ORIGINAL

25-30.440 Additional Engineering Information Required of Class A and B Water and Wastewater Utilities in an Application for Rate Increase.

Each applicant for a rate increase shall provide two copies of the following engineering information to the Commission, with the exception of item (1), of which only one copy is required.

- (1) A detailed map showing:
- (a) The location and size of the applicant's distribution and collection lines as well as its plant sites, and
- (b) The location and respective classification of the applicant's customers.
- (2) A list of chemicals used for water and wastewater treatment, by type showing the dollar amount and quantity purchased, the unit prices paid and the dosage rates utilized.
- (3) The most recent chemical analyses for each water system conducted by a certified laboratory covering the inorganic, organic turbidity, microbiological, radionuclide, secondary and unregulated contaminants specified in Chapter 17-550, Florida Administrative Code.
- (4) All water and wastewater plant operating reports for the test year and the year preceding the test year.
- (5) The most recent sanitary survey for each water plant and inspection report for each wastewater plant conducted by the health department or the Department of Environmental Regulation (DER).
- (6) All health department and DER construction and operating permits.
- (7) Any Notices of Violation, Consent Orders, Letters of Notice, or Warning Notices from the health department or the DER since the utility's last rate case or the previous five years, whichever is less.
- (8) A list of all field employees, their duties, responsibilities, and certificates held, and an explanation of each employee's salary allocation method to the utility's capital or expense accounts.
- (9) A list, by serial number and description, of all vehicles owned or leased by the utility showing the original cost or annual lease expense, who the vehicle is assigned to, and the method of location to the utility.
- (10) Provide a list, by customer, of all complaints received during the test year, with an explanation of how each complaint was resolved.

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DOCUMENT NUMBER-DATE

FPSC-RECORDS/REPORTING

991437

Wedgefield Utilities, Inc.

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Docket No. 991437-WU

25.30-440 (2) Chemicals Used

Test Year Ended June 30, 1999

Water Treatment Plant

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Chemical	Usage	U	1999 nit Price	_	<u>U</u>	1998 nit Price	
Chlorine Gas	Approximately 1750 lbs/month	\$	115.00	per 150lbs. Unit	\$	115.00	per 150lbs. Unit
Aquadene SK-7841 Liquid	Approximately 12.2 gallons/month	\$	225.00	per 30 gals. Unit	\$	258.00	per 30 gals. Unit
Morton Solar Coarse	Approximately 20 80lbs. bags/day	\$	3.95	per 80lbs. Unit	\$	3.95	per 80lbs. Unit
Wastewater Treatment Plant Chlorine Gas	Approximately 1650lbs./month	\$	115.00	per 150lbs. Unit	\$	115.00	per 150lbs. Unit

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Wedgefield Utilities, Inc.

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Docket No. 991437-WU

25.30-440 (3) Chemical Analyses

Test Year Ended June 30, 1999

Annual Drinking Water Quality Report

Wedgefield Utilities, Inc.

Welcome to the Annual Drinking Water Quality Report for Wedgefield Utilities. We are a proud member of the Utilities, Incorporated national family of water and wastewater utilities That family operates in 15 states and comprises more than 350 utilities proudly serving more than 200,000 customers. This report is designed to inform you about the quality water and services we deliver to you every day. Our constant goal is to provide you with a safe and dependable supply of drinking water. We want you to understand the efforts we make to continually improve the water treatment process and protect our water resources. We are committed to ensuring the quality of your water. Our water source is the groundwater from wells drilled 435 feet deep into the Floridan Aquifer.

• This report shows our water quality and what it means.

We want our valued customers to be informed about their water utility. If you have any questions about this report or concerning your water utility, please contact David Orr at (407) 869-1919, or (800) 272-1919 if outside the greater Orlando area.

Wedgefield Utilities, Inc. routinely monitors for constituents in your drinking water according to Federal and State laws. The table that follows shows the results of our monitoring for the period of January 1st to December 31st, 1998. The State allows us to monitor for some contaminants less than once per year because the concentrations of these contaminants do not change frequently. Some of our data, though representative, are more than one year old.

<u>Special Note to Property and Facility Managers:</u> If you are responsible for apartments or other multiple residential or commercial units we encourage you to distribute this report to all your tenants either by posting in a common area or by furnishing a copy to each tenant or resident. If you require additional copies, please call customer service at (407) 869-1919, or (800) 272-1919 if outside the greater Orlando area, and we will provide them.

Terms and Abbreviations:

In the following table you will find many terms and abbreviations you might not be familiar with. To help you better understand these terms we've provided the following definitions:

Parts per million (ppm) or Milligrams per liter (mg/l) - one part per million corresponds to one minute in two years or a single penny in \$10,000.

Parts per billion (ppb) or Micrograms per liter - one part per billion corresponds to one minute in 2,000 years, or a single penny in \$10,000,000.

Action Level (AL) - the concentration of a contaminant which, if exceeded, triggers treatment or other requirements which a water system must follow.

Maximum Contaminant Level (MCL) - The "Maximum Allowed" is the highest level of a contaminant that is allowed in drinking water. MCLs are set as close to the MCLGs as feasible using the best available treatment technology.

Maximum Contaminant Level Goal (MCLG) - The "Goal" is the level of a contaminant in drinking water below which there is no known or expected risk to health. MCLGs allow for a margin of safety.

In this table you find those c	ontaminants tl	hat were de the the date	etected in ou of last requ	r latest ro ired testir	ound of sar	npling. For any contaminant not tested in 1998 n.
Contaminant and Unit of Measurement	MCL/AL Violation Y/N	Level	Notes	MCLG	MCL	Likely Source of Contamination
Inorganic Contamina	ints					
7. Antimony (ppb)	N	2.0	Tested 4/3/97	6	6	Discharge from petroleum refineries; fire retardants: ceramics: electronics; solder
11. Beryllium (ppb)	N	4.0	Tested 4/3/97	4	4	Discharge from metal refineries and coal-burnin factories; discharge from electrical, aerospace, and defense industries
12. Cadmium (ppb)	N	0.1	Tested 4/3/97	5	5	Corrosion of galvanized pipes; erosion of natural deposits; discharge from metal refinerie runoff from waste batteries and paints
14. Copper (tap water) (ppm)	Y	1.9	Tested 12/7/98 8 sites exceeded the AL	1.3	AL=1.3	Corrosion of household plumbing systems: erosion of natural deposits; leaching from wood preservatives
16. Fluoride (ppm)	N	0.41	Tested 4/3/97	4	4	Erosion of natural deposits; water additive whic promotes strong teeth; discharge from fertilizer and aluminum factories
17. Lead (tap water) (ppb)	N	1.0	Tested 12/7/98 No sites exceeded the AL	0	AL=15	Corrosion of household plumbing systems, erosion of natural deposits
18. Lead (point of entry) (ppb)	N	3.0	Tested 4/3/97	n/a	15	Residue from man-made pollution such as auto emissions and paint.; lead pipe, casing, and solder
24. Sodium (ppm)	N	7.1	Tested 4/3/97	n/a	160	Salt water intrusion, leaching from soil
25. Thallium (ppb)	N	1.0	Tested 4/3/97	0.5	2	Leaching from ore-processing sites; discharge from electronics, glass, and drug factories
Group II Unregulate	ed Organic	Contar	ninants			
116. Bromodichloromethane (ppb)	N	20.0	Tested 4/3/97			Byproduct of Chlorination
120. Chloroform (ppb)	N	54.0	Tested 4/3/97			Byproduct of Chlorination
122. Dibromochloromethane (ppb)	N	7.6	Tested 4/3/97			Byproduct of Chlorination

Note: (14) Copper. Copper is an essential nutrient, but some people who drink water containing copper in excess of the action level over a relatively short amount of time could experience gastrointestinal distress. Some people who drink water containing copper in excess of the action level over many years could suffer liver or kidney damage. People with Wilson's Disease should consult their personal doctor.

The table shows that our system uncovered a problem with copper in tap water this year. The duration of the violation was for the single sampling period in 1998. We presently add a product called Aquadene to reduce the corrosivity of the drinking water. A significant reduction in that corrosivity has occurred but requires further reduction. We are now conducting an evaluation to determine how to increase the effectiveness of this additive. We will continue to work diligently to improve this condition.

In the following list you will find the balance of all contaminants monitored that were either NOT detected or were detected in sufficiently small quantities as to not require reporting.

Microbiological Contaminants Total Coliform Bacteria Fecal coliform and E.coli 3. Turbidity **Radioactive Contaminants** 4. Gross beta/photon emitters 5. Alpha 6. Radium 226 or combined radium **Inorganic Contaminants** 8. Arsenic 9. Asbestos 10. Barium 13. Chromium 15. Cvanide 19. Mercury (inorganic) 20. Nickel 21. Nitrate (as Nitrogen) 22. Nitrite (as Nitrogen) 23. Selenium Synthetic Organic Contaminants including Pesticides and Herbicides 26. 2,4-D 27. 2,4,5-TP (Silvex) 28. Acrylamide 29. Alachlor 30. Atrazine 31. Benzo(a)pyrene (PAH) 32. Carbofuran 33. Chlordane 34. Dalapon 35. Di(2-ethylhexyl) adipate 36. Di(2-ethylhexyl) phthalate 37. Dibromochloropropane 38. Dinoseb 39. Diouat

40. Dioxin [2,3,7,8-TCDD]

- 41. Endothall 42. Endrin 43. Epichlorohydrin 44. Ethylene dibromide 45. Glyphosate 46. Heptachlor 47. Heptachlor epoxide 48 Hexachlorobenzene 49. Hexachlorocyclo-pentadiene 50. Lindane 51. Methoxychlor 52. Oxamyl [Vydate] 53. PCBs [Polychlorinated biphenyls] 54. Pentachlorophenol 55. Picloram 56. Simazine 57. Toxaphene **Volatile** Organic Contaminants 58. Benzene 59. Carbon tetrachloride 60. Chlorobenzene 61. o-Dichlorobenzene 62. p-Dichlorobenzene 63. 1,2 - Dichloroethane 64. 1,1 - Dichloroethylene 65. cis-1,2-Dichloroethylene 66. trans - 1,2 -Dichloroethylene 67. Dichloromethane 68. 1,2-Dichloropropane 69. Ethylbenzene 70. Styrene 71. Tetrachloroethylene 72. 1,2,4 -Trichlorobenzene 73. 1,1,1 - Trichloroethane 74. 1.1.2 -Trichloroethane 75. Trichloroethylene
- 76. TTHM [Total trihalomethanes] 107. 1.1-dichloropropylene 77. Toluene 108. 1.1-dichloroethane 78. Vinyl Chloride 109. 1,1,1,2-tetrachloroethane 79. Xylenes 110. 1,1,2,2-tetrachloroethane 80. THM 111. 1,2,3-trichloropropane 112. 1.3-dichloropropane Secondary Contaminants 81. Aluminum 113. 1,3-dichloropropene 114. 2.2-dichloropropane 82. Chloride 83. Color 115. Bromobenzene 84. Copper 117. Bromoform 85. Fluoride 118. Bromomethane 86. Foaming Agents 119. Chloroethane 87. Iron 121. Chloromethane 88. Manganese 123. Dibromomethane 89. Odor 124. Dichlorodifluoromethane 90. Silver 125. m-dichlorobenzene 91. Zinc 126. Methyl tert-butyl-ether (MTBE) 92. Sulfate 127. o-chlorotoluene 93. Total Dissolved Solids 128. p-chlorotoluene **Group I Unregulated Organic** 129. Trichlorofluoromethane Group III Unregulated Organic Contaminants 94. 3-Hydroxycarbofuran Contaminants 95. Aldicarb 130. 2-methyl-4,6-dinitrophenol 96. Aldicarb sulfone 131. 2-chiorophenol 97. Aldicarb sulfoxide 132. 2-4-dinitrotoluene 133. 2,4,6-trichlorophenol 98. Aldrin 99. Butachlor 134. Butyl benzyl phthalate 135. Di-n-butylphthalate 100. Carbaryl 136. Diethylphthalate 101. Dicamba 137. Dimethylphthalate 102. Dieldrin 103. Methomyl 138. Dioctylphthalate 104. Metolachlor 139. Isophorone 105. Metribuzin 140. Phenol 106. Propachlor Group II Unregulated Organic Contaminants

As you can see from the table and list, our system had a problem with the action level for copper during the previous year but had **NO** other violations and the vast majority of contaminants were not even detectable by current laboratory methods.

Some Facts about Drinking Water in General

The sources of drinking water (both tap water and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs, and wells. As water travels over the surface of the land or through the ground, it dissolves naturally-occurring minerals and, in some cases, radioactive material, and can pick up substances resulting from the presence of animals or from human activity.

Contaminants that may be present in source water include:

A. Microbial contaminants, such as viruses and bacteria, which may come from sewage treatment plants, septic systems, agricultural livestock operations, and wildlife.

B. *Inorganic contaminants*, such as salts and metals, which can be naturally-occurring or result from urban stormwater runoff, industrial or domestic wastewater discharges, oil and gas production, mining, or farming.

C. *Pesticides and herbicides,* which may come from a variety of sources such as agriculture,_urban stormwater runoff, and residential uses.

D. Organic chemical contaminants, including synthetic and volatile organic chemicals, which are by-products of industrial processes and petroleum production, and can also come from gas stations, urban stormwater runoff, and septic systems.

E. *Radioactive contaminants,* which can be naturally-occurring or be the result of oil and gas production and mining activities.

In order to ensure that tap water is safe to drink, EPA prescribes regulations which limit the amount of certain contaminants in water provided by public water systems. FDA regulations establish limits for contaminants in bottled water which must provide the same protection for public health.

All drinking water, including bottled water, may reasonably be expected to contain at least small amounts of some contaminants. The presence of contaminants does not necessarily indicate that the water poses a health risk. More

information about contaminants and potential health effects can be obtained by calling the Environmental Protection Agency's Safe Drinking Water Hotline at 1-800-426-4791.

An Explanation of Maximum Contaminant Levels

MCL's are set at very stringent levels. To understand the possible health effects described for many regulated constituents, a person would have to drink 2 liters of water every day at the MCL level for a lifetime to have a one-in-a-million chance of having the described health effect.

Where Do We Go From Here?

Wedgefield Utilities, Inc. Has numerous capital improvement projects currently underway, including a new wastewater treatment plant. At the water plant the industrial water softening units were refurbished. Of course, we continue to work to solve the corrosivity problem. These improvements reflect our commitment to maintaining a safe and dependable water supply.

Notice to Our More Vulnerable Customers

Some people may be more vulnerable to contaminants in drinking water than the general population. Immunocompromised persons such as persons with cancer undergoing chemotherapy, persons who have undergone organ transplants, people with HIV/AIDS or other immune system disorders, some elderly, and infants can be particularly at risk from infections. These people should seek advice about drinking water from their health care providers. EPA and Center for Disease Control guidelines on appropriate means to lessen the risk of infection by cryptosporidium and other microbiological contaminants are available from the Safe Drinking Water Hotline (800-426-4791).

<u>The Wrap Up</u>

We at Wedgefield Utilities, Inc. work around the clock to provide top quality water to every tap. We ask that all our customers help us protect our water sources, which are the heart of our community, our way of life and our children's future. Please do not hesitate to call our office at (407) 869-1919, or (800) 272-1919 if outside the greater Orlando area if you have questions.

Wedgefield Utilities, Inc.

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Docket No. 991437-WU

25.30-440 (4) Operation Reports

Test Year Ended June 30, 1999

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Department of Environmental Protection Attendeductive CUP For Environmental Protection Nonthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water INSTRUCTIONS: See Page 5. 1. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION Water System Mane: Optimize System State Treatment PLANT INFORMATION Water System Name: Optimize Sys			· • • • • • • • • • • • • • • • • • • •
Ionthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water INSTRUCTIONS: See Page 5. Operations: See Page 5. Instruction: Second Secon			Alternate/Substitute DEP Form 62-555.910(3)
and for Consecutive Public Water Systems that Treat Their Water INSTRUCTIONS: See Page 5. 1. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION Water System Information OF Colspan="2">OF Colspan="2">OF Colspan="2">Colspan="2">OF Colspan="2">OF Colspan="2">OF Colspan="2">OF Colspan="2">Colspan="2">OF Colspan="2">OF Colspan="2" OF Colspan= 2" OF Colspan="2" OF Colspan="2" OF Colspan			
I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION Water System Information UTILITIES TWC of Florida PWS Identification No.: 3480/49 •System Dame: UTILITIES TWC Telephone No. ¹⁰⁰ /16/2869-1919 Name: UTILITIES TWC Telephone No. ¹⁰⁰ /16/2869-1919 Address: 200 Weathersfuld. Au Telephone No. ¹⁰⁰ /16/2869-1919 Oit: Address: 200 Weathersfuld. Au State: EL Zip Code: Oit: Address: 200 Weathersfuld. Au State: EL Zip Code: 32.21/4 • Oysem Type: Accommunity: Information State: EL Zip Code: 32.21/4 • Oysem Type: Accommunity: Information Telephone No.: 407-568-6787 Address: 2049 Maxw Field St State: EL Zip Code: 32.933 • Permitted Maximum Day Capacity of Plant: 350 get; • Plant Category and Class per Rule 62699.310(2), FAC:: C-3 • Plant Operators: See Page 3. Mac State: FL Zip Code: 32.933 • Plant Operators: See Page 3. State: State Page 4. Sta			
Water System Information UTI/IT/LES TWC of Florida PWS Identification No.: 3480/49 • System Name: UTI/IT/LES TWC of Florida PWS Identification No.: 3480/49 • System Dword Telephone No.: 7647.919 Address: 200 Weathersticities au State: EL Zip Code: 32.714 • System Type: Decommunity: Inon-community: Inon-	INS	TRUCTIONS: See Page 5.	
 System Dwiner Name: UTILITIES Tooc Name: UTILITIES Tooc Telephone No.¹⁰⁷ <u>36</u> <u>9-1919</u> Address: <u>Loc Utestherskill ac-t</u> City: <u>All Concertors at End of Reporting Month: <u>Too</u> <u>one-community:</u> <u>one-communi</u></u>	I.	GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION	
City: Alf_Antruck Springs State: Zip Code: 32.71/4 • System Type: Documunity: Individual information State: Zip Code: 32.71/4 • No. of Service Connections at End of Reporting Month: 76.2.; • Total Population Served at End of Reporting Month: 1905 • Name: Wedge: Field Utilities Telephone No: 407-568-6787 Address: 20449 Maxesfield at State: E/2 Zip Code: 32.9.3.3 • Permitted Maximum Day Capacity of Plant: 350 ged: •Plant Category and Class per Rule 62.699.310(3), FA.C.: C-3 • Permitted Maximum Day Capacity of Plant: 350 ged: •Plant Category and Class per Rule 62.699.310(3), FA.C.: C-3 • II. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTHYEAR OF July 9.6 See Page 2. SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See Page 4. IV. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR 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 and that these records will be maintained available for review		• <u>System Dwner</u> Name: Utilities Tuc. Te	
 System Type: Be community: D non-community: D non-community: D consecutive No. of Service Connections at End of Reporting Month: 762; • Total Population Served at End of Reporting Month: 1903 Water Treatment Plant Information Treatment Plant View Plant View Plant View Plant View Plant Plant Category and Class per Rule 62-689.310(3), FA.C.: C-3 Plant Operators: See Page 3. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF July 96.: See Page 2. SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See Page 4. IV. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR 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 applicable to this plant were prepared each day a certified operator staffed or visited the plant during the			ato: 5/ 7in Code: 777/4
Water Treatment Plant Information • Treatment Plant Name: Wedge field Ufilities Name: Wedge field Ufilities Telephone No.: 407-568-6787 Address: 20498 Maxsfield af State: F/ Zip Code: 32.933 • Permitted Maximum Day Capacity of Plant: 350eet: • Plant Category and Class per Rule 62-699.310(3), F.A.C.: C3 • Plant Operators: See Page 3.		• System Type: A community:	
 Treatment Plant Name: Wedge Gild Utilities Address: 20449 Maxs Rield at City: Orlando Permitted Maximum Day Capacity of Plant: 350 ged; Plant Category and Class per Rule 62-699.310(3), F.A.C.: C-3 Plant Operators: See Page 3. II. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF July 96. See Page 2. SUMMARY OF USE, AT WATER TREATMENT DATA FOR THE MONTH/YEAR OF July 96. See Page 2. SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See Page 4. IV. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR 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 applicable to this plant were prepared each day a certified operator staffed or visited the plant during the reporting month indicated on this report and that these records will be maintained available for review at the plant site for not less than five years: records of amounts of chemicals used and chemical feed rates; process performance records for caeguidation/flocculation (e.g., source water temperature, pH, turbidity, color, and elkalinity and process effluent the and alkalinity in addition to chemical feed rates; process performance records for sedimentation (e.g., process effluent turbidity and sludge volume produced); process performance records for filter trues, frequency of backwash, amount of backwash water used, duration of backwash, and backwash rates); process performance records for line soda ash softening (e.g., source water and process effluent hardness in addition to records for coagulation/flocculation; sedimentation; and filtration; process performance records for line soda ash		•	at End of Reporting Month: 7703
City: <u>Orlado</u> Permitted Maximum Day Capacity of Plant: <u>350</u> <u>get</u> : Plant Category and Class per Rule 52-599.310(3), F.A.C.: <u>C-3</u> Plant Operators: See Page 3. II. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF <u>JULY</u> <u>96</u> . See Page 2. SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See Page 4. IV. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR 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 applicable to this plant were prepared each day a certified operator staffed or wisited the plant during the reporting month indicated on this report and that these records will be maintained available for review at the plant site for not less than five years: Process performance records for coagulation/flocculation (e.g., source water temperature, pH, turbidity, color, and alkalinity and process effluent pH and alkalinity in addition to chemical feed rates; process performance records for filtration (e.g., process effluent turbidity and sludge volume produced); process performance records for filtration (e.g., process effluent turbidity and sludge volume produced); process performance records for filtration (e.g., source water and process effluent hardness in addition to records for coagulation/flocculation, sedimentation, end filtration; process performance records for lime-soda ash softening (e.g., source water and process effluent hardness in addition to records for coagulation/flocculation, generation, end filtration; process performance records for lime-soda ash softening (e.g., source water and process effluent hardness in addition to records for coagulation/flocculation, sedimentation, and filtration; process performance records for lime-soda a		• Treatment Plant Name: Wedge Field UTILITIES TE	elephone No.: <u>407-568-6787</u>
 SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See Page 4. IV. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR 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 applicable to this plant were prepared each day a certified operator staffed or visited the plant during the reporting month indicated on this report and that these records will be maintained available for review at the plant site for not less than five years: records of amounts of chemicals used and chemical feed rates; process performance records for coagulation/flocculation (e.g., source water temperature, pH, turbidity, color, and alkalinity and process effluent pH and alkalinity in addition to chemical feed rates; process performance records for sedimentation (e.g., process effluent turbidity and sludge volume produced); process performance records for filtration (e.g., process effluent turbidity and color, number of filters in service, filtration rates, unit filter run volumes, head losses, length of filter runs, frequency of backwash, amount of backwash water used, duration of backwash, and backwash rates); process performance records for line soda ash softening (e.g., source water and process effluent hardness in addition to records for coagulation/flocculation, sedimentation, and filtration); process performance records for in exchange softening (e.g., source water and process effluent hardness in addition to records for coagulation/flocculation, sedimentation, and filtration); 		City: Orlando St •Permitted Maximum Day Capacity of Plant: <u>,350</u> ged; •Plant Category and Class	
 SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See Page 4. IV. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR 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 applicable to this plant were prepared each day a certified operator staffed or visited the plant during the reporting month indicated on this report and that these records will be maintained available for review at the plant site for not less than five years: records of amounts of chemicals used and chemical feed rates; process performance records for coagulation/flocculation (e.g., source water temperature, pH, turbidity, color, and alkalinity and process effluent pH and alkalinity in addition to chemical feed rates; process performance records for sedimentation (e.g., process effluent turbidity and sludge volume produced); process performance records for filtration (e.g., process effluent turbidity and color, number of filters in service, filtration rates, unit filter run volumes, head losses, length of filter runs, frequency of backwash, amount of backwash water used, duration of backwash, and backwash rates); process performance records for line soda ash softening (e.g., source water and process effluent hardness in addition to records for coagulation/flocculation, sedimentation, and filtration); process performance records for in exchange softening (e.g., source water and process effluent hardness in addition to records for coagulation/flocculation, sedimentation, and filtration); 	II.	SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF	JULY 96 : See Page 2.
 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 applicable to this plant were prepared each day a certified operator staffed or visited the plant during the reporting month indicated on this report and that these records will be maintained available for review at the plant site for not less than five years: records of amounts of chemicals used and chemical feed rates; process performance records for coagulation/flocculation (e.g., source water temperature, pH, turbidity, color, and alkalinity and process effluent pH and alkalinity in addition to chemical feed rates; process performance records for sedimentation (e.g., process effluent turbidity and sludge volume produced); process performance records for filtration (e.g., process effluent turbidity and color, number of filters in service, filtration rates, unit filter run volumes, head losses, length of filter runs, frequency of backwash, amount of backwash water used, duration of backwash, and backwash rates); process performance records for lime-soda ash softening (e.g., source water and process effluent hardness in addition to records for coagulation/flocculation; sedimentation, and filtration); process performance records for in exchange softening (e.g., feed and bypass flows, blend rate, and salt and brine used); 		SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING	G ACRYLAMIDE, POLYMER CONTAINING
 belief, the information provided in this report is true and accurate. Also, I certify that the following additional operations records applicable to this plant were prepared each day a certified operator staffed or visited the plant during the reporting month indicated on this report and that these records will be maintained available for review at the plant site for not less than five years: records of amounts of chemicals used and chemical feed rates; process performance records for coagulation/flocculation (e.g., source water temperature, pH, turbidity, color, and alkalinity and process effluent pH and alkalinity in addition to chemical feed rates); process performance records for sedimentation (e.g., process effluent turbidity and sludge volume produced); process performance records for filtration (e.g., process effluent turbidity and sludge volume produced); process performance records for filtration (e.g., process effluent turbidity and sludge volume produced); process performance records for filtration (e.g., process effluent turbidity and sludge volume produced); process performance records for filtration (e.g., process effluent turbidity and color, number of filters in service, filtration rates, unit filter run volumes, head losses, length of filter runs, frequency of backwash, amount of backwash water used, duration of backwash, and backwash rates); process performance records for lime-soda ash softening (e.g., source water and process effluent hardness in addition to records for coagulation/flocculation, and filtration); process performance records for ion exchange softening (e.g., feed and bypass flows, blend rate, and salt and brine used); 	.ĭ₽.	STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR	
 visited the plant during the reporting month indicated on this report and that these records will be maintained available for review at the plant site for not less than five years: records of amounts of chemicals used and chemical feed rates; process performance records for coagulation/flocculation (e.g., source water temperature, pH, turbidity, color, and alkalinity and process effluent pH and alkalinity in addition to chemical feed rates); process performance records for sedimentation (e.g., process effluent turbidity and sludge volume produced); process performance records for filtration (e.g., process effluent turbidity and color, number of filters in service, filtration rates, unit filter run volumes, head losses, length of filter runs, frequency of backwash, amount of backwash water used, duration of backwash, and backwash rates); process performance records for lime-soda ash softening (e.g., source water and process effluent hardness in addition to records for coagulation/flocculation, and filtration); process performance records for ion exchange softening (e.g., feed and bypass flows, blend rate, and salt and brine used); 		• · · · · · · · · · · · · · · · · · · ·	, certify that, to the best of my knowledge and
 process performance records for coagulation/flocculation (e.g., source water temperature, pH, turbidity, color, and alkalinity and process effluent pH and alkalinity in addition to chemical feed rates); process performance records for sedimentation (e.g., process effluent turbidity and sludge volume produced); process performance records for filtration (e.g., process effluent turbidity and color, number of filters in service, filtration rates, unit filter run volumes, head losses, length of filter runs, frequency of backwash, amount of backwash water used, duration of backwash, and backwash rates); process performance records for lime-soda ash softening (e.g., source water and process effluent hardness in addition to records for coagulation/flocculation, sedimentation, and filtration); process performance records for ion exchange softening (e.g., feed and bypass flows, blend rate, and salt and brine used); 		visited the plant during the reporting month indicated on this report and that these records will be	
 run volumes, head losses, length of filter runs, frequency of backwash, amount of backwash water used, duration of backwash, and backwash rates); process performance records for lime-soda ash softening (e.g., source water and process effluent hardness in addition to records for coagulation/flocculation, sedimentation, and filtration); process performance records for ion exchange softening (e.g., feed and bypass flows, blend rate, and salt and brine used); 		 process performance records for coagulation/flocculation (e.g., source water temperature, performance records for sedimentation (e.g., process effluent turbidity and sludge) 	volume produced);
 coagulation/flocculation, sedimentation, and filtration); process performance records for ion exchange softening (e.g., feed and bypass flows, blend rate, and salt and brine used); 		run volumes, head losses, length of filter runs, frequency of backwash, amount of backwa backwash rates);	ash water used, duration of backwash, and
and the second second for success and the second for the second second bring flower for second s		 coagulation/flocculation, sedimentation, and filtration); process performance records for ion exchange softening (e.g., feed and bypass flows, blen 	nd rate, and salt and brine used);
 process performance records for reverse osmosis (e.g., feed, product, and brine flows; feed pressure, temperature, pH, conductivity, and turbidity; product pH and conductivity; and brine pH and conductivity; and process performance records for electrodialysis (e.g., polarity, feed temperature and total dissolved solids, product conductivity and total discolved solids, product conductivity and total 		 turbidity; product pH and conductivity; and brine pH and conductivity); and process performance records for electrodialysis (e.g., polarity, feed temperature and total 	
dissolved solids, dilute flow rate, brine make-up, pressures, and volts/amps).		2 1 2 1 2 1 2 1	
Signature and Date B-1-96 Name and Certificate Number (please type or print)		Signature and Date Marson B-1-96 Roger H	olsapph 7436-C

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Page 1

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: 3480/49

-Wedge Rield

Treatment Plant Name:

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF _ 4014 96

UTILITIes

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

				Residual I			
Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant M (ໄໄເວ໌ (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 Sampling Points	Lowest Residual Disinfectant Concentration at Total Colliform Sampling Points (mg/L) ¹	or Abnorma
1	24	1275	1.4	0,6			
2	1	.116	1.1	0,5			· · ·
3		. 112.	40	0,4			
4		181	2,0	0,6			
5		7	1,5	0,6			<u> </u>
6		.180	1.1	0,5			
7		.175	1.0	0,4			
8		,158	1,5	0,5		[
9		1183	1,5	0,6		••	
10		,203	116	0,6			
11		.164	2,0	0,7			
12		,216	315	2.1			
13		. 144	3,5	2,5			
14		1211	3,5	2,5			
15		,241	3,5	2,8			
16		. 107	3,0	218			
17		.151	2,5	1,6			
18		1248	1,0	0,4			
19		,198	1.3	0,4			
20		1206	1,5	0,5			
21		,303	1,5	0,5			
22		,313	2,3	0,8			
23		.251	2,5	1,0			
24		,229	2,0	1,0			
25		1285	1.7	1,0			
26		1372	1.0	0.6			······
27		1277	1.2	0.6			
28		1301	2,0	0,9			
29		. 371	2.14	1,1	2 RAW/2 Dist.		
30		.347	2,0	1.0	ļ		
31	24	. 32 3	1,3	0,4		<u> </u>	
Total	XXXXXX	9.638	XXXXXXXXXXXXXX	1		XXXXXXXXXXXX	
Avg.	XXXXXX				****		
Max.	XXXXXX	residual disinfectant cond	1		XXXXXXXXXXXXXXXX		XXXXXXXX

 If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

¹ If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

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Department of **Environmental Protection**

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

INSTRUCTIONS: See Page 5.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION

	Water_System Information	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	• System Name: UTILITIES INC. OF FLORIDA	PWS Identification No.: $348-0149$ Telephone No.: $(407) 869-1919$
	• System Owner	and the form
	Name: UTILITIES INC. OF FLORIDA	Telephone No.: <u>907368-1919</u>
	Address: 200 WEATHERS AELD PUE.	
	City: NEM MONTE SAUNES	State: Fl Zip Code: 3:2 714
	●System Type: ▲ community: □ non-transient non-community: □ non-community: □ consecu ●No. of Service Connections at End of Reporting Month:3; ●Total Population Serv	itive red at End of Reporting Month: <u>1907</u>
	Water Treatment Plant Information	
		~
	• <u>Treatment Plant</u> Name: <u>WEDIEFAELO UTICINES</u> Address: <u>20449 MpNSHELO ST.</u> City: <u>DREMADO</u>	Telephone No.: (407) 568-6787
	Address: 20449 Mpmsridly ST.	
	Permitted Maximum Day Capacity of Plant: 1350 gpd; Plant Category and C	lass per Rule 62-699.310(3), F.A.C.: <u>3</u> C.
	Plant Operators: See Page 3.	
H,	SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF	
****	SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAIN EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See Pa	-
IV.	STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR	
	I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this f belief, the information provided in this report is true and accurate.	orm, certify that, to the best of my knowledge and
	Also, I certify that the following additional operations records applicable to this plant were visited the plant during the reporting month indicated on this report and that these records w site for not less than five years:	
	 records of amounts of chemicals used and chemical feed rates; process performance records for coagulation/flocculation (e.g., source water temperatu effluent pH and alkalinity in addition to chemical feed rates); process performance records for sedimentation (e.g., process effluent turbidity and slu 	

- process performance records for filtration (e.g., process effluent turbidity and color, number of filters in service, filtration rates, unit filter run volumes, head losses, length of filter runs, frequency of backwash, amount of backwash water used, duration of backwash, and backwash rates);
- process performance records for lime-soda ash softening (e.g., source water and process effluent hardness in addition to records for coagulation/flocculation, sedimentation, and filtration);
- process performance records for ion exchange softening (e.g., feed and bypass flows, blend rate, and salt and brine used);
- process performance records for reverse osmosis (e.g., feed, product, and brine flows; feed pressure, temperature, pH, conductivity, and turbidity; product pH and conductivity; and brine pH and conductivity); and
- process performance records for electrodialysis (e.g., polarity, feed temperature and total dissolved solids, product conductivity and total • dissolved solids, dilute flow rate, brine make-up, pressures, and volts/amps).

