass of Colf ξ Tenn'S Telephone No.: $(G44)$ 647-1581 Address: Gld Luceme Part Road City: Glass of Colf ξ Tenn'S Telephone No.: $(G44)$ 647-1581 Address: Colf Plant Community, FAC: 5C Plant Category and Class per Rule 62-399.310(4), FAC: 5C Lead/Chief Plant Operator: Class (A, B, C, or D). Day(s)/Shil((s),Worked. Faire Catified Plant Operators (attach additional sheets if necessary):				er and	
A HP/L 1998 Nater System Information *System Name: Swiss Golf & Tenn's PWS Identification No.: 6535064 *System Owner C.R.F. Telephone No.: (941) 641-1581 Address: P.O. Have 5252 State: F. Telephone No.: (941) 641-1581 Address: P.O. Have 5252 State: F. Telephone No.: (941) 641-1581 Address: Inteland State: F. Zip Code: 33807 *System Type: Community: O non-transient non-community: O non-community: Consecutive *System Type: Community: O non-transient non-community: O non-community: Consecutive *System Treatment Plant Information Total Population Served at End of Month: 1870 Water Treatment Plant Suisso Golf & Tenn's Telephone No.: G44) 647-1581 Address: Old Luceme Fort Food State: P1 Zip Code: 33811 Permitted Maximum Day Capacity of Plant 657.000 gpd State: P1 Zip Code: 33811 Plant Category and Class per Rule 62-659.310(4), FA.C.: 5C Day(s)/Shil(s)	INSTRUCTIONS: See Page 4.			al Brefg⊉te Arrister Setter	
System Name: Swiss (co)f (7 chis) PWS Identification No.: (65 35 00 7 •System Owner Name: CiR.F. Telephone No.: (941)(641-1581 Address: P.O. How 5252 State: EL Zip Code: 33807 •System Type: A community: a non-transient non-community: a consecutive State: EL Zip Code: 33807 •System Type: A community: a non-transient non-community: a consecutive No. of Service Connections at End of Month: 950 •No. of Service Connections at End of Month: 950 Total Population Served at End of Month: 1870 •Water Treatment Plant Information •Treatment Plant State: 100 (447-1581) •Name: Suif SS 60/f & Tenn's Telephone No.: (941) (447-1581) •Name: Suif SS 60/f & Tenn's Telephone No.: (941) (447-1581) •Name: Suif SS 60/f & Tenn's Telephone No.: (941) (447-1581) •Name: Suif SS 50 60/f & Tenn's Telephone No.: (941) (447-1581) •Name: Suif SS 50 60/f & Tenn's Telephone No.: (941) (447-1581) •Other Category and Class per Rule 62-659.310(4), FA.C.: 5C State: F1 Zip Code: 33811 •Plant Category and Class per Rule 62-659.310(4), FA.C.: 5C Day(s)/Shift(s), Worked •Cother Cartified Plant Operator: Oo7483 C 13 •Other Car		ER TREATMENT PLANT INFORMATI	ON FOR THE MONTH/YEAR	0=	
Name: C,K.L. Telephone No.: (941) (647-1581 Address: P.O. Aby 5252 State: F. Zip Code: 33807 City: Lokeland State: F. Zip Code: 33807 • System Type: A community: 0 non-transient non-community: 0 consecutive No. of Service Connections at End of Month: 950 Total Population Served at End of Month: 1870 • No. of Service Connections at End of Month: 950 Total Population Served at End of Month: 1870 • Treatment Plant Name: Suites Golf & Tennis Telephone No.: (941) (447-1581 • Address: Old Luceme Port Pond State: F1 Zip Code: 33811 • Permitted Maximum Day Capacity of Plant: 657,000 gpd • Plant Category and Class per Rule 62-699.310(4), F.A.C.: 5C • Lead/Chief Plant Operator: Name Class (A, B, C, or.D). Day(s)/Shift(s).Worked. • Other Certified Plant Operators (attach additional sheets if necessary): • Other Certified Plant Operators (attach additional sheets if necessary): • Other Certified Plant Operators (attach additional sheets if necessary):					
• System Type: Community: a non-transient non-community: a non-community: a consecutive • No. of Service Connections at End of Month: <u>950</u> Total Population Served at End of Month: <u>1870</u> <u>Water Treatment Plant Information</u> • <u>Treatment Plant Information</u> • <u>Address: <u>Address: Address: Address: Address: Address: Address: Address: Address: Address: Address: <u>Address: Address: Address: State: P1</u> Zip Code: <u>33811</u> • Permitted Maximum Day Capacity of Plant <u>657, DUD</u> gpd • Plant Category and Class per Rule 62-699.310(4), F.A.C.: <u>5C</u> • Lead/Chief Plant Operator: <u>Class (A, B, C, or.D)</u> Day(s)/Shift(s).Worked. • <u>Tobest A. Bornd</u> <u>007483</u> <u>C</u> <u>13</u> • Other Certified Plant Operators (attach additional sheets if necessary):</u></u>	Name: (, K, F. Address: P.O, H-JY	5252	,		
• Treatment Plant Swiss Golf & Tean's Telephone No.: (G41) (47-158) Address: Old Luceme Port Read State: Maintechare City: Wintechare State: Maintechare • Permitted Maximum Day Capacity of Plant: 657, 000 gpd • Plant Category and Class per Rule 62-699.310(4), F.A.C.: 5C • Lead/Chief Plant Operator: Class (A, B, C, or D): Day(s)/Shift(s).Worked. • Other Cartified Plant Operators (attach additional sheets if necessary): 13	 System Type: Community; a non-transie 	ent non-community; a non-	I consecutive		
Permitted Maximum Day Capacity of Plant: <u>657,000</u> gpd Plant Category and Class per Rule 62-699.310(4), F.A.C.: <u>5C</u> Lead/Chief Plant Operator: Name : Certificate Number: Class (A, B, C, or D). Day(s)/Shift(s).Worked Robert A. Byrd 007483 C 13 Other Cartified Plant Operators (attach additional sheets if necessary):					
Name Certificate Number Class (A, B, C, or. D): Day(s)/Shift(s).Worked 9 9 007483 0 • Other Certified Plant Operators (attach additional sheets if necessary): 13	Permitted Maximum Day Capacity of Plan Plant Category and Class per Rule 62-69	t 657,000 gpd	State: <u>7</u> Zip Code: <u>33</u>	<u>811 </u>	
9Cobert A. Byrd 007483 C 13 •Other Cartified Plant Operators (attach additional sheets if necessary):		Class (A, B, C, or D)	··· Day(s)/Shift(s).Worked		
	Robert A. Byrd	007483 C	/3		
Name: "The Cartificate Number: A Class (a, B; C, or D)? A New Class (a, B; C, or D)?					
	Name:	Cartificate Number: K Class (a. B) C, or D) :-			
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				•	
II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF A PLIL 1998	ID STATEMENT BY LEADICHIER WATE	R TREATMENT PLANT OPERATOR F	OR THE MONTH/YEAR OF		

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my snowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or-visited the plant during the month indicated above:

•records of amounts of chemicals used and chemical feed rates; and

•if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them

available for review upon request. 5/12/48

Signature and Date

Name and Cartificate Number (please type or print)

WOOT

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umen	it Plant Na	ime:	Swiss .	Golf	emis	· · · · · · · · · · · · · · · · · · ·		-
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SUM	MARYO	DAILY WATER TREA	TMENT DATA FO	ORTHEMONT	MELECE AP	RIL 1998		I .
be of	Residual	Disinfectant Maintainec	l in Distribution Sv			the second s		r. HTC of
coma	inea chior	ine (chioramine): a chi	Cane dioxide					***** <u>\$</u> ****
nmar I	ry or Ually	Water Treatment Data	for Month:	1			A state of	and the second sec
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ay of. he onlh	Plant in~	Quantity of Finished Water Standard by Plant * (gallons) ***	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Lowest Residual. Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Samoling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions	ा संयुक्त इ.स. १९९४ स.स.स. इ.स.स.स. इ.स.स.स.
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Department of Environmental Protection

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NSTRUCTIONS: Se	-						• * • •
		VATER TREATMENT	PLANTINEORMA	TIONFORT	Hemonthye	arof	
MAY 19	90			a sector of a close			
Nater System Inform	nation ~	0 10			/		\sim
• System Name:	JULAS	GolfeTennis	5	_ PWS Iden	tification No.: 6	220067	- 1944 - 1957 - 1957 - 1957 - 1957 - 1957 - 1957 - 1957 - 1957 - 1957 - 1957 - 1957 - 1957 - 1957 - 1957 - 1957 - 1957
 System Owner 	C.R.F.			Talaabaaa	tification No.: <u>(</u> : No.: <u>(941)</u> (47-1581	
Name:	P.U. BUX	$\overline{\mathcal{O}}$			NO (747)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Address: City:	Lakelans	502	····	State: P	Zip Code: _	33807	•••
System Type: A col	mmunity: O non-tra	nsient non-community	a non-community	- 🗆 consecuti	NO		
No. of Service Con	nections at End of	Month: <u>950</u>	Total Population	on Served at	End of Month:	1870	-
Water Treatment Pla							•
- Treatmost Giant						· · · · · · · · · · · ·	an dia mandri di secondo di second
Name:	Swissi	solf & Tenni	5	Telephone	No: (941) 6	47-1581	· · · · · · · · · · · · · · · · · · ·
Address:	Old Luce	me PARE Road			-		
City:	Wintern			State: Fr	Zip Code:	3381/	• •
			and				
·Permitted Maximur	n Day Capacity of I	Plant 657,000	gpd				
 Plant Category and 	i Class per Rule 62	-699.310(4), F.A.C.:	50				
Plant Category and Lead/Chief Plant C	I Class per Rule 62 Iperator:	699.310(4), F.A.C.: _	50				
Plant Category and Lead/Chief Plant C N	I Class per Rule 62 perator: amo	-699.310(4), F_A_C.:	Class (A. B. C. or D)	Day(s)/Shi((s).Wo	rked	
Plant Category and Lead/Chief Plant C N N Reburt	i Class per Rule 62 operator: lamo A Byrd	-699.310(4), F_A_C.: ** ** Certificate Number.** 00748.3	5C Class (A. B. C. or D C)	Day(s)/Shifl(s).Wo	rked	
Plant Category and Lead/Chief Plant C N Robert Other Cartified Plant	I Class per Rule 62 perator: amo A Byrd nt Operators (attact	-699.310(4), F_A_C.: ·· Certificate Number··· <i>DD748.3</i> h additional sheets if n	Class (A, B, C, or D Class (A, B, C, or D ecessary):		/3		
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Plant Category and Lead/Chief Plant C N Robert Other Certified Plant	I Class per Rule 62 perator: amo A Byrd nt Operators (attact	-699.310(4), F_A_C.: ·· Certificate Number··· <i>DD748.3</i> h additional sheets if n	Class (A, B, C, or D Class (A, B, C, or D ecessary):		/3		
Plant Category and Lead/Chief Plant C N Robert Other Certified Plant	I Class per Rule 62 perator: amo A Byrd nt Operators (attact	-699.310(4), F_A_C.: ·· Certificate Number··· <i>DD748.3</i> h additional sheets if n	Class (A, B, C, or D Class (A, B, C, or D ecessary):		/3		
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Plant Category and Lead/Chief Plant C N Robert Other Certified Plant	I Class per Rule 62 perator: amo A Byrd nt Operators (attact	-699.310(4), F_A_C.: ·· Certificate Number··· <i>DD748.3</i> h additional sheets if n	Class (A, B, C, or D Class (A, B, C, or D ecessary):		/3	rked:	
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Plant Category and Lead/Chief Plant C N Robert Other Cartified Plant	I Class per Rule 62 perator: amo A Byrd nt Operators (attact	-699.310(4), F_A_C.: ·· Certificate Number··· <i>DD748.3</i> h additional sheets if n	Class (A, B, C, or D Class (A, B, C, or D ecessary):		/3	rked:	
Plant Category and Lead/Chief Plant C <u>Robert</u> Other Cartified Plant	I Class per Rule 62 perator: amo A Byrd nt Operators (attact	-699.310(4), F_A_C.: ·· Certificate Number··· <i>DD748.3</i> h additional sheets if n	Class (A, B, C, or D Class (A, B, C, or D ecessary):		/3	rked:	

MAY 1998 I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional:

operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

•records of amounts of chemicals used and chemical feed rates; and

•if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them,

available for review upon request. 6/9/98

Signature and Date

Byrd DW007483C

Name and Cartificate Number (please type or print)

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water

Systems that Treat Their Water System PWS Identification Number Treatment Plant Name:

3 .064 5 * ICANS Gril

C. CayO & S.

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UL SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTHIVEAR OF

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: X free chlorine; 2 combined chlorine (chloramine); 0 chlorine dioxide

A STATE AND A STAT

· Summary of Daily Water Treatment Data for Month:

n en	Reported	n System	Disinfectant in: Distributio	Residual	· I munet President		**	
.6.	Emergency or Abnormal Operating Conditions	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Samoling Points	Lowest Residual. Disinfectant Concentration at Remote Point (mg/L)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Quantity of Finished Water	Plant in.	ay of. Ihe IonUtr
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FLORIDA		Department o Imental Pro		
Monthly Operation	Report for Public Wa	ater Systems t	hat Use Ground W	ater and
for Cons	ecutive Public Water	Systems that	Treat Their Water	
INSTRUCTIONS: See Page	4.			alapati di tang kalang Series
DE 1998	ten and water treatment	PLANT INFORMAT	on for the monthly e	AROE
•	Swiss Golf & To	ennis	PWS Identification No.:	535064
• <u>Svstem Owner</u> Name: Address:	C. R. F. P.O. Bux 5252		Telephone No.: (941)64	<u>e7-(53)</u>
City: •System Type: 🗙 community	LALAT D ; a non-transient non-community s at End of Month: 950	r; © non-community; C Total Population	State: <u>F1</u> Zip Code: _ consecutive Served at End of Month: _	
Water Treatment Plant Infor			Telephone No.: (941)	الم
City: • Permitted Maximum Day C	Winter hown apacity of Plant: 657,000 per Rule 62-699.310(4), F.A.C.:	gpd	State: FL Zip Code: _	33814
Lead/Chief Plant Operator: Name	" Certificato Number"	1. ct. (4. 7. 0 0)		
Robert A. Bu		Class (A, B, C, or D).	Day(s)/Shift(s).Wo 73	rxed
	itors (attach additional sheets if r		· · · · · · · · · · · · · · · · · · ·	
Namo:**	Cartificate Number	" Class (a. 8; C. or D)	🗧 🐭 📖 🛛 Day(s)/Shiil(s):Wor	xed:
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	22447 10-1 6V7 11 6-2/2711 4-1 1/m1 11 2012 1212 1212 12 12 12 12 12 12 12 12 12			
UNE 19	ICHIEF WATER TREATMENT F	LANT OPERATOR F	OR THE MONTH/YEAR O	

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my snowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- •records of amounts of chemicals used and chemical feed rates; and
- •if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them

available for review upon request. 7/13/98 Signature and Date

Kobert A. Byrd, DW007483C Name and Certificate Number (please type or print)

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	y Operatio	in Report for Public W	later Systems tha	t Use Ground)	Natur and for Coor	anutive Dubl	•	- h.
Syste	ms that Ti	reat Their Water	15250	bul	mater and for cont		Water	
System Troatme	PWS Iden	lification Number: ame:	63330	610 0 57				
reaune		ame,		to the series	112			
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THE T	MMARYO	EDAILYANATERITRE				VE IDES		ฮ
							3	
⊡ype o ⊐ com	r Residual hined chio	Disinfectant Maintained rine (chloramine); a chl	d in Distribution Sy	stem Served by	Plant: Å free chlori	ne;		
Summa	ary of Daily	Water Treatment Data	ionne dioxice					angen and an
					•			7
		х.	Lowest Residual	Residual	Disinfectant in Distributi	on System		
Day of.	Hours.	Quantity of Finished Water	Disinfectant.	Lowest Residual.	Number of Instances	Lowest Residual	Reported	
lhe · Monitr	Plant in~~	Produced by Plant	Concentration at Entry to Oistribution	Disinfectant	Where Residual Oisinfectant	Disinfectant	Abnormal	
		A Company of the second s	System (mg/L)	Concentration at: Remote Point	Measurements Taken	Concentration at Total Coliform	Operating Conditions	•
				(mg/L)	at Total Coliform	Sampling Points	Conditions	And Barry
1		725,000	3.0	1. 0	Samoling Points	(mg/L)		
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3		821.000	3.0	1.5			4	1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.
9								NGREE STREES
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17		637,000	3.0	1.4				
18							مد تر مود الر	
19		422,000	3.3	1.5				
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24		644,000	2.6	1.0			9	
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#### Department of Environmental Protection

#### Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

#### INSTRUCTIONS: See Page 4.

UGENERALEWATERSYSTEMANDW JULY 1998	ATER TREATMENT	PLANTINFORMATI	ONFOR THE MONTHIVEAR OF
Water System Information         • System Name:          • System Owner          Name:          Address:			PWS Identification No.: 6535064 Telephone No.: (941)647-1581
City: Lakelard • System Type: A community; a non-tran • No. of Service Connections at End of N	isient non-community; Ionth: _950	a non-community, a Total Population	State: <u>FL</u> Zip Code: <u>33867</u> consecutive Served at End of Month: <u>1870</u>
Water Treatment Plant Information         • Treatment Plant         Name:       Swiss Go         Address:       O G Lucert         City:       Winter Neurophics	If e Pork Road	······	Telephone No.: (941) 647-158/ State: FL_ Zip Code: 33811
Permitted Maximum Day Capacity of P Plant Category and Class per Rule 62- Lead/Chief Plant Operator: Name	fant: <u>657,000</u> 699.310(4), F.A.C.: <u></u>	gpd 5C	Day(s)/Shift(s).Worked
•Other Certified Plant Operators (attach	087483	C	14
Nama:**			Contraction Cay(s)/Shiil(s):Worked:

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- records of amounts of chemicals used and chemical feed rates; and
- •if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

8/12/98

Signature and Date

Pobert A. Byrd, DW067483C Name and Certificate Number (please type or print)

(IEP Form 02-555,900(0) Nective December 10, 1995 Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water

Systems that treat their Water System PWS Identification Number	6535064	
Trealment Plant Name:	Swiss Golf	

#### INSTIMULTING FULLAMENTERINE INFORMATION INTOXICATION /////

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: A free chlorine; Combined chlorine (chloramine); C chlorine dioxide • Summary of Daily Water Treatment Data for Month:

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				Residual	Disinlectant in Distributio	on System	
Day of. the Month	Plant in-	Quantity of Finished Water	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Lowest Residual. Disinfectant Concentration at Remote Point (mg/L)	/ Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliforn Samoling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating - Conditions
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3		454,000	3.0	18			
4							
5						· · · · · · · · · · · · · · · · · · ·	2.
5		754,000	3.0	1.5			
7							
3		540,000	3.0	1.5			
3							
10		283,000	3.0	1.5			
11							· ·
12						 	
13		750,000	3.0	1.5			
14		202	2				
15	·····	392,000	3.0	1.5	· · · · · · · · · · · · · · · · · · ·		
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;7		277,000	3.0	/. 3			· · · · · · · · · · · · · · · · · · ·
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29		394,000	3.0	1,3			
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31	1	360,000	3.0	1.5			
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#### Department of Environmental Protection

Monthly Operation Report for Public	: Water Systems	that Use Ground	Water and
for Consecutive Public Wa	ter Systems that	t Treat Their Wate	36

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NSTRUCTIONS:	See	Page 4.	

GENERALWATE	RSYSTEMANDW	ATER TREATMENT	PLANTINEORWATI	ON FOR THE MONTH	NYEAR OF
AUGUST	- 1998				
Water System Inform	ation Swiss	Golf		PWS Identification No	6535064
• <u>Svstem Owner</u> Name: Address:	P.O. BOX	5252	- <u></u>	Telephone No.: (94	) 647-1581
				State: FL Zip Cod	e: <u>33807</u>
City: •System Type: <b>A</b> con •No. of Service Conr	nmunity; <pre>onmunity; <pre>onmunity; </pre> non-transitions at End of N</pre>	sient non-community; lonth:50	; □ non-community; □ Total Population	I consecutive Served at End of Mon	th: 1870
Water Treatment Plan • Treatment Plant Name: Address: City:		0/f	0.49	Telephone No.: (94	) 647-1581
Address:	WINTERHA	ver		State: FL Zip Coo	le: <u>33811</u>
<ul> <li>Permitted Maximum</li> </ul>	Day Capacity of Plant	ant <u>477,000</u>	gpd		- <b></b>
Plant Category and     Lead/Chief Plant Op		599.310(4), F.A.C.:	50	· · · · · · · · · · · · · · · · · · ·	······
the second se		· Certificate Number.	Class (A. B. C. or.D).	Day(s)/Shift(s	Worked.
the second s	L. Burd	007483	C	13	
•Other Cartified Plan			ecessary):		· <u> </u>
Na	ime	Cartificate Number		Day(s)/Shift(s	Worked:
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1000 1000	1	NAME OF BUILDING BOARD APPROPRIATE	To BI The same 10 The service The Shall bear	FOR \$3. 1844 912 18 1. 4- 15-17 1. 8-176 - 1 8 1. 4-1	States All Contents of the Merid of Table

II. STATEMENT BY LEADICHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTHYEAR OF A UGUST 1998

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- •records of amounts of chemicals used and chemical feed rates; and
- •if applicable, appropriate treatment process performance records.

Furthermore, Lagree to retain these additional operations records at the plant site for at least five years and to make them available for review upon request.

9/6/98

Jund Name and Certificate Number (please type or print)

Signature and Date

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water

Systems that Treat Their Water System PWS Identification Number. Treatment Plant Name: _

6535064 SWISS

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#### III SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTHWEAR OF 1998 AUGUST

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: Combined chlorine (chloramine): Conforme dioxide Summary of Daily Water Treatment Data for Month:

			· · ·	Residual	, akana an			
Day of. the Montr	Plant in~;	Quantity of Finished Water	Lowest Residual Disinfectant Concentration at Entry to Oistnbutton System (mg/L)	Lowest Residual. Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Samoling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions	
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4		178,000		1		· · · · · · · · · · · · · · · · · · ·		
5		278,000	1.8	1.0		1		• 17 •
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8		312,000	<i><i><i>जiT</i></i></i>	1.0	<u> </u>			
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10		606,000	3,0	1.5				
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12		508,000	3.0	1.5				n an arana
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19	[ ['	472,000	3.0	1.5			· · · · · · · · · · · · · · · · · · ·	· · · ·
20	1	339,000	3,0	1.5	!	<u> </u>		
22	 	1 337,000	2,0	1 /15	l <u></u>	<u> </u>		
23	·		1			1	engen har	
24		678,000	3.0	1.5	· · · · · · · · · · · · · · · · · · ·		1	sturn
25	1	1		1			10 N 11	••••••
26		525,000	3.0	1.5	3BA			) : · ·
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28		319,000	2.8	1,2				1
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31		690,000	2,5	1.2			1	1
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#### Department of Environmental Protection

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

INSTRUCTIONS: See Page 4.				
SEPTEMBER 1998		PLANTINEORMATIC	******************************	
•System Owner	GOLF		PWS Identification N	
• <u>System Owner</u> Name: CR_F Address: P.o. BSX City: Att.cs.Ty • System Type: A community; a non-trans	5252		Telephone No.: <u>(94</u>	
City: <u>Atternov</u> • System Type: A community; a non-trans • No. of Service Connections at End of M	sient non-community; onth: <b>950</b>	□ non-community; □ Total Population	State: <u>FL</u> Zip Co consecutive Served at End of Mo	
Water Treatment Plant Information         • Treatment Plant         Name:       Swiss Go         Address:       OID Lice         City:       WiNnunga         • Remitted Maximum Day Canacity of Plant			Telephone No.: <u>(94</u> State: <u>FC</u> Zip Co	•
City: WiNAUM • Permitted Maximum Day Capacity of Pl • Plant Category and Class per Rule 62- • Lead/Chief Plant Operator:			State: <u>FC</u> Zip Co	ide: <u>338//</u>
Namo	·· Certificato Number···	Class (A. B. C. or D).	Daw/c)/Shi0	( ) ) Aladia d
		C.	/3	(s).Worked -
	ddilional sheets if ne	C   ecessary):	/3	(s):Worked:
•Other Certified Plant Operators (attach	ddilional sheets if ne	C   ecessary):	/3	
•Other Certified Plant Operators (attach	ddilional sheets if ne	C   ecessary):	/3	
•Other Certified Plant Operators (attach	ddilional sheets if ne	C   ecessary):	/3	

STATEMENTER LEADIGHEEWATER TREATMENT PLANT OPERATOR FOR THE MONTHINEAR OF

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

- •records of amounts of chemicals used and chemical feed rates; and
- if applicable, appropriate treatment process performance records.

Furthermore, I agree to retain these additional operations records at the plant site for at least five years and to make them

available for review upomrequest. 60

Signature and Date

DW007483C

Name and Cartificate Number (please type or print)

Monthly Operation Report for Public Water Systems that Use Ground Wate	ar and for Consecutive Public Water
------------------------------------------------------------------------	-------------------------------------

Systems that Treat Their Water System PWS Identification Number: __

Treatment Plant Name:

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#### 6535064 SWISS GOLF

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n Stra Station

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## 1155 UNIVARIA OF DAILY ANGLE THE MINENDUARY FOR THE WONTHWEAT OF SUPERABLING

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: Ofree chlorine;

□ combined chlorine (chloramine); □ chlorine dioxide

Summary of Daily Water Treatment Data for Month:

;				Residual	Disinfectant in Oistnbuli	on System	
Day of. the Month	Plant in	: Quantity of Finished Water 	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliforn Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions
1	·				3	1.5	 
2		506,000	2.6	1.4			
3							
4		365,000	3.0	1,5			
5		· · · · · · · · · · · · · · · · · · ·					
5							<u> </u>
7		684,000	3.0	1.5			
3		(1) 0 0 0 0					
9		469,000	3.0	1.5			
10		220					1
11		278,000	3.0	1,5	 		· ·
12					1		
13		7 ( .)		1		<u> </u>	
14		706,000	3.0	60	 	1	<i>a</i>
15			<u> </u>		ļ	}	
16		481,000	3.0	2.0	· · · · · · · · · · · · · · · · · · ·		
17		228 0 197		<u> </u>		<u> </u>	
13	1	278,000	3.0	1.8			
19		•		1	1		ļ/
20	<u> </u>	-11 NOU	3.0				
21	ļ	516,000	2.0	1.5	} •		
22	<u> </u>	2117 000	3.0	1.5	1	l	
23 24		347,000	0.0		<u> </u>	<u> </u>	<u> </u>
24	1	231,000	3.0	1.5	<u> </u>	1	<u></u>
25	1	001,000		· <u>···</u>	1	<u> </u>	· · · · · · · · · · · · · · · · · · ·
20	<u> </u>			<u> </u>			1
25		443,000	3.0	1.5	<u> </u>		1
29		/ <i>'_/</i>		(* )		1	;{
	1	355,000	3.0	1.5	<u> </u>	· <u>·</u>	
 ]1				1	<u> </u>	1	<u> </u>
	<u> </u>	5,654,000	{////////////////////////////////////	<u>.</u> 	3	<u> </u>	
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CER form ( 17-021 DOC 11) Oomesee was ensuer fragment Fish	
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Etacore July 1. 1991	
067 -00-000 Mg	
(Fried in by CER)	

Part II - General Information

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(i) Month October Year 1997
(2) Flant's DER Identification Number 4053P10039
(J) Flant Name Swiss Golf
(4) Plans Address Old Lucerne Park Road
(5) City Wintenaven
(6) County Pork
(7) Phone Number (941) 647-1581
(8) Permit Number <u>D0-53-200395</u>
(S) Plant Type
(10) Test Sile Identification Number NA
(11) Fecal Caliform Sample Method
Membrane Filter Most Probable Number
(12) Type of Effluent Disposal or Reclaimed Water Reuse
Evaporation Pond
(15) Limited Wet Weather Discharge Activated
(14) Cumulative Days of Wer Weather Discharge NA
(15) Flant Stating
Day Shift Operator Class Cart. No. 208544
Evening Shift Operator Class Cart. No
Night Shift Operator Class
Lad Operator York 4 7 Car No.

ſ <u></u>	1		1
Farameter	Units	STORET Code	Value
(16) Monitrly average daily flow	mçd	050053	.064
(17) Permitted capacity	ന്റർ	-	.176
(18) Three-month average daily flow	mgd	-	.056
(19) Percent of permitted capacity	965		32%
(20) CEODs Effluent	mç/L	080082	2.3
(21) CSOO ₅ Eifluent	l Ibs'day	-	NA
(22): TSS Eifluent	ாடிட	90201	2.3
(23) TSS Effuent	lbs/day	-	INA I
(24) Minimum pH		-	7.1
(25) Maximum pH		-	7.2
(25) Total N	mg/L	0000500	NA
(27) TKN	ന്റ്റ/L	000625	NA
(28) Ammonia (NH ₁ · N)	mg/L	000510	NA
(29) Nitrate	mç/L	071850	7.5
(30) Totel Phosphorus	mç/L	000565	NA
(31) Minimum Chlonne Residual	mg/L	-	1,0
(32) Maximum Chlonne Residual	mg/L	-	3.0
(23) Cther Eiluert Parameters	- 1		NA
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17-501.500(1) -----HAALMINER 2120 July 1, 1201

#### Domestic Wastewater Treatment Plant Monthly Operating Report

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34)	, .															Month		IUL	<u> </u>	_ Year		
Uay of Ilic Muniti	Flow (mฏป)	Chlorine Residual alter Contact	Chlorine Residual alter Dechlorination	CBODs Inlluent (mg/L)	TSS Influent (mg/L)	CBOD, Ellivent (mg/L)	TSS Elthuent (mg/L)	pH Elluen	TKN Elluent (mg/r.)	Ni-13 · N Elluent (mg/L)	Nitrate Etiluent (mg/L)	Total P Ellucon (mg/L)	Fecal Colitorm (II/100ml)									
Γİ	,045	11.5					!	17.21										<u> </u>	<u>i</u>	<u> </u>	<u> </u>	<u> </u>
ZI	,045	20	1	184	278	2.3	11.7	7.21			,02		121		<u> </u>	1		<u> </u>	<u> </u>		1	<u>!</u>
3	,055	2.5	l				1	17.2						<u> </u>	<u> </u>	i		1	<u>!</u>	!	1	<u>.</u>
4	,054	3,0				<u> </u>	<u> </u>	17.2						<u>i</u>	!				:	·	!	1 1
5	,053				1	1	<u> </u>			<u> </u>	ŀ				<u>!</u>	<u> </u>		<u> </u>	1	<u> </u>	!	
6	,053	12.5	1			!		17.2						<u> </u>	<u> </u>			1		i	<u> </u>	<u> </u>
7	,059	12.0			l	1		17.2		<u> </u>		<u> </u>				!	<u> </u>		1 ;	l		÷
8	,058	12.5		i	l	1	<u>!</u>	17.2			1		:	<u>.</u>	<u>.                                    </u>	1	!	<u> </u>		•	;	<u></u>
9	,064	12.0		<u> </u>	<u> </u>	1		7.2		i	l	!		÷	<u> </u>		i		_	: i	<u> </u>	<u>.</u>
10	.057	11,5	<u> </u>				<u>!</u>	17.2		<u> </u>				;	<u> </u>	:		! :	· ·	:		<u>.</u>
11	,062	!	1			 	<u> </u>	22							<u> </u>			<u> </u>	:	:	! !	1
12	,062	12.0				<u> </u>	<u> </u>	7.2						i 	! 	<u>   </u>		:		I		·
13	.035	2.5	<u> </u>					7.2							1	1		! !	,		, ;	<u>.</u>
14	,061	2.0					l ·	7.2							<u> </u>	i i		1				
15	,067	11.5			4.07	10	1	7.2			17		21		<u> </u>			i !				
16	,060	11.5		245	285	1.8	2.3	7.2			,13		~		1	: ;		!   	: 1			
רו	,064	11,0	1				!	7.2	!						,			<u></u>	: :			
18	,074	1	i				<u>.</u>				;				í				·			
19	,073	11.3						7.2							i	 			: i	1		
20	,087	11.2					<u> </u>	7.2			·					i i . i	_		·   : i			
2	,082	1.5					i	7.2								· · · · ·						
22	,069	1.5					!	7.21														
2)	,060	115						7.21		:			į			i						
24-1	,075	12.0						7.21		!	!		_						·			
251	,072	1								;	i	i	;				!	_				
	,072	25			!			7.11	!								!		_			
27!	1050	1,5						7.11		!	ļ						;					
28	,091	110						7.21					<u> </u>							:		
251	,078	17.5						1.2	. !			<u> </u>				i				!		
30!	,082	12.0		278	400		.30	7.2	!		7.5	<u> </u>	41			!				_		
311	,070	11.5	1	1		i	;	7.11	!		1	i		I		i	!			<u> </u>		

and Operation. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. The nicrmation is the complete and accurate

on .Signed: D40Name (Please Type)

Dates

- (041) 1AT-1581

ER Form (
Comestic Wastewaler Treatment Plant
Jame Care_ July 1, 1991
ER Loopcapon Mg
(Filed in by CER)

Part II - General Information

٠,

	Month NOVEMBER Year 1997
2)	Plant's DER Identification Number 4053P10039
3)	Flant Name Swiss Golf
(4)	Plant Address Old Lucerne Park Road
(5)	civWinterhauen
	CountyPolk
• •	Phone Number (941) 647-1581
	Permit Number D0-53-200395
• •	Plant TypeTII-C
• •	••
	Test Site Identification Number NA
17)	Fecal Coliform Sample Method
	Membrane Filter Most Probable Number
12)	Type of Effluent Disposal or Reclaimed Water Reuse
	Evaporation Pord
13)	Limited Wet Weather Discharge Activated
	Yes X No Not Applicable
14)	Cumulative Days of Wet Weather Discharge <u>NA</u>
(15)	Plant Staifing
	Day Shiit Operator Class C Cart. No. 008544
	Evening Shift Operator Class Cert, No
	Night Shift Operator Gigss Cert. Not
	Lead Operator Kobut & Burn C8544
	Signature V Cart, No.