Signature and Date

and Certificate Number please type or print)

Page 1

AUGUST 1996

System PWS Identification Number: Treatment Plant Name: UKDGE FIELD

I. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF

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

348-0149

Unloties

Day of the Month Hor Plan 1 2 1 2 3 4 5 5 6 7 10 11 12 1 13 1 14 1 15 16 17 18 19 20 21 2 23 24 25 5		Quantity of Finished Water Produced by Plant $\frac{1}{1}$ MGD (223) (223) (223) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (218) (228) (218) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (228) (Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)* /. 6 /. 3 /. 2 /. 3 /. 2 /. 5 /. 5 /. 5 /. 5 /. 5 /. 5 /. 5 /. 5	Lowest Residual Disinfectant Concentration at Remote Point (mg/L)* 0.4 0.5 0.7 0.3 0.7 0.3 0.7 0.5 0.7 0.5 0.7 0.5 0.7 0.5 0.7 0.5 0.7 0.5 0.7 0.5 0.7 0.5 0.7 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Collform Sampling Points (mg/L)'	or Abnorma
2 3 3 4 5 5 6 7 8 9 10 11 12 7 13 14 15 16 17 18 19 20 21 22 23 24 25 5		, 192 , 218 , 216 , 218 , 216 , 218 , 216 , 259 , 178 , 387 , 223 , 189 , 229 , 259 , 229 , 229 , 229 , 229 , 259 , 229 , 229 , 229 , 259 , 229 , 229 , 229 , 259 , 229 , 229 , 259 , 229 , 259 , 269 , 269	/.3 /.2 0.7 0.8 /.8 2.0 2.1 2.5 /.5 /.5 /.5 /.5	0.5 0.7 0.3 0.7 0.5 0.5 1.3 1.2 0.6 0.8 0.8 0.8 0.8 0.8 0.8 0.8 0.8			
2 3 3 4 5 5 6 7 8 9 10 11 12 7 13 14 15 16 17 18 19 20 21 22 23 24 25 5		, 192 , 218 , 216 , 218 , 216 , 218 , 216 , 259 , 178 , 387 , 223 , 189 , 229 , 259 , 229 , 229 , 229 , 229 , 259 , 229 , 229 , 229 , 259 , 229 , 229 , 229 , 259 , 229 , 229 , 259 , 229 , 259 , 269 , 269	/.3 /.2 0.7 0.8 /.8 2.0 2.1 2.5 /.5 /.5 /.5 /.5	0.5 0.7 0.3 0.7 0.5 0.5 1.3 1.2 0.6 0.8 0.8 0.8 0.8 0.8 0.8 0.8 0.8			
4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25		. 218 . 216 . 218 . 218 . 215 . 246 . 254 . 128 	1,2 0,7 0,8 1.8 2.0 2.1 2.5 1.5 1.5 1.5 1.5 1.5	0.4 0.3 0.4 0.5 1.3 1.2 1.2 1.2 1.2 0.8 0.8 0.8 0.8 0.8 0.8 0.8			
5 5 6 7 8 9 10 11 12 7 13 14 15 16 17 18 19 20 21 22 23 24 25 5		. 216 . 218 . 215 . 246 . 254 . 254 254 	$ \begin{array}{c} 0.7\\ 0.8\\ 1.8\\ 2.0\\ 2.7\\ 2.5\\ 1.5\\ 1.5\\ 1.5\\ 1.5\\ 1.5\\ 1.5\\ 1.5\\ 1$	0.3 0.4 0.4 0.5 1.3 1.2 0.8 0.8 0.8 0.8 0.8 0.8 0.8 0.8			
6 7 1 8 9 1 10 11 1 12 7 1 13 14 1 15 16 1 17 18 19 20 21 22 23 23 24 25 5 5		. 228 .215 .246 .254 .178 .387 .223 .189 .223 .189 .229 .159 .159 .169	0.8 1.8 2.0 2.1 2.5 1.5 1.5 1.5 1.5 1.5	0.4 0.6 0.5 1.3 1.2 1.2 1.2 0.8 0.8 0.8 0.8 0.8 0.8 0.8 0.8			
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 5		215 .246 .254 .128 .387 .223 .189 .223 .189 .229 .159 .159 .169	1.8 2.0 2.1 2.5 1.5 1.5 1.5 1.5 1.5	06 05 13 1.2 0.8 0.8 0.8 0.8 0.8 0.8 0.8			
8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25		.254 .178 .387 .223 .189 .229 .159 .159 .169	2.0 2.1 2.5 1.5 1.5 1.5 1.5	0.5 1.3 1.2 0.8 0.8 0.8 0.8 0.8 0.8 0.8 0.4			
9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25		.254 .178 .387 .223 .189 .229 .159 .159 .169	2.1 2.5 1.5 1.5 1.5 1.5	1.3 1.2 0.8 0.8 0.8 0.8 0.8 0.8			
10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25		. 178 . 387 . 223 . 189 . 229 . 189 . 229 . 159 . 169	2.5 1.5 1.5 1.5 1.5	1.2 1.8 0.8 0.8 0.8 0.8 0.8			
11 12 13 14 15 16 17 18 19 20 21 22 23 24 25		. 387 . 223 . 189 . 229 . 229 . 159 . 169 . 169	1.5 1.5 1.5 1.5	0.8 0.8 0.8 0.8 0.8 0.4			
12 13 14 15 16 17 18 19 20 21 22 23 24 25		. 22 3 . 189 . 229 . 159 . 169 . 169	1.5	0.8 0.8 0.8 0.8			
13 14 15 16 17 18 19 20 21 22 23 24 25		. 189 . 229 . 159 . 169	1.5	0:8 0:8, 0:4			
14 15 16 17 18 19 20 21 22 23 24 25		. 159 . 169	1.5	<u> </u>			
15 16 17 18 19 20 21 22 23 24 25		. 159 . 169		04		<u> </u>	
16 17 18 19 20 21 22 23 24 25			1.1				
17 18 19 20 21 22 23 24 25]		1 1 .	0.4			
18 19 20 21 22 23 24 25		. 203	1.6	0.6			
19 20 21 22 23 24 25		.158	<i>0</i> .7	04			
20 21 22 23 24 25		. 259	0.5	0.2			·
21 22 23 24 25		150	0.4	0.2			
22 23 24 25		200	0.5	0.2			
23 24 25		.14/	0.6	0.4	· ·		
24 25		334	0.8	0.3			
25		152	0.9	0.4		-2.	
		,22/	0.6	1.2			*****
		. 289	06	02			
26		, 248	<u> </u>	0.3			
27		142	0.4	0.2-			
28		. 225	0.4	02			
29	<u> </u>	. 193	0.5	0.2-	2 RAW/2 DIS	RIBUTION	
30 1:/	,	. 19]	1.0	0.3			
31 24		, 134	1.2	0.3	<u> </u>		
Total XXXX		6.774	XXXXXXXXXXXXXXX			XXXXXXXXXXX	
Avg. XXXX Max. XXXX		, 2/8			XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		

If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62:555.350(3), F.A.C.

¹ If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

En	Department of Environmental Protection	Aliernate/Substitute_DEP Form 62-555.910(3)
J	Nonthly Operation Report for Public Water Syste and for Consecutive Public Water Systems t	
INS	STRUCTIONS: See Page 5.	
I.	GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION	8
	Water System Information • System Name:	PWS Identification No.: 3480149
	• <u>System Owner</u> Name: <u>VITLITIES INC.</u> Address: 200 WEATHERSFIELS AV.	Telephone No.: (407) 869-1919
	City: ALTAMONTE SPUNGS	State: FL Zip Code: 32714
	• System Type:	cutive rved at End of Reporting Month: 1912
	Water Treatment Plant Information	
	• <u>Treatment Plant</u> Name: <u>WEDGEAIELS UTILITIES</u> Address: 20449 MANSFIELD ST.	Telephone No.: (407) 568-6787
		State: FL Zip Code: 32833
	City: <u>ORLANOO</u> • Permitted Maximum Day Capacity of Plant: <u>350,000</u> gpd; • Plant Category and • Plant Operators: See Page 3.	Class per Rule 62-699.310(3), F.A.C.: <u>3C</u>
۱۱.	SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR O	IF SEPTEMBER 1996 : See Page 2.
	SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAILEPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See I	INING ACRYLAMIDE, POLYMER CONTAINING
IV.	STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR	
	1, the undersigned lead/chief operator of the water treatment plant listed in Part I of this belief, the information provided in this report is true and accurate.	form, certify that, to the best of my knowledge and
	Also, I certify that the following additional operations records applicable to this plant were visited the plant during the reporting month indicated on this report and that these records site for not less than five years:	
	 records of amounts of chemicals used and chemical feed rates; process performance records for coagulation/flocculation (e.g., source water tempera effluent pH and alkalinity in addition to chemical feed rates); 	
	 process performance records for sedimentation (e.g., process effluent turbidity and s process performance records for filtration (e.g., process effluent turbidity and color, run volumes, head losses, length of filter runs, frequency of backwash, amount of b backwash rates); 	number of filters in service, filtration rates, unit filter ackwash water used, duration of backwash, and
	 process performance records for lime-soda ash softening (e.g., source water and pro coagulation/flocculation, sedimentation, and filtration); 	
	 process performance records for ion exchange softening (e.g., feed and bypass flows process performance records for reverse osmosis (e.g., feed, product, and brine flow turbidity; product pH and conductivity; and brine pH and conductivity); and process performance records for electrodialysis (e.g., polarity, feed temperature and 	rs; feed pressure, temperature, pH, conductivity, and
	dissolved solids, dilute flow rate, brine make-up, pressures, and volts/amps).	P F F Main
	D. Kichard Ech D. Name and D. Name and D.	Certificate Number (please type or print)

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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: 3780144

HELA

System PWS Identification Number: Treatment Plant Name: WEDGS

1. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF

TEMBER 1990

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

Unlitte

				Residual			
Day of the Month	Hours Plant in Operation	in Water Produced by Plant	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Lowest Residual Disinfectant Concentration at Remote Point (mg/L) ¹	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Collform Sampling Points (mg/L)'	Reported Emergency or Abnormal Operating Conditions
1	24	234 000	1.2	0.2		· · · · · · · · · · · · · · · · · · ·	
2		244,000	1.4	6.3	1	0.3	
3		193 000	1.5	0.3			
4		207,000	1.4	0.3		····	
5		242,000	1.4	0.3	1	0.3	
6		172,000		0.4			
7		209,000	1.5	0.4			
8		276 000	1.4	0.4	1	0.4	
9		226,000	1.4	0.4			
10		184,000	65	0.5			
11		176,000	2.0	0.7	1	0.7	
12		207 000	1,8	0.5			
13		204 000	2.0	0.6			
14		165,000	1.4	0.5	1	0.5	
15		242,000	1.5	0.5			
16		764 av	1.6	016			
17		174,000	2.0	0.5	1	0.5	
18		191,000	1.6	0.5			
19		150,000	2.0	0.6			
20		250,000	1.6	6.4		0:4	
21		207,000	2.1	0.5			
22		228,000	0.8	0.2			·
23		241,000	1.2	6.3	/	0.3	
24	┟┈╌┟───	259,000	1.4	0.6		3.:	
25	┟──┥╺─	250,000	2.2	0.5			
26		217 000	2.3	4.5		0.5	
27	├ ── │ ───	180,000	3.1	0.6			
28	┝──┝───	222,000	3.1	6.6			· · · ·
29	┝╌╢╌──	226,000	3.0	0.5		0.5	- <u></u>
30	×	266,000	3.2	1,0	· · · · · · · · · · · · · · · · · · ·		
31					<u> </u>		
Total	XXXXXX	6,532,000	XXXXXXXXXXXXXXX			XXXXXXXXXXXX	
Avg.	XXXXXX	218 000	XXXXXXXXXXXXXXXX	xxxxxxxxxx	XXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXX

If at any time the residual disfrictant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

¹ If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

. E	Department of Environmental Protection	Alternate/Substitute_DEP Form 62-555.910(3)
	Monthly Operation Report for Public Water Systems and for Consecutive Public Water Systems that	
INS	STRUCTIONS: See Page 5.	
l.	GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION	
	Water System Information • System Name: WEDGE AELD UNLITIES Pr • System Dwner	VS Identification No.: 3480149
	Name: UTTUTTÉS INC. Tel	ephone No.: (407) 869-1919
	Address: <u>200 WEATHERSField AV.</u> City: <u>ALTAMONTE SAUNCS</u> Sta	te: <u>FC</u> Zip Code: 32714
	• System Type: 🖄 community; 🗆 non-transient non-community; 🗆 non-community; 🗆 consecutive	
	No. of Service Connections at End of Reporting Month: <u>765</u> ; Total Population Served a	t End of Reporting Month:
	Water Treatment Plant Information • Treatment Plant	
	Name: WEDGEFIELD UTILITIES Tel Address: 20449 MANSALLO ST	ephone No.: <u>(407) 568-6787</u>
		te: FL Zip Code: 32833
	 Permitted Maximum Day Capacity of Plant: <u>39,000</u> gpd; Plant Category and Class Plant Operators: See Page 3. 	per Rule 62-699.310(3), F.A.C.: 3C
<u>اا.</u> ۳۰	SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See Page 4	ACRYLAMIDE, POLYMER CONTAINING
IV.	STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR	
	I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, belief, the information provided in this report is true and accurate.	certify that, to the best of my knowledge and
	Also, I certify that the following additional operations records applicable to this plant were prep visited the plant during the reporting month indicated on this report and that these records will be site for not less than five years:	ared each day a certified operator staffed or maintained available for review at the plant
	 records of amounts of chemicals used and chemical feed rates; process performance records for coagulation/flocculation (e.g., source water temperature, pl effluent pH and alkalinity in addition to chemical feed rates); process performance records for sedimentation (e.g., process effluent turbidity and sludge v process performance records for filtration (e.g., process effluent turbidity and color, number run volumes, head losses, length of filter runs, frequency of backwash, amount of backwass 	olume produced); of filters in service, filtration rates, unit filter
	 backwash rates); process performance records for lime-soda ash softening (e.g., source water and process ef coagulation/flocculation, sedimentation, and filtration); process performance records for ion exchange softening (e.g., feed and bypass flows, blend 	
	 process performance records for reverse osmosis (e.g., feed, product, and brine flows; feed turbidity; product pH and conductivity; and brine pH and conductivity]; and process performance records for electrodialysis (e.g., polarity, feed temperature and total displays and brine pH and conductivity); 	pressure, temperature, pH, conductivity, and
-	dissolved solids, dilute flow rate, brine make up, pressures, and volts/amps).	
	Signature and Date D. Light	te Number (please type or print)
		there the of house

Page 1

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: <u>3480.149</u>

WEDGEFIE

Treatment Plant Name:

1. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF OCTOBER 1986

UHLINES

			Lowest Residual	Residual D	Reported		
Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	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 Sampling Points	Lowest Residual Disinfectant Concentration at Total Collform Sampling Points (mg/L) ¹	Emergency or Abnormal Operating Conditions
1	24	202,000	3.0	0.6			
2		151,000	3,5	0.8	. <u></u>		
3		190,000	3.5	0.9	/	0.9	
4		177,000	3.5		· · · · · · · · · · · · · · · · · · ·		
5		188 000	3.3				
6		179,000	3.0	1-0	/	1.0	
7		175,000	1.8	0.8			
8		181,000	3.0	1.0			
_9		152 000	2.5	0.5	1	0.8	
īo		200 000	2.6	0.6			
11		203 000	2.6	af			
12		154,000	30	6.7	1	0.7	
13		221,000	28	0.5			
14		284 000	21	af			
15		210,000	23	0.5	/	0.5	
16		154,000	25	6.5			
17		197,000	23	0.4			·
18		233,000	2.5	al	/	0.4	
19		179,000	4.8	6.5			
20		22.9,000	2.0	0.6			
21		275 000	2.0	0.5		0.5	
22		237,000	2.1	0.5			
23		239 000	2.4	0.6			
24		223 000	2.0	05		4.5	
25	└─-┨────	260,000	1.8	0.5			
26		293,000	1.8	0.4	 		
27		186,000	2.8	0.8			
28		302,000	3.0	1.2	├ ─── └ ───	1.2	
29		277,000	3.1	1.2	<u> </u>	<u> </u>	<u> </u>
30 31		236,000	3.0	1.1			<u> </u>
	24	234,000	3.0	1.0	//	<i>1.0</i>	xxxxxxx
Total	XXXXXX	6,628,000	XXXXXXXXXXXXXXXX		10		XXXXXXXXX
Avg.	XXXXXX	214,000	I		XXXXXXXXXXXXXXXXX		
Max.		302,000		<u> </u>	XXXXXXXXXXXXXXX		XXXXXXXX

* If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.



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 5.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION

Water System Information

Water System antomation	001000
•System Name:Wedgefield Utilities	PWS Identification No.: 3480149
System Dwner	
Name: Utilities Inc. of Florida	Telephone No.: <u>407-869-1919</u>
Address 200 Weathersfield Ave.	
City: Altamont Springs Florida 32714	Statu: Zur Code:
The second	contaction

• System Type: @ community; D non-transient non-community; D non-community; D consecutive

• No. of Service Connections at End of Reporting Month: _____; • Total Population Served at End of Reporting Month:

Water Treatment Plant Information

• Insetment Plant Namu: Wedgefield water plant Address: 20449 Mansfield St.

Telephone No.: 407-568-6787

City: Orlando State: FL, Zo Code: 32833 • Permitted Maximum Day Capacity of Plant: 350,000 gpd; • Plant Category and Class per Rule 62-899.310(3), F.A.C.: 3-C • Plant Operators: See Page 3.

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF November 1996 : See Page 2.

III. SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See Page 4.

IV. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR

I, the undersigned leadichief operator of the water treatment plent listed in Part 1 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 applicable to this plant were prepared each day a certified operator staffed or visited the plant during the reporting month indicated on this report and thet these records will be maintained available for review at the plant site for not less than five years:

- records of amounts of chemicals used and chemical feed rates;
- process performance records for sedimentation (e.g., process effluent turbidity and studge volume produced);
- process performance records for filtration (e.g., process effluent turbidity and color, number of filters in service, filtration rates, unit filter run volumes, head losses, length of filter runs, frequency of beckwesh, amount of backwesh water used, duration of backwesh, and backwesh ratest;
- process performance records for time-soda ash softening le.g., source water and process efficient hardness in addition to records for coegulation/flocculation, sedimentation, and Eltration);
- · process performance records for ion exchange softening (e.g., feed and bypass flows, blend rate, and sait and brine used);
- process performance records for reverse associate le.g., feed, product, and brine flowes; feed pressure, temperature, pH, conductivity; and turbidity; product pH and conductivity; and brine pH and conductivity; and
- process performance records for electrodialysis is g., polarity, feed temperature and total dissolved solids, product conductivity and total dissolved solids, dilute flow rate, brine make-up, pressures, and volts/amps).

slach 7436-c 12/1/16

Roger Holsapple 7436-c Name and Cartificate Number (please type or print)

-Kianthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water System PWS Identification Number: 3480149 Treatment Plant Name: Wedgefield water plant

IL SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF NOVEMBER 1996

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

			Lowest Residuel	Residual D	Isinfectant in Distribuo	on.System	
Day of the Manth	Hours Plant in Operation	Ouantity of Finished Water Produced by Plant (galiona)	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 Coldorm Sampling Points	Lowest Residual Disinfectant Concentration at Total Collform Sampling Points (mg/L) ⁹	Reported Emergency or Abnormal Operating Conditions
1	14	300,000	2.3	47			
2	-1	217,000	2.0	1.0			
3		304,000	2,6	42			
4		226,000	1.9	10			
5		245 000	48	1.0			
0		233,000	45	0.8			
7		226'000	1,5	0.8			
8		141 000	1.6	0.6			
9		211,000	1.8	0.6			
10		273,000	2.5	1,0			
11		206,000	2.8	1.0	·		
12		227,000	3.0	41			
13		279,000	3.0	<u> </u>			
14		217,000	2,6	1,3			
15	l	195,000	2,7	1.1			
16	l	24 ,000	2.0	1.0			
17		269,000	1,9	1.2			
18		174,000	2,8	1.0			
19		253,000	3.0	1.0			
20		268,000	3,3	43			
21		262,000	3,0	15			
22	ļ	228,000	7.0	1.5			
23		279,000	2,8	1.4			
24		280,000	2.9	1.2			
25		231,000	2,6	1.0			
26	 	189,000	2.7	1.0			
27	l	278,000	2,5	1.0			
28	1	223,000	3.6	40			
29	<u> </u>	194,000	3.5	1.0			
30	*	208,000	2,0	2.D			
31	24						
Total	XXXXXX		****	· · · · · · · · · · · · · · · · · · ·		XXXXXXXXXXXX	*****
Avg.	XXXXXX	239,500	XXXXXXXXXXXXXXX				XXXXXXXXX
Max.	XXXXXX	309,000	1****	IYYYYYYYYYY	XXXXXXXXXXXXXXXX	1	

If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free evailable chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of mg/L of free evailable chlorine and notify the Department or the appropriate ACPHU by wike or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

H at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or fluth appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and nobity the Department or the appropriate ACNNU by wire or telephone within 24 hours pursuent to Rule 62-555.360(3), F.A.C.



Department of Environmental Protection

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

INSTRUCTIONS: See Page 5.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION

Water System Information PWS Identification No.: 3480149 • System Name: Wedgefield IItilities INC. PWS Identification No.: 3480149 • System Owner Name: Ut&lities Inc. of Florida Telephone No.: 407-869-1919 Address: 200 Weathersfield Ave. State: FL. Zip Code: 32714

• System Type: 🗰 community; 🗆 non-transient non-community; 🗖 non-community; 🗖 consecutive

•No. of Service Connections at End of Reporting Month: <u>769</u>; •Total Population Served at End of Reporting Month: <u>1923</u>

Water Treatment Plant Information

Orlando

City:

• Treatment Plant Name: WEdgefield Water Treatment Plant Telephone No.: 407-568-6787

Address: 20449 Mansfield St.

State: FL. Zip Code: 32833

Permitted Maximum Day Capacity of Plant: 350,000 gpd;
 Plant Category and Class per Rule 62-699.310(3), F.A.C.: C-3
 Plant Operators: See Page 3.

SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See Page 4.

IV. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR

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 applicable to this plant were prepared each day a certified operator staffed or visited the plant during the reporting month indicated on this report and that these records will be maintained available for review at the plant site for not less than five years:

- records of amounts of chemicals used and chemical feed rates;
- process performance records for coagulation/flocculation (e.g., source water temperature, pH, turbidity, color, and alkalinity and process
 affluent pH and alkalinity in addition to chemical feed rates);
- process performance records for sedimentation (e.g., process effluent turbidity and sludge volume produced);
- process performance records for filtration (e.g., process affluent turbidity and color, number of filters in service, filtration rates, unit filter run volumes, head losses, length of filter runs, frequency of backwash, amount of backwash water used, duration of backwash, and backwash rates);
- process performance records for lime-soda ash softening (e.g., source water and process effluent hardness in addition to records for coagulation/flocculation, sedimentation, and filtration);
- process performance records for ion exchange softening (e.g., feed and bypass flows, blend rate, and salt and brine used);
- process performance records for reverse osmosis (e.g., feed, product, and brine flows; feed pressure, temperature, pH, conductivity, and turbidity; product pH and conductivity; and brine pH and conductivity); and
- process performance records for electrodialysis (e.g., polarity, feed temperature and total dissolved solids, product conductivity and total dissolved solids, dilute flow rate, brine make-up, pressures, and volts/amps).

nde 1-10-9. Signature and Date

Roger Holsapple 7436-c

Name and Certificate Number (please type or print)

Monthly Operation Report for	Public Water Systems that Use Gro	und Water
	Water Systems that Treat Their We	
	3480149	

System PWS Identification Number: 3480149 Treatment Plant Name: Wedgefield Water Treatment

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SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF

December 1996

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

Plant

		Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual	Residual C	Recent		
Day of the Month	Hours Plant in Operation		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 Sampling Points	Lowest Residual Disinfectant Concentration at Total Colliform Sampling Points (mg/L)'	Beported Emergency or Abnormal Operating Conditions
1	24	L28,000	3,2,	1,5			
2		224,000	2,6	1.3			
Э		216,000	2.4	10			
4		214,000	4.6	0,9			
5		182,000	1.0	0.7			
6		201,000	1.0	0.6			
7		225,000	1.1	0,6			
8		219,000	1.3	0,6			
9		176,000	1.4	0,7			
10		186,000	46	0,7			
11		223,000	1.7	0,8			
12		211,000	1.7	0,6			
13		200,000	1,5	0,6			
14		197,000	1.5	0,5			
15		2.89,000	1,5	0,5			
16		198 000	1.3	015			
17		214,000	3,0	1,7			
18		207,000	3,0	2,0			
19		212,000	2.5	1.8			
20		230,000	2,7	2,0			
21		141,000	2.5	2.0			
22		271,000	2,2	1.8			
23		239,000	1.1	0,6			
24		174,000	1.0	0.5			
25		270,000	1.1	0,5			
26		247,000	0.9	0,4	4 samples		
27		174,000	0.9	0.4	2 RAW		
28		3/8,000	1.0	0,4	2 pirt		
29		175,000	6.1	0.5			
30		177,000	1.0	0.5			
31	2.4	276,000	1.1	0,5			
Total	XXXXXX		*****	<u> </u>			XXXXXXXX
Avg.	XXXXXX		XXXXXXXXXXXXXX		XXXXXXXXXXXXXXXX		XXXXXXXX
Max.	XXXXXX	3/8,000			XXXXXXXXXXXXXXXX		

If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.



Department of Environmental Protection

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

INSTRUCTIONS: See Page 5.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION

Water System Information

System Na	me: Wedgefield Utilities Inc.	PWS Identification No.: 3480149
• System Di	<u>ner</u>	
Name:	Utilities Inc. of Florida	Telephone No.: <u>407-869-1919</u>
Address:	200 Weathersfield Ave.	
City:	Altamonte Springs	State: FL. Zip Code: 32714

• System Type: 🖄 community; 🗅 non-transient non-community; 🗅 non-community; 🗖 consecutive

•No. of Service Connections at End of Reporting Month: _____; •Total Population Served at End of Reporting Month: _____;

Water Treatment Plant Information

Treatment Plant

Name:Wedgefield Water Treatment PlantTelephone No.:407-568-6787Address:20449 Mansfield St.City:OrlandoState:FL. Zin Code:32833

City: Orlando State: FL. Zip Code: 32833 • Permitted Maximum Day Capacity of Plant: 350,000 gpd; • Plant Category and Class per Rule 62-699.310(3), F.A.C.: C-3 • Plant Operators: See Page 3.

- II. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTHIYEAR OF JANDARY 97 : See Page 2.
- SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See Page 4.

IV. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR

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 applicable to this plant were prepared each day a certified operator staffed or visited the plant during the reporting month indicated on this report and that these records will be maintained available for review at the plant site for not less than five years:

- records of amounts of chemicals used and chemical feed rates;
- process performance records for coagulation/flocculation (e.g., source water temperature, pH, turbidity, color, and alkalinity and process
 affluent pH and alkalinity in addition to chemical feed rates);
- process performance records for sedimentation (e.g., process effluent turbidity and sludge volume produced);
- process performance records for filtration (e.g., process affluent turbidity and color, number of filters in service, filtration rates, unit filter run volumes, head losses, length of filter runs, frequency of backwash, amount of backwash water used, duration of backwash, and backwash rates);
- process performance records for lime-soda ash softaning (e.g., source water and process affluent hardnass in addition to records for coagulation/flocculation, sedimentation, and filtration);
- · process performance records for ion exchange softening (e.g., feed and bypass flows, blend rate, and salt and brine used);
- process performance records for reverse osmosis (e.g., feed, product, and brine flows; feed pressure, temperature, pH, conductivity, and turbidity; product pH and conductivity; and brine pH and conductivity); and
- process performance records for electrodialysis (e.g., polarity, feed temperature and total dissolved solids, product conductivity and total dissolved solids, dilute flow rate, brine make-up, pressures, and volts/amps).

rda. 2-1-97 Signature and Date

Roger Holsapple 8863-C

Name and Certificate Number (please type or print)

System PWS Identification Number 3480149 Treatment Plant Name: Wedgefield Water Treatment Plant

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF

• Type of Residual Disinfactant Maintained in Distribution System Served by Plant: K tree chlorine;
combined chlorine (chloramine);
chlorine dioxide

Day of the Month	Hours Plant in Operation	n Water Produced by Plant	Lowest Residual Disinfectant Lowes Concentration at Residu Entry to Distribution Disinfect System (mg/L)* Concentra at Remo	Residual [Disinfectant in Distribut		
				Lowest Residual Disinfectant Concentration et Remote Point (mg/L)*	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Collform Sampling Points (mg/L) ¹	Reported Emergency or Abnormal Operating Conditions
1	24	258,000	1,0	0,5			
2	24	2.81,000	1.1	0.5			
3	24	153,000	1.9	0.6			
4	24	310,000	1,6	0.6			
5	24	225,000	2.3	0,8			
6	24	233,000	2.1	0,8			
7	24	237,000	1,7	0,7			
8	24	203000	2.3	0,7			
9	24	184,000	2,/	0,9		•	
10	24	170,000	1.8	0,6			
11	24	227,000	1.9	0,6			
12	24	2/8,000	1.9	0,6		······································	
13	24	183,000	1.6	0.5			
14	24	200,000	1.5	0.3			
15	24	132,000	1,8	0,7			
16	24	223,000	2.0	0.9			
17	24	179,000	1.6	0,7			
18	Z4	222,000	1.5	0.6	· · · · · · · · · · · · · · · · · · ·		
19	24	192,000	7,0	0.7	· · · · · · · · · · · · · · · · · · ·		
20	24	221,000	1.3	0.8			
21	24	197,000	1.9	0.8			
22	24	263,000	2.3	1.0			
23	24	159,000	2.4	1.2		±	
24	24	225,000	2.5	1.2			
25	24	185,000	2.4	1.2			
26	24	206,000	2.3	1.3		· · · · · · ·	
27	24	231,000	47	1,0	4 samples	2 RAW	
28	24	135,000	6.9	1.1		2 Disturb	
29	24	196,000	2,0	1.1			
30	24	170,000	2,1	1.1			
31	24	198,000	2,3	42			
Total	XXXXXX	6,416,000	XXXXXXXXXXXXX			XXXXXXXXXXX	
Avg.	XXXXXX	207,000	XXXXXXXXXXXXXX	XXXXXXXXXXX	XXXXXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXX

If et any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 52-555.350(3), F.A.C.

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6	Department of Environmental Protection
Mo	onthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
INSTR	RUCTIONS: See Page 5.
I. G	ENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION
- 	Nater System Information (Wedge Field Cobdivision)" System Name: UTILITIES INC. of Florida PWS Identification No.: 3480144
•	Name: Urilities Inc. of Florida Telephone No.: 407-869-1919
	Address: 200 Westhersfield Aug City: Altonout Sorings State: EL Zip Code: 32719
•	System Typa: 🕸 community; 🗆 non-transient non-community; 🗅 non-community; 🗆 consecutive No. of Service Connections at End of Reporting Month: 772; • Total Population Served at End of Reporting Month: 1930
	Vater Treatment Plant Information
	Name: Under Field 41 thes uster Trestment Philtelephone No.: 407-563-6787
	Address: <u>20449 Mans Field</u> 31 City: Drivedo State: <u>F1</u> Zip Code: <u>72833</u>
	Permitted Maximum Day Capacity of Plant: <u>350</u> gpd; Plant Category and Class per Rule 62-699.310(3), F.A.C.: <u>C-3</u> Plant Operators: See Page 3.
	SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF <u>Activery</u> : See Page 2.
.a. S	SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See Page 4.
IV. S	STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR
b	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 applicable to this plant were prepared each day a certified operator staffed or risited the plant during the reporting month indicated on this report and that these records will be maintained available for review at the plant ite for not less than five years:
	 records of amounts of chemicals used and chemical feed rates; process performance records for coagulation/flocculation (e.g., source water temperature, pH, turbidity, color, and alkalinity and process effluent pH and alkalinity in addition to chemical feed rates);
	 process performance records for sedimentation (e.g., process effluent turbidity and sludge volume produced); process performance records for filtration (e.g., process affluent turbidity and color, number of filters in service, filtration rates, unit filter
	 run volumes, head losses, length of filter runs, frequency of backwash, amount of backwash water used, duration of backwash, and backwash rates); process performance records for time-soda ash softaning (e.g., source water and process offluent hardness in addition to records for
	coagulation/flocculation, sodimentation, and filtration);
	 process performance records for ion exchange softening (e.g., feed and bypass flows, blend rate, and selt and brine used); process performance records for reverse osmosis (e.g., feed, product, and brine flows; feed pressure, temperature, pH, conductivity, and tubilities excluded all and brine mH and panductivity and
	turbidity; product pH and conductivity; and brine pH and conductivity); and process performance records for electrodialysis (e.g., polarity, feed temperature and total dissolved solids, product conductivity and total dissolved solids, dilute flow rate, brine make-up, pressures, and volts/amps).
	Signature and Date 1997 3-9-97 Reger HolsApple 7436-C Name and Certificate Number (blease type or print)
	Signature and Date Name and Certificate Number (please type or print)

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Frent Meres

System PWS Identification Number Treatment Plant Name: ______

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF 1. HERORY

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

Day of th e Month		nt in Water Produced by Plant	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual D	Deserve		
	Hours Plant in Operation			Lowest Residual Disinfectant Concentration at Remote Point (mg/L)*	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Collform Sampling Points (mg/L)'	Reported Emergency or Abnormal Operating Conditions
1	24	207,000	2,9	1,6			
2	1	345,000	2,7	1.4			
3		2/2/000	2,4	1,6			
4	1	196,000	2,0	45			
5		201 000	2,3	1,5			
6	J	192,000	2.6	67			
7		27/0000	2,6	1, 8			
8		192,000	2,4	1,6			
9		250 and	2,4	1.6		•	
10		2/3 000	1.5	1,2			· · · · · · · · · ·
11		200 and	1.7	1.0			
12		158.000	2,3	1.1			
13		156-0000	2,5	1.3			
14	1	129,000	2,3	1, Z			
15		270,000	2,5	1.2			
16		232,000	2,3	1.1			
17		2/0,000	2,0	1.0			
18		100,000	2,0	1,0			
19		175,200	1.9	Q, C			
20		194,000	1.8	0,6			
21		207,000	4.6	0,5			
22		215,000	4.5	015			
23		238,000	1,2	0,4			
24		187,000	1.5	0.4	2-RAWZ-DIST.		
25		280,000	1,5	0,6			
26		24/ ,000	2,0	0,7			
27		203,000	3,1	0.9			
28		231,000	2,5	1.2			
29	1						
30	<u> </u>			 			
31	24						
Total	XXXXXX	5,905,000	*****		La contrata de la contrat	XXXXXXXXXXXX	
Avg.	XXXXXX	211,000	XXXXXXXXXXXXX				XXXXXXXX
Max.	XXXXXX	345.000	XXXXXXXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXX

If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

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4/14/97 Marganet F/I

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Interoffice Memorandum

Fire Loss Management -- Hydrant Program Coordinator 6590 Amory Court, Winter Park, FL 32792 (407)836-9080 Ext. 77877 Fax (407)836-9097

April 14, 1997

TO: Wedgefield Utilities

FROM: Lt. William Duxbury

SUBJECT: Hydrant Testing -- Estimated Water Useage March 1997

During the months of March 1997 it is estimated that the Fire/Rescue Division used approximately 28,683 gallons of water testing hydrants in the Wedgefield Subdivision, serviced by your utility.

If you have any questions or need further information please contact me.

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Department of Environmental Protection
onthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
TRUCTIONS: See Page 5.
GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION
Water System Information • System Name: Wedge field woter Tresspent Phot PWS Identification No.: 3480149 • System Owner Name: UTITIES En. of Flogida Telephone No.: 407-869-1919
Address: 200 Westhersfield Aug
City: <u>Altamonte Springs</u> • System Type: R community; D non-transient non-community; D non-community; D consecutive
•No. of Service Connections at End of Reporting Month: 723; •Total Population Served at End of Reporting Month: 1930.5
Water Treatment Plant Information • Treatment Plant Name: Wedge Reild Woter Thentment Plant Telephone No.: 407-568-6787 Address: 20448 Maw Field ST
City: Orlando State: F/ Zip Code: 32.83.3
Permitted Maximum Day Capacity of Plant: 350000 gpd; Plant Catagory and Class per Rule 62-699.310(3), F.A.C.: C-3 Plant Operators: See Page 3.
SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF MArch 1997 : See Page 2.
SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See Page 4.
STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR
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Also, I certify that the following additional operations records applicable to this plant were prepared each day a certified operator staffed or visited the plant during the reporting month indicated on this report and that these records will be maintained available for review at the plant site for not less than five years:
 records of amounts of chemicals used and chemical feed rates; process performance records for coagulation/flocculation (e.g., source water temperature, pH, turbidity, color, and alkalinity and process affluent pH and alkalinity in addition to chemical feed rates);
 process performance records for sedimentation (e.g., process effluent turbidity and sludge volume produced); process performance records for filtration (e.g., process affluent turbidity and color, number of filters in service, filtration rates, unit filter run volumes, head losses, length of filter runs, frequency of backwash, amount of backwash water used, duration of backwash, and backwash rates);
 process performance records for lime-soda ash softening (e.g., source water and process effluent hardness in addition to records for coogulation/flocculation, sedimentation, and filtration);
 process performance records for ion axchange softening (e.g., feed and bypass flows, bland rate, and salt and brine used); process performance records for reverse osmosis (e.g., feed, product, and brine flows; feed pressure, temperature, pH, conductivity, and turbidity; product pH and conductivity; and brine pH and conductivity; and
• process performance records for electrodialysis (e.g., polarity, feed temperature and total dissolved solids, product conductivity and total
dissolved solids, dilute flow rate, brine make-up, pressures, and volts/arrps). <u>General Hols Apple 7436-C</u> Signature and Date Name and Certificate Number (please type or print)

3460149

System PWS Identification Number: (Treatment Plant Name:

Wedge Field Water Trestment Plant SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF Milorch

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

Day of the Month	Hours Plant in Operation	Plant in Water Produced by Plant	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual (
				Concentration et Remote Point (mg/L)*	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residuel Disinfectant Concentration at Total Collform Sampling Points (mg/L) ¹	Reported Emergency or Abnormal Operating Conditions
1	24	249,000	35	2,3			
2		310,000	3,4	2, /			
З		252,000	3,5	2,1			
4		236,000	2.5	1,8			
5		255,000	.), 2	1.8			[
6		227,000	3,5	2,0			
7		220,000	3,2	2.0			
8		266 000	3,0	1,9			
9		468,000	2.6	1,4			
10		229,000	2,3	1,5			
11		336,000	2.0	1,2			
12		234.000	2./	0.9			
13		215 000	2.0	0.9		· · · · · · · · · · · · · · · · · · ·	
14		219,000	4.6	0, 3			
15		172,000	1.8	0,8			
16		Z32,000	1,6	0,7			
17		2.36,000	210	1,0		······································	
18		186 000	2.0	1.2			
19		219,000	2,4	1,2			
20		214,000	1,8	1,0	* 2well		
21		215,000	67	1,0	3 Distribution		
22		188,000	/ 7	1,0			
23		339,000	1.9	1.1			
24		197,000	1.7	0.9			
25		215,000	1.8	1,0			
26		284,000	17	1.0			
27		289,000	2.6	13			
28		297,000	2.2	1, 2_			
29		286,000	2,3	1.2			
30		271,000	2.6	1,3			
31	24	288,000	2,1	1,0			
Total	XXXXXX	1,751,000	XXXXXXXXXXXXX	XXXXXXXXXX		XXXXXXXXXXXX	
Avg.	XXXXXX	250,000			XXXXXXXXXXXXXXX		
Max.	XXXXXX	468,000 residual disinfectant cond		A contraction of the second se	XXXXXXXXXXXXXXX	1	

If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chloring and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Aule 62-555.350(3), F.A.C.

If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, Immediately Increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuent to Rule 62-555.350(3), F.A.C.

1.00	Department of Environmental Protection	Alternate/Substitute DEP Form 424655 910(3)
N	onthly Operation Report for Public Water System and for Consecutive Public Water Systems (ems that Use Ground Water that Treat Their Water
INST	TRUCTIONS: See Page 5.	
ł.	GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATIO	N
	Water System Information • System Name: <u>Wedge Higher</u> Urilities • <u>System Owner</u> Name: Utilities Inc. of Florida	PWS Identification No.: <u>3480149</u> Telephone No.: <u>407-869-1919</u>
	Address: 200 Wentlersfield Aul. City: Altamoute springs T	State: F/ Zip Code: 327/4/
	• System Type: 19 community: D non-transient non-community; D non-community; D cons	ecutive
	•No. of Service Connections at End of Reporting Month: <u>777</u> ; •Total Population S	erved at End of Reporting Month: 77-577
	Water Treatment Plant Information • Treatment Plant Name: Werker held Water Treatment phit Address: 20449 Monstickel St	Telephone No.: 407-568-6787
	City: Orlando Permitted Maximum Day Capacity of Plant: 350,000 gpd; Plant Category and	State: <u>F/</u> Zip Code: <u>32 S 3 3</u>
	Plant Angrators: Sag Pana 3	
11.	SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR	OF <u>Spril 1997</u> : See Page 2.
	SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTA EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See	AINING ACRYLAMIDE, POLYMER CONTAINING
IV.	STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR	
	I, the undersigned lead/chief operator of the water treatment plant listed in Part I of thi belief, the information provided in this report is true and accurate.	s form, certify that, to the best of my knowledge and
	Also, I certify that the following additional operations records applicable to this plant w visited the plant during the reporting month indicated on this report and that these records site for not less than five years:	
	 records of amounts of chemicals used and chemical feed rates; process performance records for coagulation/flocculation (e.g., source water temper affluent pH and alkalinity in addition to chemical feed rates); process performance records for sedimentation (e.g., process effluent turbidity and process performance records for filtration (e.g., process affluent turbidity and color 	sludge volume produced); , number af filters in service, filtration rates, unit filter
	 run volumes, head losses, length of filter runs, frequency of backwash, amount of backwash rates); process performance records for lime-soda ash softaning (e.g., source water and process performance); 	
	 coagulation/flocculation, sedimentation, and filtration); process performance records for ion exchange softening (e.g., feed and bypess flow process performance records for reverse osmosis (e.g., feed, product, and brine flo turbidity; product pH and conductivity; and brine pH and conductivity); end process performance records for electrodialysis (e.g., polarity, feed temperature and 	ws; feed pressure, temperature, pH, conductivity, and
	dissolved solids, dilute flow rate, brine make-up, pressures, and volts/amps).	······································
	Signature and Data S-4-97 Roger Name and	Certificate Nonber (please type or print)

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System PWS Identification Number: 348014

Treatment Plant Name: Usedge Gold

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF

Willie.

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

Unterphat

		ant in Water Produced by Plant	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System				
Day of the Month	Hours Plant in Operation			Lowest Residual Disinfectant Concentration at Remote Point (mg/L)*	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Collform Sampling Points (mg/L)1	Reported Emergency or Abnormal Operating Conditions	
1	24	239,000	2.0	l, Q				
2	Λ	262,000	2,2	1.0				
3		269,000	2,4	0.7				
4		251,000	2,3	0,9	5			
5		339,000	2,3	D, Z				
6		371,000	2.7	1,0				
7		274,000	2.7	1,0				
8		307,000	2.4	1.6				
9		252,000	2.0	1,1		•		
10		227,000	2,4	1, Ζ.				
11		283,000	2.3	1.1				
12		220,000	2,0	1.0				
13		258, 200	2,0	1,0				
14		182,000	2,5	10				
15		156 000	2.0	0.3				
16		182 Occ)	3.4	1.3				
17		162, C.C	23	10				
18		236,000	2.3	11				
19		2/2, 0a)	2,6	2, 0				
20		269 00	2,9	1.7				
21		219,000	2,5	44		······		
22		281,000	2,2	1.4	····			
23		2/8,000	2,8	1,4				
24		250,000	2.9	1.6				
25		157 000	2,5	1.3				
26		285,000	4,4	1.9				
27		175,000	2,5	1.5				
28		196,000	2,8	2,0				
29		210,000	2.5	1.0				
30		232,000	Z, 9	1.3				
31	24			1				
Total	XXXXXX		XXXXXXXXXXXXX	*****	5	*****	XXXXXXXX	
Avg.	XXXXXX	239 000	XXXXXXXXXXXXX	XXXXXXXXXX		XXXXXXXXXXX	XXXXXXXX	
Max.	XXXXXX	371,000	XXXXXXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXX	XXXXXXXXXXX	XXXXXXXX	

If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

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•		FILE
ST	Department of Environmental Protection	Alternate/Substitute_DEP Form 62-555.910(3)
•	Operation Report for Public Water System I for Consecutive Public Water Systems th	
INSTRUCTION	S: See Page 5.	
I. GENERAL	WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION	
 System Na 		PWS Identification No.: 3480/49
• <u>System_Ov</u> Name:	UTILITIES INC. OF Florida	Telephone No.: 407-869-1919
City:	ITAMONTE Springs	State: <u>P/</u> Zip Code: <u>32714</u>
●System Ty ●No. of Ser	ype: p community; \Box non-transient non-community; \Box non-community; \Box consecutivities Connections at End of Reporting Month: 274 ; •Tatal Population Servi	tive ed at End of Reporting Month: 1935
● <u>Treatment</u> Name: Address: City:	<u>Plant Information</u> <u>Plant</u> <u>Alege Field Water Trestment Plant</u> <u>204499 Mausfield st</u> <u>Orlands</u> Maximum Day Capacity of Plant: <u>350,000</u> gpd; •Plant Catagory and Cl rators: See Page 3.	Telephone No.: 407-568-6787 State: 4/2 Zip Code: 32.833 ass per Rule 62-699.310(3), F.A.C.: C-3
•	Y OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF	MAY 1997 : See Page 2.
III. SUMMARY	Y OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAIN OHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See Pa	
IV. STATEME	NT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR	
	dersigned lead/chief operator of the water treatment plant listed in Part I of this fo nformation provided in this report is true and accurate.	mm, certify that, to the best of my knowledge and
visited the p	rtify that the following additional operations records applicable to this plant were plant during the reporting month indicated on this report and that these records will less than five years:	prepared each day a certified operator staffed or II be maintained available for review at the plant
 proc. afflu proc proc rum back proc cosg proc cosg proc proc turb proc 	rds of amounts of chemicals used and chemical feed rates; ess performance records for coagulation/flocculation (e.g., source water temperature ent pH and elkalinity in addition to chemical feed rates); ress performance records for sedimentation (e.g., process effluent turbidity and slud ress performance records for filtration (e.g., process effluent turbidity and color, nu volumes, head losses, length of filter runs, frequency of backwash, amount of back cwash rates); ress performance records for lime-soda ash softening (e.g., source water and proces gulation/flocculation, sedimentation, and filtration); ress performance records for ion exchange softening (e.g., feed and bypass flows, to ress performance records for reverse osmosis (e.g., feed, product, and brine flows; ridity; product pH and conductivity; and brine pH and conductivity); and ress performance records for electrodialysis (e.g., polarity, feed temperature and to olved solids, dilute flow rate, brine make-up, pressures, and volts/amps).	lge volume produced); mber of filters in service, filtration rates, unit filter tweash water used, duration of backwash, and as alfluent hardness in addition to records for blend rate, and selt and brine used); feed pressure, temperature, pH, conductivity, and

Alternate/Substitute_DEP Form 62 555 910(3)

System PWS Identification Number: <u>3480/49</u> Treatment Plant Name: <u>Wedge Ruld Utilitie</u>

... SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF

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

Water plant

Day of the Month	Hours Plant in Operation	Quantity of Finished Dia Mater Produced by Plant Conc on (gailons) Entry t		Residual Disinfectant in Distribution System			
			Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Lowest Residual Disinfactant Concentration at Remote Point (mg/L)*	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residuel Disinfectant Concentration at Total Collform Sampling Points (mg/L)'	or Abnormal
1	29	185-000	2,5	1,3			·
2		203 000	23	1.2			
3		301 000	2,2	10			
4		287 000	2,3	1.1			
5		240 000	2.1	1.0			
6		273000	2,0	1,0			
7		279 000	2,5	1.3		· · · · ·	
8		310000	3,5	2,1	5	· ·	
9		354020	415	2,2			
10		355,000	21	Z, /			
11		242000	7,0	21			
12		242000	5.0	49			
13		2140as	2,6	3,0			
14		259000	1,8	1.6			
15		209 000	1,8	1.4			
16		230000	1,0	10		······	
17		2/9 00	1.0	0.8			
18		222200	1.2	0.6			
19		20000	1,2	0,6			
20		225000	1.4	0,6			
21		201000	1.5	0.6			
22		20200	1.7	0,7			
23		176000	1.7	0.7			
24		27300	1,6	0,6			
25		2/2 00	1.8	0,7			
26	┠_ <u></u>	32000	2.0	0.9			
27	╏─┤───	170 000	2,0	1,0			
28	↓ }	175 000	2.2	1.0			
29	┝╼┥───	23/000	2.0	Y, D			
30	1 1/1	2/0 000	2.7	1.3			
31	24	209 000	2.4	1.2			
Total	XXXXXX	7,247,000	XXXXXXXXXXXXX		1. <u>V</u>	XXXXXXXXXXX	
Avg.	XXXXXX	10000			XXXXXXXXXXXXXXXX		
Max.	XXXXXX	353,000 residual disinfectant con	TXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXX

If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

	•
Department of Environmental Protection	m 62-555.910(2)
Ionthly Operation Report for Public Water Systems that Use Grou and for Consecutive Public Water Systems that Treat Their W	
STRUCTIONS: See Page 5.	
GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION	
	9-1919
Water Treatment Plant Information • Treatment Plant • Treatment Plant Name: M.e. op fuild Water Treatment Plant Telephone No.: 407-3 Address: 20499 Mswsfield ST State: 6/2 City: Orlande State: 6/2 Zip Code: 2 • Permitted Maximum Day Capacity of Plant: 35000 gpd; • Plant Category and Class per Rule 62-699.310(3), F. • Plant Operators: See Page 3. 1	68-6787 2933 A.C.: <u>3-C</u>
SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF $\sqrt{\nu \nu e} T/$: See Page 2.
. SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYM EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See Page 4.	ER CONTAINING
. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR	
I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of belief, the information provided in this report is true and accurate.	my knowledge and
Also, I certify that the following additional operations records applicable to this plant were prepared each day a certified o visited the plant during the reporting month indicated on this report and that these records will be maintained available for re site for not less than five years:	
 affluent pH and alkalinity in addition to chemical feed rates); process performance records for sedimentation (e.g., process effluent turbidity and sludge volume produced); process performance records for filtration (e.g., process affluent turbidity and color, number of filters in service, filtrat run volumes, head losses, length of filter runs, frequency of backwash, amount of backwash water used, duration of backwash rates); process performance records for little-soda ash softening (e.g., source water and process affluent hardness in addition coagulation/flocculation, sedimentation, and filtration); process performance records for ion exchange softening (e.g., feed and bypass flows, blend rate, and selt and brine u process performance records for reverse osmosis (e.g., feed, product, and brine flows; feed pressure, temperature, pH, turbidity; product pH and conductivity; and brine pH and conductivity; and process performance records for electrodialysis (e.g., polarity, feed temperature and total dissolved solids, product con dissolved solids, dilute flow rate, brine make-up, pressures, and volts/amps). 	ion rates, unit filter backwash, and to records for sed); conductivity, and ductivity and total
IST	Environmental Protection File. Substant of the provide the second secon

Treatment Plant Name: Wedge Fie Unte ry sthe exil

System PWS Identification Number:

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF

•Type of Residual Disinfectant Maintained in Distribution System Served by Plant: 💓 free chlorine; 🗆 combined chlorine (chloramine); 🗆 chlarine dioxida

	Plant in	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual (
Day of the Month				Lowest Residual Disinfectant Concentration at Remote Point (mg/L)*	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Collform Sampling Points (mg/L)*	Reported Emergency or Abnormal Operating Conditions
1	24	218,000	2.4	$\downarrow O$			
2		203,000	2,0	Q.S.			
3	$\Gamma' \Gamma$	261,000	21	1.0			
4		2/4,000	2,5	1,1			
5		210,000	2,6	11			
6		178 000	3,0	1,4			
7		233,000	3,2	4.6			
8		186 000	1.8	40			
9		210,000	1.4	1.0			
10		118,030	1,0	0,6			
11		200,000	1.0	0.5			
12		161,000	1.6	08			
13		181,000	1.6	0.9			
14		245,000	1.6	0.9			
15		188,000	1.7	Rig			
16		160,000	1.6	0.7			
17		164,000	1,6	0.8			
18		182,000	1.6	0,8			
19	ļ	215,000	1.8	0.3			
20	<u> </u>	2/2,000	2.0	0,8			
21		152,000	2,0	0.4			
22		207,000	2,0	0, 6,			
23		19/1000	1.8	0,6			
24		173 000	1.8	0.6			
25		198,000	1,6	0,6	5 somales		
26	┦_┤───	121,000	1.7	0.7	· · · · · · · · · · · · · · · · · · ·		
27	+	233,000	11.8	0.7			ļ
28	┦. ┧━━	150,000.	1.7	0,6	ļ		
29 30	+ \{/	220,000	2,0	0.7	· · · · · · · · · · · · · · · · · · ·		
30	24	186,000	3.0	0,7	<u> </u>		
Total Avg.	XXXXXX	<u> </u>	*****	XXXXXXXXXXXX		xxxxxxxxxxxx xxxxxxxxxx	XXXXXXXXX
Max.	XXXXXX		XXXXXXXXXXXXXXXXX				XXXXXXXXX
WAX.	1000000	1 602,000	100000000000000000	1	1	~~~~~	~~~~

If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.



Department of **Environmental Protection**



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

INSTRUCTIONS: See Page 5.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION I.

	•System Name: Wadge Field Utilitie's Inc	PWS Identifica	tion No.: <u>3480149</u>
	Name: 17/11/25 INC. OF Florida	Telephone No.:	407 869-19/9
	Address: 200 Wenthers Field Ave		
	City: AlrAmoute Springs		Zip Code: <u>327/4</u>
	 System Type: # community; □ non-transient non-community; □ non-community; □ consecutions of Service Connections at End of Reporting Month: 228; • Total Population Service 	tive ed at End of Rej	porting Month: 1945
	Water Treatment Plant Information		
	• Treatment Plant Name: When friend upper treptment Phat	Telephone No.:	407-508-6187
	Address: 20499 Man; field STI		
	City: Orlando	State: El	Zip Code: 32,820
	Permitted Maximum Day Capacity of Plant: 350,000 gpd; Plant Category and C	iass per Rule 62	-699.310(3), F.A.C.: C-3
	Plant Operators: See Page 3.		
Ħ.	SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF	July	<u>97</u> : See Page 2.
	SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAIN	ING ACRYLAN	
	EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See Pa	ge 4.	
IV.	STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR		

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 applicable to this plant were prepared each day a certified operator staffed or visited the plant during the reporting month-indicated on this report and that these records will be maintained available for review at the plant site for not less than five years:

- records of amounts of chemicals used and chemical feed rates;
- process performance records for coagulation/flocculation (e.g., source water temperature, pH, turbidity, color, and alkalinity and process effluent pH and alkalinity in addition to chemical feed rates);
- process performance records for sedimentation (e.g., process effluent turbidity and sludge volume produced?
- process performance records for filtration (e.g., process affluent turbidity and color, number of filters in service, filtration rates, unit filter run volumes, head losses, length of filter runs, frequency of backwash, amount of backwash water used, duration of backwash, and backwash rates);
- process performance records for time-soda ash softaning (e.g., source water and process effluent hardness in addition to records for copoulation/flocculation, sedimentation, and filtration);
- process performance records for ion exchange softening (e.g., feed and bypass flows, blend rate, and salt and brine used);
- process performance records for reverse osmosis (e.g., feed, product, and brine flows; feed pressure, temperature, pH, conductivity, and turbidity; product pH and conductivity; and brina pH and conductivity); and
- process performance records for electrodialysis (e.g., polarity, feed temperature and total dissolved solids, product conductivity and total dissolved solids, dilute flow rate, brine make-up, pressures, and volts/amps).

8-6-97 Signature and Date

Alternate/Substitute_DEP Form 62 555 910(3)

System PWS Identification Number: 3480149 Treatment Plant Name: Medge Field Unitrices waker man

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF

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

	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			- .
Day of the Month				Lowest Residual Disinfectant Concentration et Remote Point (mg/L)*	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residuel Disinfectant Concentration at Total Collform Sampling Points (mg/L) ¹	Reported Emergency or Abnormal Operating Conditions
1	24	213,000	1.6	0,7			
2	1	287,000	16	0.7			
3		232,000	_1.7	0,8			
4		232,000	i. 9	0,8			
5		281,000	16	0,8			
6		126,000	1.3	0.4			
7		215,000		0,2			
8		230,000	2.0	0,5			
9		185,000	3.0	0,9		•	
10		227,000	3,0	1. 6			
11		202,000	2,6	1,4			
12		213,000	2.7	1.4			
13		155,000	2.1	1,3			
14		200,000	1,6	1.1			
15		207,000	1,3	1.0			
16		205,000	0.8	0.4			
17		172,000	1.6	: 0,8			
18		215,000	2,6	1.0	2		
19		155,000	5,0	2,6			
20		169,000	3.2	10			
21		243,000	2.0	0,8			
22		134,000	2,0	0,3			
23		229,000	2.0	0.9	5		
24		154,000	2./	1.0			
25		252,000	2.0	1.0			
26	<u>}</u>	188,000	2,2	1,0			
27	┞┟	213,000	2,2	1,0			
28	⊢/	243,000	2.0	0,8			
29 30	┟ <u></u> ┛┝╴	213,000	2.0	0,9			
30	24	1.88,000	2.0	0,9			
Total	XXXXXX		XXXXXXXXXXXXXX		~	xxxxxxxxxx	xxxxxx
Avg.	XXXXXX	204,000	XXXXXXXXXXXXX		XXXXXXXXXXXXXXX	****	
Max.	XXXXXX	the second s	****			xxxxxxxxxx	

If at any time the residual disinfectant concentration at the antry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to flule 62-555.350(3), F.A.C.

T	Department of Environmental Protection	AnumatorSubsciente DEP Form 62-555 910(3)
Monthly and	Operation Report for Public Water Sy for Consecutive Public Water System	stems that Use Ground Water
STRUCTIONS:	See Page 5. (ATER SYSTEM AND WATER TREATMENT PLANT INFORM	ATION
Water System • System Nan • <u>System Dwe</u> Name:	Utilities Two of Florida	PWS Identification No.: <u>3430149</u> Tatephone No.: <u>407-869+1919</u>
City: <u>A/</u>	200 WRATHERS Cold sure macule springs a: De community: D non-trenslent non-community: D non-community: D A community: D non-trenslent non-community: D non-community: D	Statu: <u>F</u> Zip Code: <u>32</u> <u>14</u> I consecutive
Weter Treatm • <u>Treatment 1</u> Nome: Address: City: • Permitted N	Dedge field water Treatment Phut 2049 9 Marsfield 51 Priando Aaximum Day Capacity of Plant: 360,000 gpd; @Plant Catago	
I. SUMMARY II. SUMMARY	INFORME SON POOR 3. OF DAILY WATER TREATMENT DATA FOR THE MONTH/Y OF USE, AT WATER TREATMENT PLANT, OF POLYMER C	ONTAINING ACRYLAMIDE, POLYMER CONTAINING
	IHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: IT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR	•
	esigned lead/chief operator of the water treatment plant listed in Part I formation provided in this report is true and accurate.	of this form, certify that, to the best of my knowledge and
visited the pl	tify that the following additional operations records applicable to this pl ant during the reporting month indicated on this report and that these r ass than five years:	
proce proce proce proce proce proce	ds of amounts of chemicals used and chemical feed rates; as performance records for coegulation/flocculation (e.g., source water t int pH and alkalinity in addition to chemical feed rates); as performence records for sedimentation (e.g., process effluent turbidit as performence records for filtration (e.g., process effluent turbidity and olumes, head losses, length of filter runs, frequency of backwash, amou wash rates);	y and studge volume produced); I color, sumber of filters in service, filtration rates, unit filter
 proce csage proce proce turbic prace 	iss performance records for time-sode ash softening (e.g., source water dation/flocculation, sedimentation, and filtration); iss performance records for ion exchange softening (e.g., feed and bype iss performance records for reverse osmosis (e.g., feed, product, and bri fity; product pH and conductivity; and brine pH and conductivity); and iss performance records for electrodialysis (e.g., polarity, feed temperats (ved solids, dilute flow rate, prime make-up, pressures, and volts/amps).	es flows, blend rate, and selt end brine used); ine flows; feed pressure, temperature, pH, conductivity, and
		Pager Holsapple 7436-C

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

12905

System PWS Identification Number: 139 Treatment Plant Name: Wedge Fix

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF _

20140

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

MU.S

			Lowest Residual	Residuel C	Reported		
Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest nestole Disinfectant Concentration at Entry to Distribution System (mg/L)*	Lowest Residual Disinfectant Concentration et Remote Point (mg/L)*	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)*	neported Emergency or Abnormal Operating Conditions
1	24	180,000	2.0	0.9			
2		165,000	2,0	0.9			
3		199,000	2./	0.4			
4		194,000	2.2	0.8			
5		249,000	2.4	1. P			
6		190,000	2.3	1.0			
7		152,00D	2.4	1, Z			L
8		191 000	2.4	1.1			
9		234,000	2,4	1,0			
10		162,000	2,3	1,0		·	
11	┟↓	224,000	2,1	0,8			
12	{	210,000	2,4	10,8			
13		216 200	1,7	0.4			
14	╏	229,000	1.1	0,4			
15		186.000	1.4	0.4			
16		229,000	1,3	. C. 5			
17	 	207,000	1,5	0,5			
18	 	209,000	1.7	0,4		····	
19	┫──┤────	190,000	1,3	0,3			
20	╏┈┟╼╾╴	198,000	1.2	0,4			
21		193,000	1.3	0,3	3 Disorbilion		
22	┟ ─┼───	211,000	1,3	0,5	2 RAIN		
23	╅╌ ╾┥╍ <u></u> ──	247,000	1,3	0.5	{		
24	╅─┼───	191,000	1.4	0,6	<u> </u>		
25	╉╍╌┼╍╍╍	201,000	1.5	0,6	├ ───────────		
27	┠─┼───	264 000	<u></u>	0.5	ł	 	
28	╉╌┯┽╼━━━		1,0	0.5	<u> </u>		
29	╉╍╋╼╍╍	236,000					
30	╉╾┼╌╌━	241,000	10	0.6	<u> </u>	<u></u>	
31	24	235.0067	1.1	0,6	<u></u>		
Total	XXXXXX	6.524.000	XXXXXXXXXXXXXX			****	XXXXXXXX
Avg	XXXXXX	2/0,000	the second s	the second se	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		
Max	XXXXXX	274,000			XXXXXXXXXXXXXXXX		
L		- C. J. Ally - Comment		In the distribution		the sector of the	

If at any time the residuel disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free evailable chlorine, immediately increase the chlorine does until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of mg/L of the evaluable chlorine, immediately increase the chlorine does until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of mg/L of the evaluable chlorine, immediately increase the chlorine does until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of the evaluable chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-668.350(3), F.A.C.

It at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately kicrease the chlorine dose and/or fluth appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuent to Rule 62-555.350(3), F.A.C.

Include service lines, mains, hydrants, tanks, etc.