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mçd	050053	,083
(17) Permitted capacity.	rrigd	<del>_ ,</del>	.176
(18) Three-month average daily ".cw	mçd	-	.067
(19) Percent of permitted capacity	%	-	38%
(20) C3005 Effluent .	mg/L	080082	2.86
(21) C3005 Eilluent	lbs'day		NA
(22) TSS Effluent	mg/L	900201	3.67
(23) TSS Effluent	lbs/day	-	NA
(24) Minimum pH		-	7.0
(25) Maximum pH	i I	-	7.2
(26) Total N	mg/L	000500	NA
(27) TKN	mç/L	000625	NA
(28) Ammonia (NH ₃ · N)	mg/L	000610	NA
(29) Nitrate	mg/L	071850	DA 11.20
(30) Total Phosphorus	mġ/Ľ	000665	NA
(31) Minimum Chlonnë Residual	mg/L	. –	1.5
(32) Maximum Chlonne Rescual	mgiL		3.0
(33). Other Efluert Parameters			NA
•			
•			
•			

July 1, 1991 IFHA IN OY JEAN Domestic Wastewater Treatment Plant Monthly Operating Report Year 199-Month NOVEMBER 34) Fecal Coliform (#/100ml) -NI-I^a - N Elluent (mg/L) Total P Elluent (mg/L) CBODs Elluent (mg/L) Nitrate Ettuent (rng/L) CBODs Inlluent (mg/L) TKN Elilueni (mg/L) SS Ethuent (mg/L) Chlorine Residual alter Dechlorination TSS Inluent (mg/L) Chlorine Residual after Contact Day of the Munit pH Elluen (hgm) woll i 17.3 2.0 114 7.2 11.5 094 1 Ζ i 7.2 2.5 3 05 ł 7.2 2.0 1 7.2 ÷ 1 13.0 l n ; 17.21 į 1 l 1 17.2 i. 4 i ; i Ť i ÷ ł 08 ł 1 1 i 17.2 ÷ i 2.0 ÷ 08 : ÷ ; I 17.2 1 054 3.0 ! ļ 0 i 1 17.2 ł 1 079 ł 11 i ۱ 7.2 2.0 ł 12 07 i L 141 11.97 265 267 2.86 13.67 17.2 3.0 69 13 1 7.7 1.0 ł 4 067 ł 1 1 104 ļ t ıS 1 1 7.2 104 ł 16 1 I l 7.2 25 ÷ 17 : ł ÷ 7.2 ł 7.0 079 i 1 18 i ſ 17.2 2.0 T : 14 : 080 1 ÷ ! í 7.2 ÷. ł 20 082 i. i i : 7.1 i : ui ,070, ÷ 091 ; 22 . : ÷ i i į ÷ 17.1 09 ÷ ; 231 1 1 17.) 24-1 2 : 11 . A S 2 i ÷ ł ł 7.1 080 9.0 i 251 i i 1 ! 11.29 1411 i 370 448 2 1.4 7.0 LЫ 080 ÷ ÷ ÷ 1 27! 129 i . 1 ł i 1 17.1 i 28 08 : ţ i ì İ ,121 251 ; ł ł ł 1 17.1 12.0 30! 121 ÷ ÷ i ۰, 31 1

Led Operator. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. The information is rule, complete, and accurate

Robert A. Signed: Byrch . Name (Please Type) -

12/13/97 Cate:

17-501.500(1)

Comesos Wastewater Weatment Plant Momeso Company Record

CEA For

SER ANNO A	17-001-200(1)
iom i	17-171200(1) ספורי אוג איז איז איז איז איז איז איז איז איז איז
	July 1, 1991
100-02	1001 Mg
	(Med in by CEA)

Part II - General Information

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ា	Month DECEMBER Year 1997
	Plant's DER Identification Number 4053 P10039
(-)	Flant Name Swiss Golf
(0)	
(4)	Fiert Address Old Lucerne Park Road
(S)	civWinterhaven
(6)	County Posk
(7)	Phone Number (941) 647-1581
(8)	Permit Number
(S)	Plant Type
(10)	Tex Sile Identification Number <u>VA</u>
(17)	Feczi Coliform Sample Method
	Membrane Filter Mcst Probable Number
(12)	Type of Effluent Disposal or Reclaimed Water Reuse
	Evaporation Pond
(13)	Limited Wet Weather Discharge Activated
(14)	Cumulative Days of Wer Weather Discharge <u>NA</u>
(15)	Plant Stailing
	Day Shift Operator Class Cert. No. 008544
	Evening Shift Operator Class Cart. No
	Night Shift Operator GassCart. No:
	Lace Operator Koburt By C 8544
	Scharme, CSU MG

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	πçd	050053	.122
(17) Permitted capacity	mgd		.176
(18) Three-month average daily flow	mgd	-	.090
(19) Percent of permitted capacity	%	-	51%
(20) CBODs Effluent	mg/L	080082	4.2
(21) CBOOs Effluent	lbs'day	-	NA
(22) TSS Erilluent	mg/L	900201	4.3
(23) TSS Efluent	lts/day	-	INA
(24) Minimum pH		-	7.0
(25) Maximum pH			7.4
(25) Total N	mg/L	000500	NA
(27) TKN	നറ്റ/L	000625	NA
(28) Ammenia (NH ₃ · N)	mg/L	000610	NA
(29) Nitrate	mg/L	077850	< 0
(30) Total Phasphorus	المريد ا	000665	NA
(31) Minimum Chlonne Residual	mg/L		0.6
(32) Maximum Chlonne Rescual	mg/L	-	3.5
(33). Other Eifluert Parameters	· i		NA
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## Domestic Wastewater Treatment Plant Monthly Operating Report

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Σ a	Chlorine Residual	alter Contact Chlorine Residual alter Dechlorination	CBODs Inlluent (mg/L)	(-1/Gui) Ivenilui SSI	CBOD's Elltrient (mg/L)	TSS Elluent (mg/L)	2	TKN Elluent (mg/L)	(1/G(L) IVENIIJE N	Nilrate Etliuent (mg/L)	Elluent (mg/L)	Coliform (#/100ml)	1							į	
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3,01	18 2.1	2	<del> </del>	1		1	17.1		1	1	1	T			!		<u>.</u>	:	<u>!</u>		
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Lead Operator. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. The information is true, complete, and accurate

obert A la Signed: jurd Kobe Name (Please Type) •-----

01/10/98 Oaie: _

Telechane Na. (Plezza Type) (941) 647-15-81

CER Form	17-001_000111
Form Tax	Comessic Wastewater Treatment Plant
يدن محصاع	July 1, 1991
د	2001 ¹⁴ 0
	(Fried in by CER)

Part II - General Information

٠,

(i) Month JANUARY Year 1998	
(2) Plant's DER Identification Number 40.53P10039	
(J) Flant Name SWI3S GOLF	
(4) Plant Address Old Lucerne Park Road	
(5) City Winterhouch	
(5) County Palk	
(7) Phone Number (941) 647-1581	
(8) Permit Number 20-53-200395	
(9) Plant Type TIL-C	
(10) Test Sile Identification Number NA	
(11) Fecal Coliform Sample Method	
X Membrane Filter 🗌 Most Probable Number	
(12) Type of Eifluent Disposel or Reclaimed Water Reuse	
Eucloration Psinch	
(15) Limited Wet Weather Cischarge Activated	
(14) Cumulative Days of Wet Weather Discharge NR	
(15) Plant Staffing	•
Day Shift Operator Class Cart No 0085 44	
Evening Shirt Operator Class Cart, No	_
Night Shift Operator Gass Cart No	-
Lead Ocerator Kun Ma CRS 44 Signature Cert Na	

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	тçd	050053	.121
(17) Permitted capacity	mgd	-	.176
(18) Trree-month average daily flo	w  mgd		1.109
(19) Percent of permitted capacity	%	_	62%
(20) CEOOs Efilient	mg/L	080082	3.6
(21) CEOD ₅ Eifluent	lbs'day	-	NA
(22) TSS Effluent	mçiL	900201	2,4
(23) TSS Effluent	ובאכמי	! -	NA
(24) Minimum pH		.  —	7.1
(25) Maximum pH			7.2
(26) Total N	∫ mg/L	000000	NA
(27) TKN	ا شچال	000625	NA
(28) Ammonia (NH3 · N)	mg/L	000610	NA
(29) Nitrate	mg/L	071850	,3
(30) Total Phasphorus	mg/L	000665	NA
(31) Minimum Chlonne Residual	mg/L	}	0.6
(32) Maximum Chlonne Residual	i mg/L		3.0
(33) Other Eilluers Parameters			NA
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CEA Form - 17-50:50011 Domestic Wastemater Tradition Plant Form File Monitor Constant Accord Effective Oate JUN 1, 1991

והשט עם הי שאיינע

#### Domestic Wastewater Treatment Plant Monthly Operating Report

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34)					<u> </u>							1	! 1		1					
U≞∕ G the haran Flow (mgd)	Chlorine Residual alter Contact	Chlorine Residual alter Dechlorination	CBODs Inliuent (mg/L)	TSS Inluent (mg/L)	CBODs Elliuent (mg/L)	TSS Elluent (mg/L)	PH Elltuent	TKN Elluent (mg/L)	(1/GW) IVENIJE N · TIN	Nitrata Elltuent (rng/L)	Total P Etiluent (mg/L)	Fecal Coliform (#/100ml)								
1.112				[		1									<u> </u>		i			
21,112	10.8						7.2						<u> </u>	<u> </u>	!	· · ·				
31,115	1.3						7.2								<u> </u>					<u> </u>
41,165	11.5				<u> </u>		7.2			1 1							<u> </u>			1
51,015	13.0				<u> </u>		7.2			! !		!				<u> </u>				
6 141	11.0				1	ļ	7.1			<u>   </u>			· · · · ·							
71,109	11.0				1	1	7.1			0 21			: 1			<u>·</u>				
31,162	1.5		235	1264	13.5	12.4	7.2			0.3	<u>_</u>	121	<u> </u>							
91,095	1.0		<u> </u>	<u> </u>	<u>i</u>	_	7.2	•	i						<u> </u>					<del></del> ;
101,155	12.0			<u> </u>	<u>i</u>	!	7.1		! .	<u>:  </u>		 						<u> </u>		
111,110	115						7.2			<u> </u>		 			·····					
121,088	12.5				<u> </u>		7.2											1		1 .
131,108	12.0						7.2			· · · ·					<u> </u>			<u>i</u>		1
11-1,135	12.5						7.2													1
151,130	2.0		i				7.2							1 		1				
16: 142	11.5						7.2													
191,091	1.6				1	 	7.2								·····	<u> </u>	·		<u> </u>	
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11 1272	10.5	· !	210	177	3.6		7.2					21			· · ·	<del></del>				
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201 102	1.0				<u>.</u>		7.11	i			<u>-</u> -			<u>-</u> ;			:	:	;	
14-1 131	10.61						7.21								<u>:</u>			;	:	
151 137	1.0		i			,	7.21											 i		
161,090	0,8		 				7.2	i					'							
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781 130	1.51				i		7.2				1			i			i		!	
151! 148	11.0						7.21		i				<u>`</u>	<u>-</u>	;		:		1	1 .
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and Operator. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. This remation is true, complete, and accurate

ligned: Varrie (Flease Type) ______ Robert Burd

Oate: 2/14/98

Telesnone Na. (Please Type) (941) 647-1581

Sector Name

C.R.F.

063 mm ( 17-601_200(1)	
GER Form (17-601.00(1) Oomestic Wastewater Treatment Plant form Tote Horitiny Oberaning Recort	
ETerre Que July 1. 1991	
OER Loo-cloon Ma	
(Filed in by CER)	_

Part II - General Information

٠,

	Month FEBRUARM Year 1998
(1)	Month $PERION (0.53 Plup 39)$
(2)	Plant's DER Identification Number 4053 P10039
(C)	Flant Name Swiss Golf
(4)	Plans Address Old Lucenne PANK Road
(5)	civWinterAcuen
	County Polk
с С	Phone Number (941) 647-1581
(8)	Permit Number D0-53-200395
(9)	Plant Type TIT - C
(10)	Test Sile Identification Number NA
	Fecal Coliform Sample Method
	Membrane Filter Most Probable Number
(12)	Type of Eifluent Disposel or Reclaimed Water Reuse
• •	Evaporation Pond
(13)	Limited Wet Weather Discharge Activated
()	
(1.5	Cumulative Days of Wer Weather Discharge NA
(1-)	
110.	Elect Staffor
(12)	Plant Staifing Day Shift Operator Class Cart. No. 008544
	Evening Shift Operator Class Cert. No
	Night Shift Operator Gass Cart. No
	Lead Ocerator

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mçd	050053	,131
(17) Permitted capacity	ngd		.176
(18) Three-month average daily flow	mgd		.125
(19) Percent of permittee capacity	%		71%
(20) C3005 Eiluent · .	mg/L	080082	1.7
(21) CBOO ₅ Eifluent	lbs'day		1,92
(22) TSS Effluent	mg/L	90201	1,5
(23) TSS Effluent	lbs/day	<u> </u>	1.64
(24) Minimum pH		-	7.1
(25) Maximum pH			7.2
(25) Total N	mg/L	000500	NA
(27) TKN	mç/L	000625	NA
(28) Ammonia (NH3 · M)	.mg/L	000610	NA
(29) Nitrate	mg/L	071850	0.3
(30) Totel Phosphorus	ாடூ/ட	000665	NA
(31) Minimum Chlonne Residual	mg/L		0.5
(32) Maximum Chlonne Residual	mg/L	-	2.0
(33) Other Effluent Parameters	· 1 I		NA
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Led Operator. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. This remation is true, complete, and accurate.

ligned: 194rd Kobert Name (Please Type) -

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3/10/98 Oate: __

Telechane Na. (Plezze Type) (941) 647-1581

ER Form 17-601 200(1) Domestic Wasternier Teamers Plant
Domestic Wasternier Treatment Plant Monthly Doversing Acont
Jerre Jus July 1, 1991
E7 - LOOC 2001 Mg
(Fied in by CER)

Part II - General Information

(i) Month MARCH Year 1998
(2) Flant's DER Identification Number 4053710039
(J) Plant Name <u>Swiss Golf</u>
(4) Plant Address Old Lucerne Park Road
(5) City Winterheven
(6) County Polk
(7) Phone Number (941) 647-1581
(8) Permit Number <u>D0-53-200395</u>
(S) Plant Type <u>TH-C</u>
(10) Test Sile Identification Number <u>NA</u>
(11) Focal Coliform Sample Method
Membrane Filer Most Protable Number .
(12) Type of Eifluent Disposel or Receimed Water Reuse
Evoporation Pond
(15) Limited Wet Weather Discharge Activated
(14) Cumulative Days of Wet Weather Discharge NA
(15) Flant Staifing
Day Shift Operator Class Care. No. 008544
Crening Shift Operator Class Cerc Nu
Night Shift Operator Cass
Lead Operator Kobat By WW008544C

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Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	тçd	050053	1.103
(17) Permitted capacity	ന്റ്റർ	<del></del>	,176
(18) Three-month average daily flow	ന്റ്റർ	-	.118
(19) Percent ci permittec capacity	%	-	67%
(20) C2OOs Effluent .	/ mc/L	080082	3.3
(21) CEODs Eilluent	lbs'day		2.8
(22) TSS Eifluent	Πς/L	90201	2.6
(23) TSS Efluent	lics/cay		2.2
(24) Minimum pH	•,	-	7,1
(25) Maximum pH			7,2
(25) Total N	mg/L	0002500	NA
(27) TKN	ጡ <u>ር</u> /ር	000625	NA
(28) Ammonia (NH3 · N)	ாடி/ட	000610	NA
(29) Nitrate	mg/L	071850	.1
(30) Tazi Phaspharus	mg/L ∤	000665	NA
(31) Minimum Chlonne Residual	mg/L	-	1.0
(32) Maximum Chlonne Residual	mg/L	-	1.8
(33) Cither Eifluert Parameters	.   		NA
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A Form - 17-501200(1) Opmestic Wastewater Treatment Plant Momphy Operating Report

July 1, 1991

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#### Domestic Wastewater Treatment Plant Monthly Operating Report

34	•) •														Month	MA	RCH		Year 1	998
. unow on p ARU	Flow (mgd)	Chlorine Residual aller Contact	Chlorine Residual alter Dechlorination	CBODs Inluent (mg/L)	(T/Gw) tuantiu SSL	CBODs Ellivent (mg/L)	TSS Ellluent (mg/L)	pH Elliuent	TKN Elluent (mg/L)	NI-1, - N Ellivent (mg/L)	Nitrala Effluent (mg/L)	Total P Elluent (mg/L)	Fecal Coliform (#1100ml)				· · · · · · · · · · · · · · · · · · ·			
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31	,136	1,0	[				i	7.2					l	<u>   </u>				1.		1
4	,068	11.0			1	l	1	7.1	1				<u> </u>				:			
Ś	,107	115		<u>B24</u>	2235	3.3	2.6	2.1			!</td <td></td> <td>12</td> <td><u>!                                     </u></td> <td><u>i</u></td> <td></td> <td><u> </u></td> <td></td> <td><u>i</u></td> <td></td>		12	<u>!                                     </u>	<u>i</u>		<u> </u>		<u>i</u>	
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151	1081	1.2			1	· ]	j	7.2	;	;	İ	1	i		ii	1	:	!		
161	,100	1.0	1		1	1	1	7.24		i	1	1				1	1	ļ	1	i
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21	,121	111	ļ		1	i	1	7.2	į	!	į		1		i		:	i	!	
22	116	1.5	i	1		!		7.11		i	1			1		i	•	;		:
231	088	1.0	!	1	!			2.21		:	!		i				•	•	:	
241	,090	401	]	;	!	;	·	7.21	<u> </u>		!\		;			<u> </u>	:	;	:	
25 I 261	,084	1.5	1	i			1	2.2		· 1	!	<u> </u>	;	!!!			<u> </u>	i	:	
261	121	1.2	ļ.		1	!		7.21	ļ	1	<u> </u>	1	<u> </u>			!	i	i		
27!	,084 ,121 ,086 ,083 ,083 ,098	1.5				i		7.2	i	!				:		;	;			
<u>75</u> i	,0831	11	!				<u>.</u>	7.24	!	!		1	1						!	
251!	,0981	1.8			•			7.11	!	<u> </u>	<u> </u>	<u> </u>				!	<u> </u>	<u> </u>	<u> </u>	
30 :	.091	121			<u> </u>			7.11	1	<u> </u>	<u> </u>	<u> </u>					:	<u>    i                                </u>	<u> </u>	<u> </u>
311	1051	1.2	ļ	!	1	i		7.1	<u> </u>		1	i	!	<u>i i</u>	<u> </u>	:	<u> </u>		;	<u> </u>

Lead Operator. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. This normation is true, complete, and accurate.

Name (Please Type) ----11-

4/2/98 Oate:

Telechane Na. (Plezza Type) (941) 647-1581

	17-501 200(1)
form Take	17-501 200(1) วิติตรมน Wastewater Freatmens Plane ครามการ Constant Anoset
5 cm - 3 ki	July 1, 1991
K2-00L F30	(F440 in or CER)

Part II - General Information

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(1) Month APRIL Year 1998	
(2) Plant's DER Identification Number 4053 P10039	
(J) Plant Name Swiss Golf	
	;
(4) Plane Address Old Lucerne Park Re	d
(5) City Winterhoven	
(6) CountyPolk	
(7) Phone Number (941) 647-1581	
(8) Permit Number DD- 53-200395	
(9) Flant Type TIL-C	
(10) Test Sile Identification Number NA	
(11) Fecal Coliform Sample Method	
Membrane Filter Most Probable Number	
(12) Type of Eilluent Disposal or Recarmed Water Reuse	
Eveporation Pond	
(13) Limited Wet Weather Discharge Activated	
(14) Cumulative Days of Wet Weather Discharge NA	
(15) Plant Staffing	
Day Shift Operator Class Care. No00854	÷¢
Evening Shirt Operator Class Cart. No	
Night Shift Operator Ciaps	
Lead Operator Kolund Broken WW 0085	440

Parameter	Units	STCRET Code	Value
(16) Monthly average daily flow	۳çd	050053	.082
(17) Permitted capacity	rrçd		,176
(18) Three-month average daily flow	bəm	-	.105
(19) Percent of permittee capacity	45	_	60%
(20) C2005 Eiluent ·	المجرال	080082	4.5
(21) CEODs Eilluent	ics'day	-	3.1
(22) TSS Effluent	πçíL	900201	2.6
(23) TSS Efluent	lbs/day		1,8
(24) Minimum pH		—	7.0
(25) Maximum pH			7.2
(25) Total N	mg/L	000500	NA
(27) TKN	നട്ട/Ը	000625	NA
(28) Ammenia (NH1 · N)	тс/L	0000510-	NA
(29) Nitrate	mg/L	071850	1,)
(30) Tatel Phosphorus	mç/L	000565	NA
(31) Minimum Chienne Residual	mg/L	-	1,0
(32) Maximum Chlonne Residual	mg/L	-	2.8
(22) Citter Efluert Parameters	1 . I		NA
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17-501-200(1) CEA For סמווישטאל אבורי אוויישובל אבורות אווייסט אמוויש לספר אחת אפטות Que JUN 1. 1791 E2 ec CER ADD-CLUDA NO. והשל עם חי באילו

#### Domestic Wastewater Treatment Plant Monthly Operating Report

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י וויויהיש אוון א אפת	Flov, (mgd)	Chlorine Residual after Contact	Chlorine Residual alter Dechlorination	CBODs Inlivent (mg/L)	TSS Inluent (mg/L)	CBOD's Ellivent (mg/L)	TSS Eliluent (mg/L)	pH Ethent	TKN Elluent (mg/L)	Ni-L-N Ellivent (ng/L)	Nitrale Effluent (mg/L)	Total P Elliuent (mg/L)	Fecal Coliform (II/100ml)						a na manga na manga na manga na manga na manga na mangana na mangana na mangana na mangana na mangana na manga	
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31	,068	2.0						7.1						<u> </u>	1		1	1	1	!
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5	,124	1,5		1				7.0							İ		1	1	i	1
6!	,044	12.0						7.0						i				<u> </u>	<u>.</u>	
7 1	,108	1.8	i			!		7.0	į						1		i		:	<u>.</u>
<u>s</u>	1084	1.5	j			!		7.1							1	<u>   </u>			<u> </u>	<u> </u>
<u> </u>	,096	1.8		i	!!	<u> </u>	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	7.1	i		!			<u> </u>		<u>                                      </u>		<u> </u>	<u>.</u>	<u>.</u>
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151	1084	1.8	<u> </u>		i	1		7.1											1 :	<u> </u>
19	,680	2.0	3	525	34a	14		7.0	— †	<u>i</u>	<.01		211						:	<u> </u>
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18	,068	1.5	!	<u>-</u>	<u> </u>	;		7.0	;	;	!		;		1 1			;		
141	1082		i-	i			i	1	1			, !			1					
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221	,067	1.5	1	1		!	-	7.2	:	<u>-</u>	i			;	; !		•	;		:
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Lead Operator. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. The momation is the complete and accurate

Kobert As Byrd Signed: Name (Flease Type) ·-----

Date: 5/14/98

Telecriane Na. (Plezza Type) (941)647-1581

JEA POMI 4	17-501200(1) Domestic Wasterreter Heatmont Plant
-om 144_	MORINY CONTING ANONT
	July 1, 1991

Part II - General Information

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(1) Month MAY Year Year 1998
(1) Month <u>MAY</u> Year <u>1998</u> (2) Flant's DER Identification Number <u>4853710039</u>
(2) Flant's DEH Identification Number 40001
(J) Fizht Nzme Swiss Golf
(4) Plane Address Old Lucenne Pork Road
(5) City Winter Deven
(6) County Polk
(7) Phone Number (941) 647-1581
TA 53-500395
10) Test Sile Identification Number <u>NA</u>
11) Focal Coliform Sample Method
Membrane Filter 🗌 Most Probable Number
12) Type of Effluent Disposel or Reclaimed Water Reuse
Eucporation Pond
13) Limited Wet Weather Discharge Activated
Yes XNo Not Applicable
14) Cumulative Days of Wet Weather Discharge
15) Plant Staifing
Day Shiit Operator Class Cart. No 008544
Cvening Shiit Operator Class Care Na
Night Shift Operator Class Cart. No
Lead Ocerator Aduts And WW008544C
Sgranna Carl No.

Units	STORET Code	Value
ಗ್ರಾರ	050053	,057
ന്റ്റർ		.176
mçd	-	1,081
%		46%
ا ستج/لـ	080082	<2
lics'day		12,95
ا المرال	900201	10.8
lts/cay		15.14
		7.0
		7.2
mg/L	000500	NA
mç/L	000625	NA
.mg/L	000610	NA
mg/L	071850	1.43
mg/Ľ	000665	NA
mg/L		1.8
mg/L		4.0
. I 1		NA
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	mçd mçd mçd % mç/L ibs/day mç/L ibs/cay mç/L mç/L mç/L mç/L	Orlins         Ccc/e           mgd         050053           mgd         —           mgd         —           %r         —           %r         —           mg/L         080082           ibs/day         —           mg/L         \$Ccce           ibs/day         —           mg/L         \$Cccon           ibs/day         —           mg/L         \$Ccc600           mg/L         00Cc625           mg/L         00Cc610           mg/L         071850           mg/L         Ccc6655           mg/L

CER Form - 17-501500(1) Domestic Waster Har Stattment Plant Form Tale Mominiv Constitut Another Electric Odda, July 1, 1991 CER Adonation Na_______ (Free in on UER)

#### Domestic Wastewater Treatment Plant Monthly Operating Report

34)														٢	lonih	MA	1	Ye	er L	998
Day of the Month	riow (mgu) Chlorine Residual	aller Contact Chlorine Residual after Dechlorination	CBODs Inlluent (mg/L)	TSS Influent (mg/L)	CBODs Ellivent (mg/L)	TSS Etituent (mg/L)	pH Elluen	TKN Elluent (mg/L)	(1) N.I	Nitrale Etfluent (rng/L)	Total P Etiluent (mg/L)	Fecal Colilorm (#/100ml)								
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51,0	78 3.0			<u> </u>	<u> </u>		7.1							<u> </u>					<u>-</u>	
6! 0	59 3.		!	1		<u> </u>	7.2						<u> </u>		<u> </u>		· · ·			
	78 2.4	<u></u>	<u> </u>	1		i   	<u>7.1</u> 7.1			i			1			<u> </u>		<u>+</u>		
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151,0	57 2.4	·			!		7.1!	i	<u> </u>		!	i	i		!	<u> </u>		<u> </u>	<u> </u>	
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	72 3.5			<u> </u>	<u> </u>		7.1	<u> </u>	<u> </u>	i		<u> </u>	i	i	····		<u></u>		<u> </u>	
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261,04	46 2.0		1	i	· · ·		7-01	1	<u> </u>			<u>.</u> i		1	1	!		1	1	<u> </u>
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Lead Operator. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. This remation is true, complete, and accurate.

Signed: Name (Flease Type) Koben  $\sim$ *----- Viamo

619198 Oate: ___

Telechane Na. (Flezze Type) . (941)647-1581

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068 mm + 17-601 200(1)	
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Electre Jac July 1, 1991	
067 - 200-Cabon Ma	
ifteen or cert	

Part II - General Information

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(i) Month JUNE Year 1998	
(2) Plant's DER Identification Number 4053 P100 39	
(J) Flank Name Swiss Golf	
(4) Plane Address Old Luceme Port Road	_
(5) City Winterhaven	
(5) County Polk	
(7) Phone Number (241) 647-1581	_
(3) Permit Number DO - 53-200395	
(5) Plant Type III - C	
(10) Test Sile Identification Number NA	_
(ii) Fecal Coliform Sample Method	
Membrane Filer Most Protable Number	
2) Type of Eifluent Disposel or Receimed, Water Reuse	-
Evaporation poind	_
13) Limited Wet Weather Discharge Activated	
(4) Cumulative Days of Wet Weather Discharge NA	_
S Flant Staifing	
Day Shift Operator Class Cart. No. 003544	
Evening Shirt Operator Class Cart. No	
Night Shiit Operator, Class Cart. No	,
Lad Operator Koluts for WWould 744C	
Komuna Ceri Na	

Pzrameter	Units	STORET Code	Value
(16) Monitily average daily flow	ന്റെർ	050053	, 048
(17) Permitted capacity	mçd	-	,176
(18) Three-month average daily flow	mçd	-	.062
(19) Percent of permittee capacity	965	-	.35%
(20) C200s Effluent	mç/L	080082	3.0
(21) CEODs Eifluent	lbs'day	-	1.2
(22) TSS Eilluent	mçrL	90201	2.0
(23) TSS Efluent	lbs/day	-	0.8
(24) Minumum pH	.	-	7.1
(25) Maximum cH		-	7.2
(25) Total N	mg/L	OCCECO	NA
(27) TKN	ጠር/ር	000625	NH
(28) Ammonia (NH ₃ · N)	mg/L	000610-	NA
(29) Nitrate	mg/L	071850	9.51
(30) Total Phasphorus	, mç/L	CCC665 i	NA
(31) Minimum Chionne Residual	mg/L	-	1.2
(32) Maximum Chlonne Rescual	mg/L į́	-	4.0
(33). Cither Eilluert Parameters	· 1 1		NA
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CCR Form - 17-50150011 Domestic Wastervaler Vestment Plant Form TH_ Montally Operating Report Effective Offic_July 1, 1991 CCR Apportung No______

# Domestic Wastewater Treatment Plant Monthly Operating Report

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and Operation. This is to contry that I am familiar with the information contained in this report and that to the best of my knowledge and celler. This remation is rule complete, and accurate

Signed:	Roberty And	
Mines (Slozen Tyce)	Robert A. Byrd	
	C.R.F.	