Plant WEDGEFICID Utilites Month/Your August - 1887

· · · ·

DATE	FLOSHING TIME (HIN)	ESTIMATED	SILL	TLME FLUSHED		LOCATION OF FLOSRING POINT OR LINE BREAK
8-11-97		150		1500		Unit I. Black 16A Lot 2 Hrd
ч					1.	Wait Z. Block IF. Lot 1. Hya
11				L.J.	4	Vait 1' Black 22 Lot 12. Hu
1.				N	4	Vait 1. Alock 84 Lat 20. Hyc
4		11		11	14	Unit 1. Block 20 Lot 21. Avc
4		11		ł	11	Vart 1. Black 17 Lot 5. Hyd
11		11		<u></u>	11	Unit 1. Black as. Hud
4				4	11	Vart 1. Black 27. Let 1. Hyd
		<u> </u>		<u> </u>	11	Voit 1. Black AT. Lat 18. Hyd
11				11	11	Vart 1. Black 27 dot 10. Hyd
11				<u></u>	<u>1)</u>	Vait 1, Black 19 lat 22. Hyd
- 11				11	141	Wast 1, Black 18, bet 6. Ityd
4				<u>4</u>	11-	Unit 1A, Black 26 Lat 1, Hyd
4				/1	11	Unit 18, Black 74, Lot 4, Hyd
14		47			1	Varit 18, Black 30, Lot 22, rtya
4		- 4		<u>N</u>		UNITIA Black 29 Jat 12, Hyd
- 41		4		<u>и</u>	<u> </u>	Radger Dealaisge Hyd
					4	UNIT 2, Black 45, 44 16, Hya
!!		4		<u> </u>	- 11	Valt 2. Block 47, Lot 1, Hya
		n		4	11	Units Black 22, Lot 9, Hyd
		- H		4		VALT 3 Black 49 Lat 7 Hyd
- 11				4	- 11	VALTS, Block 46 LOF 43, HYD
		<u> </u>		4		Vait 3 Black 48, Lot 4, Hyd
		ATO		K	2250	White Black 49 Lat. 5 Nyd
		·				
					↓	
			<u> </u>			
	· · · · · · · · · · · · · · · · · · ·		 			<u></u>
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54,00 = .054

A		Department of nmental Protect		FIL	EP Form 62-565 \$10(3)
"fonthly Op and fo	eration Rep r Consecuti	ort for Public Wate ve Public Water Sy	er Systems istems that	that Use Gr Treat Their	ound Water Water
INSTRUCTIONS: SI	-	WATER TREATMENT PLANT	NFORMATION		
Water System Infe • System Name: • <u>System Dwner</u> Name:	Wedge	field Water Treat	ment Phot	elephone No.: <u>407-</u>	869-1919
City: <u>Alfa</u>	DENTR SPING		nunity: CI consecutive	tata: <u>F7.</u> Zip Code: at End of Reporting Mod	
Water Treatment • Treatment Plant Name: U Address: 2 C		unter Treatment P	lant r	elephone Na.:	
City: <u>Orf</u> • Permitted Maxim • Pient Operators	num Day Capacity of . : See Page 3.	Plant: <u>350,000</u> gpd; •Plan	nt Catagory and Clas	,	n, F.A.C.: <u>C-3</u>
SUMMARY OF	USE, AT WATER	EATMENT DATA FOR THE MO TREATMENT PLANT, OF POLY IN AND MANGANESE SEQUES	MER CONTAININ	G ACRYLAMIDE, PO	
		TER TREATMENT PLANT OPE			
-	-	of the water treatment plant listed report is true and accurate.	in Part I of this form	n, certify that, to the be	st of my knowledge and
	during the reporting m	itional operations records applicable onth indicated on this report and the			
process p efficient p process p	erformance records for H and alkalinity in add erformance records for	s used and chemical feed rates; computation/flocculation (e.g., source liston to chemical feed rates); r sedimentation (e.g., process affluent i filtration (e.g., process affluent turk	t turbidity and sludge	a volume produced);	
run volur backwast • process p	us, head losses, lengt i rates); erformance records fo	n of filter runs, frequency of backwa r lime-sode ash softening (e.g., sourc	sh, amount of backw	rash water used, duratio	n of backwash, and
 process p process p turbidity; 	ectormence records for product pH and condu	station, and filtration!; r ion exchange softening (e.g., food a r syverse exclasis (e.g., food, product ctivity; and brine pH and conductivit c electrodialysis (e.g., polarity, food t	;, and brine flows; fe y); and	ed pressure, temperature	, pH, conductivity, and
	solids, dikits flow rate	brine make up, pressures, and volt $\frac{10-9-97}{100}$	slamps).		
Signature and	Dete		Name and Certifi	icate Number (please typ	e ar print)

Monthly Operation Re	part for Public V	Nater Systems the	it Use Ground Water
and for Consecutive	Public Water S	vatems that Treat	Their Water

348

System PWS Identification Number: Treatment Plant Name: INedge Field unster Treatment

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTHIYEAR OF Saplember

Type of Residual Disinfectant Maintained in Distribution System Served by Plant: D free chlorine; D combined chlorine (chloramine); C chlorine diazida

bit

		Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residuel C			
Day of the Month (Hours Plant in Operation			Lowest Residual Disinfectant Concentration et Remote Point (mg/L)*	Number of Instances Where Residual Disinfectant Messurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) ¹	Reported Emergency or Abnorme Operating Conditions
1	24	204 000	215	1.1			
2	<u>^</u>	200,000	2.3	2.7			
3	7 - 1 V	161 000	2.3	1.4			
4		205 000	7.5	1.6			
5		187.000	215	1.5			
6	_	180,000	2.11	1.0			
7		7-13,000	1.17	0.4			
8		931 000	15	0.6			
9		235,000	2,0	0.7			
10		229:000	2.1	0.7		·	
11		271,000	2 C	0.1			
12		297,000	1.4	0.4			
13		236 000	19	10.7			
14		212,000	63	0.8			
15		255000	1, 1	0.8			
16		300,000	1.1	28			
17		235,000	2.0	2.1			
18		294,000	1-,	1,1			
19		173,000	2.2	10			
20		335,000	2.4	1. 2			
21		236,000	2.3	1, 14			
22		301,000	<u>1</u> 3				
23		267 000	2.4	1.1			
24		166,000	23	1.4		<u></u>	
25		272,000	70.3	1.11	X3 Cist		
26	·	200,000	2.9	46	a staw		
27		215000	2.4	1.1		[
28		237,080	2,1	1,0	······		L
29	<u>\/</u>	249,000	1.1	0,6	<u> </u>	ļ	
	24	241,000	2,0	0.7			
31				ļ			
	XXXXXX		XXXXXXXXXXXXXXXX			XXXXXXXXXXX	
	<u> </u>	and the second			XXXXXXXXXXXXXXX		
	XXXXXX	3357000			XXXXXXXXXXXXXXXX		

If at any time the residual disinfectant concentration at the antity to the detribution system drops below the equivalent of 0.2 mg/L of free evailable chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rute 62-865.360(3), F.A.C.

If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately literase the chlorine dose und/or flush appropriate partians of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free evailable chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuent to Rule 62-555.350(3), F.A.C.

Include service lines, mains, hydrants, tanks, etc.

Ledge-Plast Nooth/Year Saptemper

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DATE	PLUSPING TIME	estinated GPN		TLME	TOTAL	LOCATION OF FLOSRING POINT OR LINE BREAK
9-10	30	1,000	4"		30,000	Nydrent in Front of Ronger
9-18		14			10,000	2527 Abalanches line break
9-21		60	2"		25,000	Give break Abrey Ave.
9-22		25	3/4"		15,000	1. 200 BROSS on Albier Ave,
· · · · · · · · · · · · · · · · · · ·						
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N N	Department of Environmental Protection Ionthly Operation Report for Public Water Systems that Use Ground Water
	and for Consecutive Public Water Systems that Treat Their Water
INS	TRUCTIONS: See Page 5.
I.	GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION
	Water System Intormation 1 • System Name: Wedge Field LEXTER TREATMENT Plant PWS Identification No.: 3480149
	• System Owner Name: Utilities Tuc. of Florida Telephone No.: 407-869-1919
	Address: 200 Weathers Field AUR. City: Alromonic springs State: El Zip Code: 32714
	• System Type: 🎝 community; 🗆 non-transient non-community; 🗖 non-community; 📮 consecutive
	•No. of Service Connections at End of Reporting Month: 786 ; •Total Population Served at End of Reporting Month: 4965
	Water Treatment Plant Information • Treatment Plant / / / / / / / / / / / / / / / / / / /
	Name: Wedgetield Wafer Treatment / 627 Telephone No.: 401-368 6181
	Address: <u>20449 Min.us fuiled 57</u> City: <u>State:</u> Zip Code: <u>32833</u>
	•Permitted Maximum Day Capacity of Plant: 350,000 gpd; •Plant Category and Class per Rule 62-699.310(3), F.A.C.: <u>C-3</u>
11.	•Plant Operators: See Page 3. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF <u>Ctober 1997</u> : See Page 2.
11.	
•	SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT: See Page 4.
IV.	STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR
	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 applicable to this plant were prepared each day a certified operator staffed or visited the plant during the reporting month indicated on this report and that these records will be maintained available for review at the plant site for not less than five years:
	 records of amounts of chemicals used and chemical feed rates; process performance records for coagulation/flocculation (e.g., source water temperature, pH, turbidity, color, and alkalinity and process effluent pH and alkalinity in addition to chemical feed rates); process performance records for sedimentation (e.g., process effluent turbidity and sludge volume produced);
	 process performance records for filtration (e.g., process affluent turbidity and color, number of filters in service, filtration rates, unit filter run volumes, head losses, length of filter runs, frequency of backwash, amount of backwash water used, duration of backwash, and backwash rates);
	 process performance records for lime-soda ash softaning (e.g., source water and process effluent hardness in addition to records for coagulation/flocculation, sedimentation, and filtration);
	 process performance records for ion exchange softening (e.g., feed and bypass flows, blend rate, and selt and brine used); process performance records for reverse osmosis (e.g., feed, product, and brine flows; feed pressure, temperature, pH, conductivity, and furbidity; product pH and conductivity; and brine pH and conductivity; end
	 process performance records for electrodialysis (e.g., polarity, feed temperature and total dissolved solids, product conductivity and total dissolved solids, dilute flow rate, brine make-up, pressures, and volts/amps).
	1/2 Holach 11-7-97 Roger Halsapple 7436-C
	Signature end Date Neme and Certificate Number (please type or print)

d for (Consecuti	Report for Public Wat ve Public Water Syste	ems that Treat Th			Substitute DEP Form 62	555.910(3)
nent Pla IUMM# Type o	nt Name: ARY OF D	n Number 3480 <u>Wedgefield w</u> AILY WATER TREATME Disinfectant Maintained in D	o <u>ter Treatmen</u> INT DATA FOR THI	E MONTH/YEA	$R OF \underline{OCT_{DD}}$	er 19 d chlorine (chlorami	<u>77</u> ne);
				Residual	Disinfectant in Distribut	ion System	
Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced 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 Disinfectent Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Colliform Sampling Points (mg/L)1	Reported Emergency or Abnorme Operating Conditions
1	24	202,000	2,1	1,0			K
2	1	256,000	4,5	2,3			
3		2.87,000	5.0+	4,6			
4		281000	5.0	3.9			
5		257,000	4,8	3,6			
6		246,000	3,/	2.4			
7		232,000	1.6	0,8			
8		228,000	0.6	0.2			
9		270,000	0.8	0,2			
10		194,000	1,0	0,4			
11		216,000	0.9	0,4			
12		000,771	0,6	0,3			
13		237,000	Ö. 61	0,2			
14		234,000	0.7	0, 2.			
15		237,000	2.4	0.6			
16		242,000	1, Z	0,6			
17		197,000	<i>i</i> .7	0.3			
18	Į	224,000	0.3	0.2		l	L
19		241,000	0.3	0,3			
20	ļ.	237,000	1.9	0.8	<u> </u>		
21		265,000	1.9	0,8			
22		239,000	2,0	0,8			·
23		393,000	2.1	0.8		7	tsee_
24		241,000	3.2	13			ATtached
25		269,000	2,3	11			
26		194,000	2,0	1,0			
27		219,000	0,6	0,4			L
28	$\downarrow \downarrow$	228,000	O, E.	0.2			ļ
29	↓	243,000	<u> </u>	0, 2	<u> </u>	Į	
30		194,000	1.1	0,7			
31	14	186.000	1.0	0,3	# 3 DIST. 2 RALU		

S

000

1000

XXXXXX

XXXXXX

Total

Avg.

XXXXXXXXXXXX XXXXXXX

XXXXXXXX

If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, Immediately Increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

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Include service lines, mains, hydrants, tanks, etc.

Plant WEDGEFIEID WITP Month/Year OcTober 1997

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X

		ESTIMATED		TOTAL	LOCATION OF FLOSRING POINT OR LINE BREAK
DATE	(MÌN)		FLUSARD	.	20117 MAJESTIC
10-4-97	15min	220	and the second	1750	
10-4-51	15min_	250		1750	20519 MAJESTIC
10-4-87	15mln	928		1750	20657 MAILARD
10-6-81	15 MIN	850	سعمت فعم	1250	20745 MAILARD
	ISMIJ	250		1750	2329 Albeone
	15 min	250		1750	Corner MANIUM + AMBORIN
10-6-97		250	`	1750	Youver Ascot + Mardi Caras
10-6-97	15min	250		1750	Ronger DRAINAGE
10-13-87	15 min	250		1750	20117 Majesti c
16-13-87	15 min	250		1750	20515 majorti L
10-13-87	ISMIN	850		1250	20652 mollorp
10-13-97	ISMIN	250		1750	20745 MOLLARD
10-14-87	15 Min	250		1750	20117 MAICHIC
	15 min	850		1750	20519 MALESTIC
10-14-97		250		1750	20657 MAILARD
10-14-87		250		1750	20745 MAIIBRO
10-15-91	15 min	250		1750	20117 MAJOSTIC
10-15-87	15ml J	250		1750	20519 MAJOSTIC
10-15-97	Ismin	250	[1750	20657 MALIARD -
10-15-97	15min	250		1750	20745 MAILARD
10-16-57	15 min	250		1750	26117 MIDJestic
10-16-91	ISAIN	250		1750	20519 Mejertic
10-16-57	15min	250	Į	1750	20657 MOHARN
10-16-57	15min	250		1250	20445 MOLLARD
			1		

Include service lines, mains, hydrants, tanks, etc.

			Neet L/Year	October 1997
DATE	FLIGEING TING (WIN)		2114 TOTAL	LOCATION OF FLOERING POINT OR LINE DREAK
10-20-87	15 min	250	1750	20117 MAJESTIC
10-20-97	15 MIN	250	1750	20519 MAJESTIC
10-20-97	15 min	250	1750	20657 MALLACD
10-20-97	15 Min	250	1750	20745 MAILARD
10-20-97	IX.MON	250	1750	2329 Albeone
10-20-97	15 Min	250	1750	Corner MANINO + AMBURIN
10-20-97	15 MIN	250	1750	Conver Assot + Mardi Cares
10-20-97	15min	250	1750	Roma DRAINESE
10-21-97	15min	200	17.50	20117 MAYESHIC
10-21-82	15min	230	1250	20515 malectic
10-21-97	15 min	250	1750	20657 mollorp
10-21-97	15-10	250	./7.50	20745 MallARD
10-22-17	15 MIN	250	/750	26117 MALCHIE
10-22-87	15min	350	1750	20519 MALESTIC
10-22-87	15 MIN	250	1750	20657 MALLARD
10-22-97	15min	250		20745 MAIIBRO
10-23-57	15 MIN	250	1750	20117 majestic
10-23-47	15min	250	1756	20,519 MAJOSTIC
16-03-51	15min	250	1756	20657 MAILARD -
10-23-97	1.Sala	250	/75-0	20745 MAILARD
10			1046	
10-24-97	15 MIN	220	/250	20117 MAICSFIL 20519 MAICSFIL
10-14-97	IS MIN	250	1250	20651 MAINED
10-24-97	15 min	250	1750	20245 MAIIDED
	t		····	1

Plant WEDGEFIEID WTP

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	Department of	Anornalo/Sublitute DEP Form \$2 \$55 \$10(3)
[~	Environmental Protection	FILE
	onthly Operation Report for Public Water S and for Consecutive Public Water System	
INS	STRUCTIONS: Smi Page 5.	
١.	GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORM	ATION
_	Water System Information • System Name: Wedge Field unter Trestypeut Pi • System Durge	
	Normer UTILITHES LNG. OF Florida	Telephone Na: 307 369 1919
-	Address: 200 Weathurstieled AUR_ City: Altramoute springs	Statu: <u>F1</u> Zup Code: <u>32719</u>
	 System Type: Community; D non-translant non-community; D non-community; C No. of Service Connections at End of Reporting Month; 787; Total Popula 	tion served at End of Reporting Month: 1967, 5
_	Water Instimum Plant Information • Instimum Plant Name: Weadge Field water Treatment Plant	
	Address: 20447 Man, field ST City: Drlande	
	Permitted Maximum Day Capacity of Plant: 350,000 gpd; Plant Catage Plant Sparators: See Page 3.	State: $E/$ Zp Code: 32833 wy and Class per Rule 52-699.310(3), F.A.C.: C.3
H	SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTHLY	EAR OF November 97: Son Page 2.
ut.	SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER C EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT:	ONTAINING ACRYLAMIDE, POLYMER CONTAINING See Page 4.
i¥.	STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR	
	I, the undersigned lead/chief operator of the water treatment plant listed in Part 1 belief, the information provided in this report is true and accurate.	of this form, certify that, to the best of my knowledge and
	Also, I cartify that the following additional operations records applicable to this pl visited the plant during the reporting month indicated on this report and that these n site for not less than five years:	ant wore prepared each day a cartified operator staffed or accords will be maintained available for review at the plant
	 records of amounts of chamicals used and chemical feed rates; process performance records for coegulation/flocculation (e.g., source water to effluent pH and alkalinity in addition to chemical feed rates); process performance records for sedimentation (e.g., process effluent turbidity process performance records for filtration (e.g., process effluent turbidity and 	and studge volume produced):
	run volumes, head losses, length of filter runs, frequency of backwash, amou backwash ratest;	it of backwash water used, duration of backwash, and
	 process performance records for time-soda asti softening (e.g., source water a congulation/flocculation, sadimentation, and filtration); 	
	 process performance records for ion exchange softening (e.g., feed and bypes process performance records for reverse exclosis (e.g., feed, product, and brie furbidity; product pH and conductivity; and brine pH and conductivity; and 	s flows, bland rate, and selt and brine used); a flows; feed pressure, temperature, pH, conductivity, and
	 process performance records for electrodialysis (e.g., polarity, feed temperatur dissolved solids, dilute flow rate, brine meke-up, pressures, and volts/amps). 	and total dissolved solids, product conductivity and total
	1/ 1/ P	
	Signature and Date. Marte	and Cartificate Number (please type or print)

V

Monthly Operation Report for	r Public Water Systems that Use Ground Water
and for Consecutive Public	Water Systems that Treat Their Water
System PWS Identification Numbery	3430149

Treatment Plant Name: 11.6.198 Fister water Treatment pilant

. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF November 1997

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: A free chlorine;
chlorine dioxide

		Lowest Residual		Residuel C	ion System	Reported	
Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfactant Concentration at Entry to Distribution System (mg/L)*	Lowest Residual Disinfectant Concentration et Remote Point (mg/L)*	Number of Instances Where Residual Disinfectent Measurements Taken at Total Coliform Sampling Points	Lowest Realdual Disinfactant Concentration at Total Colliform Sampling Points (mg/L) ¹	neportad Emergency or Abnormal Operating Conditions
1	14	186,000	1.1	0.3			
2	1	247,000	0,9	0.3			
3		297,000	2, /	0,8			
4		324,000	2,5	1,0			
5		217,000	2.6	1,2			
6		316,000	2.0	1.0			
7		232,000	1.7	1.0			
6		2.18'000	Ĺ7	1,0			
9		225 000	1.9	1. 7.			
10		298,000	4.9	2.,5			
11		2.52,000	3.7	1.4			
12		263,000	1, 2	0.7			
13		165,000	13	0.7			
14		175.000	13	(0, 3)			
15		[177,000]	1,3	0,6		[
16		236 000	1.3	0,6			
17		202.000	1.5	0.3	3DUST. 2RAW		
18		199,000	1.9	0,7			
19		22/ 000	4.5	0.7			
20		238,000	1,3	0.6			
21		227,000	7,7	0.8			
22		200,000	1,6	0.8			
23		196,000	1.5	0.7			
24		2/3,000	1. 25	0,7			
25		156,000	1.7	0.3			
26		163000	1.1	0,8			
27		263,000	1,5	0.7			
28		291,000	15	0.8			
29		184,000	1,7	0,5			
	2.4	245,000	1.3	0.6			
31	L	<u> </u>]		
Total	XXXXXX		XXXXXXXXXXXXXXX	And the second sec		XXXXXXXXXXX	
Avg.	XXXXXX				XXXXXXXXXXXXXXX		
Max.	XXXXXX	329,000	XXXXXXXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXX	XXXXXXXXXXX	******

* If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free evailable chlorine, immediately increase the chlorine dose unsil the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free evailable chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine data and/or fluth appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuent to flute 62-555.350(3), F.A.C.

Include service lines, mains, hydrants, tanks, etc.

Plant WEDGEFIEID UNIT 3 Martarian Norimber, 1997

DATE	71,000,130 7136 (0136)		BELL	22108- 91.5284340	-	LOCATION OF LOCATION OF
11-3-17	JAIN	390	R"	15:00	1950	
11/3/97	10min	390	8"	15:00	3800	
11-3-97	Smin	390	8"	15100	1950	
11-3-57	SAIN	390	811	15:00	1950	
11-3-97	15 MIN	390	8"	15:00	30.50	Lat 9 MALLARD West Audrast
11-3-97	Smin	380	8"	15:00	1950	Lat 9 MAURED Post Sudrant
11-3-97	5min	390	8"	15:00	1950_	TRACT C MARNI Gras EAST. Hydraw
11-3-97	5min	390	811	15:30	1950	TRACT C MAROL GOAS What Hydra
11-3-97	10 min	390	8"	15:30	3900	2329 ABALONE North Hudson
11-3-97	SPIN	390	811	15:30	1950	232 2 ABAIONE SOUTH, Hydraw
11-4-17	SMIN	390	8"	09:00	1950	ALABASTER + ADNey North Hudron
11-4.97	SAVA	390	811	09:00	1950	10+9 MAILARD West Hydraut
11-4-92	Sold	390	ş11	09:00	1850	1at 9 MALIARD EAST, ANArowt
11-4-87						
11-4-97	SAIN	390	8	01:50	1950	TRACT C MARDI GLAS EAST, Hydraw
11-4-91	Sald	390	8	09:30	1950	TRACT C MARDS Gras West, Hydraw
11-5-97	5 Min	390	8	01:00	1850	Lat 9 MALLARD What Hudrawt
11-5-87	IMIN	390	8	08:00	390	Lot 9 MALIARD FALL, HURRANT
11-5-87	ImIN.	370	8	09:30	390	TRACT (MARAI GRAS EDST HUDY
11-5-57	Imin	390	8	08:30	390	TRALT C. MARA; GRAS, Weit, Hydri
11-14-97	Smin	350	8	13:30	1950	
ILN-FT	SAIN	350	8	13:40	1950	2446 ABRIONE HIdrant
11-14-97	3min	390	8	13:45	1170	2412, ABALONE, Hydrant 2108, ABAIONE, Ardrant
11-17-97	2 min	390	R	10:00	780	2446 ABAIONE, Audrowt
11-17-87	2 Min	390	8	10:00	780	2617 ABRIANC, Hydrawt
11-12-97	amin	390	8	10:00	780	2FAT ABRIANC. HUDRONT

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Department of Environmental Protection

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

INSTRUCTIONS: San Page 5.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION

Syna have We refuiled unter Treatment	- Mart 1985 Identification No.: 3480149
· Entry Utilities Sinc. of Florida	Totashara Ma: 407 368 1919
The Altomate spings	Same El_ 2a Cade: 32714
City: <u>All Pompore</u> springs • System Type: If consumity: D non-traditions non-consumity: D non-consumity: • No. of Service Connections at End of Reporting Month: <u>789</u> ; • Tatal Paper	derives Served at End of Reporting Months 1972, 5

Your Lindon Con Information

Wedge Riefel upter Thest next Plant	Identione No.: 407 568 6787
Marsteld St	
City. Orlande	Sum: 1/ Top Code: 3283-3

oParticul Maximum Day Capacity of Plant 350,000 gpt; OPlant Cumpery and Class per Rule 52-508.318(3), FAC: <u>C-3</u> OPlant Operators: San Page 3.

- H. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF ______ : Sou Page 2.
- IE. SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR INDI AND MANGANESE SEQUESTRANT: don Page 4.

N. STATEMENT BY LEADICHNEF WATER TREATMENT PLANT OPERATOR

L the undersigned booldchief operator of the wear provinces plant listed in Part 1 of this form, cartify that, to the best of my investedge and balled, the intermedian provided in this report is true and accurate.

Nos, I cartify that the following additional operations records applicable to this plant wave propered such day a cartified operator staffed or visions the plant during the reporting stands indicated on this report and that these records will be maintained available for review at the plant site for not less that five years:

- · seconds of amounts of chamicals until and chamical feed volve;
- pressue perturmance recercle for computation/flocculation (e.g., source water temperature, pH, turbidity, culor, and alkalinity and process affluent pH and alkalinity in solution to chamical flood, color;
- · precises performance receives for addimension (e.g., process officiant herbidity and shalps volume produced);
- process participance vectors for Westion (e.g., process offloant, cohidity and color, number of Mars in parvice, Heration rates, unit filter run volumes, hand becaus, length of Mayr rates, Sequency of backwesh, amount of backwesh water used, deration of backwesh, and backwesh values.
- process performance reports for hom-such ant software (e.g., source water and presses officent handsace in addition to records for computation/locatedation, and Masteria;
- · process performance reserts for ian archenge softening ing., feed and byposs from, bland rate, and east and brine work:
- process performance reserve for sporce consols (e.g., fiel, product, and brine flows; feel process, unspectare, pfl, conductivity, and tarbidity; product ph and conductivity; and folios ph and conductivity; and
- precess performance reserve for destandinguis (e.g., polarity, feed samparature and total desaived optick, product conductivity and total desaived solids, diver form rate, lyino make-op, pressures, and validampel.

in and Date /

noer Hokande 7436-C

ann and Cartilizata Mandas igteour type or print)

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

3480149 System PWS Identification Number: Treatment Plant Water Trestment Plant Name: 11/2dae FIL

IL SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF December

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: free chloring: O combined chlorine (chlorastine); C chierine diaxide

				itesiduel C	Bassard		
Dey of the Mansh	Hours Plant in Operation	Quantity of Finished Water Produced by Plans (gallons)	Lewest Residual Disinfectant Concentration at Enery to Distribution System (mp/L)*	Lowert Residuel Disinfectant Concentration et Remote Point imp/L1*	Number of Instances Where Residual Disinfectant Measurements Taken at Tatel Caliform Sampling Points	Lowest Restduel Disinfectant Concentration at Total Collform Sampling Points (mg/L)'	Reported Emergency or Abnormal Operating Conditions
1	24	210,000	1.4	0,8			
2		200,000	1.5	0.8			
3		198,000	1.4	0.6			
4		194,000	1.6	0,7			
5		181,000	1.4	0.7			
6		200,000	1.5	0.7			
7		176000	1.9	0,8			
8	l	197,000	1,7	0,8			
9	ļ	188,000	1.6	0.9			
10	Ļ	2/3,000	14	0,8		<u>.</u>	
11	ļ	177,000	1.5	0,8		L	
12	<u> </u>	200,000	1,6	P.B			
13	ļ	170,000	1.6	Q. B			
14	ļ	154,000	1.5	6.6			
15	 	167,000	1.6	0.7		L	
18	Ļ	19,000	4.6	0.9			
17	 	211,000	46	.0.6	5		
18	ļ	184,000	47	0.6			
19	 	185,000	47	0.6			
20		192,000	1.1	0.7			
21	h	2/3/200	2.7	0.8			
22	<u> </u>	3/3,000	<u></u>	0.1		 	
23	Į	200,000	1.7	<u>-0.7</u>		<u> </u>	
24	<u> </u>	263,000	2.0	0,8	<u> </u>	F	
26	{	161,000		D.9	<u> </u>		
27	_	189.000	2.0	D.4 D.8	<u> </u>	f	
28	╂────	the second s	11		·····	∱	
29	+	170,000	1.5	0.9	+	<u> </u>	
30	+	187,000	1.8	0.9	<u> </u>	<u> </u>	
31	24	186,000	4./	7.3	<u> </u>		
Total			XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				XXXXXXXX
Avg.	XXXXXX	194,000			XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		XXXXXXXX
Max.	XXXXXX		XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXX

If at any sine the realist of interant canceners on at the energies die destriction system drope balow the equivalent of 0.2 mp/ of free evaluable chiorine, immediately increase the chiorine deep until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free evaluate chlorine and notity the Department or the appropriate ACMUD by wire or telephone within 24 hours pursuant to Auto 62-866.380(3), F.A.C.

If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free evaluable chloring, immediately increase the chloring dure and/or flath applications particles of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of tree evaluable chlorine and nosity the Department or the appropriate ACPHU by wire or relighone within 24 hours pursuant to Rule \$2-555.350(3), F.A.C.

	Department of Environmental Prote	ſ	FILE
Monthly and	Operation Report for Public W for Consecutive Public Water	ater Systems Systems that	that Use Ground Water Treat Their Water
NISTRUCTIONS I. GENERAL 1	5: 5m Pap 5. WATER SYSTEM AND WATER TREATMENT PLAI	IT WEORMATION	
Enter, Jenter • Section Ma	Wedsefield Water Tre	etment Plant	115 Identification No.: 34 80/49
+ <u>Brains</u> Ri Norm:	THilities Inc. of Florid	٢٢	stephene Na: 407-869-1918
Adirust: Eny:	200 Weathersfield Ave. Altamonte Springs		tate F1 20 Colle: 32714
• System Ty • No. of Se	voice Connections at End of Reporting Month: 789	•Tetal Population Served	at End of Reporting Manths 1973
•] mitanti Kata	Wedgefield Water treatment 20449 Mansfield Street	Plant_	idaphane Na: <u>407-568-6787</u>
C	Original O Maximum Day Capacity of Plant 350000 pt	A Part Catagory and Cla	2011 F1 Ep Coder. 32833
•Plant Spa	KONCE So FOR 3. TY OF DAILY WATER TREATMENT DATA FOR TH		-
EPICHLOI N. STATEME	IY OF USE, AT WATER TREATMENT PLANT, OF ROHYDRIN, AND/OR IRON AND MANGANESE SEO ENT BY LEAD/CHIEF WATER TREATMENT PLANT Identified familicities operates of the water transmiss plant	DESTRANT: See Page OPERATOR	; 4 .
halist, the Also, I c variate the	information provided in this report is one and accurate. mathy that the following additional operations records appli- plant during the reporting much indicated on this report of a loss, than five years:	able to the plant wave p	repared such day a cartified operator statled a
ere •	ands of annumes of chamicals used and characted fand roter scale performance recercle for computation/focculation (e.g., leave plit and alkalisity in publicion to chamical fault rotests iccus performance recercle for antiferentiation (e.g., process o	source svelor temperature	
• prt ne	neses performance recercle for Meration (s.g., process office a volument, band lacous, longth of Near rank, broquency of b civench calant	n britility and calor, and	der ef More in service, fibration cates, unit fill
4 pro	cons performance recurds for ann-code only entraning in.g. ngulation/flocculation, satismention, and fitzation(; ncnex performance recurds for tex perchange performing (s.g.		
i vi pot	econe performance recercle for the presence performing pro- conse performance recercle for reverse persons (e.g., food, y rbidley; product pf: and conductivity; and bring pfi and condu- action performance recencle for alustradialysis (e.g., polarity;	puber, and bring flours: I activity's and	iesd pressure, temperature, pH, conductively, and
4 1	illiam C. Joulian 2-6-98	ni veikaiseesi.	
Lensia	we and Deve	tions and Cart	dicete Mander (please type or print)

Meathly	Operation Re	pert for	Public	Water	System	ts that	L Usia I	Ground	Water
and fo	Consecutive	Public	Water #	System	s that '	Trest	The ir '	Watar	

ystem PWS Identificati	on Numbe r: _	<u></u>
restment Plant Marine:	Wed	sefield

IL SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF JANUARY 1998

Type of Residual Disinfactant Maintained in Distribution System Served by Plant: & free chlorine; C combined chlorenine); C chierine dioxide

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		Lowest Resident		Residuel O	ion System	Reported	
Dey of the Manth	Hours Flank in Operation	Quantity of Finished Water Produced by Plant (gallons)	Disinfectant Concentration at Entry to Distribution System (mg/L)*	Lowest Recidual Disinfectant Concentration et Remote Point img/Lif	Number of Instances Where Residual Disinfectors Measurements Taken et Tatel Californ Sempling Points	Lowest Residual Disinfactant Concentration at Total Collion Sampling Points (mgAJ)	or Alinorana Operating Conditions
1	24	228,000	5.0	3,1			
2	24	231,000	2.7	1,3			
3	24	199,000	2.0	0,9			
4	24	153,000	1.9	Ort			
5	24	194,000	3.3	1.8			
8	24	188,000	114	0.8			
7	24	200,000	0,9	0,3			
8	24	169.000	0.6	0,3			
9	24	215,000	0,6	0,2			
10	24	180,000	41	0.4			
11	24	173,000	1.7	0.8			
12	24	211,000	2.9	1.7			
13	24	315,000	3,5	2.5			
14	24	198,000	1.4	1.0			
15	24	161,000	1.0	0.6			
10	24	233,000	1.0	0,4			
17	24	2/1,000	1.1	6.6			
18	24	168,000	1.2	0.6			
19	24_	201,000	1.7	0.9			
2 0	24	208,000	1.6	0.8			
21	24	175,000	0,9	0.4			
22	24	208,000	1.4	0.7	3	0,7	
23	24	184,000	0.9	0.4			
24	24	215,000	0.8	0.4		~ .	
26	24	169,000	0.7	013			
50	24	179,000	0.9	0.5			
27	24	203,000	0.9	0.4			
28	24	159,000	1.1	0.4			
28	24	173,000	43	0.8			
30	24	214,000	1.1	0,6			
31	24	209,000		0.5			
Tetal	XXXXXX		XXXXXXXXXXXXXX			XXXXXXXXXXX	the second s
Ave.	XXXXXXX	the second stand and the second stand and the second stand and the second stand sta			XXXXXXXXXXXXXXXX		
Max	XXXXXX	315,000	XXXXXXXXXXXXXXX	XXXXXXXXXXX	KXXXXXXXXXXXXXXXXX	XXXXXXXXXXX	XXXXXXXX

If at any time the residuel desinfectant conceneration at the every to the detribution system drops below the equivalent of 0.2 mp/L of free evailable chlorine, immediately increase the chlorine does unjil the realitud disinfectent concentration is at least equivalent to 0.2 mp/L of free evallable chiome and notify the Department or the appropriate ACMYU by wire or telephone within 24 hours pursuant to Rule 62-556.350(31, F.A.C.

It as any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free evaluable chlarine, immediately storeses the chlorine dose and/or fush appropriate portions of the distribution system until the residual disinfectant concension is at least equivalent to 0.2 mp/L of free available pricine and notify the Department or the appropriate ACPERU by wire or whether within 24 hours pursuent to fulle \$2-665.350(3), F.A.C.

PLUSHING & MALON Include service lines, mains, hydrants, tasks, etc. Plast <u>Ukolge field</u> Jow <u>78</u>

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20	30	50		1500	Mainsfield + Albian
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21	30	50		1500	Mainsfield + Albion
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T	Department of Environmental Protection	FILE				
Monthly Operation Report for Public Water Systems that Use Ground Wate and for Consecutive Public Water Systems that Treat Their Water						
	: See Page 5. CUP # 2-095-0278 UM					
GENERAL 1	NATER SYSTEM AND WATER TREATMENT PLANT INFORMATI	ion L				
Ween Anton • System He • System He • System He Hover Address	200 (Degither Fleta 19/0	Mon Mastification No.: 3480149 Totophone No.: 407-869-1919 State: F1 20 Code: 32714				
City: • Sycam Ty	A FAMOA te Springs	mentytive				
	vice Connections at End of Reporting Month: 77; •Tatal Population					
• Instant	Wedge field Wates Indetment	Plont the 407-568-673				
City: •Faceitad	Octando Nationa Day Capacity of Plant 350,000 pot Plant Congery	States per finite \$2586,31837, FAC: (-3				
wrann opn						
n. Summar	Y OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAD	R OF 1-ebruary 1993: Son Page 2				
	OF USE, AT WATER TREATMENT PLANT, OF POLYMER CON					
	OHYDRIN, AND/OR IRON AND MANBAMESE SEQUESTRANT: 1 NT BY LEADICHIEF WATER TREATMENT PLANT OPERATOR					
	herighed hadiched sparster of the under twomant plant listed in Port 1 of	this face sprife that so the best of our beautures and				
	alonged and the spectra of the second scores.	and reach record that is no suct to and thereaded but				
	rtily that the following additional operations records applicable to this plant dust during the reporting spanch indicated on this report and that these reco					
	nung annang ang supersing separat angkanggi an yan supert ang sinat panan anga	net and the menument president for review at the bard				
• •	rds of anumits of chamicals used and chamical fuel types;					
	non parlamance recercle for computationflocculation (e.g., every) water tem non phi and alkalishing in addition to chamical food rotack	•				
	cas performance records for sollingatation (s.g., precias officiant tarbidity a case performance reports for Microlica (s.g., process officiant tarbidity and co					
-	volumes, head lanue, length of filter uses, trapposery of buckmash, amount length related					
• •	ness performance recurds for ball-sade ant softening \$1.5. stores water and	l process officient bardness in addition to records for				
• •	pdetiantflocculation, softwarterfore, and Microiant; 2005 performance recurde for iun auchange pationing (n.g., food and bypane (
	case performance vocurds for operas connects tag, fiel, predect, and brine idity; predict pit and conductivity; and brine pit and conductivityi: and	-				
turi • pro	cans partermance meanin for elemendicity is (e.g., polarity, food semperature selved solids, divise flow rate, bries make-up, prevenue, and voltainmed.	and total disadved eachs, product conductivity and total				

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: 3480149 Treatment Plant Name: Westerflete Water Plant Atternete/Substitute DEP Form 42 555 910(3)

.I. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF

reb

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

				Residuel C	B		
Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Lowest Residual Disinfectant Concentration et Remote Point (mg/L)*	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfactant Concentration at Total Collform Sampting Points (mg/L) ¹	Reported Emergency or Abnorma Operating Conditions
1	24	150.000	1,0	0,5			
2	24	180 000	1.4	0,9			
3	24	189,000	1:4	0,8			
4	.24	182,000	1.2	. 0,7	·		
5	24	158,000	1.8	0.8			
6	24	238,000	1.6	0,8			
7	24	209,000	1.8	Q.5			
8	24	140,000	1.7	0.6			
9	<u> 24 –</u>	132,000	2,0	Q19			
10	24	185,000	48	0.7			
11	24	175,000	1.9	Di 8			
12	24	235,000	1.8	1217			
13	24,	192,000	2.0	10			
14	.24	-214,000	212	1.0			
15	24	153,000	1.9	0.9			
16	24	191,000	213	0.9			·
17	.24	200,000	1.8	O,P			
	24	200,000	210	0,9			
19	24	193,000	47	0.9	3	0.9	
20	.24	224,000	7.7	0.8	}		
22	24	188,000		1.0	 		
23	24	166,000	2.2	1.0	 	<u> </u>	
24	<u>24</u> 24	199,000	2,1	0,9	{ <u> </u>		<u> </u>
25	24-		211	1.0	<u> </u>		<u> </u>
26	24	183,000	211	1.4	<u></u>		
27	24	233,000	20	1/2	<u> </u>	}	ļ
28	24	306,000	2,3	1.6	<u></u>		
29							
30			1	1	1	1	
31	1	1		l	1	1	
Total	XXXXXX	5,436,000	****	****	3	*****	XXXXXXX
Avg.	XXXXXX		XXXXXXXXXXXXX	XXXXXXXXXX	*****	*****	XXXXXXX
Мах.	XXXXXX	306,000	XXXXXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXX	XXXXXXXXXXX	XXXXXXXX

If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free evailable chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuent to flule 62-555.350(3), F.A.C.

Include service lines, mains, hydrants, tanks, etc.

Plan Wodgefield Math/Tons Feb. 1998

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						Florido Underslound Lof#24 NAtchez St
						Lof#24 NAtchez St
2-20-93	60	125	2"FH		7500	MARIN+ BALLArd
0 1242	713	125	211FH		37.500	Marling BAllard
2-28-92	300	123	<u>~~~</u>		57,500	MAY TINY PATIATO
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Monthly 0	Environme	ntal Protection ntal Protection for Public Water while Water System	Systems that	FILE Use Ground Water It Their Water
	C10 #	2-095-0278	um	
	See Pape 5			
				fication No.: 348-80145
•System North •System Date	Utilities Inc	of Florida	Tologham R	k: <u>407-867-1918</u>
Minu: _				<u>/ 20 Code: 327/9</u> Denotion Manufor 1973
O System Type	fil community, D am-transfers on Connections at End of Reported	The community: C and community	ity; CI consecutive reputation Served at End of	Reporting Months
Wester Treatility	et Plant Information			
• <u>Instant</u>	Wedgefield Wi	ter Treatment	Plant Idates	407-568-678
A				
+Parmitted M	animum Day Capacity of Plant:	350,000 ppt. •Punt	Company and Close per Refe	RESELUTION FAC: C-3
	NETE SAS PAUL 3. DE DAILY WATER TREATM			rch 1998 : See Page 2.
				LAMIDE, POLYMER CONTAINING
	HYDRIEL AND/OR IRON AND			
N. STATEMER	T BY LEAD/CHIEF WATER T	TREATMENT PLANT OPEN	LTOR	
	raigned lastificial sportstar of the		Part I of this form, continy	that, is the last of my investeige and
	unnotes provided in this report is			a
				ch day a cartified aparater statled as involved and available for review at the plant.
	na that five years:			
-	is of sources, of character wood a as partermence recercle for canad		retor temperature, pH, Netla	dry, color, and situative and process
office	na phi and alkalinity in addition to	chamical tand rates		
	us partennesses recents for authors as partennesses recents for Microi			productor; ars in garvice, filtration catus, unit filter
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• prece	er parlemance recents for time-as		neter and process officient (hardware in addition to encorde for
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e prece		n antenis fe.g., ford. spreduct, a	ent brine Nours; fund press	re, sumpressive, pll, conductivity, and
 Fract 	at performance suppris for choses	ulicitate te.e. paterity, best tem	pareture and total designed	f which, predict conductivity and tetal
	ived selicit, disto; flow rate, prine			~ . /
lin	Man P. Jouha	10 4-2.98	Williamo	Forehand C582
Equipa	ent Pr-		have and Cartilizate Not	dage igdenaam type as print)

mustiniy Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water System PWS Identification Number 3480149 Treatment Plant Name Wedge Fir Icl Water Tree theat Plant

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF MArch 1997

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

Residual Disinfectant in Distribution System Lowest Residual Reported Day of Hours Quantity of Finished Water Disinfectant. Number of Instances. Lowest Residual Lowest Residual Emergency or the Plant in Produced by Plant. Concentration at Where Residual Disinfectant Abnormal Disinfectant Month (gallons) Operation Entry to Distribution Disinfectant Concentration at Operating. Concentration at Measurements Taken System (mg/L) Total Coliform Conditions Remote Point at Total Coliform Sampling Points (mg/L) Sampling Points (mg/L) 24 1 06.000 211 1,0 24 2 89.000 2,4 10 3 24 239,000 2,3 1.1 20,000 4 24 2.2 iO5 24 214 157,000 12 24 199 6 <u>99 000</u> 218,000 d. 1.4 7 Z4 2.6 18 23 8 74 2.7 79.000 24 2.9 9 192,000 1,2. 10 24 246,000 2.9 1.4 11 157,000 37 ΖÝ 1.6 12 ZŸ 24%,000 2,3 0,8 ZŸ 2.5 13 183,000 13 14 2<u>4</u> 2.4 225,000 1.0 15 24 192,00 0 2.0 1.0 213,000 16 24 3 2 l0,8 2 3 245,000 17 Z.4 2.0 0.3 143,000 18 24 3.0 1.0 2.4 19 2:0 2.8 20 24 79,000 9 0.8 17 3,000 9 21 24 のバ 22 zЧ 200,000 Q.8 /+ 198,000 ZΫ 2.7 23 1,2 245 000 24 zΥ 2.5 1. Z 25 24 234,000 214 1.0 230,000 24 2.5 26 1,3 24 27 201,000 2.3 1.0 267.000 28 ZY 214 1.7 245,000 29 24 2 6 <u>1,3</u> 24 30 223,000 2,4 1. 2. 31 1, 24 245,000 3 1.0 Totat 6406,000 Avg 206,000 Max 262,000

Include service lines, mains, bydrants, tasks, etc.

Medsefield MArch 1998

DATE			Velk			LICATION OF FLAMAING POINT OR LINE BANAR
3 5/98	150	50	21/2 FH		7500	Bancroft+Nusent
16197	60	125	22FH		7500	MAILINTBAGBAD
3/11/98		920	2-12.FH		1000	Pine GlenCourt
3 11 198		950	2VEFH		1000	Resence OAKLANE
111/197	-7	920	242 FH	<u></u>	1000	Recency OAKLARE
111/58		950	ZZEFH		1000	RecentyOAK Lane.
11198	1	750	22FH		1000	GlenElm WAY
3/13/48	60	125	2×2 FH		7500	MAILINY Rasdad
121/198	60	125	24 FA		7500	MAY lin + Bagdad
29/198	60	125	22FA		7500	MArlin + Basdad
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Department of **Environmental Protection**

FILE

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 WA	TER TREATMENT	PLANT INFORMATI	ON FOR THE MONTH/YEAR OF
APRIL 1998			
Water System Information •System Name: INedge Field M	lities water tre	stment Plant	PWS Identification No. 3480/49
• <u>System Owner</u> Name: <u>UTILITIES LNC. of</u> Address: <u>200 Weathersfield Au</u>	Florida		Telephone No.: 407 869 1919
City: Algamoute Springs			State: F/ Zip Code: 327/4
City: <u>Altomovity</u> Springs •System Type: a community; b non-trans •No. of Service Connections at End of Mo	ient non-community; onth: <u>794</u>	; □ non-community; t Total Population	
Water Treatment Plant Information • <u>Treatment Plant</u> Name: <u>Westophic A Utilities</u> Address: 20/49 Mausfield ST	WATErTrestmo	NT Phot_	•
City: Orlando			State: F/ Zip Code: 32833
•Permitted Maximum Day Capacity of Pla			
Plant Category and Class per Rule 62-6	99.310(4), F.A.C :	3-C	
rad/Chief Plant Operator:	<u></u>		
Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
Roger HolsApple	7436	C	
•Other Certified Plant Operators (attach a	additional sheets if ne	ecessary):	
Name	Certificate Number	Class (a. B. C, or D)	Day(s)/Shift(s) Worked
Charlie Forchaud	5828	C	

TATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF APRIL 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.

5-2-98 Signature and Date

Reger Holsapple 7436 - C ame 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 0149 Usilita マンヌ

System PWS Identification Number: _ Treatment Plant Name Wedge Fuld

WAKER TREATMENT PONT

SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTHIYEAR OF 1992 APRIL

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

•Summary of Daily Water Treatment Data for Month:

				Residual			
the Plant in	Hour s Plant in Operation	Quantity of Finished Water Produced 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 Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency of Abnormal Operating Conditions
1	24	206,000	20	0.9			
2	24	220.000	2.2	13			1
3	24	239.000	2.1	1,0			
4	24	235,000	2,4	1,4			
5	24	224,000	2,3	1,3			
6	24	228,000	2.7	1.7-			
7	24	250,000	2,6	1,2			·
8	24	230,000	2.3	1.0			<u> </u>
9	24	250,000	2.4	1.1	+		
10	24	273,000	2.3	1.1			1
11	24	300,000	2,6	11.4	↓		
12	24	270,000	2.7	1,6			<u>├</u>
13	24	291,000	26	123	2	1.0	<u> </u>
14	24	319,000	2.6	1.2	<u> </u>		<u> </u>
15	24	323,000	2.7	1.3	1		<u>+</u>
16	24	280,000	2.6	1.3			
17	24	361.000	2.5	1.1	<u> </u>		
18	24	332,000	2.4	1.1	<u> </u>	<u> </u>	
19	24	299,000	2,3	1.0	<u> </u>	}	- <u> </u>
20	24	249,000	2.15	1.0		1	
21	24	315.000	3.4	1,8	<u>↓</u> .		
22	7.4	265.000	3.5	1.9			+
23	Z4	300,000	3,4	1.5			1
24	24	335 000	3,2	1.5	1		
_25	24	376,000	3.0	1.5	•		
26	24	382,000	2.9	113		1	1
27	24	343,000	3,1	1,2-			
28	24	343,000	3.0	1,3			
29	2.7	284,000	3.2	1,5			
30	24	236,000	7,2	1.2			
31	<u> </u>	18,563,000		1			
Total	<i>\\\\\</i>	18,228,0001	<u> </u>	X///////	3	XIIIII	X <u>[[]</u> [
Avg.	<i>\</i>	288,400	<i>V////////////////////////////////////</i>	<u>X///////</u>	<u> XIIIIIII</u>	<u>X////////////////////////////////////</u>	NIII
Max.	<u>V////</u>	382,000	<u> X////////////////////////////////////</u>	XIIITT	X/////////	X///////	X[[[]

Include porvice lines, mains, bydrants. tasks, etc. Plant Wedge Full meth/Imp April 98

V

DATE	PLOOR LINE.		STRUC	Time .		LICATION OF FLOWLING POINT OR LIVE WRANK
4/	20 Min	150		1120	3,000	
5	20 Min	150		1500	3000	Ronge Dipinage
//	20 Min	150		1000	4500	Range Drawhal
12	20 Min	150		1030	2900	2022 Marlin ST
18	30 Min	150		1100	4500	20322 Marlin ST
22	20 MIN	10		1300	200	20722 Marlia ST
26	30 MÍN	150		1200	4500	20232 Marlin ST
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Department of Environmental Protection

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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 WA	TER TREATMENT	PLANT INFORMATI	ON FOR THE MONTH/YEAR OF
Water System Information •System Name: Wodge Field U •System Owner Name: UTILITIES INC., of	bter Treatment	+ Phit	PWS Identification No.: 3480/49
Address: 200 Wenthers Field Ave	<u> </u>		Telephone No.: <u>207 86 91919</u>
•System Type: ≱ community; □ non-trans	ient non-community		State: <u>F/</u> Zip Code: <u>327/4</u>
•No. of Service Connections at End of Mo		Total Population	Served at End of Month: <u>1885</u>
Water Treatment Plant Information			
• <u>Ireatment Plant</u> Name: Wedge Fredel Water Address: <u>20449</u> Mausfield st.	Treatment 1-	That	Telephone No.: <u>407 568 1454</u>
City: Orlando			State: <u>F1</u> Zip Code: <u>32833</u>
 Permitted Maximum Day Capacity of Pla Plant Category and Class per Rule 62-6 ead/Chief Plant Operator: 		C3	
Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
Koger Holosphe	7436		Wed-SUN Days
•Other Certified Plant Operators (attach a			
Brancharter De Name - De Statter House	<u>}</u>		Day(s)/Shift(s) Worked
Charlie Porchaud	5828	<u> </u>	MON-Fri Kous
Richard Newburg	8447	e	Part Time
		<u> </u>	
	<u></u>	<u> </u>	£;
IL STATEMENT BY LEAD/CHIEF WAT	TERTREATMENTE		

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:

erecords 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 ailable for review upon request.

lozele, 5-31-98 Signature and Date

Name and Certificate Number (please type or print)

DEP Form (12:355-900/1)

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: $3480/49$
Systems that real men water System PWS Identification Number: 3480149 Treatment Plant Name: Wedge Field water Treatment Plant

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTHIYEAR OF

998 NIAY

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

Summary of Daily Water Treatment Data for Month: Residual Disinfectant in Distribution System Lowest Residual Reported Day of Hours Quantity of Finished Water. Disinfectant Number of Instances Lowest Residual Emergency or Lowest Residual the Plant in Where Residual Produced by Plant: Concentration at Disinfectant Abnormal Disinfectant Month Operation (gallons) Entry to Distribution Disinfectant Concentration at Operating Concentration at System (mg/L) Measurements Taken Total Coliform Remote Point Conditions at Total Coliform Sampling Points (mg/L) Sampling Points (mg/L) 24 74.000 2.6 1 .Ζ. 24 370<u>, 000</u> 2 2,6 1,3 335,000 24 3 2,9 1,6 4 24 253.000 3,5 1.5 5 24 240,000 3.1 1,5 6 3,0 24 276,000 1,5 272,000 24 7 2,1 1.0 24 358 000 8 2.8 1,3 9 23 351,000 2.3 4,0 10 24 268,000 2,3 1.0 11 24 387,000 1,9 1,0 24 372,000 12 1. 9 1,0 416,000 13 24 1.9 1.0 14 0,8 24 407,000 1.6 15 369,000 24 1,7 0.8 2.4 16 449.000 2.0 I.D429,000 17 24 2.0 1,1 291,000 18 24 2,0 1.0 19 30/1000 74 2,1 1.0 2 10 292,000 429,000 20 24 217 1.4 21 24 1.0 0,5 392,000 1.2 22 24 0.5 23 1,3 24 412,000 0,6 413,000 24 2.4 1.2 0.5 485,000 25 24 42 G, 6 26 24 312,000 1.6 0.6 27 24 394,000 126 0,8 28 271,000 24 1.3 Ø. 7 29 24 283,000 トも 0.9 292-000 273-000 30 24 0. % 45 31 24 1.3 7 Ô. Total 10.656.000 Avg. 343.741 Max. 485,0CC

Include service lines, mains, hydrants, tasks, etc.

Plane Wedge field MAY 1998

DATE						COR LINE WOLAN FLORAING POINT LOCKIICH OF
53	30	10		1500	300	20232 Marlin st.
5-6	60	10		1200	600	20232 Marlin St
5-9	30	10		1440	300	20232 Morlin ST
-24	10	150		1230	1500	20918 Nettleton ST
-24	10	150		1250	1500	tiftstation # 4
-24	20	150		1310	3000	RAUger Desirage
-24	Ŕ	10		1330	600	20232 Marlin SK
5-28	20	10		1100	200	20131 MALON PK
5-28	20	10		1230	200	20146 MALDN PH
5-28	20	10		1570	200	20101 Murry PK
5-30	60	15		1400	900	20132 Marlin ST
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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.

GENERAL WATER SYSTEM AND			
l <u>ater System Information</u> System Name: <u>Volga his lat</u>	WATER TREATMEN	it Plant	PWS Identification No.: 3430149
Name: <u><u> </u></u>	. of Florida		Telephone No.: <u>869-1919</u>
City: Alteristic Series			State: <u>F/</u> Zip Code: <u>327/4</u>
City: <u>Al raminete</u> Serieure System Type: A community: D non-tra No. of Service Connections at End of	ansient non-community Month: <u>295</u>	; □ non-community; Total Population	Consecutive Served at End of Month: <u>7287</u>
later Treatment Plant Information	pler-		
Name: Uelgafiele []	11114695	<u> </u>	Telephone No.: <u>578 - 6787</u>
Address: 20449 Mausfield ST.			
City: Orlando		·····	State: F/ Zip Code: 32833
Permitted Maximum Day Capacity of			
Plant Category and Class per Rule 6	2-699.310(4), F.A.C.: _	3-0	· · · · · · · · · · · · · · · · · · ·
ead/Chief Plant Operator:		·····	
Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
Roger Holsapple	7436		WED-SUN DAYS
Other Certified Plant Operators (attac	th additional sheets if n	ecessary):	
Name	Certificate Number	Class (a, B, C, or D)	Day(s)/Shift(s) Worked
Charley Foreband	5828	4	MOU-Fri. Davis
Rick Nestard	8447	C	But time.
Rebert Riswer	6439	A	Part Time
		<u> </u>	
		<u>+</u>	
		<u> </u>	

20.02 4<u>8</u>

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.

Sogold Signature and Date

Kager Hols Apple 1436 - C Name and Certificate Number (please type or print)

FILE

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water 3480/49

System PWS Identification Number, 37 Treatment Plant Name: 129 Age Pold 01

III. SUMMARY OF DAILY WATER TREATMENT DATA FOR THE MONTH/YEAR OF

IUNE 98

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

				Residual				
Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disin/ectant 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 Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	Reported Emergency or Abnormal Operating Conditions	
1	24	297,000	1,6	,8			<u> </u>	
2]	397,000	1.7	. 8				
3		377 000	1,5	16		· · · · · · · · · · · · · · · · · · ·		
4		450,000	1,6	,6			1	
5		447 000	1,5	,6	1		1	
6		438,000	1.6	. 8)	<u> </u>	
7		335,000	1,7	18			<u> </u>	
8		183,000	1.6	1,6		·····	<u> </u>	
9	1	378,000	1.7	. 9	<u> </u>	· · · · · · · · · · · · · · · · · · ·	<u>}</u>	
10		314,000	1.7	1.0	<u> </u>		<u> </u>	
11		294,000	_1.7	1.0		·		
12		366000	14	1.0	+			
13		348,000	15	10		·		
14		379.000	_1.7	1.2	<u> </u>		<u> </u>	
15		385,000	1.5	.7			1	
16		357,000	1,3	15			1	
17		452,000	1.7	. 3			1	
18		378,000	1,4	,4				
19		262,000	1.6	.4	1		1	
20		246.000	1,3	,3			1	
21		252.000	1.4	,3		-2.		
22		272000	1.9	, 6	1		1	
23		397.000	2,0	9		1		
24		204000	1.5	1.1		1		
25		290000	1.7	.9	D 3·	0,4		
26		273,000	1.8	1,0				
27	┥_┤_┈	368,000	2.3	1.6			<u> </u>	
28	┼──┤───	326,000	1.8	1.4			·	
29		356,000	1.7	1.0			<u> </u>	
30	24	345000	1.4	0.8		J		
31				<u></u>		1	*****	
Total	<i>\{_{</i>	10,261,000	<u> </u>	X///////	1 5	<u> </u>	X444	
Avg.	Y////	342,000	V////////	X///////	N/////////////////////////////////////	XIIIII	<u> </u>	

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Include service lines, mains, hydrants, tanks, etc.

Plant Wedge field Nonth/Year JUNP

		PLUSEING TIME	ESTIMATED		TIME	TOTAL	LOCATION OF FLUSAING POINT OR LINE BREAK
	DATE	(MIN) 40	GPM 150	site 3″_	FLUSHED 1/0D	6,000	19950 NugaNT ST.
	6-4	60	30	$\tilde{1}$	12.00	1800	20123 Marlin ST
	6-5-	20	150	>"	1400	3,000	20751 B 518520
	6-5-	20	150	3/1	1430	2,000	20751 F STR 520
۰ ارا			,				
-X	6-21		150	3″		15,000	Mojestic & Bourst (Brake)
Ť	6-21		150	3″		3000	MACOU + 520
A	6-21	 	150	3 "		12,000	BRAXIC FT + Nettle toN
T	6-22		150	3″		5,000	Bauroft + Nettleton 20123 Marlin ST
`√	6-25	30	30	/ "	10:AM	900	20/23 /Marlin S/
**	6-27		150	3"		15,000	BAUGOFT & Nettlelon
下	6-27_		15-0			15,0005	Macon + 520
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A orange county Fire Department for putting out fires

	V
DER Same 17401800(1) Dansen Witteren Sam Tas Marana Operating	In Laternari Plant
Effective Com . July 1 1981	· · · · · · · · · · · · · · · · · · ·
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Domestic Wastewater Treatment Plant Monthly Operating Report

Part II - General Information

	3) Month July Year 1996
	(2) Plant's DER Identification Number 3048P037/2
~	3) Plane Name Wedge Field UTilities
	Wastewater Treatment plant
	(4) Plane Address 19204 Merideth Parkway
~	(5) City Orlando
	(6) County Or A.Ng. e
	(7) Phone Number 407-568-6787
	(8) Permit Number <u>D-048-259584</u>
	Plant Type 1-C
•	u) Test Site Identification Number N/A
	1) Fecal Coliform Sample Method
•	2) Type of Ethiuent Disposal or Reclaimed Water Reuse Colfcoarse. spray Irrigation
	3) Limited Wet Weather Discharge Activated
	4) Cumulative Days of Wet Weather Discharge
	15) Plant Stating
	Day Shuft Operator Class C Cerl. No. 8863
	Evening Shift Operator Class Cen No
•	Night Shift Operator Glass Q Cert. No
	Lead Operator Columb Cross A - 6547

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mgd	050053	,12/
(17) Permitted capacity	mgd		,200
(18) Three-month average daily flow	mgd		162
(19) Percent of permitted capacity	96	_	76%
(20) CBODs Effluent	m g/L	060082	1,45
(21) CBODs Effluent	lbs/day	-	2.4
(22) TSS Effluent	mg/L	900201	til
(23) TSS Etfluent	lbs/day	_	1.8
(24) Minimum pH		_	7,4
(25) Maximum pH	<u> </u>		7,7
(26) Total N	mg/L.	000600	
(27) TKN	mg/L	000625	
(28) Ammonia (NH3 · N)	mg/L	000610	_
(29) Nitrate	mg/L	071850	12 80
(30) Total Phosphorus	mg/L	000665	
(31) Minimum Chlorine Residual	mg/L	-	1.4
(32) Maximum Onlorine Residual	mg/l	-	1.7
(33) Other Effluent Parameters			
Turbility (min)	NTU		0,50
Turbidity (Max)	NTU		2,82
Fecal Coliform	MF		۷۱
······································			

OCA fare 17 401.900	itu
Anna Int Manualay Contra	ang Report
Charter Dave May 1. 19	-
Carles Dark - and and	
OC# Applc@mm Hp	I and a by DLM
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,7	4)															Month		yار	- -	Year	96	·
		Chlorine Residual after Contact	Chiorine Resoluat after Dechlorination	CBODs Intiuent (mg/L)	TSS Inlivent (Tig/L)	CBOOs Emuent (mg/L) Comeasi / Pc	TSS Ethueni (mg/L)	pH Effuen	TKN Effluent (mg/L)	NH3 · N Effluent (mg/L)	Nikrate Effluent-(mg/L)	Tolal P Effluent (mg/L)	Fecal Cottorm (#1100mi)	2 Turber 1 ty (NEW)	LKRIJATION (MED)	Residuals (MED)	Rowfall (wedes)					
Ī	1511	1,6			1		<1	76					41	6,73			3,2		1			
Ž	1/23	1.7			[<1	7.6						0,69	- 1							i
3	101	1.6			<u> </u>		<1	7.6 7.6					<1	03,0								
4	,111	1.6					<1	7.6						0,62							i	
Ş	,107	46			L		٢١_	7,6					<1	0.65		[_ 1
<u> </u>		4.7			.			7,5					L	6,99		!	!					!
Ļ	,123	1.6			ļ		<	7,5						1. 42						1		
8	./23	1,6			· · ·		<1	7.5			┝──┥		</td <td>1,20</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	1,20								
1		1.4					$\langle $	7.5						1.91	·		_+					
N ST	,110	1,4		1-11	50		2,5	7.5	$ \longrightarrow $					2,82						<u>+</u> _		
//	,148	1,5		154	70	1.2	41	7.5			1,23		<1	1.26					i			
~		1,5						7 <u>,5</u>						1.11	••••						- +	:
Ň	110	1.6	4					7.4	$ \longrightarrow $					0.78		<u></u>	<u> </u>	<u> </u>	i	<u></u> -		
1	,159	1.5	-+				21	7,4 7,4						1,06								
12	1136	1.6					< / < /	<u>47</u>					<1	1,80		036	i		ļ	1 7		
1 <u>6</u> 1	,112	1.5	i				<u><!--</u--></u>	7.5 7.5 7.5 7,5						0,70		<u> </u> +			<u>+</u>		<u> </u>	
R	130	1.4					<1 1,5	43					</td <td>0,50 1,70i</td> <td><u> </u></td> <td></td> <td>ļ</td> <td><u> </u></td> <td></td> <td>· — ·</td> <td>•</td> <td></td>	0,50 1,70i	<u> </u>		ļ	<u> </u>		· — ·	•	
- 11	,210	1,5					45	7.7	┈╾╼┝			\rightarrow	</td <td>1.701</td> <td></td> <td></td> <td> <u>-</u></td> <td>;</td> <td>- · į.</td> <td></td> <td>•</td> <td><u> </u></td>	1.701			<u>-</u>	;	- · į .		•	<u> </u>
1 9		1.6	†					7.5		i				0,80		<u>.</u>	·			÷ -	·····	
บ	122	1.5		i				7.5	+		-+			a12		:						
12	.128	1.4	+	1			ς I :	7.5		— †				0.90	•			·····			`-	
22	.110	1.4						7,5				Ť		0.9/		 +			· · · · ·	<u> </u>		
ъ	,10	1.5						7,5				-t	21	0.87		<u> </u>		·				
2		1.5						7,5		—i		_		1.441	;	-		·				
21212	,100	1,5			-f	f	-≁∔	7.7				<u>//</u>	-	1.00							<u> </u>	
27	1075	1.7				1		7.7		†			- 	0,60					i	<u> </u>		<u>-</u> :
28		1.6						7.7						0.73			-+		-			
21		1.5	1	47	169			7,7		h	1.80			2,70								
र्व प्र	.102	1,4						27		-1		-1	1	,00	- i-		- †	Ť		· - - 4		
্সা	1031	1.5					I	7.7						2,75	39	1					1	-

Domestic Wastewater Treatment Plant Monthly Operating Report

31.91 + 1.03d Operator. This is to certify that 1 am familiar with the information contained in this report and that to the best of my knowledge and belief. This mation is true, complete, and accurate

ied on

ne (Please Type)_ BOBERT L. CROSS _____ MANY Name WEDGE FEELD UTILETIES INC.