Date: 7/15/98

Telechone No. (Please Type) (941) 647-1581

063 650 4	17-601,20001
готп 14	17-001.00011 omestic Wastewaler Treatment Plant oraniv Oberstong Acourt
Electre Jak	July 1, 1991
محمود 120	on No

Part II - General Information

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i) Month JULY Year 1998
(2) Fiant's DER Identification Number 4053P10039
(J) Flant Name Swiss Golf
(4) Fleri Address Old Lucerne Park Road
19 CivWinterhoven
(5) County PolK
(7) Phone Number (94) 647-1581
(8) Permit Number <u>Do - 53 - 200395</u>
(5) Flant TypeTII-C
(10) Fest Sile Identification Number <u>NA</u>
(11) Fecal Coliform Sample Method
Membrane Filler 🗌 Most Protable Number
(12) Type of Einluent Disposel or Receimed Water Reuse
Eveporation Fond
(13) Limited Wet Weather Discharge Activated
(14) Cumulative Days of Wer Weather Discharge <u>NA</u>
(15) Flant Slaiting
Oay Shift Operator Class Cart. No. 608544
Evening Shirit Operator Class Cert. No
Night Shift Operator Class Cart. No:
Lad Operator Front P WW 0080 990

Parameter	Units	STCRET Code	Value
(16) Monthly average daily flow	ന്റ്റർ	050053	,057
(17) Permitted capacity	mgd		176
(18) Three-month average daily flow	mgd		,054
(19) Percent of permitted capacity	%	-	31%
(20) C3005 Effluent .	mç/L	080082	4.3
(21) CEODs Eilluent	lbs'day		2.0
(22): TSS Eitluent	mg/L	900201	2.5
(23) TSS Efluent	lbs/day	-	1.2
(24) Minimum pH	•	-	7.0
(25) Maximum pH			7.2:
(26) Total N	mg/L	000000	NA
(27) TKN	mç/L	000625	NA
(28) Ammonia (NH ₁ · N)	mg/L	000010	NA
(29) Nitrate	mg/L	071850	1.42
(30) Total Phasphorus	הקונ ∤	CCC665 j	NA
(31) Minimum Chlonne Residual	mg/L		1.0
(32) Maximum Chlonne Residual	mg/L		4.0 t
(33) Other Eilluert Parameters	- 1		NA
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#### Domestic Wastewater Treatment Plant Monthly Operating Report

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Lead Operation. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. This recommand is rule, complete, and accurate

Signed: Kobert A B. rd Name (Please Type) R. Concard Name

8 12 Oate:

Telechone Na (Please Type) (941)647-1581

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£1.00m Car	July 1, 1991
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Part II - General Information

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(i) Month AUGUST Year 1998
(2) Flant's DER Identification Number 4053 P100 39
(3) Flant Name Swiss Golf
(4) Plane Address Old LUCERNE PARK ROAD
(5) City WINTERHAUEN
(5) County POLK
(1) Phone Number (941) 647-1581
(8) Permit Number D0-53-200395
(5) 2!ant Type TTT - C
(10) Test Sile Identification Number NA
(11) Fecal Caliform Sample Meined
Membrane Filter 🗌 Most Protable Number
(12) Type of Effluent Disposal or Reclaimed Water Reuse
EVAPORATION POND
(13) Limited Wet Weather Discharge Activated
(14) Cumulative Days of Wat Weather Discharge NR
(IS) Plant Stailing
Day Shiit Operator Class Care No. 008544
Evening Shift Operator Class Cert. Na
Night Shirt Operator Class Care Ma
Lead Ocerator Robert Anna WW 008544C
a change a contract

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	۳çd	050053	,048
(17) Permitted capacity	mçd		.176
(18) Three-month average daily flow	mgd	-	,051
(19) Percent of permitted capacity	%	-	29%
(20) C2ODs Efiluent .	mg/L	080082	1,55
(21) CEOD ₅ Eilluent	lbs'day		,62
(22) TSS Eifluent	mç/L	50201	1.4
(23) TSS Efluent	105/Cay	<u> </u>	.56
(24) Minimum pH			7.0
(25) Maximum pH			7.2
(25) Total N	mg/L	OCCECO	NA
(27) TKN	mç/Ĺ	000625	NA
(28) Ammonia (NH1 · N)	mg/L	000610	NA
(29) Nitrate	mg/L	071850	0,27
(30) Total Phasehorus	mg/L	000665	NA
(31) Minimum Chlonne Residual	mg/L		1.4
(32) Maximum Chlonne Rescual	mçıL		4.0
(33) Other Eilluers Parameters	1		NA
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34)		<u> </u>			1						1		[							
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41,	050	3.1			]		1	17.1	<u> </u>		 		<u> </u>			1 1	· ·			
51,0	033	2.6			1			7.0	<u> </u>	!	4 71	· · ·	<u> </u>	<u>i  </u>		<u> </u>		1	. <u>.</u>	1
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Lead Operator. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belier. This reformation is true, complete, and accurate,

ŝg Name (Please Type) Tomoney Name

9/6/48 Oate: _

Telechone No. (Please Type) (941)647-1581

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	prived in by LERA

Part II - General Information

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(i) Month SEPTEMBER Year 1998
(2) Alant's DER Identification Number 4053P100 39
(J) Plant Name Swiss Golf
(4) Plant Address Old Lucerne Pork Road
(5) City Winter haven
(5) County Polk
(7) Phone Number (941) 647-1581
(8) Permit Number DO - 53 - 200395
(S) Plant Type III-C
(10) Test Sile Identification Number NA
(11) Fecal Coliform Sample Method
Membrane Filter 🗌 Most Protable Number
(12) Type of Eifluent Disposal or Reclaimed Water Reuse
Evoporation Pord
(15) Limited Wet Weather Cischarge Activated
Yes X No Not Applicable
(14) Cumulative Days of Wet Weather Discharge NA
(15) Flant Stailing
Day Shiit Operator Class Care No. 008544
Evening Shirt Operator Class Cert. No
Night Shift Operator Class Cart. No.
Lead Ocerator Robert And WW003544C

	·		
Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mçd	050053	,057
(17) Permitted capacity	mgd		,176
(18) Three-month average daily flow	mçd	-	.054
(19) Percent ci permitted capacity	%	-	31%
(20) C200, Eiluent	mç/L	080082	2.35
(21) CBODs Eilluent	lbsday		1.12
(22) TSS Effluent	mg/L	90201	1,45
(23) TSS Efluent	lbs/day		,69
(24) Minimum pH			7.1
(25) Maximum cH			7.4
(26) Total N	mg/L	000500	NA
(27) T.K.N	mç/L	000625	NA
(28) Ammenia (NH ₃ · N)	mg/L	000610	NA
(29) Nitrate	mg/L	071850	1.38
(30) Total Phasphorus	mg/Ľ	000665	NA
(31) Minimum Chlenne Residual	mg/L		1.0
(32) Maximum Chlonne Residual	mg/L	-	3.4
(33) Other Efluert Parameters			NA
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Domestic Watterater Trauna Domestic Watterater Trauna	הבול זחו
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00-C1001 Nd	
נהאים ים מאיילו	EAL

Domestic Wastewater Treatment Plant Monthly Operating Report

34)													2		Мо	nih <u>S</u>	EPTE	ingur	_ Yezr	1998
	Flo.: (mgd)	Chlorina Residual alter Contact	Chlorine Residuel alter Dechlorination	CBODs Inliuent (mg/L)	ISS Inluent (mg/L)	CBODs Elliven (mg/L)	TSS Elliveri (mg/L)	pH Elluen	TKN Elluen! (mg/L)	NH13 - N Ellivent (mg/L)	Nitrate Ettluent (mg/L)	Total P Etliuent (mg/L)	Fecal Coliform (#/100ml)					i		
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Lad Operator. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief. This recommation is true, complete, and accurate,

Signed: 1gyd sper Name (Please Type) RF Tompany Name

10/11/98 Oate: .

Telechone Na. (Please Type) (941) 647-1581

ORIGINAL SHEET NO. 2.0

CHC VII, LTD.

WATER TARIFF

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ORIGINAL

# Table of Contents

Sheet Number
Communities Served Listing 4.0
Index of
Rates and Charges Schedules
Rules and Regulations 6.0-6.1
Service Availability Policy
Standard Forms 25.0
Technical Terms and Abbreviations
Territory Served 3.0-3.1

WATER TARIFF

(Continued from Sheet No. 6.0)

	Sheet <u>Number</u>	Rule <u>Number</u>
Protection of Company's Property	10.0	12.0
Right of Way or Easement	11.0	14.0
Signed Application Necessary	7.0	3.0
Tax Clause	12.0	18.0
Temporary Discontinuance of Service	14.0	27.0
Type and Maintenance	9.0	9.0
Unauthorized Connections - Water	12.0	20.0
Withholding Service	8.0	5.0

ORIGINAL SHEET NO. 8.0

CHC VII, LTD.

WATER TARIFF

(Continued from Sheet No. 7.0)

- 4.0 <u>APPLICATIONS BY AGENTS</u> Applications for water service requested by firms, partnerships, associations, corporations, and others shall be rendered only by duly authorized parties. When water service is rendered under agreement or agreements entered into between the Company and an agent of the principal, the use of such water service by the principal shall constitute full and complete ratification by the principal of the agreement or agreements entered into between the agent and the Company and under which such water service is rendered.
- 5.0 <u>WITHHOLDING SERVICE</u> The Company may withhold or discontinue water service rendered under application made by any member or agent of a household, organization, or business unless all prior indebtedness to the Company of such household, organization, or business for water service has been settled in full in accordance with Rule 25-30.320, Florida Administrative Code.
- 6.0 <u>EXTENSIONS</u> Extensions will be made to the Company's facilities in compliance with Commission Rules and Orders and the Company's tariff.
- 7.0 <u>LIMITATION OF USE</u> Water service purchased from the Company shall be used by the customer only for the purposes specified in the application for water service and the customer shall not sell or otherwise dispose of such water service supplied by the Company.

Water service furnished to the customer shall be rendered directly to the customer through Company's individual meter and may not be remetered by the customer for the purpose of selling or otherwise disposing of water service to lessees, tenants, or others and under no circumstances shall the customer or customer's agent or any other individual, association or corporation install meters for the purpose of so remetering said water service without the prior written consent of the Utility.

In no case shall a customer, except with the written consent of the Company, extend his lines across a street, alley, lane, court, property line, avenue, or other way

(Continued to Sheet No. 9.0)

## WATER TARIFF

(Continued from Sheet No. 8.0)

in order to furnish water service to the adjacent property through one meter even though such adjacent property may be owned by him. In case of such unauthorized extension, remetering, sale or disposition of service, the customer's water service will be subject to discontinuance until such unauthorized extension, remetering, sale or disposition of service is discontinued and full payment is made to the Company for water service rendered by the Company (calculated on proper classification and rate schedules) and until reimbursement in full is made to the Company for all extra expenses incurred for clerical work, testing, and inspections. (This shall not be construed as prohibiting a Customer from remetering.)

8.0 <u>CONTINUITY OF SERVICE</u> - The Company will at all times use reasonable diligence to provide continuous water service, and having used reasonable diligence, shall not be liable to the customer for failure or interruption of continuous water service. The Company shall not be liable for any act or omission caused directly or indirectly by strikes, labor troubles, accidents, litigations, breakdowns, shutdowns for emergency repairs, or adjustments, acts of sabotage, enemies of the United States, Wars, United States, State, Municipal or other governmental interference, acts of God or other causes beyond its control.

> If at any time the Company shall interrupt or discontinue its service, all customers affected by said interruption or discontinuance shall be given not less than 24 hours written notice.

9.0 <u>TYPE AND MAINTENANCE</u> - The customer's pipes, apparatus and equipment shall be selected, installed, used and maintained in accordance with standard practice, and shall conform with the Rules and Regulations of the Company, and shall comply with all Laws and Governmental Regulations applicable to same. The Company shall not be responsible for the maintenance and operation of the customer's pipes and facilities. The customer expressly agrees not to utilize any appliance or device which is not properly constructed, controlled and protected or which may adversely affect the water service; and the Company reserves the right to discontinue or withhold water to such apparatus or device.

(Continued to Sheet No. 10.0)

ORIGINAL SHEET NO. 16.0

# CHC VII, LTD.

WATER TARIFF

## INDEX OF RATE AND CHARGES SCHEDULES

## Sheet No.

Customers Deposits	21.0-21.1
Fire Protection Service	20.0
General Service, GS	17.0
Meter Test Deposits	22.0
Miscellaneous Service Charges	23.0
Multi-Residential Service, MS	19.0
Residential Service, RS	18.0
Service Availability Fees and Charges	24.0

WATER TARIFF

## FIRE PROTECTION SERVICE

## WATER

## AVAILABILITY -

APPLICABILITY -

<u>LIMITATIONS</u> - Subject to all of the Rules and Regulations of this Tariff and General Rules and Regulations of the Commission.

## BILLING PERIOD- N/A

<u>RATE</u> - <u>Public Fire Protection</u> - per hydrant N/A

Private Fire Protection -

N/A

BASE FACILITY CHARGE -

TERMS OF PAYMENT -

EFFECTIVE DATE -

TYPE OF FILING - Grandfather Certificate

WATER TARIFF

### CUSTOMER DEPOSITS

ESTABLISHMENT OF CREDIT - Before rendering water service, the Company may require an applicant for service to satisfactory establish credit, but such establishment of credit shall not relieve the customer from complying with the Company's Rules for prompt payment. Credit will be deemed so established, in accordance with Rule 25-30.311, Florida Administrative Code, if:

- (A) The applicant for service furnishes a satisfactory guarantor to secure payment of bills for the service requested,
- (B) The applicant pays a cash deposit,
- (C) The applicant for service furnishes an irrevocable letter of credit from a bank or surety bond.

<u>AMOUNT OF DEPOSIT</u> - The amount of initial deposit shall be the following according to meter size:

	<u>Residential</u>	<u>General Service</u>
5/8 x 3/4"	N/A	N/A
1"	N/A	N/A
1 1/2"	N/A	N/A
Over 2"	N/A	N/A

ADDITIONAL DEPOSIT - Under Rule 25-30.311(7), Florida Administrative Code, the Company may require a new deposit, where previously waived or returned, or an additional deposit in order to secure payment of current bills. The Company shall provide the customer with reasonable written notice of not less than thirty (30) days where such request or notice is separate and apart from any bill for service. The total amount of the required deposit shall not exceed an amount equal to the average actual charge for water service for two (2) monthly billing periods for the twelvemonth period immediately prior to the date of notice. In the event the customer has had service less than 12 months, the Company shall base its new or additional deposit upon the average actual monthly billing available.

(Continued to Sheet No. 21.1)

WATER TARIFF

### METER TEST DEPOSITS

<u>METER BENCH TEST REQUEST</u> - If any customer requests a bench test of his or her water meter, the Company will require a deposit to defray the cost of testing; such deposit shall not exceed the following schedule of fees and shall be in accordance with Rule 25-30.266, Florida Administrative Code:

# METER SIZE FEE

5/8 x 3/4"	\$20.00
1" and 1 1/2"	\$25.00
2" and over	Actual Cost

<u>REFUND OF METER BENCH TEST DEPOSIT</u> - If the meter is found to register in excess of prescribed accuracy limits pursuant to Rule 25-30.262, Florida Administrative Code, the deposit shall be refunded. If the meter is found to register accurately or below such prescribed accuracy limits, the deposit shall be retained by the Company as a service charge for conducting the meter test.

<u>METER FIELD TEST REQUEST</u> - Upon written request of any customer, the Company shall, without charge, make a field test of the accuracy of the water meter in use at the customer's premises provided that the meter has not been tested within one-half the maximum interval allowed under Rule 25-30.265, Florida Administrative Code.

EFFECTIVE DATE -

<u>TYPE OF FILING</u> - Grandfather Certificate

WATER TARIFF

## SERVICE AVAILABILITY FEES AND CHARGES

SERVICE AVAILABILITY FEES AND CHARGES
<u>SHEET</u>
DESCRIPTION AMOUNT NUMBER
<u>Back-Flow Preventer Installation Fee</u>
5/8 x 3/4" \$
1"\$
1 1/2" \$
2" \$
Over 2" [1]
<u>Customer Connection (Tap-in) Charge</u>
5/8 x 3/4" metered service \$
1" metered service \$
1 1/2" metered service \$
2" metered service \$
Over 2" metered service Actual Cost [1]
Guaranteed Revenue Charge
With Prepayment of Service Availability Charges:
Residential-per ERC/month ()GPD\$
All others-per gallon/month
Without Prepayment of Service Availability Charges:
Residential-per ERC/month ( )GPD \$
All others-per gallon/month \$
Inspection Fee Actual Cost [1]
Main Extension Charge
Residential-per ERC ()GPD \$
All others-per gallon \$
or
Residential-per lot ( foot frontage) \$
All others-per front foot \$
Meter Installation Fee
<u>5/8 x 3/4"</u> \$
´1"\$
1 1/2"\$
2"
Over 2"\$
Plan Review Charge Actual Cost [1]
Plant Capacity Charge
Residential-per ERC ( )GPD \$
All others-per gallon \$
System Capacity Charge
Residential-per ERC ()GPD \$
All others-per gallon \$
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[1] Actual Cost is equal to the total cost incurred for services rendered by a customer.