Date 8-20-96

Telephone No (Please Type) _______ 669-1919 _____

Page 3 of 3

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form tag_	Domestic W Monthly Opi	a distant and a second second	i sement i Int	
Effective Or	a July 1	991	···	
	ahon No	(Fda)		
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Domestic Wastewater Treatment Plant Monthly Operating Report

Part II - General Information

AVGUST ____Year _____ 1) Month 3048 PD (2) Plant's DER Identification Number -3) Plant Name WESSERFELD WW. (An) MARFOR 14204 (4) Plant Address ORGANDO ~(5) City_ MANG (6) County .___ 568-678 (7) Phone Number. D-048-(8) Permit Number . 1-<u>~(9)</u> at Type 0) Test Site Identification Number ... 1) Fecal Coliform Sample Method Most Probable Number Membrane Filter 2) Type of Effluent Disposal or Reclaimed Water Reuse GOLP COURSE SALAY JACIGA HON 3) Limited Wet Weather Discharge Activated 4) Cumulative Days of Wet Weather Discharge _ NA 15) Plant Staffing Day Shift Operator Class _____ Cert. No 886-3 Evening Shift Operator Class _____ Cert. No _____ Night Shift Operator Class Cert. No. Lead Operator ___

Parameter	Units	STORET	Value
(16) Monthly average daily flow	mgd	050053	,124
(17) Permitted capacity	mgd		.200
(18) Three-month average daily flow	mgd	—	.133
(19) Percent of permitted capacity	%	_	629
(20) CBODs Effluent	mg/L	080082	
(21) CBODs Effluent	lbs/day	-	
(22) TSS Effluent	mg/L	900201	
(23) TSS Effluent	lbs/day	—	
(24) Minimum pH		—	6.9 7.7
(25) Maximum pH		-	27
(26) Total N	mg/L	000600	
(27) TKN	mg/L	000625	
(28) Ammonia (NH3 - N)	mg/L	000610	
(29) Nitrate	mg/L	071850	
(30) Total Phosphorus	mg/L	000665	
(31) Minimum Chlorine Residual	mg4.		1.0
(32) Maximum Ohlorine Residual	mg/L		1.0
(33) Other Effluent Parameters			
TURB, (min)	NTU		0.4
	NTU		3.0
TING (MAX) FECAL Coliforn	MF		21

OLA Fer	
Somethic Views	need Freetman Bart
FRANK DAL MAY 1. 1991	······································
OCA 400+Carlon No	
l	if and a by DER

AUGUST Year 1996 Month (34) 5 z Fecal CoHorm (#/100mi) NH3 · N Ethent (mg/L) Nitrate Ethuent (mg/L) CBOOs Effluent (mg/L) CBODs Influent (mg/L) P Effluent (mg/L) TKN Ethent (mg/L) Chlorine Residuat after Dechlorination 1224UDUSE (TS intuent (mg/L) ISS Ethent (mg/L) MOUL Chlorine Residual after Contact TUBBIO, K. Effluent e C (pgm) 5 Flow (Total _ ŝ Ĩ ~1036 1 1.0 2 7.7 102 2 .61 113 7.7 <u>7.3</u> 7.5 0.6 3 111 <u>·113</u> 0.5 27 1.2 05 130 7.5 08 7.6 21 115 21 0.4 100 21 7.2 194 107 2.0 21 7.5 0.4 ,120 411 0.5 110 <u>7. l</u> Ù 0.9 126 7.7 178 2117.6 2. ? 2 41 15 71 0.6 155 3.0 ł 2.1 i 3.1 150 2.5 21 Z | 1.8 1136 ~1 よ1 2.5 1.9 . 112 7.5 122 15 7.5 .128 12.9 2/ 7/ EMER. POND - FLOCK OVER i38 21 3.0 7. L UKIKS 400m6 289 L 1 17.8 2.0 151 1.1 7 <1 1.5 219 176 ,107 1.7 4.3 ---1.1 7.5 ; .099 1.2 1 7.3 1 ŬĤ G 7.1 1.0 .117 4 7.5 1.3 ,148 Z1 17.5 41 1.2 1.9 7.0 1.0 104 21 7.0 21 1.4 joļ 1.1 69 21 2.1 099 7.0 کن / 099 1.7 7.0

Domestic Wastewater Treatment Plant Monthly Operating Report

3 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 matog is the complete and accurate

ed: CROSS se Type KOBERTL ю (. Dany Name UTILITOLS INC OF FLA

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Dale 9-17-96 Telephone No (Please Type (407) 869-1919

Page 3 of 3

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	17-601.900(1)		•	
Form Tate	17-601.900(1) Domestic Walkewater 1 Monthly Operating Rep	irettment Plan port		
	- July 1 1991			•
DEA ADDA	anon No			
L	(F#ed)	cy DEPO		

(1) Month <u>SEPTEMBER</u> Year 1996
(2) Plant's DER Identification Number 3048 Po 3 7/2
(3) Plant Name WEDGEFFELD WRSTEWATER
TREATMENT PLANT
(4) Plant Address 19204 MEREDITH PKWY.
(5) City (IRLANISO
(6) County ORANGE
(7) Phone Number (407) 568-6787
(8) Permit Number 048 2595-84/
(9), ut Type /-C
0) Test Site Identification Number
1) Fecal Coliform Sample Method
Membrane Filter Difference Most Probable Number
2) Type of Effluent Disposal or Reclaimed Water Reuse
Colf Carest Spray IRCIENTION
3) Limited Wet Weather Discharge Activated
4) Cumulative Days of Wet Weather Discharge
5) Plant Staffing
_ Day Shift Operator Class Cert No
Evening Shift Operator Class Cert. No
Night Shift Operator Class
Lead Operator <u>A Kic Martice Ecles</u> <u>Briddy</u> Signature Cert No

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mgd	050053	.131
(17) Permitted capacity	mgơ		.200
(18) Three-month average daily flow	mgđ		,125
(19) Percent of permitted capacity	%	_	63%
(20) CBODs Effluent	mg/L	080082	3,5
(21) CBOD ₅ Effluent	'lbs/day	-	
(22) TSS Effluent	mg/L	900201	1.0
(23) TSS Effluent	lbs/day	-	
(24) Minimum pH			6.5
(25) Maximum pH		-	<u>6.5</u> 8.0
(26) Total N	mg/L	000600	
(27) TKN	mg/L	000625	
(28) Ammonia (NH3 · N)	mg/L	000610	
(29) Nitrate	mg/L	071850	1.6
(30) Total Phosphorus	mg/L	000665	
(31) Minimum Chlorine Residual	mg/Ĉ		1.5
(32) Maximum Chlorine Residual	mg/L	_	1.5
(33) Other Effluent Parameters			
FECAL Coliform	#/100		<u> </u>
TURBIDITY (MAX)	NTU		4.4
TIRACITY (Min).	NTV		0.6

DLA Farm		Report
Energy De	July 1, 1991	
		1

Monthly Operating Report Month SEPTEMBER Year 1996 (34) Fecal Coliform (#/100ml) NH3 · N Effluent (mg/L) (NTU) C800s Effuent (mg/L) P Etiluent (mg/L) CBODs inluent (mg/L) Nitrate Ethuent (mg/L) Effluent (mg/L) Chlorine Residual after Dechlorination (SS Influent (mg/L) Etluent (mg/L) Chlorine Residual after Contact MOUIN mesion Effluent (pgn) Ee 5 XX Total ي ¶ SS <u>у</u> Ł 1.8 21 7.6 104 5.0 1 1.6 ī 7.6 097 4.0 **~**1 4.4 <1 Z.6 3 136 1.5 2.2 **<**1 1.0 7.0 2.5 107 1.9 5 1.3 6.5 2.0 100 1.7 69 2.3 201 えまえ 7.0 2.1 226 2.1 ... Í <1 7.3 17.5 2.5 237 1.4 7.4 21 1.5 <u>157</u> 2.4 7.8 41 3 296 2.5 21 21 1.6 133 2.5 76 <1 <u><111.6</u> 77 28 2.8 Ī 7.8 1.8 142 2.6 1.4 2.9 7.8 113 41 25 1.8 126 2:6 21 1.7 0.9 2.3 41 7.7 140 <118.0 104 30 146 3.5 <18.0 21 0.91 <u><110.9</u> 113 <18.0 3.2 3.5 129 18.0 101 3.5 80 0.8 1.3 123 3.5 <1 : 7.4 2 à <1 29 0.9 1 130 3.5 4179 0.7 126 3.5 1.3 24 21:05 143 136 35 35 トレ 139 0.6 145 3.5 <u>79</u> 3.5 7.9 114 0.6 8.0 084 3.5 68 L1 8.0 1<u>47</u> 3.5 0. É ~1 6.7 1.3 7.9 122 35

Domestic Wastewater Treatment Plant

d 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 mation is true, complete, and accurate

ase Type) _ D. Ricinas Eck TR **H**Y1 ne INC 1pany Name UTILITIES

10-8-96 Oate .

Telephone No (Please Type) (40.7) 568-67870

Have 3 of 3

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Den Fam a 17-601.900(1) Domestic Waltemater fem Tee Monthly Operating Re	Treatment Plant
iem Tee Monthly Operating Re	port
Macive Dem, July 1, 1991	
DEA Appresión No	
(Fåg)	I I DEPO

Part II - General Information

	(T)	Month OCTOBER Year 1996
	(2)	Plant's DER Identification Number 3048 Po 37/2
~	(3)	Plant Name WEDGE FIELD UMSTELUNTEL
•		TREATMENT PLANT
	(4)	Plant Address 19204 MEREDITH PIKLUY
-	(5)	City ORLANDO
		CountyORANKiE
	m	Phone Number (401) 568-6787
		Permit Number
_	(-,	int Type / -C
	•	Test Site Identification Number
		Fecal Coliform Sample Method
	''	Membrane Filter Most Probable Number
*	2)	Type of Effluent Disposal or Reclaimed Water Reuse
		_ Golt Course TRACATION (Spray)
	3)	Limited Wet Weather Discharge Activated
~	4)	Cumulative Days of Wet Weather Discharge
	15)	Plant Staffing
		Day Shift Operator Class Cerl. No
^		Evening Shift Operator Class Cert. No.
		Night Shift Operator Class
		Lead Operator

,e

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mga	050053	.111
(17) Permitted capacity	mgd		.200
(18) Three-month average daily flow	mgd		,122
(19) Percent of permitted capacity	%		61%
(20) CBODs Effluent	mg/L	080082	2.6
(21) CBODs Effluent	ibs/day	-	
(22) TSS Effluent (IMAX.)	mg/L	900201	2.2
(23) TSS Effluent	lbs/day		
(24) Minimum pH			7.1
(25) Maximum pH			8.2
(26) Total N	mg/L	000600	
(27) TKN	mg/L	000625	
(28) Ammonia (NH3 - N)	mg/L	000610	
(29) Nitrale (AVE.)	mg/L	071850	0.66
(30) Total Phosphorus	mg/L	000665	
(31) Minimum Chlorine Residual	mg/L		2.4
(32) Maximum Chlorine Residual	mg/L	-	5.0T
(33) Other Effluent Parameters			
FECAL Colifarm	Fliod		<u> </u>
	NTU		0.65
TURBIBITY (MAX) TURBIBITY (MIN)	NTI		0.24

	17-601900(1)	
Fem Tea.	Dometric Westward Presman Place Marshly Obertang Report	,
	My 1. 1991	
	of and a by D(P)	

Month OCTOBER YOR 1996 34) Fecal Coliform (#/100ml) CNR 1 NH3 · N Efficent (mg/L) CBOD_s Effluent (mg/L) CBODs Inttuent (mg/L) P Effluent (mg/L) Nitrate Ettluent (mg/L) IKN Effuent (mg/L) Chiorine Residual after Dechlorination Effluent (mg/L) TSS Influent (mg/L) Chlorine Residual after Contact TURBIONY Effuent Flow (mgd) Total | <u>ISS</u> F 0.56 7.9 3.5 1.1 186 11 21 0.44 7.9 2.4 .099 2.2 <1 0.41 .097 7.9 2.5 0.55 7.8 1107 2.6 112 3.0 7.9 0.51 <u>2</u>] 17.9 .151 2.8 252 21 120 0.55 ,146 26 2) 8.0 28 0.55 138 21 21 10.58 129 3.2 7.9 251 159 2.8 0.31 انه 29 3.0 -1 661 .122 09 3.0 7.9 060 3.0 7,9 053 2 21 3.0 0.63 <u>13</u>3 8,0 3.2 4117.8 115 05B 3.5 7 7.9 1 029 1, 0.61 410.62 7.9 097 2.8 2.1 0,64 3.5 18.2 133 21 ~1 104 3.5 8.1 0,651 34 100 8.2 10.4/1 34 119 18.2 0.33 41 101 2.8 ī 21:0.29 7.9 3.4 108 E.Z 0.37 092 3.2 8.1 0,24 4 1 240 172 2.4 21 8.1 ,105 3.2 21 0.95 :0.25 3.1 ,101 8.1 0.25 3.3 ,114 025 8.0 5.0 ÷1 7.2 12Ê 0.25 . 099 5,0 0.35 c. (7.2 4.0 113 4 7.1 0.25 098 5.0 </ 7.1 <10.2% 040 5.0 0.24 41171 1

Domestic Wastewater Treatment Plant Monthly Operating Report

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14 Junil ed. REFARES se Type)_________ ю Zλ UTILITIES ipany Name_

11-7-96. Date _____

Telephone No (Please Type) (407) 568-6787

Lay of the month

And Anna a	
Plane Case	
CLA ALEXANDE No.	

D	Month	November	Year.	1996
2	Plant's DE	R Identification Number	3048 <u>P</u> (3712
[1]	Hant Nam	e Wedgefield i	Utiliti	.es
14	Plant Addr	19204 Merd	ith Pkj	1.
ិគ		Orlando		
		Orange		
			787	
• * • *	rmt Nur	nber	584	
		<u> </u>		· · ·
		entication Number	N/A	
	Fecal Coll	orm Sample Method ane Filter 🔲 Most f		,m be r
2)		went Dicpond or Annan Turse Spray Ir		
3)		t Weather Discharge Ac		
4)	Cumulative	Days of Wet Weather D	ischarge	<u>_N/A</u>
(5)	Plant Staffir	NO		
~	Day Shift C	perator Class C	Cert	Ng <u>8863</u>
	Evening Sh	n Operator Class	Sm	Na
	Night Shift	Operator Cupss	f for	Na
	Lead Open	tor _ Kichau /	feude	A-5940
-			-	

······	1		
Parameter	Units	STORET Code	Value
(16) Morany average daily low	ngu	050053	115
(17) Permitted capacity	mga		200
(16) Three-month average daily flow	mgd	-	119
(19) Percent of permitted capacity	40		57%
(20) CBOD, Effuent	mol.	080082	4.7
(21) CBODy Effluent			4,5
(22) TSS Effluent	mg/L	900201	1.3
(23) TSS Effluent	losiday		1.2
(24) Minimum pH		-	6.7
(25) Maximum pH			7.2
(26) Total N	mgil.	000600	Aly
(27) TKN	mgt.	000625	Ala
(28) Ammonia (NH, M)	mg/L	900610	NA
(29) Navale	mg/L	071850	049
(30) Total Phosphorus	mg/L	000665	NA :
(31) Minimum Chlorine Residual	mg/L	-	2.0
(32) Maximum Chlonne Residual	mg/L	-	5.0
(33) Other Effluent Parameters			
Turbidity (MIN)	NTU		0.3
Turbidity (MAX)	NTU		0,7
Fecal Coliform	M/F		<u>< /</u>
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-	.J4	n			¢												Mont	n_N	iover	nber	Moa	1996	D .
	UNDIN BUI O ART	Flow (mgd)	Chlorine Residual Mer Comact	Chionine Resolute: after Dechtorination	CBOBS internations to	TSS Inhen (mgr.)	BOON ENVENTION LA	TSS ERLEN (MOL)	ph Effueri	TKN Ethen (mor)	NH3 · N Ethert (mgl.)	Watate Emulant (mol.) Le	Total P Ethueni (mg/L)	Fecal Cottorm (#100ml)	Turb. (NTU)	DResiduals (MG)	S Irrigation (MG)	Rain Fail (inch.					
		0.078				1			7.1						0.3	Ø	0,625	10	<u> </u>	<u></u>			
		0,087 0,138							7,1					Ļ	0,3		8593	¦ 	ļ	!		(
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	đ	0,112	5,0			╉╾╍╸	╉╼╌┥	<u><</u> [6,1						0,4		0, 387		- • :	•			<u> </u>
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		0.124				· • • •	1	- 1	6.9			┝╌╌┫			0,4		.409		<u> </u>				÷
	8	0, 183	2.3			1	1 1		6,9						0.5		169		i	i i			;
	1	0, 122							6,8						0,4		333		1				;
-	ľ	116	3,2					۲۱	7.2						0,6		.343				[i	
	4		2,8					٢١)	6,9					۲۱	0.5		. 481					i	
		0.072	7,8			 		٢٢_	7,0						0,8		,378						
			3.7			 	 	<u> </u>	6,9	i					0,4		, 177						
	14	0. 122	5,5			.	}i		2.0		-+				0,5		, 481				į		
	活	2,123	3.21		<u> </u>	ł	┠──┥		7,0						0,6		.115				-	; 	
-	nt		2.1			{		27	7.0 7,0			+			0.6		,002					<u> </u>	
	18:1	2.105			57	216		14	$\frac{1}{7.1}$			0.49		27	0,61		601			<u> </u>	·····	·	-
	11	2. 120	3,0			<u> </u>			7.1		f	1			0.61		, 559						—
	2 9	0.056 0.155	4.0					1,2 !	6.9		Ť		- 1		0.6		. 451					•,	
	<u>v</u> [4	0. 155	7.0		1			1.0	67	1				61:	0.5		404:						<u></u>
~	4	2,110 7.182 9.190	3,2	İ.			1		6,8						A 8 ;		385		:	•			
	1	1.182	2.5						$\overline{\mathcal{L}}$.		, i			: 7:		441	1	,				
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			7.0	ť	99	97.8			7./	<u></u>	 ŧ	<u>aos</u>	_	<u> </u>	0.7		377			<u>i</u>	<u> </u>		
			, <u>,</u> ,						7,2						0.5		003			;		-	<u> </u>
	_		0				f		57	+			f		0,5	<u>+</u>	380	i		<u>;</u>			
-	थ्रिट	0.088 4	1,8		-1			- 1	59	+	+				5.4	— — †	301			i -	<u> </u>		
	342	. 894 3	6,0						7,0	+					$\frac{7}{5,7}$	- ť	29/	+	†		╾╺╈╸	i	
	1								1							<u> </u>	~~~	-i		+		; - -	-

d Operator. This is to carefy that I are lamitar with the information contained in this report and that to the best of my knowledge and belief, this match is true, complete, and accurate)

Page 3 of 3

have Her. antres Richard Newberg ne ... wase Type) pary Name Utilities Fine æ

12/18/9le Date.

Florida . Wederlich Utility Townor in more Types (407) 869-1919

Reuseflows.

DAV	REUSE FLOWS	- measured	<u>at discharge p</u>	umps to golf course
DAY	Vnd- 29	Sep-96	Oct-96	<u>Nov-96</u>
i	2.000	177,000	10,000	628,000
	5,000	161,000	9,000	583,000
•	1,000	388,000	0	610,000
	1,000	671,000.	0	384,000
	2.000	<u>607,000</u>	0;	412,000:
<u></u>	2,000	454,000	0	514,000
	3,000	0.	0.	409,000
	· · · · · · · · · · · · · · · · · · ·	111,000	9,000	169,000
	_0	196,000	0	333,000
10	<u>Q</u>	0	0	343,000
1 I.	<u>,</u>	1,000	143,000	481,000
in in the second se	· · · · · · · · · · · · · · · · · · ·	0	0	378,000
13		1	469,000	197,000
		379.000	497,000	481,000
	46,000	115,000	232,000	115,000
16	\$,000	0	211,000	2,000
17	55.000	21,000	99,000	601,000
18	11,000	237,000	455,000	421,000
14	95.000	475,000	434,000	559,000
<u> </u>		355,000	456,000	451,000
-	5,000	483,000	435,000	404,000
24	587,000	9,000	370,000	385,000
	16.000	483,000	377,000	446,000
	<u>Û</u>	153,000	502,000	378,000
	0	292,000	534,000	377,000
	<u> </u>	613,000	0	8,000
27	169,000	454,000	0	380,000
	<u>233.000</u>	344,000	324,000	381,000
29	+90,000	543,000	343,000	374,000
<u> 5</u> 0 j	400.000	0	559,000	391.000
	25,000 n/a	· · · · · · · · · · · · · · · · · · ·	699,000 n/a	

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12/15/96

To: D.E.P. / Wastewater Division

From: Utilities Inc. of Florida / Richard Newberg

Enclosed is the November monthly Operating report for Wedgefield Utilities wastewater Treatment Facility, I.D. number 3048P03712. I replaced Richard Eck as Lead Operator on 12/09/96 and will continue in that capacity until further notice. The monthly report was compiled from data that was collected under the direction of Richard Eck. I reviewed the data and to the best of my knowledge believe it to be true and correct. If you have any questions, please contact me at (407) 869 - 1919. Thank you for reviewing this information.

ore control

Sincerely

Richard Newberg

cc. Orange County Pollution Control

018 Aum # 17-601.800(1)	
Rem Tas Marrier Operating Report	ert Plani
Channe Care_shely 1. 1901	
05P Appropries	

د. د هند ا

Part II - General Information

~		-
	. 7)	Month December year 1996
		Plant's DER Identification Number 3048203712
		Wodzofiold Ubilition
<i>.</i>	[3)	Plant Name Wedgefield Utilities
	(4)	Plant Address 19204 Merdith Pky.
	19	
~		Cay Orlando
	(6)	County_Orange
	ത	Phone Number 407-568-6787
	105	Permit Number
	(0)	
ړ ≣م	¢	₩ Type1-C
	O)	Test Site Identification Number N/A
	ŋ	Fecal Coliform Sample Method
	-	Membrane Filter
	~	
~	2)	Type of Effluent Disposal or Reclaimed Water Reuse
		Golfcourse Spray Irrigation
	3)	Limited Wet Weather Discharge Activated
_	41	
	4)	Cumulative Days of Wet Weather Discharge <u>N/A</u>
	15)	Plant Statling
		Day Shuft Operator Class C Cert. No. 8863
~		Evening Shift Operator Class Cen_Ma
		Night Shift Operator Class
		Lead Operator Signature found ASG40

T		• ···· <u></u>
Units	STORET Code	Value
mgd	050053	171
mgd	-	200
mgd		1.137
96		85%
mg/L	080082	2.65
lbs/day		3,77
mg/L	900201	1,1
tos/day	-	1.5
		6,4
		7.2
mg/L	000600	
mg∕L	000625	
mg/L	000610	
mg/L	071850	126
mg/L	000665	
mg/L	-	27
mg/L		50
NTU		0,43
NTU		1,91
M/F		</td
		j
]
	mgd mgd mgd % mg/L lbs/day mg/L lbs/day mg/L mg/L mg/L mg/L mg/L mg/L mg/L mg/L	mgd 050053 mgd mgd mgd %b mg/L 080082 lbs/day mg/L 900201 lbs/day mg/L 900600 mg/L 000600 mg/L 000600 mg/L 000610 mg/L 000665 mg/L 000665 mg/L NTU NTU

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Domestic Wastewater Treatment Plant Monthly Operating Report

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•		Flow (mag) Gallauú	Chlorine Residual after Contact	Chlorine Residual after Dechlorination	CBODS intrum (mg/c) the	TSS Infuent (mg/L)	f BOD's Emutine (nec.) te	TSS Ethuery (mg/L)	pH Efluent	TKN Effluerd (mg/L)	NH3 · N Ethent (mort)	Nikale Emuent (mol.) 8 hr. composite	Total P Effluent (mg/L)	Fecal Coliform (#/100ml)	Turb. (NTU)	Rësiduals (MG)	Irrigation (MG)	Rain Fall (Inch)					
	Σ	131,580	5.0			1		14	6,7			<u> </u>		1	,75	048		2.9	ļ	Ţ		<u> </u>	
	2	189,20	5.0		ļ			45_	6,8			[]		</td <td>.78</td> <td><u> </u></td> <td>391</td> <td></td> <td><u> </u></td> <td><u> </u></td> <td>+-</td> <td><u> </u></td> <td>1</td>	.78	<u> </u>	391		<u> </u>	<u> </u>	+-	<u> </u>	1
		186,289	5,0 5,0			<u> </u>	{ }	<u> </u>	6, 9 6, 8			┨────┨		<1	.65	[183 222		 		┥╌╌		<u> </u>
	7	170, 301 183, 085	5,0 4,9			1		<u>5</u> 4/	6.0			}{		21	,7 <u>2</u> ,43	}	766		 		1	<u> </u>	
-	6	174 135	4.9		·	1	t		6.9		·	i †			.49		377		1	<u>†</u>			
	7	192,259	4/			1			17.0			11			,53		341		İ.	1	1		
	8	205,175	45					<u><!--</u--></u>	6.6				- <u>-</u> .		1.63	1	,011		Ì	<u> </u>			
		156,070	45			I		<u><1</u>	6.8		_			21	,75		<u>090</u>		1	<u>i</u>	1		i
	10		4,3			 		<u><1</u>	6.9						,63		212		!	<u> </u>	i I	ļ	<u>.</u>
~	111	166,300			A .//	7877		<u>۲</u>	7.0					2/	,59		494			╀───	i		
	17	12,000	4,6 5,0		277	789	<u>-2,0</u>	<u><!--</u--></u>	7.0			0.0		21	.91		421			-	÷	i	r
		13,153	20			 			7,0					<u> </u>	.94		.081 101	1	<u>.</u> !	<u>i</u>	1		*
	1	171, 600	5,0 5,0					1,8	6,6			┠───┼	·		1,01		414			;	·		<u></u>
	16	155,054	5,0					1.8	6.7 6,9					<1	1,03		490		I	1	1		·
	1		3.7			 		</td <td>7,0</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>1,02</td> <td> i</td> <td>.404</td> <td></td> <td></td> <td>1</td> <td>:</td> <td></td> <td></td>	7,0						1,02	i	.404			1	:		
		1501527	27		_	114	i	</td <td>7.0</td> <td> •</td> <td></td> <td></td> <td></td> <td>21</td> <td>1.09</td> <td></td> <td>417</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	7.0	•				21	1.09		417						
	17	118,109	4.21]				</td <td>614</td> <td></td> <td></td> <td></td> <td></td> <td>2/</td> <td>1.04</td> <td></td> <td>007</td> <td></td> <td></td> <td></td> <td></td> <td>.<u> </u></td> <td></td>	614					2/	1.04		007					. <u> </u>	
	29	177,681	3,4						6.8					<u> </u>	1007		092				<u>.</u>		<u> </u>
	4		5.0			!			6.8						,43		104			•			· <u> </u>
		84,746				ļ		<u> </u>	7,0						156	_	376				<u>. </u>		
-	24		5.0					1,0							1,0Z		.767		· · · · · · · · · · · · · · · · · · ·	· 	.		
	24		5.0						<u>7,1</u>						0.96		251				· · · ·		
		154,010			267	220	23		$\frac{1}{7}$			1,26		</td <td>,74 .82</td> <td></td> <td>243</td> <td>{</td> <td></td> <td></td> <td><u> </u></td> <td></td> <td><u> </u></td>	,74 .82		243	{			<u> </u>		<u> </u>
	訊	158,000	3.01	<u> </u>	٣		~	_	7,1		Ì	1120			1.61		245			<u> </u>	<u> </u>	<u>:</u>	;
	Z S <u>j</u>	62,856	5,0						7,2					İ	Loz	{	255	1	i				1
~	29	198,240	5.0		_			1.0	7,1						1,16		243					i	
	34	62,688	5,0					<u>1, /]</u>	7,0					41	1,06		304						
	<u>1</u>]	(1,237).	5,0					1,4	7, 1					</td <td>1.91</td> <td></td> <td>3/3</td> <td></td> <td></td> <td></td> <td></td> <td>1</td> <td></td>	1.91		3/3					1	

d 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 mation is true, complete and accurate

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Dale_____1/21/97

Telephone No (Please Type) (407) & 9199

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GER Rom a 17401,000(1) Demostic Watterson Fem Tay, Marriery Coursering P	er Beaster Lapart	ant Part	
Energy Care July 1 1991			
		<u> </u>	
(FA	hand in the		 ·

	1) Month JANUARY Year 97
	(2) Plant's DER Identification Number 3048203712
	(3) Plant Name Wedgefield Utilities
	(4) Plant Address 19204 Merdith Pky.
.	(5) City Orlando
	(6) County_Orange
	(7) Phone Number 407-568-6787
	(8) Permit Number D-048-259584
•	- ant Type1-C
	0) Test Site Identification Number <u>N/A</u>
	1) Fecal Coliform Sample Method
-	Membrane Filter Most Probable Number
	2) Type of Effluent Disposal or Reclamed Water Reuse Golfcourse Spray Irrigation
	3) Limited Wet Weather Discharge Activated
•	4) Cumulative Days of Wet Weather Discharge <u>N/A</u>
	15) Plant Staffing
	Day Shut Operator Class <u>C</u> Cert. No. 8863
	Evening Shift Operator Class Cert. No
	Night Shift Operator Class Cert. No
	Lead Operator William Olicon A-6665
	Supreture Cert No.

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mgd	050053	
(17) Permitted capacity	mgđ	-	.200
(18) Three-month average daily flow	mgd		140
(19) Percent of permitted capacity	9⁄6	-	79%
(20) CBODs Ethuent	mg/L	060082	3.15
(21) CBODs Effluent	lbs/day	_	4.1
(22) TSS Ettluent	mg/L	900201	.6
(23) TSS Etfluent	tos/day		.80
(24) Minimum pH		_	6.4
(25) Maximum pH		-	7.2
(26) Total N	mg/L	000600	NA
(27) TKN	mg/L	000625	N/A
(28) Ammonia (NH3 - N)	mg/L	000610	N/A
(29) Nitrale	mg/L	071850	.08 6.0
(30) Total Phosphorus	mgit.	000665	N/A
(31) Minimum Chlorine Residual	mg/L	-	1.2
(32) Maximum Ohlorine Residual	mg/L	-	5.0
(33) Other Effluent Parameters			
Turbidity (MIN)	NTU		کړ.
Turbidity (MAX)	NTU		16.8
Fecal Coliform	M/F		<1-
			

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	Domestic Wastewater Treatment Plant Monthly Operating Report																						
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	5	15.	ā,	রু ঠু	間	13	L εğ	1	{	ž		μ Ĕğ	Ĕ	E	(NTU)	1	Ē	}			}	i	
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	way a me would	Flow (1973) &a/5.	Chorine Residual after Contect	Chlorine Resoluar after Dechlorination		TSS Inhueni (mg/L)	CBOD, Enventing 1 t	SS Ettluent (mg/L)	5	TKN Effluent (mg/L)	NH3 - N Efficient (mort)	50	lotal P Etituent (mg/L)	Fecal Coliform (#1100ml)	•	Rësiduals	gation	Fall	i		Ì	İ	1
	ы Б	Ē	5 2	≧∆	Ъ	E	Ő.	Ē	pH Effluent	E.	Z	برور	٩	Ŭ	Turb.	F q			1	1	1	1	1 1
-	à	5	<u>ö</u> ž	Ĩ	d d d	8	0 C C	18	Ţ.	Ž X	Ŧ	2 <u>9</u>	ola j	8	1°	S S S S S S S S S S S S S S S S S S S	L'	Rain				ļ	i !
-	2			0 m	<u> </u>	<u> </u>	<u>م</u>				4	<u></u>		ļ		<u> n</u>	н		┨	<u> </u>	·	<u> </u>	↓
	Ц	181,562	50			 	<u> </u>		6.9					<u> </u>	1,3	 	,3/3		. - -		<u> </u>	<u> </u>	 !
	4	171, 170 127, 806	5,0			<u> </u>		2,5	6,8		┣──			51	1,73	├ ──-	2.45 2.53	<u>.</u>	╅───	<u></u>	<u> </u>	į	
	H	121,500	202			<u> </u>	.		6,7		┣──				1.72		265		• ∔	<u>+</u>	<u> </u>	í	<u> i</u>
	5	187,733	5.0			<u> </u>		41	7,7						1.7	 	250	<u> </u>	 		i		·!
~	6	16,121	2.9					21	7.1			<u>i</u>		<1	,87		302		1	ţ	†	7	. .
	키	134,975	4,5			1	1	2,4	171						169		457			1			
	8	138 410	5.0					1,8	7,1					41	12,0		,42C	ļ	ī Χ	601	lug T Blou	<u>p En</u>	her.
	2	151,653	5.0						6.9						12.9	0,0.5		 	ļ	10	Blo	<u>10.20</u>	
	ପ୍ର		5,0	ļ		╞	 	ļ	69						7.5		004	•	<u> </u>	1	i	,i	·
-	1		5,0					L	6.4						12,2		017	 	 		i	; ¦	<u> </u>
	3		5.0						6.4						13,6		097 250	<u>↓</u>	÷	.		; - i	· ,
	<i>7</i>		5,0 5.0						7.0		·····				13,7		254	<u> </u>	<u>.</u>	<u> </u>			·
	_	164, 494	50						7,0					 	15.0	.009	101	i					
		170,087	50 50						5.7	 					16,3		020	ī —	1		7 1 1		· · ·
-	オ	164 975	5.0						6.4						11.4		005		<u> </u>	1			·
	18	190 431	50				i		6,6						5,2				1		L.A		
	7	170 555	5.0					<1	6.7						13,2	ļ	.090		XS	vita	46	<u>c k 1</u>	0
			197						6.1					<u> </u>	59		. 413		Ĩ.	<u>दर (</u>	10 Mg		<u> </u>
	#	153,136 136, 301 ;	5.01					21	$\left(\begin{array}{c} c \\ c \end{array} \right)$,024							`
~	清	145 923	5,01		2477		2,4		6.7						,34		454				<u> </u>		<u> </u>
		155 320			05	//	<u>, 7</u>			-+		0,68		</td <td>,78</td> <td></td> <td>523</td> <td></td> <td>• •</td> <td>·</td> <td></td> <td></td> <td></td>	,78		523		• •	·			
		74,395							6.8						1.5		,015						
		84,407							6.6	l					29		210		<u></u>		<u> </u>		
	7	164 558	1,6		131	159	1.3	41	6.5		—-i	6.0		41	6.5		352					 ;	<u> </u>
	21	131,634	1,2					c1	7.2					41	0,4		.028						
		71,505						<u> </u>	6.9]				<u> </u>	0,3		Ø						
	Æ	30,092	5.0						6.7			 			0,3		-337						
	'¥	53,444	<u>siq</u> t						6,71				1		0.3		263				i	<u> </u>	

Troatment Plant

d 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 mation is true, complete, and accurate

Ulham dear ier ne (Mease Type) WILLIAM SECOY _____ Dany Name WEDGEFIEID Utilites

Dale 2/10/97

Telephone No (Please Type) 407 869-1919

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			· · · · · ·	ر

Domestic Wastewater Treatment Plant Monthly Operating Report

	(1)	Month Feburary Year 1997
	(2)	Plant's DER Identification Number 3048203712
►.		Plant NameWedgefield Utilities
	(4)	Plant Address 19204 Merdith Pky
•	(5)	City Orlando
	(6)	CountyOrange
	n	Phone Number 407-568-6787
	(8)	Permit Number
•	(ant Type1_C
	0)	Test Site Identification NumberN/A
		Fecal Coliform Sample Method
		I Membrane Filter
•	2)	Type of Effluent Disposal or Reclamed Water Reuse
		Golfcourse Spray Irrigation
	3)	Limited Wet Weather Discharge Activated
		🔲 Yes 🛄 No 🇮 Not Applicable
•	4)	Cumulative Days of Wet Weather Discharge <u>N/A</u>
	(5)	Plant Statting
-		Day Shuft Operator Class <u>C</u> Cert. No <u>8863</u>
		Evening Shift Operator Class Cert. No
		Night Shift Operator Class Cert. No
		Lead Operator (1/1/100 A-6665

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mgd	050053	159
(17) Permitted capacity	mgd	—	,200
(18) Three-month average daily flow	mgd	_	.162
(19) Percent of permitted capacity	9⁄6	_	192
(20) CBOD ₅ Effluent	mg/L	060082	4,5-
(21) CBODs Effluent	lbs/day	-	5.9
(22) TSS Ettluenk	mg/L	900201	1.4
(23) TSS Etfluent	ibs/day	-	1, 85
(24) Minimum pH		_	5,9
(25) Maximum pH		_	6.9
(26) Total N	mg/L	000600	
(27) TKN	mg/L	000625	
(28) Ammonia (NH3 · N)	mg/L	013000	
(29) Nitrale	mg/L_	071850	
(30) Total Phosphorus	mg/L	000665	
(31) Minimum Chlorine Residual	mgr		1.4
(32) Maximum Ohlonne Residual	mgi	-	5.0
(33) Other Effluent Parameters		 	
Turbidity (MIN)	NTU	<u> </u>	0,43
Turbidity (MAX)	NTU	İ	3,0
Fecal Coliform	M/F		21
	 _		
			
			L

OLA Form 17 40130074 Desirettic Instantion Province Provi From Tax Linetty Chartering Resource (server Data Arty 1, 1981) OLA Assessment Tax / set in Str. DDI:

							INIC	/ 1(1	•• y	C P	u		, · ·	CPC								
																Moot	For	hore	1010	¥.,	19	97
3	4)			မို						_			.	.	.	MON	r = 1	/ U.X.A 7~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		שנאי רי	,	/ /.
	Elow Grad	CNorine Residual after Contact	Chlorine Resolual after Dechlorination	0 ⁸¹	TSS Influent (TIQ/L)	CRODI EMUMI (MOV) te	TSS Emueri (mg/L)	pH Effluent	TKN Effluen (mg/L)	NH3 · N Effluent (mg/L)	Nikale Emueni (moll); te	Total P Etiluent (mg/L)	Fecal Coliform (#/100ml)	Turb. (NTU)	Résiduals <i>MG</i>	There	10					
1	166,260	5,0		ļ	ــــــ			6.7					ļ	1/23	L	261	L		<u>i</u>	ļ	ļi	
2	181,673	5.0		↓	150		<1	6.4	ļ	L			<u> </u>	1.24		305	 	L	<u> </u>		·	
3	44,469	5.0	 	Ļ	108		<1	6.8					KL.	,85		300	I	Į	↓	Į	<u> </u>	
<u> </u>	144,468		\	 				6.9					<u> </u>	. 84		229	 	Ì	į .			i
~5	149.131	1/2	 	f	146	├	4.9	6.5	ļ				</th <th>_8Z</th> <th></th> <th>229</th> <th></th> <th> </th> <th>i—</th> <th></th> <th><u>├</u> ‡</th> <th></th>	_8Z		229			i—		<u>├</u> ‡	
6	153,640			L		!		6.8	<u> </u>				ļ	1.81		303 589 461	ļ 	[<u>!</u>	ļ	<u> </u>	
17	152,137	5:0	 					6.8					 	1.55		<u>532</u>		<u> </u>	-			i
{ <u>2</u>	152,603	5.0			1	Į		6.6					ļ	643		461	<u> </u>	<u> </u>	<u> </u>			
1	18:931	4.8	 		114	i	17	6.1						47		<u>258</u>			<u>i</u>	L		
27	172,164	5.0	ļ		192	┥—┥		6.7					¢./	3,0		12		<u> </u>	1	j	<u></u>	
-5	<u>344</u>	5.0			103		≤ 1	6.6						56		32			!	i		
<u>-</u>		5.0		244	116	7.7	$\frac{\zeta}{\zeta}$	6.9			777		<u> </u>	1.0		13					· · · · ·	
- 7	142050	1.6		<u>K.77</u>	P.17	<u>., </u>	1.2	6.7			46		<u>c./</u>	1.0		2.82				<u> </u>		
, ,	156 854	5.0			-			6,3						193		284			• • • • • • •	<u>:</u> ;	<u> </u>	
7		5.0			7/0	┞───┥	7 .	6, <u>4</u> 5,9						37		29/		• • •	-			<u> </u>
~	191 339 156 353	4,0		·	<u>710</u> 196		<u>ل ک</u>	2.7					</th <th>73</th> <th></th> <th></th> <th></th> <th></th> <th><u>, </u></th> <th>· · · · · ·</th> <th></th> <th><u> </u></th>	73					<u>, </u>	· · · · · ·		<u> </u>
7	149.465	5.0			176	<u> </u>	4,0]	6.5					<u><</u>	1.34	011	101						
Ť		5.0			234			6.9					<1		ATAC	<u>33</u> 87				÷		
2	132,836				254	ť	1.0!	6,6. 6,8					$\leq i$	68	- <u>-</u>	31:					- <u>.</u>	
7	141,327	50			<u>677</u>		1.0	6,8	{		+		</th <th>,51</th> <th></th> <th>282</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>	,51		282						
z	185.526				j i			6.3				i		52 47	_	- <u>286</u> -					<u> </u>	
~3		50			438	t t	17	6.0						188	_	104						
7	134, 38Z			Z/Z		1.9		6,8			0.18		</th <th></th> <th></th> <th>77</th> <th></th> <th></th> <th></th> <th>· · · · ·</th> <th></th> <th></th>			77				· · · · ·		
- 7	155.396				~~	<u>" / </u>		6,5		i	~/&			1,4		216						
	151,427	40			252			67					</th <th></th> <th>_</th> <th></th> <th>{</th> <th>;</th> <th></th> <th><u>.</u></th> <th></th> <th></th>		_		{	;		<u>.</u>		
- 7	161,465							6.6		i				2.0		16.8 780		;			<u>:</u>	`
3	143,553		2					6.6	{	{				2.7		5	—i	i		÷	<u> </u>	
-1								<u></u>			-+			<u>≈:</u>					†		<u>-</u>	;
1			1.															i			+ -	
1												ł								+	- †	

Domestic Wastewater Treatment Plant Monthly Operating Report

d 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 mation is true, complete, and accurate.

1eco iam ied re (mease Type) Willing 5ELOY Dany Name Utilitas INC

Date 3-10-97

Telephone No

FILE

	<u> </u>	$\cdot \nu$
OLA Aura 17-401 800(1) Demostic Washing		
Parmiting Manager	Report	
Eneral Care July 1 1901		
01# ************************************		.

Domestic Wastewater Treatment Plant Monthly Operating Report

	Mand 1997
	Monin // Arch year 1997
(2)	Plank's DER Identification Number 3048203712
~ (3)	Plant Name Wedgefield Utilities
(4)	Plant Address 19204 Merdith Pky
~ (5)	CityOrlando
(6)	County_Orange
ന	Phone Number407-568-6787
	Permit Number
~ 19	
·	Test Site Identification Number <u>N/A</u>
	Fecal Coliform Sample Method
-1	Membrane Filter
~ 21	Type of Effluent Disposal or Reclaimed Water Reuse
(ے	Golfcourse Spray Irrigation
-	
3)	Limited Wet Weather Discharge Activated
~	
4}	Cumulative Days of Wet Weather DischargeN/A
(5)	Plant Statting
~	Day Shult Operator Class <u>C</u> Cert. No. <u>8863</u>
	Evening Shift Operator Class Cert. No
	Night Shift Operator Cuss Cert. No.
	Lead Operator William A. 6665 Signature Cert No
~	() .
	V

Parameter	Units	STORET	Value
(16) Monthly average daily flow	mgd	050053	, 164.5
(17) Permitted capacity	mgơ	-	200
(18) Three-month average daily flow	mgd		.160
(19) Percent of permitted capacity	96		80%
(20) CBODs Effluent	mg/L	080082	3.1
(21) CBODs Effluent	lbs/day	-	4,2
(22) TSS Effluent	mg/L	900201	1.2
(23) TSS Effluent	losiday		1.6
(24) Minimum pH	l 		6,0
(25) Maximum pH			7,/
(26) Total N	mg/L	000600	
(27) TKN	mg/L	000625	
(28) Ammonia (NH3 N)	mg/L	000610	
(29) Nitrate	mg/L	071850	4,68
(30) Total Phosphorus	mg/L	000665	
(31) Minimum Chlorine Residual	mg/L	-	1, Z
(32) Maximum Onlorine Residual	mg/L	_	<u>5,0</u>
(33) Other Effluent Parameters			
Turbidity (MIN)	NTU		0,5
Turbidity (MAX)	NTU		28
Fecal Coliform	M/F	-	<1
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OCA for Detrotte Vanes and Susanan Part
Controller Vienerated Streament Parts
Feet Tex
Parrie Data Judy 5, 1984
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3	4)			C)												Mont	Λ	larc.	h	Yesau	19	97
ney a ine monin	Flow (mga)	Chlorine Residual after Contact	Chlorine Residual after Dechtorination	CBODS Intruent (more) to	TSS influent (mg/L)	B hr. composite	TSS Efflueri (mg/L)	ph Effuent	TKN Ethuen (mol.)	NH3 · N Efficient (mg/L)	Nicale Emuent (mort) 8 hr. composite	Total P Etflueni (mg/L)	Fecal Coliform (#100mi)	Turb. (NTU)	Rësiduals (MG)	Irrigation (MG)	Rain Fall (Inch)					
7	. 164	3,0		-	1			6,3					1	23	「丁	1378			t 1	1		;
2	.206	3,7			158		1,2	6,4					<1	2.4		410	1	1	i			·;
3	1135	5.0			152		41	7, 1						2,8		410	l		[
4	.146	5.0	ļ		176		10	6,8						0.7		1507					į	
~5	1.89	47			152		< 1	6.7					<1	0,5		197/					į	
0 	145	3,6 2.3		:27	160	4,1	6,5	6,7			3,0		<1	1.1		,456					Ļ	
×	150	5.0			<u> </u>	┠──┤		6,3	<u> </u>					49		,436						
9	181	5.0			192	 	21	6,4				÷		2,3		,5/1						
10	,155	5.0			172		1,5	6,9					27	$\frac{2}{1,3}$		553				.		
17	57	2,7						6,7					- / -	1,0		558			{			
12	186	1,6			24			6.9					<u><1</u>	1.0		520					<u> </u>	·
13	150	1.7		207	97	2.7	<br </td <td>6,9</td> <td></td> <td></td> <td>2,05</td> <td></td> <td>2/</td> <td>16</td> <td>-+ -</td> <td></td> <td>2.11</td> <td></td> <td></td> <td></td> <td>* †</td> <td></td>	6,9			2,05		2/	16	-+ -		2.11				* †	
14	,177	4,3						6.5						2,0	-	043!	77			;	······	
15	200	50						6,7				1		1,51	1	043 1002 272	414		<u>ن</u> ا	1	:	
16	, 184	28			242		1,2	6,0	1					1.8		272	- 1	1	· ÷	,		
-7	130	43	-+		278	!	<br 2, 0	6,8					4/	1./		273	1	;				
러	149	5.0	·		240	i	2,0	6.4						1.01		320			i			-
	.137	12			242		2.0	6.9				_	<u><!--1</u--></u>	0,81		20%					•	
Ť	.16 <u>3</u> 137	1,4	ť	164	14Z	2,7	2,2.				<u> 11.0</u>		21:	0.9	_	.070						
z		5,0	+			;-		6,9					i	181		<u>203</u>			-			
~3		2.6		ł	218	i		6,6		<u></u>	<u>+</u>	\rightarrow		15		145			_ •			
.4		4,7			184		<	6.8						1.4		304						
- 3		24	—-†		174			6,8		+	-+			1.4!	+	,450				<u> </u>		
.6	176	24		190	1615			6,9			7.2			0,9		<u>459.</u> T		<u></u>		<u> </u>		
亚	160	2,2	ľ		146		2.14	5,9		Ť			_	1.01		223	!	<u> </u>	i		<u>.</u>	
8	144	5.0						.9						2,3		45	i	-+				
-1		5,0					f	18						.3	-+-#	440	<u>त</u> ्त		-+			;
-] -		5.0			202		2.8	6,8						20		ozd	5.51	— İ			<u>†</u>	
1	16/	5.0		/	160	6	1.51	5.5						8		30/1	1				<u> </u>	

d 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 mation is true, camplete, and accurate

Tham M Alla ne (messe Type) William SECOY Dany Name WEDGEFIELD Utilites ...

Date _ 4-7-97

Telephone No (Please Type) 407-568-6787

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OLA Nem & 17-601 800(1)		
GER Ann. a. 17-601.800(1) Demotic Westering Ann. Tap. Manky Coursing P	er Treasmant Place	
Charter Care, July 1 1991		-
		÷ •
I	100 -	<u> </u>

	'n	Month April Year 1997
		Plant's DER Identification Number 3048203712
~	 (3)	Plant Name Wedgefield Utilities
	(-)	
	(4)	Plant Address 19204 Merdith Pky.
- .	(5)	CityOrlando
	(6)	County_Orange
	ത	Phone Number 407-568-6787
	(8)	Permit Number
-		ant Type <u>1-C</u>
		Test Site Identification Number <u>N/A</u>
		Fecal Coliform Sample Method
^	2)	Type of Effluent Disposal or Reclaimed Water Reuse
		Golfcourse Spray Irrigation
	3)	Limited Wet Weather Discharge Activated
	4)	Cumulative Days of Wet Weather Discharge <u>N/A</u>
	15)	Plant Statting
~		Day Shuft Operator Class C Cert. No. 8863
		Evening Shift Operator Class Cert. No
		Night Shift Operator Class Cert. No
		Lead Operator William Jum A-6/6/65
		0

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Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mgd	050053	155
(17) Permitted capacity	mgd	e	200
(18) Three-month average daily flow	mgd	- ,	15-9
(19) Percent of permitted capacity	96	_	79%
(20) CBODs Effluent	mg/L	080082	3,45
(21) CBODs Effluent	ibs/day	-	5.7
(22) TSS Effluent	mg/L	900201	1.7
(23) TSS Etfluent	tos/day	-	28
(24) Minimum pH		-	5,7
(25) Maximum pH		-	7,1
(26) Total N	mg/L	000600	
(27) TKN	mg/L	000625	
(28) Ammonia (NH ₃ ·N)	mg/L	000610	
(29) Nitrale	mg/L	071850	0,8 904
(30) Total Phosphorus	mg/L	000665	
(31) Minimum Chlorine Residual	mg/L	-	1,1
(32) Maximum Onlonne Residual	mg/L	-	5.0
(33) Other Effluent Parameters			
Turbidity (MIN)	NTU		0,4
Turbidity (MAX)	עזיא		2,1
Fecal Coliform	M/F		<1
		_	

17.679 0001
OCA Form 17-601900(1) Domestic Wasterger Trasmost Parts
Form Taxe Ady 1, 1991
Charter Dark -
OCH Appropriate two

							IVIC	DUILL	uy (Op	eral	ing	ј н	epo	m							
.3	4)			a)												Mont	1	pr	i)	Year	19	<u> </u>
		Chlorine Residual after Contact	Chiorine Residual after Dechlorination	CBODS in Ucon (more)	TSS Influent (mg/L)	CBOD, Effuent (mg/1) te	TSS Etliveni (mg/L)	pH Effluent	TKN Effluent (mg/L)	NH3 · N Effluent (mg/L)	Nitrate Effluent (mg/L), te	Total P Effiuent (mg/L)	Fecal Col·lorm (#/100ml)	Turb. (NTU)	Rësiduals (MG)	Irrigation (MG)	Rain Fall (inch)					
7	#13550	50						6.6						1.2	ļ	493			1			
2	183075	5.0		111-	2/6	29	26	6,6					21	1,0		474	 	 	<u> </u>	i		i
2	147550	415 5,0		143	176	22	2.3	6.4			08		<u></u> <1.	1.2	ļ	479		 	<u> </u>		<u> </u>	
		2,0 2,7			<u> </u>			6,4						1.0		5136					`	<u> </u>
5	18/861	3.2			194		3,2	6.7 5.7					╂───	1,6		458						· · - ·¦
7	151525	3,2 5,0		1	194 138 90			6.6					<1	13	ļ	427	. 5				<u> </u>	
3	63623	5,0		_	90			6.(1,3		437						—— 1
<u> </u>	150630	5,0			122 280		1,9	6.9					5/	10.7		1327	1			1		
\underline{o}		5,0			280		1.4	20					<١	08		481				i	i	
~/		5.0						6.9						1.1		464	1				i	
4		5,0 4,7			2.0	·		6,8						41	4	001				!	- 1	:
4		5.0			206		13	6,8						1.5		12.76	1		i			
Ę	148586	50			164		1,9	6,9				ł	</td <td>1.4 0.3</td> <td></td> <td>mit</td> <td>- 4- 1</td> <td><u> </u></td> <td></td> <td></td> <td></td> <td></td>	1.4 0.3		mit	- 4- 1	<u> </u>				
5	147099	5.0			114		<1	6,9			··{	·		0.7		0/1	. [.]					
-2	1441772	50	<u> </u> t	2/7		4,0	2,5	6,9			204		</td <td>1,0</td> <td></td> <td>005</td> <td>* 1</td> <td></td> <td></td> <td></td> <td></td> <td><u> </u></td>	1,0		005	* 1					<u> </u>
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4	160300	4.8]			Ĩ	6.9						0.91		,111			·····		1	
- 7	171920	5,0					!	1,0						1.6		486	•				·	——
7	91996	کر						7,1						2,1		508			_	••••••••••••••••••••••••••••••••••••••	•	
~	152149	50		<u></u>	<u>67</u>		(1	6.91			i			0,8		451			•	•		
- 1		5.0			57		1.4	5.8	-+				</td <td>0.6:</td> <td>-</td> <td>357</td> <td>1.5'</td> <td>1</td> <td></td> <td></td> <td>·</td> <td></td>	0.6:	-	357	1.5'	1			·	
्रौ	147684	.0		<u> </u>	68	/	,5 1	5.8				<u> </u>	</td <td>0.5</td> <td></td> <td>357 355</td> <td></td> <td></td> <td>•</td> <td></td> <td></td> <td></td>	0.5		357 355			•			
đ	792/4							6,8 (, 9						0.4		591.	i		i	· · · ·		
乖	792/8 4	0			206		01	- 7						0.5		001	<u>//</u>					
8	132605	20		-t	46		9	29					\overline{z}	0.5 0.7	121	6/7					<u> </u>	
~1.	40554	4		- f		ť		(.9 .9				f	-/ ¥									
- 14	7/167 1	. /			73	1	26	5,6		-+			c7 6	5,2				†			— —	
1	<u>.</u>			1																		
	1405542	. 1			73	/,	2.6	6, 9 6, 6				-	k	0.5 0,8		00/ 283						

d 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 mation is true, complete, and accurate

Uliam ed re (Prease Type) _ William SECOY Ipany Name WEDGEPIRID UTILITICS

Date _ 5-12-97	
Date	

Telephone No (Please Type) 402-568-678-7

<u></u>
OER Form 17-601900(1)
Con Tee Monthly Operating Report
Stilling Open July 1, 1991
DEA Approxim No
(Feed in by DBR)

	(1)	MAY Year 1997
		Plant's DER Identification Number 3048203712
-		Wodgofiold Utilities
	[3)	Pant Name
	(4)	Plant Address 19204 Merdith Pky.
•	(5)	xyOrlando
		County_Orange
	m	Phone Number 407-568-6787
	(9) (9)	Permit Number
~		ant Type1_C
		fest Site Identification NumberN/A
	1)	Fecal Coliform Sample Method
~		* Membrane Filter
	2)	ype of Effluent Disposal or Reclaimed Water Reuse
		Golfcourse Spray Irrigation
	3)	imited Wet Weather Discharge Activated
		Yes No T Not Applicable
~	4)	Cumulative Days of Wet Weather DischargeN/A
	15)	Plant Staffing
~		Day Shift Operator Class <u>C</u> Cert. No. <u>8863</u>
		vening Shift Operator Class Cert. No
		light Shift Operator Class Cert. No
		ead Operator William Decon A-6665
		Signature & Cert No.

ParameterUnitsSTORET CodeValue(16)Monthly average daily flowmgd050053,15%(17)Permitted capacitymgd-,200(18)Three-month average daily flowmgd-,159(19)Percent of permitted capacity96-,600(20)CBODs Effluentmg/L080082 4.1 (21)CBODs Effluentibs/day- 5.4 (22)TSS Effluentmg/L900201 1.0 (23)TSS Effluentibs/day- 1.3 (24)Minimum pH 6.4 (25)Maximum pH 7.6 (26)Total Nmg/L000600(27)TKNmg/L000610(29)Nitratemg/L000665(30)Total Phosphorus'mg/L000665(31)Minimum Chlorine Residualmg/L $ s.0$ (33)Other Effluent Parameters- $s.0$ Turbidity(MIN)NTU 3.0 FecalColiformM/F 4.1			······	
(17) Permitted capacitymgd200(18) Three-month average daily flowmgd159(19) Percent of permitted capacity%800(20) CBODs Effluentmg/L080082 $4'.1$ (21) CBODs Effluentibs/day $5.4'$ (22) TSS Effluentmg/L900201 1.0 (23) TSS Effluentibs/day 1.3 (24) Minimum pH $6.4'$ (25) Maximum pH 7.0 (26) Total Nmg/L000600(27) TKNmg/L000610(28) Ammonia (NH3 - N)mg/L000665(29) Nitratemg/L071850 $5.1'.31$ (30) Total Phosphorusmg/L000665(31) Minimum Chlorine Residualmg/L- $2.4'$ (32) Maximum Chlorine Residualmg/L- 5.0 (33) Other Effluent Parameters- 5.0 Turbidity (MIN)NTU $0.4'$ Turbidity (MAX)NTU 3.0	Parameter	Units		Value
(18) Three-month average daily flowmgd159(19) Percent of permitted capacity9680(20) CBODs Effluentmg/L080082 4.1 (21) CBODs Effluentibs/day- 5.4 (22) TSS Effluentmg/L900201 1.0 (23) TSS Effluentibs/day- 1.3 (24) Minimum pH- 6.4 (25) Maximum pH- 7.0 (26) Total Nmg/L000600(27) TKNmg/L000625(28) Ammonia (NH ₃ - N)mg/L000665(30) Total Phosphorusmg/L000665(31) Minimum Chlorine Residualmg/L-(32) Maximum Chlorine Residualmg/L-Turbidity(MIN)NTU 0.4 Turbidity(MIN)NTU 0.4	(16) Monthly average daily flow	mgd	050053	.158
(19)Percent of permitted capacity96 RO (20)CBODs Effluentmg/L080082 4.1 (21)CBODs Effluentibs/day- 5.4 (22)TSS Effluentmg/L900201 1.0 (23)TSS Effluentibs/day- 1.3 (24)Minimum pH 6.4 (25)Maximum pH 7.0 (26)Total Nmg/L000600(27)TKNmg/L000610(28)Ammonia (NH3 - N)mg/L000610(29)Nitratemg/L071850 $5.1.31$ (30)Total Phosphorusmg/L000665(31)Minimum Chlorine Residualmg/L- 2.4 (32)Maximum Chlorine Residualmg/L- 5.0 (33)Other Effluent Parameters- 5.0 Turbidity(MIN)NTU 0.4 Turbidity(MAX)NTU 3.0	(17) Permitted capacity	mgơ		.200
(20) CBODs Effluent mg/L 080082 4.1 (21) CBODs Effluent ibs/day - 5.4 (22) TSS Effluent mg/L 900201 1.0 (23) TSS Effluent ibs/day - 1.3 (24) Minimum pH 6.4 (25) Maximum pH 7.0 (26) Total N mg/L 000600 (27) TKN mg/L 000610 (28) Ammonia (NH ₃ - N) mg/L 000610 (29) Nitrate mg/L 000665 (30) Total Phosphorus mg/L 000665 (31) Minimum Chlorine Residual mg/L $-$ (32) Maximum Ohlorine Residual mg/L $-$ (33) Other Effluent Parameters - 5.0 (33) Other Effluent Parameters - 5.0 Turbidity (MIN) NTU 04	(18) Three-month average daily flow	mgd		.159
LEGDOUCHSLinder 10^{-1} 7.1 (21) CBODsEffluentmg/L900201 1.0 (22) TSSEffluentmg/L900201 1.0 (23) TSSEffluentibs/day $ 1.3$ (24) Minimum pH 6.4 $ 6.4$ (25) Maximum pH 7.0 $-$ (26) Total Nmg/L000600 $-$ (27) TKNmg/L000625 $-$ (28) Ammonia (NH3 - N)mg/L000610(29) Nitratemg/L071850(30) Total Phosphorusmg/L000665(31) Minimum Chlorine Residualmg/L $-$ (32) Maximum Chlorine Residualmg/L $-$ (33) Other Effluent Parameters $ 5.0$ Turbidity (MIN)NTU 0.4 Turbidity (MAX)NTU 3.0	(19) Percent of permitted capacity	96	-	.80
(22) TSS Effluent mg/L 900201 1.0 (23) TSS Effluent tbs/day - 1.3 (24) Minimum pH 6.4 (25) Maximum pH 7.0 (26) Total N mg/L 000600 (27) TKN mg/L 000610 (28) Ammonia (NH ₃ - N) mg/L 000610 (29) Nitrate mg/L 000665 (30) Total Phosphorus mg/L 000665 (31) Minimum Chlorine Residual mg/L (32) Maximum Chlorine Residual mg/L (33) Other Effluent Parameters 5.0 Turbidity (MIN) NTU 0.4 Turbidity (MAX) NTU 3.0	(20) CBODs Effluent	mg/L	080082	4.1
(23) TSS Effluent Its/day - 1.3 (24) Minimum pH $6.4'$ (25) Maximum pH $7.6'$ (26) Total N mg/L 000600 (27) TKN mg/L 000625 (28) Ammonia (NH ₃ - N) mg/L 000610 (29) Nitrate mg/L 071850 (30) Total Phosphorus mg/L 000665 (31) Minimum Chlorine Residual mg/L (32) Maximum Chlorine Residual mg/L (33) Other Effluent Parameters 5.0 Turbidity (MIN) NTU 0.4' Turbidity (MAX) NTU 3.0	(21) CBODs Effluent	lbs/day		5.4
(24) Minimum pH $6.4'$ (25) Maximum pH $7.0'$ (26) Total N mg/L 000600 (27) TKN mg/L 000625 (28) Ammonia (NH ₃ - N) mg/L 000610 (29) Nitrate mg/L 071850 (30) Total Phosphorus mg/L 000665 (31) Minimum Chlorine Residual mg/L (32) Maximum Chlorine Residual mg/L (33) Other Effluent Parameters 5.0 Turbidity (MIN) NTU 0.4' Turbidity (MAX) NTU 3.0	(22) TSS Effluent	mg/L	900201	1.0
(25) Maximum pH - 7.0 (26) Total N mg/L 000600 (27) TKN mg/L 000625 (28) Ammonia (NH3 - N) mg/L 000610 (29) Nitrate mg/L 071850 (30) Total Phosphorus mg/L 000665 (31) Minimum Chlorine Residual mg/L - (32) Maximum Chlorine Residual mg/L - (33) Other Effluent Parameters - 5.0 Turbidity (MIN) NTU 0.4 Turbidity (MAX) NTU 3.0	(23) TSS Effluent	lbs/day	_	1.3
(25) Maximum pH - 7.0 (26) Total N mg/L 000600 (27) TKN mg/L 000625 (28) Ammonia (NH ₃ - N) mg/L 000610 (29) Nitrate mg/L 071850 (30) Total Phosphorus mg/L 000665 (31) Minimum Chlorine Residual mg/L - (32) Maximum Chlorine Residual mg/L - (33) Other Effluent Parameters - 5.0 Turbidity (MIN) NTU 0.4 Turbidity (MAX) NTU 3.0	(24) Minimum pH		-	6.4
(27) TKN mg/L 000625(28) Ammonia (NH3 - N) mg/L 000610(29) Nitrate mg/L 071850(30) Total Phosphorus mg/L 000665(31) Minimum Chlorine Residual mg/L $-$ (32) Maximum Chlorine Residual mg/L $-$ (33) Other Effluent Parameters mg/L $-$ Turbidity(MIN)NTU $0.4'$ Turbidity(MAX)NTU 3.0	(25) Maximum pH		_	
(28) Ammonia (NH3 - N)mg/L000610(29) Nitratemg/L071850(30) Total Phosphorusmg/L000665(31) Minimum Chlorine Residualmg/L $-$ (32) Maximum Chlorine Residualmg/L $-$ (33) Other Effluent Parameters1000000000000000000000000000000000000	(26) Total N	mg/L	000600	
(29) Nitrate mg/L 071850 $5.7.31$ (30) Total Phosphorus mg/L 000665 (31) Minimum Chlorine Residual mg/L $ 2.4$ (32) Maximum Chlorine Residual mg/L $ 5.0$ (33) Other Effluent Parameters 3.0 0.4 Turbidity(MIN)NTU 0.4	(27) TKN	mg/L	000625	
(30) Total Phosphorusmg/L000665(31) Minimum Chlorine Residualmg/L-2.4(32) Maximum Chlorine Residualmg/L-5.0(33) Other Effluent Parameters-5.0Turbidity(MIN)NTU0.4Turbidity(MAX)NTU3.0	(28) Ammonia (NH3 - N)	mg/L		
(31) Minimum Chlorine Residualmg/L-2.4(32) Maximum Chlorine Residualmg/L-5.0(33) Other Effluent ParametersTurbidity(MIN)NTU0.4Turbidity(MAX)NTU3.0	(29) Nitrate	mg/L	071850	5.1.31
(32) Maximum Ohlonne Residualmg/L-5.0(33) Other Effluent ParametersTurbidity(MIN)Turbidity0.4Turbidity(MAX)NTU3.0	(30) Total Phosphorus	mg/L	000665	
(32) Maximum Chlonne Residualmg/L-5.0(33) Other Effluent ParametersTurbidity(MIN)Turbidity0.4Turbidity(MAX)NTU3.0	(31) Minimum Chlorine Residual	mĝ/L	-	2.4
Turbidity(MIN)NTU0.4Turbidity(MAX)NTU3.0	(32) Maximum Ohlonne Residual	mg/L	-	
Turbidity (MAX) NTU 3.0	(33) Other Effluent Parameters			
	Turbidity (MIN)	NTU		0.4
Fecal Coliform M/F 21	Turbidity (MAX)	NTU		3.0
· · · · · · · · · · · · · · · · · · ·	Fecal Coliform	M/F		∠]
	· ·			
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DER form	17-601900(1)
Form Tale_	17-801900(1) Domestic Wastewater Treatment Plant Monthly Operating Report
Effective De	July 1, 1991
DER Apok	aton No
	(Fried in by DER)