## EFFECTIVE DATE -

<u>TYPE OF FILING</u> - Grandfather Certificate

Ray Moats

President of General Partner

WATER TARIFF

### APPLICATION FOR WATER SERVICE

## SWISS GOLF & TENNIS CLUB MOBILE HOME PARK LEASE AGREEMENT

THIS LEASE made and entered into this _____ day of ______ 19___, by and between CHC VII, Ltd., known as Swiss Golf & Tennis Club Mobile Home park, hereinafter called the "Community" and ______, hereinafter called the Owner-tenant.

WITNESSETII, that in consideration of the covenants herein contained, on the part of the said Owner-tenant to be kept and performed, the said Community does hereby release to the said Ownertenant the following described property: Street: ______, Lot No.:

TO HAVE AND TO HOLD the same from the ______ day of ______, 19____, until the 31st day of December, the said Owner-tenant paying the initial monthly base rental of from the beginning of this Lease until the 31st day of December, 19_____. Annual monthly base rental increases for the calendar years 19_____ and subsequent years will be based on no less than \$5.00 or the increase in the Consumer Price Index (defined as the United States Department of Labor Consumer Price Index, U.S. City Average, All Urban Consumers, 1982-84 equals 100) ("CPI"), whichever is greater. Lease renewals and increases will become effective the first day of January of each year thereafter and will be a part of the Lease Agreement for that year.

Base rent will also be increased in calendar years subsequent to the initial year by any increase in real estate or other taxes and assessments by a state or local government. Such increases in taxes and assessments will be based on a prorata computation among all lots in the mobile home park and will be charged to all residents to whom this Prospectus is applicable. The mobile home owner shall be notified of the increase in base rent at least ninety (90) days prior to the increase.

Rental payments are due on or before the 1st day of each month for that month, at the place designated by the Community.

The Owner-tenant covenants and agrees to the following:

1. To make no unlawful, improper, or offensive use of the property.

2. To comply with the Rules & Regulations of the Park. A copy of said Rules & Regulations has been furnished to the Owner-tenant.

(Continued to Sheet No. 27.1)

WATER TARIFF

(Continued from Sheet No. 27.0)

3. That the Lease is governed by Chapter 723, Florida Statutes (Florida Mobile Home Act) as currently in effect at the time of execution of this document, the provisions of which are incorporated herein by reference.

4. Actions by the Owner-tenant which constitute grounds for eviction under Section 723.061, Florida Statutes, shall be a violation of this Lease. Failure of the Community to evict a tenant for violation of any one of the grounds set forth in Section 723.061, Florida Statutes, or for any grounds provided for in this Lease, shall not waive the right for the Community to consider any subsequent violation of the same grounds, or the violation of any other grounds, a breach of this Lease by Ownertenant so long as permitted by Chapter 723, Florida Statutes.

5. As provided in the Rules & Regulations, rules and regulations may be modified, eliminated, or additional rules and regulations adopted by the Community upon giving the Owner-tenant notice thereof as required by law and said Rules & Regulations in accordance with Chapter 723, Florida Statutes.

6. This Lease and the privileges contained herein are not assignable, and said Lease is only valid as long as those executing this Lease reside upon the premises set forth in this Lease, and are in full conformance of all provisions of this Lease and the park Rules & Regulations, except that a new home owner may assume, in writing, the balance of the annual Lease through December 31, of the year of purchase in accordance with Chapter 723, Florida Statutes.

7. Owner-tenant expressly understands and agrees that, upon execution of this Lease, all prior leases, rental agreement, negotiations, and other agreements between the parties regarding the lot leased are hereby terminated, void, and of no legal force and effect.

8. Storm Drainage is included in the lot rental amount and charged in accordance with Sections VII and VII(J) of the Prospectus.

(Continued to Sheet No. 27.2)

ORIGINAL SHEET NO. 27.2

WATER TARIFF

(Continued from Sheet No. 27.1)

9. Other financial obligations of the Owner-tenant, not including user fees, are as follows:

## Fees or Charges

\$ 20.00 per cut

Yard Maintenance (not charged unless owner fails to maintain yard)

Water and Sewer	up to $\frac{8000}{\text{gallons}}$ gallons excess per $\frac{1000}{\text{gal}}$ gal. over $\frac{8000}{10,000}$ up to $\frac{10}{10,000}$	$\begin{array}{c} s \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ \underline{s} \\ 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	lots 1001 through 1086	charged by the City of Winter Haven in accordance with its current rates
Tree Trimming/Remov	val, Debris Removal	
(not charged unless Or to provide services him		s billed amount
*		1.50
Late Check Charge aft	er 5th day	\$ <u>1.50</u> per day
Bad Check Charge		\$
Extra Resident Fee		\$ 10.00 per person
Debris Removal	charged in accordance with So of the Prospectus	ection VIII(K)
Governmental Assessm	ents, charged in accordance with Se	ection VIII(J)

Fees, Surcharges, Charges of the Prospectus

The fees will be charged and increased as set out in Sections VIII(F) through (K) of the Prospectus. No services are included in the lot rental amount other than those services stated above.

10. The Community reserves the right to pass on and pass through charges in accordance with the Prospectus and Chapter 723, Florida Statutes.

11. Owner-tenant(s) acknowledge that they have read the foregoing, the Rules & Regulations, and the Prospectus, and that Owner-tenant was offered the foregoing Lease prior to occupancy.

(Continued to Sheet No. 27.3)

### ORIGINAL SHEET NO. 27.3

CHC VII, LTD.

WATER TARIFF

(Continued from Sheet No. 27.2)

We have read and understand this Agreement and agree to the terms set out herein.

WITNESS our hands and seals of the date set out above.

Owner-tenant

Community Representative

Owner-tenant

(Continued to Sheet No. 27.4)

WATER TARIFF

_____

(Continued from Sheet No. 27.3)

## HIDDEN GOLF CLUB MOBILE HOME PARK LEASE AGREEMENT

THIS LEASE made and entered into this _____ day of _____, 19___, by and between CHC VII, Ltd., known as Hidden Golf Club Mobile Home park, hereinafter called the "Community" and ______, hereinafter called the Owner-tenant.

WITNESSETII, that in consideration of the covenants herein contained, on the part of the said Owner-tenant to be kept and performed, the said Community does hereby release to the said Ownertenant the following described property: Street: ______, Lot No.:

TO HAVE AND TO HOLD the same from the ______ day of ______, 19____, until the 31st day of December, the said Owner-tenant paying the initial monthly base rental of \$_______ from the beginning of this Lease until the 31st day of December, 19_____. Annual monthly base rental increases for the calendar years 19_____ and subsequent years will be based on no less than \$5.00 or the increase in the Consumer Price Index (defined as the United States Department of Labor Consumer Price Index, U.S. City Average, All Urban Consumers, 1982-84 equals 100) ("CPI"), whichever is greater. Lease renewals and increases will become effective the first day of January of each year thereafter and will be a part of the Lease Agreement for that year.

Base rent will also be increased in calendar years subsequent to the initial year by any increase in real estate or other taxes and assessments by a state or local government. Such increases in taxes and assessments will be based on a prorata computation among all lots in the mobile home park and will be charged to all residents to whom this Prospectus is applicable. The mobile home owner shall be notified of the increase in base rent at least ninety (90) days prior to the increase.

Rental payments are due on or before the 1st day of each month for that month, at the place designated by the Community.

The Owner-tenant covenants and agrees to the following:

1. To make no unlawful, improper, or offensive use of the property.

2. To comply with the Rules & Regulations of the Park. A copy of said Rules & Regulations has been furnished to the Owner-tenant.

3. That the Lease is governed by Chapter 723, Florida Statutes (Florida Mobile Home Act) as currently in effect at the time of execution of this document, the provisions of which are incorporated herein by reference.

(Continued to Sheet No. 27.5)

WATER TARIFF

(Continued from Sheet No. 27.4)

4. Actions by the Owner-tenant which constitute grounds for eviction under Section 723.061, Florida Statutes, shall be a violation of this Lease. Failure of the Community to evict a tenant for violation of any one of the grounds set forth in Section 723.061, Florida Statutes, or for any grounds provided for in this Lease, shall not waive the right for the Community to consider any subsequent violation of the same grounds, or the violation of any other grounds, a breach of this Lease by Ownertenant so long as permitted by Chapter 723, Florida Statutes.

5. As provided in the Rules & Regulations, rules and regulations may be modified, eliminated, or additional rules and regulations adopted by the Community upon giving the Owner-tenant notice thereof as required by law and said Rules & Regulations in accordance with Chapter 723, Florida Statutes.

6. This Lease and the privileges contained herein are not assignable, and said Lease is only valid as long as those executing this Lease reside upon the premises set forth in this Lease, and are in full conformance of all provisions of this Lease and the park Rules & Regulations, except that a new home owner may assume, in writing, the balance of the annual Lease through December 31, of the year of purchase in accordance with Chapter 723, Florida Statutes.

7. Owner-tenant expressly understands and agrees that, upon execution of this Lease, all prior leases, rental agreement, negotiations, and other agreements between the parties regarding the lot leased are hereby terminated, void, and of no legal force and effect.

8. Storm drainage is included in the lot rental amount and charged in accordance with Sections VII and VIII(J) of the Prospectus.

9. Other financial obligations of the Owner-tenant, not including user fees, are as follows:

Fees or Charges

Yard Maintenance (not charged unless owner<br/>fails to maintain yard)\$ 20.00 per cutWater and Sewerup to  $\underline{8000}$  gallons\$  $\underline{15.71}$ <br/> $\underline{1.31}$ <br/>excess per  $\underline{1000}$  gal. over  $\underline{8000}$  up to  $\underline{10.000}$ \$  $\underline{1.31}$ <br/> $\underline{2.09}$ 

Tree Trimming/Removal, Debris Removal (not charged unless Owner-tenant fails to provide services himself)

sbilled amount

(Continued to Sheet No. 27.6)

ORIGINAL SHEET NO. 27.6

CHC VII, LTD.

WATER TARIFF

1

(Continued from Sheet No. 27.5)

Late Check Charge after 5th day	\$ <u>1.50</u> per day
Bad Check Charge	\$ <u>15.00</u>
Extra Resident Fee	\$ 10.00 per person
Debris Removal	charged in accordance with Section VIII(K) of the Prospectus

Governmental Assessments, Fees, Surcharges, and Charges charged in accordance with Section VIII(J) of the Prospectus

The fees will be charged and increased as set out in Sections VIII(F) through (K) of the Prospectus. No services are included in the lot rental amount other than those services stated above.

10. The Community reserves the right to pass on and pass through charges in accordance with the Prospectus and Chapter 723, Florida Statutes.

11. Owner-tenant(s) acknowledge that they have read the foregoing, the Rules & Regulations, and the Prospectus, and that Owner-tenant was offered the foregoing Lease prior to occupancy.

We have read and understand this Agreement and agree to the terms set out herein.

WITNESS our hands and seals of the date set out above.

Owner-tenant

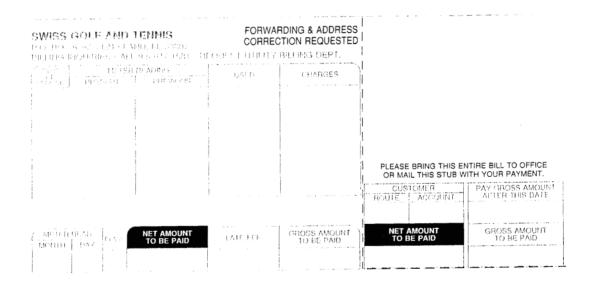
Community Representative

Owner-tenant

#### WATER TARIFF

### COPY OF CUSTOMER'S BILL

HIDDEN P.O. BOX		AND, FL 33807		RDING & ADDRESS CTION REQUESTED BILLING DEPT.			
OF SERVICE	METER READING E PRESENT PREVIOUS		LISED		CHARGES		
					PLEASE BRING THIS E OR MAIL THIS STUB V CUSTOMER ROUTE ACCOUNT		
METER	READ DAY CLASS	NET AMOUNT TO BE PAID	LATE FEE	GROSS AMOUNT TO BE PAID	NET AMOUNT TO BE PAID	GROSS AMOUNT TO BE PAID	



ORIGINAL SHEET NO. 2.0

WASTEWATER TARIFF

Table of Conte
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Service Availability Policy	27.0
Standard Forms	23.0
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Territory Served	3.0-3.1

WASTEWATER TARIFF

(Continued from Sheet No. 5.0)

- 10.0 <u>"POINT OF COLLECTION"</u> For wastewater systems, "Point of Collection" shall mean the point at which the Company's piping, fittings, and valves connect with the customer's piping, fittings, and valves.
- 11.0 <u>"RATE SCHEDULE"</u> The rate(s) or charge(s) for a particular classification of service plus the several provisions necessary for billing, including all special terms and conditions under which service shall be furnished at such rate or charge.
- 12.0 <u>"SERVICE"</u> Service, as mentioned in this tariff and in agreement with customers, shall be construed to include, in addition to all wastewater service required by the customer the readiness and ability on the part of the Company to furnish wastewater service to the customer. Service shall conform to the standards set for in Section 367.111 of the Florida Statutes.
- 13.0 <u>"SERVICES LINES"</u> The pipe between the Company's mains and the point of collection which includes all the pipe, fittings and valves necessary to make the connection to the customer's premises.
- 14.0 <u>"TERRITORY"</u> The geographical area described by metes and bounds with township, range and section in a certificate, which may be within or without the boundaries of an incorporated municipality, and may include areas in more than one county.

## WASTEWATER TARIFF

# INDEX OF RULES AND REGULATIONS

	Sheet <u>Number</u>	Rule <u>Number</u>
Access to Premises	10.0	13.0
Adjustment of Bills	13.0	21.0
Applications by Agents	7.0	4.0
Billing Periods	11.0	15.0
Change of Customer's Installation	9.0	10.0
Change of Occupancy	12.0	19.0
Continuity of Service	9.0	8.0
Delinquent Bills	11.0	16.0
Evidence of Consumption	13.0	23.0
Extensions	8.0	6.0
Filing of Contracts	13.0	22.0
General Information	7.0	2.0
Held for Future Use	14.0-15.0	
Inspection of Customer's Installation	10.0	11.0
Limitation of Use	8.0	7.0
Payment of Wastewater and Water Service Bills Concurrently	11.0	17.0
Policy Dispute	7.0	1.0
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Right of Way or Easements	10.0	14.0
Signed Application Necessary	7.0	3.0
(Continued to Sheet No. 6.1)		

ORIGINAL SHEET NO. 6.1

WASTEWATER TARIFF

(Continued for Sheet No. 6.0)

	Sheet <u>Number</u>	
Tax Clause	12.0	18.0
Temporary Discontinuance of Service	13.0	23.1
Type and Maintenance	9.0	9.0
Unauthorized Connections - Wastewater	12.0	20.0
Withholding Service	8.0	5.0

WASTEWATER TARIFF

## RULES AND REGULATIONS

- 1.0 <u>POLICY DISPUTE</u> Any dispute between the Company and the customer or prospective customer regarding the meaning or application of any provision this tariff shall upon writ ten request by either party be resolved by the Florida Public Service Commission.
- 2.0 <u>GENERAL INFORMATION</u> The Company's Rules and Regulations insofar as they are inconsistent with any Statute, Law, Rule or Commission Order shall be null and void. These Rules and Regulations are a part of the rate schedules and applications and contracts of the Company, and in the absence of specific written agreement to the contrary, apply without modification or change to each and every customer to whom the Company renders wastewater service.

In the event that a portion of these Rules and Regulations are declared unconstitutional or void for any reason by any court of competent jurisdiction, such decision shall in no way affect the validity of the remaining portions of the Rules and Regulations for wastewater service unless such court order or decision shall so direct.

The Company shall provide to all customers requiring such service within the territory described in its certificate upon such terms as are set forth in this tariff pursuant to Chapter 25-9 and 25-30, Florida Administrative Code, and Chapter 367, Florida Statutes.

3.0 <u>SIGNED APPLICATION NECESSARY</u> - Wastewater service is furnished only after a signed application or agreement and payment of the initial connection fee are accepted by the Company. The conditions of such application or agreement are binding upon the customer as well upon the Company. A copy of the application or agreement for wastewater service accepted by the Company will be furnished to the applicant on request.

The applicant shall furnish to the Company the correct name and street address or lot and block number at which wastewater service is to be rendered.

4.0 <u>APPLICATIONS BY AGENTS</u> - Applications for wastewater service requested by firms, partnerships, associations, corporations, and others shall be rendered only by duly

(Continued to Sheet No. 8.0)

WASTEWATER TARIFF

(Continued from Sheet No. 7.0)

authorized parties. When wastewater service is rendered under agreement or agreements entered into between the Company and an agent of the principal, the use of such wastewater service by the principal or agent shall constitute full and complete ratification by the principal of the agreement or agreements entered into between agent and the Company and under which such wastewater service is rendered.

- 5.0 <u>WITHHOLDING SERVICE</u> The Company may withhold or discontinue wastewater service rendered under application made by any member or agent of a household, organization, or business unless all prior indebtedness to the Company of such household, organization, or business for wastewater service has been settled in full in accordance with Rule 25-30.320, Florida Administrative Code.
- 6.0 <u>EXTENSIONS</u> Extensions will be made to the Company's facilities in compliance with Commission Rules and Orders and the Company's tariff.
- 7.0 <u>LIMITATION OF USE</u> Wastewater service purchased from the Company shall be used by the consumer only for the purposes specified in the application for wastewater service. Wastewater service rendered to the customer for the consumer's own use and shall be collected directly into the Company's main wastewater lines.

In no case shall a customer, except with the written consent of the Company, extend his lines across a street, alley, lane, court, property line, avenue, or other way in order to furnish wastewater service to the adjacent property even though such adjacent property may be owned by him. In case of such unauthorized extension, remetering, sale, or disposition of service, the consumer's wastewater service will be is subject to discontinuance until such unauthorized extension, remetering, sale, or disposition of service discontinued and full payment is made to the Company for wastewater service rendered by the Company (calculated on proper classifications and rate schedules)

(Continued to Sheet No. 9.0)

## WASTEWATER TARIFF

(Continued from Sheet No. 8.0)

and until reimbursement in full made to the Company for all extra expenses incurred for clerical work, testing, and inspections. (This shall not be construed as prohibiting a Customer from remetering.)

8.0 <u>CONTINUITY OF SERVICE</u> - The Company will at all times use reasonable diligence to provide continuous wastewater service, and having used reasonable diligence, shall not be liable to the customer for failure or interruption of continuous wastewater service. The Company shall not be liable for any act or omission caused directly or indirectly by strikes, labor troubles, accidents, litigations, breakdowns, shutdowns for emergency repairs, or adjustments, acts of sabotage, enemies of the United States, Wars, United States, State, Municipal or other governmental interference, acts of God or other causes beyond its control.

If at any time the Company shall interrupt or discontinue its service, all customers affected by said interruption or discontinuance shall be given not less than twenty-four (24) hours written notice.

- 9.0 <u>TYPE AND MAINTENANCE</u> The customer's pipes, apparatus and equipment shall be selected, installed, used and maintained in accordance with standard practice and shall conform with the Rules and Regulations of the Company and shall comply with all Laws and Governmental Regulations applicable to same. The Company shall not be responsible for the maintenance and operation of the customer's pipes and facilities. The customer expressly agrees not to utilize any appliance or device which is not properly constructed, controlled and protected, or which may adversely affect the wastewater service; the Company reserves the right to discontinue or withhold wastewater service to such apparatus or device.
- 10.0 <u>CHANGE OF CUSTOMER'S INSTALLATION</u> No changes or increases in customer's installation, which will materially affect the proper operation of the pipes, mains, or stations of the Company, shall be made without written consent of the Company. The customer shall be liable for any change resulting from a violation of this Rule.

(Continued to Sheet No. 10.0)

WASTEWATER TARIFF

(Continued from Sheet No. 9.0)

11.0 <u>INSPECTION OF CUSTOMER'S INSTALLATION</u> - All Customer's wastewater service installations or changes shall be inspected upon completion by a competent authority to ensure that customer's piping, equipment, and devices have been installed in accordance with accepted standard practice and local Laws and Governmental Regulations. Where Municipal or other Governmental inspection is required by local Rules and Ordinances, the Company cannot render wastewater service until such inspection has been made and a formal notice of approval from the inspecting authority has been received by the Company.

> Notwithstanding the above, the Company reserves the right to inspect the customer's installation prior to rendering wastewater service, and from time to time thereafter, but assumes no responsibility whatsoever for any portion thereof.

12.0 <u>PROTECTION OF COMPANY'S PROPERTY</u> - The customer shall exercise reasonable diligence to protect the Company's property on the customer's premises and shall knowingly permit no one, but the Company's agents or persons authorized by law, to have access to the Company's pipes and apparatus.

> In the event of any loss or damage to property of the Company caused by or arising out of carelessness, neglect, or misuse by the customer, the cost of making good such loss or repairing such damage shall be paid by the customer.

- 13.0 <u>ACCESS TO PREMISES</u> The duly authorized agents of the Company shall have access at all reasonable hours to the premises of the customer for the purpose of installing, maintaining, inspecting, or removing the Company's property or for performance under or termination of the Company's agreement with the customer and under such performance shall not be liable for trespass.
- 14.0 <u>RIGHT OF WAY OR EASEMENTS</u> The customer shall grant or cause to be granted to the Company, and without cost to the Company, all rights, easements, permits, and privileges which are necessary for the rendering of wastewater service.

(Continued to Sheet No. 11.0)

WASTEWATER TARIFF (Continued from Sheet No. 10.0)

- 15.0 <u>BILLING PERIODS</u> Customers pay the base charge monthly, in advance, in the lot rental amount but not in the base rent. The Utility bills customers quarterly, in arrears, for the excess consumption charges. Bills shall become due when rendered and be considered as received by the customer when delivered or mailed to the water service address or some other place mutually agreed upon. Nonreceipt of bills by the customer shall not release or diminish the obligation of the customer with respect to payment thereof.
- 16.0 <u>DELINQUENT BILLS</u> Bills are due when rendered. However, the Company shall not consider the customer delinquent in paying any bill until the twenty-first (21) day after the Company has mailed or presented the bill to the customer for payment. Wastewater service may then be discontinued only after the Company has mailed or presented within five (5) working days a written notice to the customer in accordance with Rule 25-30.320, Florida Administrative Code. Wastewater service shall be restored only after the Company has received payment for all past-due bills and reconnect charges from the customer.

There shall be no liability of any kind against the Company for the discontinuance of wastewater service to a customer for that customer's failure to pay the bills on time.

Partial payment of any bill for wastewater service rendered will not be accepted by the Company, except by the Company's agreement thereof or by direct order from the Commission.

17.0 PAYMENT OF WASTEWATER AND WATER SERVICE BILLS CONCURRENT-LY - When both wastewater and water service are provided by the Company, payment of any wastewater service bill rendered by the Company to a customer shall not be accepted by the Company without the simultaneous or concurrent payment of any water service bill rendered by the Company. The Company may discontinue both wastewater service and water service to the customer's premises for non-payment of the wastewater service bill or water service bill or if payment is not made concurrently. The Company shall not re-establish or reconnect wastewater service and/or water service until such time as all wastewater and water service bills and all charges are paid.

(Continued to Sheet No. 12.0)

WASTEWATER TARIFF

(Continued from Sheet No. 11.0)

- 18.0 <u>TAX CLAUSE</u> A municipal or county franchise tax levied upon a wastewater or water public utility shall not be incorporated into the rate for wastewater or water service but shall be shown as a separate item on the utility's bills to its customers in such Municipality or County.
- 19.0 CHANGE OF OCCUPANCY - When a change of occupancy takes place on any premises supplied by the Company with wastewater service, written notice thereof shall be given at the office of the Company not less than three (3) days prior to the date of change by the outgoing Customer. The outgoing customer shall be held responsible for all wastewater service rendered on such premises until such written notice is so received by the Company and the Company has had reasonable time to discontinue the wastewater service. However, if such written notice has not been received, the application of a succeeding occupant for wastewater service will automatically terminate the prior account. The customer's deposit may be transferred from one service location to another, if both locations are supplied wastewater service by the Company; the customer's deposit may not be transferred from one name to another.

Notwithstanding the above, the Company will accept telephone orders, for the convenience of its customers, to discontinue or transfer wastewater service from one service address to another and will use all reasonable diligence in the execution thereof. However, oral orders or advice shall not be deemed binding or be considered formal notification to the Company.

20.0 <u>UNAUTHORIZED CONNECTIONS - WASTEWATER</u> - Connections to the Company's wastewater system for any purpose whatsoever are to be made only by employees of the Company. Any unauthorized connections to the customer's wastewater service shall be subject to immediate discontinuance without notice. Wastewater service shall not be restored until such unauthorized connections have been removed and until settlement is made in full to the Company for all wastewater service estimated by the Company to have been used by reason of such unauthorized connection.

(Continued to Sheet No. 13.0)

WASTEWATER TARIFF

(Continued from Sheet No. 12.0)

- 21.0 <u>ADJUSTMENT OF BILLS</u> When a customer has been overcharged or undercharged as a result of incorrect application of the rate schedule, incorrect reading of a water meter, or similar reasons, the amount may be credited or billed to the customer in accordance with Rule 25-30.340 and 25-30.350, Florida Administrative Code.
- 22.0 <u>FILING OF CONTRACTS</u> Whenever a Developer Agreement or Contract, Guaranteed Revenue Contract, or Special Contract or Agreement is entered into by the Company for the sale of its product or services in a manner not specifically covered by its Rules and Regulations or approved Rate Schedules, a copy of such contracts or agreements shall be filed with the Commission prior to its execution in accordance with Rules 25-9.034 and Rule 25-30.550, Florida Administrative Code. If such contracts or agreements are approved by the Commission, a conformed copy shall be placed on file with the Commission prior to its effective date.
- 23.0 <u>EVIDENCE OF CONSUMPTION</u> The initiation or continuation or resumption of water service to the customer's premises shall constitute the initiation or continuation or resumption of wastewater service to the customer's premises regardless of occupancy.
- 23.1 <u>TEMPORARY DISCONTINUANCE OF SERVICE</u> At any time a customer may request a temporary discontinuance of service in order to insure that customer is not billed for any wastewater usage during the period of time in which that premises is not occupied or otherwise utilized. The customer will, however, be liable for payment of the base facility charge during the entire period of time the temporary disconnect remains in effect, in order for the Company to be able to recover its fixed cost of having wastewater service available to those premises upon request by the customer.

ORIGINAL SHEET NO. 14.0

WASTEWATER TARIFF

# HELD FOR FUTURE USE

ORIGINAL SHEET NO. 15.0

WASTEWATER TARIFF

.

## HELD FOR FUTURE USE

ORIGINAL SHEET NO. 16.0

WASTEWATER TARIFF

# INDEX OF RATES AND CHARGES SCHEDULES

## Sheet No.

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Residential Service, RS	18.0
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ORIGINAL SHEET NO. 17.0

WASTEWATER TARIFF

### GENERAL SERVICE

### RATE SCHEDULE GS

- <u>AVAILABILITY</u> Available throughout the area serviced by the Company.
- <u>APPLICABILITY</u> For water service to all customers for which no other schedule applies.
- LIMITATIONS Subject to all of the Rules and Regulations of this tariff and General Rules and Regulations of the Commission.

BILLING PERIOD- N/A

 $\frac{RATE}{} - N/A$ 

MINIMUM BILL - N/A

TERMS OF PAYMENT - Bills are due and payable when rendered and become delinquent if not paid within twenty (20) days. After five (5) working days' written notice is mailed to the customer separate and apart from any other bill, service may then be discontinued.

EFFECTIVE DATE -

<u>TYPE OF FILING</u> - Grandfather Certificate

WASTEWATER TARIFF

#### RESIDENTIAL SERVICE

## RATE SCHEDULE RS

- <u>AVAILABILITY</u> Available throughout the area served by the Company.
- <u>APPLICABILITY</u> For water and wastewater service for all purposes in private residences and individually metered apartment units
- <u>LIMITATIONS</u> Subject to all of the Rules and Regulations of this tariff and General Rules and Regulations of the Commission.
- <u>BILLING PERIOD</u>- Base Charge: Monthly in advance Excess Consumption Charge: Quarterly in arrears
- <u>RATE</u> Water and Wastewater for 5/8x3/4" Meters:

Up to 8,000 gallons\$15.00per 1,000 gal. over 8,000 up to 10,000\$ 1.25per 1,000 gal. over 10,000\$ 2.00

MINIMUM BILL - \$15.00

TERMS OF PAYMENT - Bills are due and payable when rendered and become delinquent if not paid within twenty (20) days. After five (5) working days' written notice is mailed to the customer separate and apart from any other bill, service may then be discontinued.

EFFECTIVE DATE

<u>TYPE OF FILING</u> - Grandfather Certificate

WASTEWATER TARIFF

## MULTI-RESIDENTIAL SERVICE

#### RATE SCHEDULE MS

- <u>AVAILABILITY</u> Available throughout the Sumter County systems.
- <u>APPLICABILITY</u> For wastewater service to all master-metered residential customers including, but not limited to, Condominiums, Apartments, and Mobile Home Parks.
- LIMITATIONS Subject to all of the Rules and Regulations of this tariff and General Rules and Regulations of the Commission.
- BILLING PERIOD Monthly
- RATE Per Unit

Base Facilities Charge

All meter sizes

N/A

Gallonage Charge per 1,000 gallons N/A

BASE FACILITY CHARGE - N/A

- TERMS OF PAYMENT Bills are due and payable when rendered and become delinquent if not paid within twenty (20) days. After five (5) working days' written notice is mailed to the customer separate and apart from any other bill, service may then be discontinued.
- EFFECTIVE DATE -
- TYPE OF FILING -

WASTEWATER TARIFF

### CUSTOMER DEPOSITS

ESTABLISHMENT OF CREDIT - Before rendering wastewater service, the Company may require an applicant for service to satisfactory establish credit, but such establishment of credit shall not relieve the customer from complying with the Company's Rules for prompt payment. Credit will be deemed so established, in accordance with Rule 25-30.311, Florida Administrative Code, if:

- (A) The applicant for service furnishes a satisfactory guarantor to secure payment of bills for the service requested,
- (B) The applicant pays a cash deposit,
- (C) The applicant for service furnishes an irrevocable letter of credit from a bank or surety bond.

<u>AMOUNT OF DEPOSIT</u> - The amount of initial deposit shall be the following according to meter size:

	<u>Residential</u>	<u>General Service</u>
5/8 x 3/4"	N/A	N/A
1"	N/A	N/A
1 1/2"	N/A	N/A
Over 2"	N/A	N/A

ADDITIONAL DEPOSIT - Under Rule 25-30.311(7), Florida Administrative Code, the Company may require a new deposit, where previously waived or returned, or an additional deposit in order to secure payment of current bills. The Company shall provide the customer with reasonable written notice of not less than thirty (30) days where such request or notice is separate and apart from any bill for service. The total amount of the required deposit shall not exceed an amount equal to the average actual charge for wastewater service for two (2) monthly billing periods for the twelve-month period immediately prior to the date of notice. In the event the customer has had service less than 12 months, the Company shall base its new or additional deposit upon the average actual monthly billing available.

(Continued to Sheet No. 20.1)

ORIGINAL SHEET NO. 20.1

WASTEWATER TARIFF

(Continued from Sheet No. 20.0)

<u>INTEREST ON DEPOSIT</u> - The Company shall pay interest on customer deposits pursuant to Rule 25-30.311(4)(a). The rate of interest is six percent (6%) per annum. The payment of interest shall be made once each year as a credit on regular bills or when service is discontinued as a credit on final bills. No customer depositor will receive interest on his or her deposit until a customer relationship and the deposit have been in existence for at least six (6) months. At such time, the customer depositor shall be entitled to receive interest from the day of the commencement of the customer relationship and placement of the deposit. The Company will pay or credit accrued interest to the customer's account during the month of <u>N/A</u> each year.

<u>REFUND OF DEPOSIT</u> - After a residential customer has established a satisfactory payment record and has had continuous service for a period of twenty-three (23) months, the Company shall refund the customer's deposit provided the customer has <u>not</u>, in the preceding twelve (12) months:

- (a) made more than one late payment of the bill (after the expiration of twenty (20) days form the date of mailing or delivery by the Company),
- (b) paid with a check refused by a bank,
- (c) been disconnected or non-payment, or
- (d) at any time tampered with the meter or used service in a fraudulent or unauthorized manner.

Notwithstanding the above, the Company may hold the deposit of a non-residential customer after a continuous service period of twenty-three (23) months and shall pay interest on the non-residential customer's deposit at the rate of seven percent (7%) per annum upon retainment of such deposit.

Nothing in this rule shall prohibit the Company from refunding a customer's deposit in less than twenty-three (23) months.

EFFECTIVE DATE -

<u>TYPE OF FILING</u> - Grandfather Certificate

WASTEWATER TARIFF

#### MISCELLANEOUS SERVICE CHARGES

The company may charge the following miscellaneous service charges in accordance with the terms stated herein. If both water and wastewater services are provided, only a single charge is appropriate unless circumstances beyond the control of the Company require multiple actions.

> <u>INITIAL CONNECTION</u> - This charge would be levied for service initiation at a location where service did not exist previously.

<u>NORMAL RECONNECTION</u> - This charge would be levied for transfer of service to a new customer account at a previously served location or reconnection of service subsequent to a customer requested disconnection.

<u>VIOLATION RECONNECTION</u> - This charge would be levied prior to reconnection of an existing customer after disconnection of service for cause according to Rule 25-30.320(2), Florida Administrative Code, including a delinquency in bill payment.

<u>PREMISES VISIT CHARGE (IN LIEU OF DISCONNECTION)</u> - This charge would be levied when a service representative visits a premises for the purpose of discontinuing service for nonpayment of a due and collectible bill and does not discontinue service because the customer pays the service representative or otherwise makes satisfactory arrangements to pay the bill.

#### Schedule of Miscellaneous Service Charges

Initial Connection	N/A
Normal Reconnection	N/A
Violation Reconnection	N/A
Premises Visit (in lieu of disconnection)	N/A

[1] Actual cost is equal to the total cost incurred for services.

#### EFFECTIVE DATE -

<u>TYPE OF FILING</u> - Grandfather Certificate

WASTEWATER TARIFF

# SERVICE AVAILABILITY FEES AND CHARGES

DESCRIPTION	AMOUNT	<u>SHEET</u> NUMBER
Customer Connection (Tap-in) Charge 5/8 x 3/4" metered service 1" metered service 1 1/2" metered service 2" metered service Over 2" metered service	\$ \$ \$	st [1]
Guaranteed Revenue Charge With Prepayment of Service Availability Charges Residential-per ERC/month ()GPD All others-per gallon/month Without Prepayment of Service Availability Char Residential-per ERC/month ()GPD All others-per gallon/month	\$ \$ ges <b>:</b> \$	
Inspection Fee	Actual Co	st [1]
Main Extension Charge Residential-per ERC ()GPD All others-per gallon or Residential-per lot (foot frontage)	\$	
All others-per front foot		
Plan Review Charge	Actual Co	st [1]
Plant Capacity Charge Residential-per ERC ()GPD All others-per gallon		
System Capacity Charge Residential-per ERC ()GPD All others-per gallon	\$ \$	
[1] Actual Cost is equal to the total cost incur rendered by a customer.	red for s	ervices

EFFECTIVE DATE -

TYPE OF FILING -

WASTEWATER TARIFF

## INDEX OF STANDARD FORMS

## Sheet No.

APPLICATION FOR WASTEWATER SERVICE	25.0
COPY OF CUSTOMER'S BILL	26.0
CUSTOMER'S GUARANTEE DEPOSIT RECEIPT	24.0

# ORIGINAL SHEET NO. 24.0

WASTEWATER TARIFF

# CUSTOMER'S GUARANTEE DEPOSIT RECEIPT

N/A

WASTEWATER TARIFF

#### APPLICATION FOR WASTEWATER SERVICE

## SWISS GOLF & TENNIS CLUB MOBILE HOME PARK LEASE AGREEMENT

THIS LEASE made and entered into this _____ day of _____, 19__, by and between CHC VII, Ltd., known as Swiss Golf & Tennis Club Mobile Home park, hereinafter called the "Community" and ______, hereinafter called the Owner-tenant.

WITNESSETH, that in consideration of the covenants herein contained, on the part of the said Owner-tenant to be kept and performed, the said Community does hereby release to the said Ownertenant the following described property: Street: ______, Lot No.:

TO HAVE AND TO HOLD the same from the ______ day of ______, 19____, until the 31st day of December, the said Owner-tenant paying the initial monthly base rental of \$_______ from the beginning of this Lease until the 31st day of December, 19_____. Annual monthly base rental increases for the calendar years 19_____ and subsequent years will be based on no less than \$5.00 or the increase in the Consumer Price Index (defined as the United States Department of Labor Consumer Price Index, U.S. City Average, All Urban Consumers, 1982-84 equals 100) ("CPI"), whichever is greater. Lease renewals and increases will become effective the first day of January of each year thereafter and will be a part of the Lease Agreement for that year.

Base rent will also be increased in calendar years subsequent to the initial year by any increase in real estate or other taxes and assessments by a state or local government. Such increases in taxes and assessments will be based on a prorata computation among all lots in the mobile home park and will be charged to all residents to whom this Prospectus is applicable. The mobile home owner shall be notified of the increase in base rent at least ninety (90) days prior to the increase.

Rental payments are due on or before the 1st day of each month for that month, at the place designated by the Community.

The Owner-tenant covenants and agrees to the following:

1. To make no unlawful, improper, or offensive use of the property.

2. To comply with the Rules & Regulations of the Park. A copy of said Rules & Regulations has been furnished to the Owner-tenant.

(Continued to Sheet No. 25.1)

WASTEWATER TARIFF

(Continued from Sheet No. 25.0)

3. That the Lease is governed by Chapter 723, Florida Statutes (Florida Mobile Home Act) as currently in effect at the time of execution of this document, the provisions of which are incorporated herein by reference.

4. Actions by the Owner-tenant which constitute grounds for eviction under Section 723.061, Florida Statutes, shall be a violation of this Lease. Failure of the Community to evict a tenant for violation of any one of the grounds set forth in Section 723.061, Florida Statutes, or for any grounds provided for in this Lease, shall not waive the right for the Community to consider any subsequent violation of the same grounds, or the violation of any other grounds, a breach of this Lease by Ownertenant so long as permitted by Chapter 723, Florida Statutes.

5. As provided in the Rules & Regulations, rules and regulations may be modified, eliminated, or additional rules and regulations adopted by the Community upon giving the Owner-tenant notice thereof as required by law and said Rules & Regulations in accordance with Chapter 723, Florida Statutes.

6. This Lease and the privileges contained herein are not assignable, and said Lease is only valid as long as those executing this Lease reside upon the premises set forth in this Lease, and are in full conformance of all provisions of this Lease and the park Rules & Regulations, except that a new home owner may assume, in writing, the balance of the annual Lease through December 31, of the year of purchase in accordance with Chapter 723, Florida Statutes.

7. Owner-tenant expressly understands and agrees that, upon execution of this Lease, all prior leases, rental agreement, negotiations, and other agreements between the parties regarding the lot leased are hereby terminated, void, and of no legal force and effect.

8. Storm Drainage is included in the lot rental amount and charged in accordance with Sections VII and VII(J) of the Prospectus.

(Continued to Sheet No. 25.2)

#### WASTEWATER TARIFF

### (Continued from Sheet No. 25.1)

Other financial obligations of the Owner-tenant, not including user fees, are as follows: 9.

## Yard Maintenance (not charged unless owner fails to maintain yard)

Water and Sewer	up to $\frac{8000}{\text{gallons}}$ excess per $\frac{1000}{\text{gal}}$ gal. over $\frac{8000}{\text{up}}$ up to $\frac{10,000}{10,000}$
	excess per 1000 gal. over 8000 up to 10,000
	excess per 1000 gal. over 10,000

lots 1001 through 1086

charged by the City of Winter Haven in accordance with its current rates

Tree Trimming/Removal, Debris Rem (not charged unless Owner-tenant fail to provide services himself)	
Late Check Charge after 5th day	\$ <u>1.50</u> per day
Bad Check Charge	\$
Extra Resident Fee	<u>\$ 10.00</u> per person
Debris Removal	charged in accordance with Section VIII(K) of the Prospectus

Governmental Assessments,	charged in accordance with Section VIII(J)
Fees, Surcharges, Charges	of the Prospectus

The fees will be charged and increased as set out in Sections VIII(F) through (K) of the Prospectus. No services are included in the lot rental amount other than those services stated above.

The Community reserves the right to pass on and pass through charges in accordance with 10. the Prospectus and Chapter 723, Florida Statutes.

Owner-tenant(s) acknowledge that they have read the foregoing, the Rules & Regulations, 11. and the Prospectus, and that Owner-tenant was offered the foregoing Lease prior to occupancy.

(Continued to Sheet No. 25.3)

Ray Moats President of General Partner

#### ORIGINAL SHEET NO. 25.2

Fees or Charges

\$ 20.00 per cut

\$ 15.71 s 1.31 \$ 2.09

CHC VII, LTD.

WASTEWATER TARIFF

(Continued from Sheet No. 25.2)

We have read and understand this Agreement and agree to the terms set out herein.

WITNESS our hands and seals of the date set out above.

Owner-tenant

Community Representative

Owner-tenant

(Continued to Sheet No. 25.4)

_____

## WASTEWATER TARIFF

(Continued from Sheet No. 25.3)

## HIDDEN GOLF CLUB MOBILE HOME PARK LEASE AGREEMENT

THIS LEASE made and entered into this _____ day of _____, 19___, by and between CHC VII, Ltd., known as Hidden Golf Club Mobile Home park, hereinafter called the "Community" and ______, hereinafter called the Owner-tenant.

WITNESSETII, that in consideration of the covenants herein contained, on the part of the said Owner-tenant to be kept and performed, the said Community does hereby release to the said Ownertenant the following described property: Street: ______, Lot No.:

TO HAVE AND TO HOLD the same from the ______ day of ______, 19____, until the 31st day of December, the said Owner-tenant paying the initial monthly base rental of \$_______ from the beginning of this Lease until the 31st day of December, 19______. Annual monthly base rental increases for the calendar years 19_____ and subsequent years will be based on no less than \$5.00 or the increase in the Consumer Price Index (defined as the United States Department of Labor Consumer Price Index, U.S. City Average, All Urban Consumers, 1982-84 equals 100) ("CPI"), whichever is greater. Lease renewals and increases will become effective the first day of January of each year thereafter and will be a part of the Lease Agreement for that year.

Base rent will also be increased in calendar years subsequent to the initial year by any increase in real estate or other taxes and assessments by a state or local government. Such increases in taxes and assessments will be based on a prorata computation among all lots in the mobile home park and will be charged to all residents to whom this Prospectus is applicable. The mobile home owner shall be notified of the increase in base rent at least ninety (90) days prior to the increase.

Rental payments are due on or before the 1st day of each month for that month, at the place designated by the Community.

The Owner-tenant covenants and agrees to the following:

1. To make no unlawful, improper, or offensive use of the property.

2. To comply with the Rules & Regulations of the Park. A copy of said Rules & Regulations has been furnished to the Owner-tenant.

3. That the Lease is governed by Chapter 723, Florida Statutes (Florida Mobile Home Act) as currently in effect at the time of execution of this document, the provisions of which are incorporated herein by reference.

(Continued to Sheet No. 25.5)

WASTEWATER TARIFF

(Continued from Sheet No. 25.4)

4. Actions by the Owner-tenant which constitute grounds for eviction under Section 723.061, Florida Statutes, shall be a violation of this Lease. Failure of the Community to evict a tenant for violation of any one of the grounds set forth in Section 723.061, Florida Statutes, or for any grounds provided for in this Lease, shall not waive the right for the Community to consider any subsequent violation of the same grounds, or the violation of any other grounds, a breach of this Lease by Ownertenant so long as permitted by Chapter 723, Florida Statutes.

5. As provided in the Rules & Regulations, rules and regulations may be modified, eliminated, or additional rules and regulations adopted by the Community upon giving the Owner-tenant notice thereof as required by law and said Rules & Regulations in accordance with Chapter 723, Florida Statutes.

6. This Lease and the privileges contained herein are not assignable, and said Lease is only valid as long as those executing this Lease reside upon the premises set forth in this Lease, and are in full conformance of all provisions of this Lease and the park Rules & Regulations, except that a new home owner may assume, in writing, the balance of the annual Lease through December 31, of the year of purchase in accordance with Chapter 723, Florida Statutes.

7. Owner-tenant expressly understands and agrees that, upon execution of this Lease, all prior leases, rental agreement, negotiations, and other agreements between the parties regarding the lot leased are hereby terminated, void, and of no legal force and effect.

8. Storm drainage is included in the lot rental amount and charged in accordance with Sections VII and VIII(J) of the Prospectus.

9. Other financial obligations of the Owner-tenant, not including user fees, are as follows:

Fees or Charges

Yard Maintenance (not charged unless owner fails to maintain yard)

\$ 20.00 per cut

 Water and Sewer
 up to 8000 gallons
 \$ 15.71

 excess per 1000 gal. over 8000 up to 10,000\$
 1.31

 excess per 1000 gal. over10,000
 \$ 2.09

Tree Trimming/Removal, Debris Removal (not charged unless Owner-tenant fails to provide services himself)

sbilled amount

(Continued to Sheet No. 25.6)

1

WASTEWATER TARIFF

(Continued from Sheet No. 25.5)

Late Check Charge after 5th day	<b>\$</b> <u>1.50</u> per day
Bad Check Charge	\$ <u>15.00</u>
Extra Resident Fee	\$ <u>10.00</u> per person
Debris Removal	charged in accordance with Section VIII(K) of the Prospectus

Governmental Assessments, Fees, Surcharges, and Charges charged in accordance with Section VIII(J) of the Prospectus

The fees will be charged and increased as set out in Sections VIII(F) through (K) of the Prospectus. No services are included in the lot rental amount other than those services stated above.

10. The Community reserves the right to pass on and pass through charges in accordance with the Prospectus and Chapter 723, Florida Statutes.

11. Owner-tenant(s) acknowledge that they have read the foregoing, the Rules & Regulations, and the Prospectus, and that Owner-tenant was offered the foregoing Lease prior to occupancy.

We have read and understand this Agreement and agree to the terms set out herein.

WITNESS our hands and seals of the date set out above.

Owner-tenant

Community Representative

Owner-tenant

## WASTEWATER TARIFF

## COPY OF CUSTOMER'S BILL

P.O. BOX	<b>1 GOLF CLU</b> 5252 • LAKELAI NQUIRIES CALL	ND, FL 33807	FORWAR CORREC	RDING & ADDRESS TION REQUESTED BILLING DEPT.		
TYPE OF SERVICE	METER PRESENT	READING PREVIOUS	USED	CHARGES	l	
					PLEASE BRING THIS OR MAIL THIS STUB	ENTIRE BILL TO OFFICE WITH YOUR PAYMENT.
				<u> </u>	CUSTOMER ROUTE ACCOUNT	PAY GROSS AMOUNT AFTER THIS DATE
METEF MONTH	READ DAY CLASS	NET AMOUNT TO BE PAID	LATE FEE	GROSS AMOUNT TO BE PAID	NET AMOUNT TO BE PAID	GROSS AMOUNT TO BE PAID

SWISS GOLF AND TENNIS PO 4900 SAST MILLING, FL (1997 Patrice models CALLOS (C. 1991 - 1	PL VI907 CORRECTION REQUESTED			
	(131)	CHARCES		
			PLEASE BRING THIS EI OR MAIL THIS STUB W CUSTOMER ROUTE ACCOUNT	NTIRE BILL TO OFFICE VITH YOUR PAYMENT. PAY OROSS AMOUNT AFTER THIS DATE
METER BLAD MONTHE TAY	EATE HER	GDOSS AMOUNT TO SE PAID	NET AMOUNT TO BE PAID	GROSS AMOUNT TO BE PAID

# ORIGINAL SHEET NO. 27.0

# CHC VII, LTD.

WASTEWATER TARIFF

## INDEX OF SERVICE AVAILABILITY

## Sheet Number

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Service Availability Policy	28.0
Table of Daily Flows	N/A

WASTEWATER TARIFF

# SERVICE AVAILABILITY POLICY

N/A

ORIGINAL SHEET NO. 29.0

WASTEWATER TARIFF

# HELD FOR FUTURE USE