	(34)																Month	M	Y		Year	<u> 199</u>	7
~	(34)										Ŷ			ह				(inch)			Ţ		
				_	ਵਿੱ		CBODs Effluent (mg/L)			$\overline{}$	- N Effluent (mg/L)	Effluent (mg/L)	g/L)	Fecal Coliform (#/100ml)	3	(me)	(me)	X				ļ	
	Ę		ler	Chlorine Residual after Dechlorination	Ê	TSS Influent (mg/L)	E E	TSS Effluent (mg/L)		TKN Efftuent (mg/L)	して	E S	Effluent (mg/L)	ĺ.ŧ	(U+N)		3				ļ		
	Month		sid			<u>(</u>	ଳୁଷ୍ଣ	ц (ц		ב ד	flue	E E	, jě	E	3	RESIDUAIS	2	FAII			ļ		
	the	(pő	n Re	٣Ę	Ē	nen	Ē	luer	len	flue	iii 7	E E S	Ē		~	ŝ	3	ě.					
<u> </u>	5	E)	ιΞŬ	ĔŎ	Ő	lu .	l ő.	Ē	pH Effluent	교	- F	Nitrate 8 H &	<u>م</u>	ज्ञ	TURB	ŝ	è.	ર					
	Day	Flow (mgd)	Chlorine Residual after Contact	afte	CBODs Inlivent (mg/L)	TSS		ISS	F	TK	۴N	Ž90	Total	ية ا	コ	2X	TRRIGATION	RAW					
	1	. 148	5.0		141	112	5.3	1.6	6.8			5.7		41	0.5		.343						
	2	.120	2.4			·			6.9					<u></u>	0.6		.477			<u> </u>			
_	3	.166	3.2		2	اعمد حد			6.8		. <u>.</u>				0.4		.475						
	4	.170	5.0			102			6.9						4	- <u></u>	369						,
	5	.155	4.8			140		1.8	6.9					41	6.4		1.52						
	6	.165	5.0			186		1.8	7.0						0.7		991 512						
	7	.140	5.0			188		1.6	2.0					<u> </u>	1.1		558						
	8	.153	4.3		156	<u>189</u>	4.0	1.8	7.0			.34		4/	0.9		-237				1	1	<u> </u>
-	ł	172	5.0			_			2.0						1.0		514	<u> </u>		<u> </u>	 i	;	
	•	.206	5.0			لله در			6.9		<u> </u>				1.4		.475	<u> </u> −				Ì	
	11	- 222	5.0			54		41	7.0		1			41	1.0		0	1			i	1	
	12	·212 ·14/	5.0			21			7.0						1.0		.040				ĺ	1	
	14	. /88	1.7 5.0		142	169		41	6.4		i			1	0.8		.527	!			i	:	
	15	,161	4.1		/42	702		-1	6.9			5.59		41	0.4		479	1		i	İ	1	
-	16	. //8	5.0						7.0					 	0.4	i	499				I I	1	
	17	.166	2.8						6.8					1	0.7		.492	1			:	1	
	18	. 148	5.0		· ·				6.5		1				0.9	1	\$427				;		
	19	4	5.0						2.0		1				1.3		04B	.5				. <u> </u>	
	10	. 146	5.0						6.6					}	0.8		,016	:	-		·		
<u> </u>	21	.150	4.5						6.8						0.7	 	510			· ·			·
	22	, 173	2.5			188		41	6.7			ļ		41	0.8	! 	505			•			
	23	.135	3.6					<u> </u>	7.0		L			<u> </u>	0.7	 	485					1	
	24	152	2.4					1 \$	6.7					 +	0.8		.477	· ·		•	•	·	
	25	. 170	5.0	<u> </u>	ļ	251		1.5	65		<u> </u>			ļ	1.3		,430 021	•5					
	26	. 203	5.0		<u> </u>				6.6					-	1.8	i	1021	2.0					
-			5.0		ļ	267		1.7	7.0			<u> </u>	···-	41	1.2	 	.010	1.1					··· · ·
			5.0			251		1.5	6.7		 				0.6		011	• 4		├			····'
		.166	5.0		289	124	3.1	41	6.7			.31		41	0.5		612						
		.074	5.0				 		6.9		 		_	┨────	1.3		008			├		<u> </u>	بـــــــــــــــــــــــــــــــــــــ
	31	. 107	5.0	<u> </u>	<u> </u>		1	l	6.6		1			1	3.0	1	.017			L,	1	1	

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 information is true, complete, and accurate.

iam Signed: Name (Picase Type) WILLIAM SECOY

Company Name WEDGE FIELD UTILITES

Date: 6-10-97

Telephone No. (Please Type) 407-568-6782

Page 3 of 3

	···· () ··· · · · · ·
FILI	OFR Form a 17-501.900(1) Comestic Wastewater Treatment Plant Form Tele Monthly Operating Report Effective Dem_July 1, 1991 DER Approach No

(1)	Month Year997
(2)	Plant's DER Identification Number 3048P03712
~ (3)	Plant Name WEDGEFIELD UTILITIES
(4)	Plant Address 19204 MERDITH_PKY
• •	City ORLANDO
(6)	County ORANGE
(7)	Phone Number
(8)	Permit Number <u>D - 048-259584</u>
(9)	nt Type1 - C
10)	Test Site Identification NumberN/A
11)	Fecal Coliform Sample Method
	X Membrane Filter Most Probable Number
1 2)	Type of Effluent Disposal or Reclaimed Water Reuse
	GOLFCOURSE SPRAY IRRIGATION
13)	Limited Wet Weather Discharge Activated
	Yes No X Not Applicable
1 4)	Cumulative Days of Wet Weather DischargeN/A
15)	Plant Staffing
~	Day Shift Operator Class C Cert. No 8863
	Evening Shift Operator Class Cert. No
	Night Shift Operator Class Cert. No
	Lead Operator William Alun A-6665
-	Signature Cert No.

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mgd	050053	. 175
(17) Permitted capacity	mgd	—	.200
(18) Three-month average daily flow	mgơ		. 163
(19) Percent of permitted capacity	%	—	83%
(20) CBODs Effluent	mg/L	080082	1.3
(21) CBODs Effluent	· ibs/day	-	1.9
(22) TSS Effluent	mg/L	900201	0.6
(23) TSS Effluent	lbs/day	—	0.9
(24) Minimum pH		_	6.5
(25) Maximum pH		-	7.0
(26) Total N	mg/L	000600	
(27) TKN	mg/L	000625	
(28) Ammonia (NH3 · N)	mg/L	000610	
(29) Nitrate	mg/L	071850	1.8
(30) Total Phosphorus	mg/L	000665	
(31) Minimum Chlorine Residual	mg/Ľ	-	1.7
(32) Maximum Chlonne Residual	mg/L	—	1.7 5.0
(33) Other Effluent Parameters			
34 Turbidity [Min]	NTU		0.4
35 Turbidity [Max	JNTU		4.2
36 Fecal Coliform	M/F		1

~~~~	17-601900(1)
	17-601500(1) Domenic Wastewater Treatment Plant Monthly Operating Report
	July 1, 1991
DER ADDH	
	(Filed v) by DER)

(34)									-							Month	JL	INE		Year	199	)7
<u> </u>						··												-			T	
Day of the Month	Flow (mgd)	Chlorine Residual after Contact	Chlorine Residual after Dechlorination	CBODs Intluent (mg/L)	TSS Influent (mg/L)	CBOD, Effluent (mg/L)	TSS Etfluent (mg/L)	pH Effluent	TKN Effluent (mg/L)	NH3 - N Effluent (mg/L)	Nitrate Effluent (mg/L) BHE Composite	Total P Effluent (mg/L)	Fecal Coliform (#/100ml)	TURDIDITY (NTU)	RESIDUALS (MG)	IRRICATION (me)	RAIN FAIL (INCH)					
		ļ			158	~40		6.9					<u> </u>	1.8		.018	- •-		<u> </u>			;
Ţ	.163	5.0			138		2.6	7.0					41	3.6	6024		1.4					
<u> </u>	145	5.0			110		4.9	6,9						2.2		.017	- • •		1		İ	
-3	.236	5.0						6.5						y. 2		.006	- 0-	¥-	Goi.	c to	reid	et .
<u>У</u> 5	<u>6</u>	5.0						20					<u> </u>	3.1		614	-0-	*	Pe	δ		
	.164	5.0	<u> </u>					7.0						0.6		614						
2	.190	5.0						2.0						0.9		010	-0-					
8	.217	4.3			163		41	45						10.9		.023	-0-				1	
<u>9</u>	238_	5.0	1		134		41	65				_	41	10.8	1	015	-0-		Ì			
10	.77	5.0						6.8						0.4		027	1.5				į	
<u> </u>	, 169	5.0			546		41	6.6					41	0.6		.017	0.2					
12	. 197	5.0	i	188	155	1.0		6.6			1.6		1	0.5		028	- 6	_				
13	.175	5.0		l				6.7				_		0.5	,024	021	0.8					
14	, 187	5.0				_		6.8					<u> </u>	0.4		6003	3.5		<u> </u>			
25	. 199	2.1				_		6.6					<u> </u>	0.4		- 0-	1.0		i			
16	. 100	2.0						6.7						0.4		062	2.0				<u> </u>	
12	. 124	2.3						6.7						0.5		- 0 -	0.2				۱ ÷	
18	, 143	5.0		205	108		41	6.7					<1	0.5	l	.001					<u>.</u>	
19	. 120	5.0	i	205	R14	1.7	1.6				1.2		4	0.7		008	- • -		i		<u> </u>	
20	. 258	2.0					l	1.8					<u> </u>	0.5		100Y	1.9					
-21	.159	2.0						6.7		-				0.5	4 1	014	0.4		•			<u>.                                    </u>
22	. 164	5.0	1 /		17B			6.7					ļ	0.5	: <b>}</b>				<u>.                                    </u>			
23	,137	4.0		 	92			6.7					41	0.6	: +	016	-0-	l 	l 		:	
24_	129	5.0	İ	   	170			6.7	İ				<u> </u>	0.5		027	1.0	i .	: +		;	- <b></b>
25	,135	5.0			178		41	6.9		<u> </u>			1	0.5			0,5				:	
26	.146	4.9						6.9	I	<b> </b>	i			0.5		015	0.1		•			
-27	.283	1.7	L		ļ	ļ		6.9		ļ	<b> </b>		<u> </u>	0.4	<u> </u>	-0-	1.3		<u> </u>		;	
28	.174	2.9		L	-		<b> </b>	4.8		<b> </b>			<b> </b>	0.4	<u> </u>	-0-	0.1		ļ			
25	.180	50		<b> </b>	488		1.0	6.6		<b> </b>		 		0.4	<u> </u>	for	0.2		i			
<u>30</u>	143	5.0	ļ		276		<1	6.7					1	0.4		039	- 0 -					
		I	L	!	I	L			L	L			1			<u> </u>	I	L	L			

mead 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 information is true, complete, and accurate.

_____ Signed: SECOY WILLIAM Name (Picase Type) _

Dompany Name WEDGEFIELD Utilities

Date: 7-8-97

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-	17-601.900(1)	
Farm Tata_	17-601.900(T) Demostic Westerniser Treatment Plant Monthly Operating Report	
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DER ADD	(Fred in by OGR)	
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FILE

# Domestic Wastewater Treatment Plant Monthly Operating Report

	(1)	Month	July		Year	1997
	(2)	Plant's DE	R Identifica	tion Number	<u>3048P</u>	03712
-	(3)	Plant Narr	he <u>WEDG</u>	SEFIELD	UTILIT	IES
	(4)	Piant Add	ress#	3100 B	NCROFT	BLV
			- <u></u>			
-	(5)	CityOF	LANDO			
	<b>(</b> 6)	County	ORANGE			
	3	Phone Nu	umber <u>40</u>	7-568-6	787	
	(8)	Permit Nu	mber <u>D</u> -	048-25	9584	
•		ant Type	<u> </u>	с		
	(10)	Test Site I	dentification	Number	N/A	
	(11)	Fecal Coli	form Sampl	le Method		
		XX Memt	orane Filter	Most	Probable N	umber
•.	(12)	Type of E	fluent Dispo	osal or Recta	imed Water	Reuse
		GOLFC	OURSE	SPRAY I	RRIGATI	<u> </u>
	(13)	Limited W	et Weather	Discharge A	ctivated	
		🗌 Yes	No	XX Not A	opicable	
`	(14)	Cumulativ	e Days of V	Net Weather	Discharge	N/A
			·			
	(15)	Plant Staff	ing			
		Day Shift	Operator C	lass <u>C</u>	Cert	No 8863
•		Evening S	ihift Operato	or Class	Cer	No
		Night Shif	• •	Class		. Na
		Lead Ope	rator _	Ulum (	Kurz.	A-6665
					$\overline{U}$	Cert HQ

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mgd	050053	.162
(17) Permitted capacity	mgơ		. 200
(18) Three-month average daily flow	mgd		165
(19) Percent of permitted capacity	96		, 83
(20) CBODs Effluent	mg/L	060082	4.7
(21) CBODs Effluent	lbs/day	-	6.4
(22) TSS Effluent	mg/L	<b>90</b> 0201	.33
(23) TSS Effluent	lbs/day	~	.45
(24) Minimum pH		~	6.4
(25) Maximum pH			7.2
(26) Total N	mg/L	000600	
(27) TKN	mg/L	000625	
(28) Ammonia (NH3 · N)	mg/L	000610	
(29) Nitrate	mg/L	071850	2.1
(30) Total Phosphorus	mg/L	000665	
(31) Minimum Chlorine Residual	mg/L		1.2
(32) Maximum Chlonne Residual	i mg/L		5.0
(33) Other Effluent Parameters			
34 Turbidity [min]	Ntu	İ	0.3
35 Turbidity [ Max]	Ntu		1.5
36 Fecal Coliform	M/F	 	<1
		. 	
 		<b></b>	 
		<u> </u>	L

DER Rom	. 1740C90010
Fern Tele_	17-60190001 Domestic Westernator Steament Plant Monthly Operating Report
Enecure De	July 1, 1991
DER Apon	ation No(Failo in by DER)

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$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	Day of the Month	Flow (mgd)	Chlorine Residual after Contact	Chlorine Residual after Dechlorination	CBODs Intiven (mg/L)	1	CBODs Efficient (mg/L)	TSS Ettluent (mg/L)	pH Effluent	TKN Ethuent (mg/L)	NH3 · N Effluent (mg/L)	Nitrate Ethuent (mg/L)	Total P Effluent (mg/L)	Fecal Coliform (#/100ml)		Residuals (me)	ERRICATION (mG)	1					
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$ \begin{array}{c c c c c c c c c c c c c c c c c c c $	. <u>k</u> _			ļ	<b> </b>			1.0	6.9			┣_──┤										╞╾╌╴╀	
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$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				<u> </u>		<u>i</u>				<b>-</b>							207	10.5	<b>!-</b>	<u>}</u>		<u> </u>	<u> </u>
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$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				<u> </u>	<u> </u>			41				┨╼╼╼┥				<b> </b>	249		<u>-</u>	<u>-</u>	<u> </u>	· · · · · · · · · · · · · · · · · · ·	!
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$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				1	i		<b> </b>	<u>51</u> .			<b> </b>								1			·	
IF : 204' $2.6$ $6.4'$ $7.5'$ $315'.7'$ $IS'$ $1.97'$ $3.0$ $6.6'$ $9.0'$ $332'0.4'$ $d0$ $.184'.50$ $1.35'$ $6.1'$ $0.6'$ $.331'0.0'$ $21'.157'.50$ $1.52'.41'.6.7'$ $6.1'$ $6.6'.224'.1.5'$ $22'.157'.50$ $1.52'.41'.6.7'$ $6.6'.224'.1.5'$ $23'.161'.4.5'.0$ $1.38'.61'.7'.0'.00'.00'.00'.00'.00'.00'.00'.00'.$				•	1200	112	10		1612					1 <u>4</u>	0.6	Ì			<u>{</u>	· ·		<u>.                                     </u>	!
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$26$ $188 \pm 5.0$ $6.9$ $0.5$ $.041 \pm$ $t_1$ $t_2$ $27$ $.182 \pm 5.0$ $98$ $1.3$ $6.9$ $41$ $6.7$ $.135 \pm$ $t_1$ $t_1$ $28$ $.157 \pm 5.0$ $.138$ $<1$ $6.9$ $0.7$ $.142$ $0.3$ $#$ $t_1$ $t_1$ $29$ $.157 \pm 5.0$ $.281$ $<1$ $6.9$ $0.6$ $.077 \pm$ $t_1$ $t_1$ $29$ $.157 \pm 5.0$ $.281$ $<1$ $6.9$ $0.6$ $.077 \pm$ $t_1$ $t_1$ $20$ $.157 \pm 3.0$ $.281$ $<1$ $6.9$ $0.6$ $.030$ $0.2$ $= 4$ $t_1$		191 -	· · · · · · · ·	<b> </b>	1	<u></u> ↓	1	;	11 0	ł	<b> </b>	ii		1				<u>-0</u>	<b>π</b>	•			** ==== *
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20 148 + 2.0 226 41 6.8 41 6.9		159 4		†	1		1		169		†	j{		<u>†</u>	10.1					+ ··· · · · · · · · · · · · · · · · · ·		1	:
31 1/85 + 3.6		148 +		1		27%	† <u> </u>		1.9		t	<u>†                                    </u>		41								1	[
	3	185 ¥			1		1		6.9	1	<u> </u>	11	·	† ••-	0.5	1			¥			1	

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 Information is true, complete, and accurate

William Signea. _ Name (Please Type) .___WILLIAM SECOY

Date 8-5-97

Company Name WEDGE FIELD UTILities

Tolenhone No (Please Turn) 407-568-6787 .

	17-601.900(1)
Form Tele.	17-601.900(1) Domestic Westerner Treatmont Plant Marthy Opening Report
Effective D	July 1, 1991
DER Adda	(Ferd in by DER)
	FILE

	m	Month August Year 1997
		Plant's DER Identification Number 3048P03712
•	(3)	Plant Name WEDGEFIELD UTILITIES
	(4)	Plant Address #_3100_BANCROFT_BLV
<b>.</b>	(5)	City_ORLANDO
	(6)	County ORANGE
		Phone Number 407-568-6787
	• •	Permit Number <u>D- 048-259584</u>
_	r	ant Type
	(10)	Test Site Identification Number <u>N/A</u>
		Fecal Coliform Sample Method
		X Membrane Filter Most Probable Number
~	(12)	Type of Effluent Disposal or Reclaimed Water Reuse
		GOLFCOURSE SPRAY IRRIGATION
	(13)	Limited Wet Weather Discharge Activated
		Yes No XX Not Applicable
-	(14)	Cumulative Days of Wet Weather Discharge
	(15)	Plant Staffing
		Day Shift Operator Class Cert. No886.3
-		Evening Shift Operator Class Cert. No
		Night Shift Operator Class Cert. No
		Lead Operator William Secondary A-6665
		Signature Cert. No

Units	STORET	Value
mgd	050053	6181
mgo	_	. 200
mgd		.173
%		. 87%
mg/L	060082	3.0
lbs/day	-	4.5
mg/L	<b>90</b> 0201	< ]
lbs/day	-	< /
	-	6.5
		7.0
mg/L	000600	
mg/L	000625	
mg/L	000610	
mg/L	071850	.05
mg/L	000665	
mg4L		1.3
mg/L	-	5.0
Ntu		0.2
Ntu		1.2
M/F		<b>4</b> ]
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{		
	mgd mgd % mg/L lbs/day mg/L lbs/day mg/L mg/L mg/L mg/L mg/L mg/L mg/L mg/L	Onlis         Code           mgd         050053           mgd            mgd            %            mg/L         080082           lbs/day            mg/L         900201           lbs/day            mg/L         900201           lbs/day            mg/L         000600           mg/L         000625           mg/L         000610           mg/L         000665           mg/L         000665           mg/L            mg/L            Mg/L            mg/L         000665           mg/L            mg/L            mg/L            mg/L            mg/L            mg/L            mg/L            mg/L            mg/L            mg/L            mg/L            mg/L            mg/L        <

DER Fam	17-601.900n)
Fern Tale_	17-601.900(1) Domestic Watternater Treatment Plant Monthly Operating Report
	July 1, 1991
	aton No
	(Fried + by DER)

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	(34)															-	Month	A	مرية	<u> </u>	Year	1997	<u> </u>
~	·										-			Ē			5		Ì				
					- EN	. 1	CBODs Ethnent (mg/L)	1	{		NH3 · N Effluent (mg/L)	Nitrate Ethuent (mg/L)	Ţ	Fecal Coliform (#/100ml)	נטראין	(me)	(mc)	3					1
	£		al	Chlorine Residual after Dechlorination	CBODs Inlivent (mg/L)	रू	Ēġ	ISS Effuent (mg/L)		TKN Effluent (mg/L)	L)		Total P Ettluent (mg/L)	1/#	3	E		(معدر)	ļ				
	of the Month	0	Chlorine Residual after Contact	ina ina ina	i i i	TSS Inliuent (mg/L)	je i	Ĕ		r (m		5	៶ឨ	ε	1	1	ERRICATION	_	i			1	ł
	ē	ତ୍ୟି	Hei	۳ ۳ ۳	E S	ent	E S	le of	Effluent	nen	ШШ	Žð	<b>N</b>	<u>i</u>		è	47		1				
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~	Day	Flow (mgd) EstimatED	le pl	불호	08	S	B B	8	H	XN	ŗ	ie i	)tal	eca	Turbidity	RESIDUOLS	66	RAIN FALL					
	0	Ū V	ar C	ы С Г	09	F	0.40	<u>F</u>		<u>н</u>	z	Z ^v q	P	u.	<u> </u>	R			<b> </b>				
		160	5.0						7.0				·		0.5		0	1.3	*_	Estim		FLOW	
	<b>x</b>	./7/	50						6.8			<u>├</u>			0.5		0	1.3	<u> 11</u>	1	<u> </u>	SEE	
	3	169	4.1						6.9			┝╍╍╌┥			0.5	<b> </b>	0	0	<u>n</u>		<u> </u>	LETA	<u>e</u>
≁	<u>v</u>	.173	<u>39</u> 24						7.0			┝────┥			0.4	<b> </b>	.006	2.0	11	<u> </u>	11		<u> </u>
	5	155	1.3			2.00			7.0					<1	0.3	╂────	203	0,5	1	·	<u> </u>		
	9	195	5.0		178	320 169	1.4	<u> </u>	1/ 6			(0.02		41	0.6	<u> </u>	.127	1.0	<u>· 1</u>	÷	<u> </u>		
	8	. / 8 2	50		110	268	(-1	4	69 69			10.04		<1	10.6	.006	. 225	1.0		I	11		—i
	9	172	5.0			ezu.	1		6.9				<u></u>	. <b>.</b>	0.4	1	1321	0.4		i	u		i
	<u>к</u>	231	30						6.7						0.4		354	6.0	<u> </u>	1	11		
	П.,	1225 _	5.0			198		4/	6.9					<1	0,4		102	1.0	11	1	11	Í	
	12	181	5.0			290		41	69						10.3		,225	0	11		4		
	13	192	5.0	1		250		41	69					<1	0.6		332	1.0	<u></u>	·	<u> </u>	j	i
	14	184	5.0			268		41	6.9					41	0.3		1246		h .	1	<u>h</u> i	:	
	15	.159	5.0				<b></b> .	· · · · ·	6.9						0.5		.247		<u> 11                                   </u>	· · · · · ·	<u> </u>		
	16	.225	5.0			·			6.8		L	Ļ			0.5_		. 249		<u></u>		<u> </u>		
	17	.228	5.0				·		6.7					<u> </u>	0.7	1	e 210				11		
		<u>•177</u>	3.4	<u>i                                    </u>		90_		1.0	2.0					<1	1.0	+ +	.014				11		<u> </u>
	15	118	5.0_	i		1000			6.5		·· <b>-</b> · · ·				1.0	1	.647	0	<u> </u>	I	<u>tı</u>		<u> </u>
	20 21	186	50	1 1	160	152	4.6	<u> </u>	65			0.17		<u> </u>	1.0	-	1239	0	<u> </u>	<b>.</b>			
	12		5.0		100	240	7.6		6.9					<b>*</b> /	1.0 :0.4	.006	.029	0,9	ft 11	<b>.</b>	- <u>11</u>	· ·	
	23	.204	5.0		┝────━┥	l i			6.6			<u> </u>	•		0.5	∔- — —	0	2.4	<u> </u>		<u> </u>		
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•	25 1	.178	50			144	· • ·	41	20				-	51	10.6		0	25		:			:
	26	168	50						7.0						0.4	t	.004	6.1	11		<u> </u>		
	n	144	5.0			138_		41	6.9					1/	0.3	1	.002	0			11		
	28	167	5.0			130		4]	6.9					<u> </u>	0.3	Ì	001	0	11	ļ	<u>_n</u>		İ
1	29	141	5.0				<b> </b>		6.9					ļ	0.3		1001	0	<u> </u>	ł			i
ł	30	153	5.0				<b>↓</b>		6.8						0,6		005	0	11	┥──┤	- 11		
ί	31	195	5.0		L	I		L	2.0		L			l	0.7		0	0.1		Ll	<u> </u>	1	

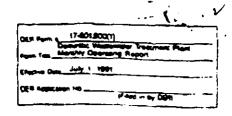
Lead Operator. This is to certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief, this minformation is true, complete, and accurate  $\gamma$ 

Ulum Signus 4 14 Name (Please Type) . WILLIAM SECOY

9-5-9 Date:

Company Name _____WEDGEFILLD UTILLAS

Telephone No (Pleace Turne) 407 568 6787 ....



FILE

# Domestic Wastewater Treatment Plant Monthly Operating Report

Part II - General Information

	(1)	Month SEptember Year 1997
		Plant's DER Identification Number <u>3048P03712</u>
	• •	Plant Name WEDGEFIELD UTILITIES
	(4)	Plant Address #_3100_BANCROFT_BLV
•,	(5)	City_ORLANDO
	(6)	County ORANGE
	თ	Phone Number 407-568-6787
	(8)	Parmit Number D- 048-259584
•	•••	Tant Type 1-C
(	10)	Test Site Identification NumberN/A
	11)	Fecai Coliform Sample Method
^ (	12)	Type of Effluent Disposal or Reclaimed Water Reuse
		GOLFCOURSE SPRAY IRRIGATION
(	13)	Limited Wet Weather Discharge Activated
- (	[14]	Cumulative Days of Wet Weather Discharge <u>N/A</u>
(	(15)	Plank Staffing
		Day Shift Operator Class C
•		Evening Shift Operator Class Cert. No
		Night Shift Operator Class Cert. No Lead Operator William ALUN A-6665
		Signature Ceri. No.

t

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mgd	050053	,149
(17) Permitted capacity	mga	_	. 200
(18) Three-month average daily flow	mgd		.164
(19) Percent of permitted capacity	46	—	82%
(20) CBODs Effluent	mg/L	080082	3.3
(21) CBODs Effluent	ibs/day	-	4.0
(22) TSS Ethuent	mg/L	<b>90020</b> 1	0.94
(23) TSS Ethuent	tos/day	-	1.17
(24) Minimum pH		-	6.5
(25) Maximum pH		—	2.0
(26) Total N	mgʻi	000600	
(27) TKN	mg/L	000625	
(28) Ammonia (NH3 · N)	mg/L	000610	
(29) Nitrate	mg/L	071850	.12
(30) Total Phosphorus	mg/L	000665	
(31) Minimum Chlorine Residual	mg/L	-	3.4
(32) Maximum Chlonne Residual	mg/L	-	5.0
(33) Other Ethuent Parameters			
34 Turbidity [min]	Ntu		0.3
35 Turbidity [ Max]	Ntu.		1.5
36 Fecal Coliform	M/F		<
		- 	 
	<b> </b>	<b> </b>	 
l	}	<u> </u>	

DER fam	17-80390011 Demonstre Westernahr Engement Plant Manshey Counting Report
ومحصد وم	July L 1981
DEA Agant	(FARE IN BY DER)

	(34	)							<b>.</b>					<b>.</b>			Mont	September	Year <u>1997</u>
•	Day of the Month	Flow (mgd)	Chorine Residual after Contact	Chlorine Residual after Dechlonination	CBOD, Intuent (mg/L)	TSS Intuent (mg/L)	CBOOS EMUMAN (MOLL)	TSS Ethnent (mg/L.)	pH Effluent	TKN Effuent (mg/L)	NH3 - N Effluent (mg/L)	National Effluent (mo/L)	Total P Etituent (mg/L)	Fecal Coliform (#/100ml)	LUTN) HIbIdAT	Residuals (me)	ERRICATION (MG)	RAW Fall (Imad)	
	1	. 203	45						6.6					1	115				
		.160	5.0						20						12			40	
	3	.N3	5.0						2.0						1.0			0.1	
<u>_</u>	<u>y</u>	.179	50		164	136	3.2	1.0	20			0.11		41	1.0		0/2	0.2	
	5	. 119	5.0	ţ					6.8						15	,012		4.2	
	4	.166	50						16.5						0.7	[			
	7	.110	40	1					20					1	12				
	8	. 191	3.9	ţ		156		1.6	20					41	1.2	i	.004	-0-1	
	Ĩ	.136	50	ſ					6.9						1.3	Ì	1001		
~	7	139	5.0	Į		172		1.0	6.9					4	0.7		106	-8-	
	ÌI	1.1.21	50			192		41	6.9					4	104		1002		
		.167	50	İ					4.8						1.3		.102	- <b>a</b>	
		. 142	5.0						67				-		0.3		1092	0.4	1 1
	14	.148	50						4.9	[	Γ				0.5		1.014		
	15	148	5.0	1		124		41	4.9					41		1012		1.0	1
~	14	.121	50	]				·	4.9		Ī., .				0.1				
	1	.119	150	i —		246		41	16.2					41	05		.038	1	
	-	137	15.0		96	158	3.3	1.9	61			0.12		4	1.0	i .	- 0-		
	19	124	5.0	i					6.6						10.6	1	,001	-8-	<u>.</u>
	æ	1.153	50	i				1	16.8				1		1.0			•0•	
	21	.151	50	1	1				20			}	i 		0.7	L		-0-	
-	21	.144	15.0		209	17		۱ ۱	6.9					4	.1.0	•	111		
	23	,122	5.0		<u> </u>	1	!		6.9			1			0,3	+010	.028	0.7	
	24	1.122	5.0	1	306		1	2.5					1	4	0.3		.030		* ,
	25	1.150	5.0	·	310			1.6	6.5					41	10.9	<u>i</u>		1.0	
	26	,122	15.0	1	1	<u> </u>			6.9			i	Į		0.1	[	127	64	
	27	150	50		<u> </u>				6.7						0.4	1		Beb .	
	28	.168	50				1		20						05				
	25	174	3.4		114			41	80					41	0.4				
	20	.125	4.0						20						0.3				
						1	1	[	1				[]	1					

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

William nЛ SiL_J__ WILLIAM SECOY Name (Please Type) --

Company Name WEDEGFHID Utilities

10-9-97 Oate:

Telenhone No. (Please Type)

,	
OLA Same 17401 SCOTT	August
Orana Day	

v.

# Domestic Wastewater Treatment Plant Monthly Operating Report

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(1) Mc	DETOBER Ver 1997
(Z) Pu	Int's DER Identification Number 3048P03712
(J) Pu	NAME WEDGEFIELD UTILITIES
<b>(4)</b> Pu	MACHTER # 3100 BANCROFT BLV
(5) Ci	ORLANDO
(6) Co	URY ORANGE
(7) Ph	ione Number 407-568-6787
(C) Pu	ms Number <u>D- 048-259584</u>
<b>(9</b> ) Pu	ant Type1-C
(10) Te	at She Identification Number <u>N/A</u>
	cal Coliform Sample Method Membrane Filler () Most Probable Number
	pe of Effluent Disposal or Reclaimed Water Rause
	OLECOURSE SPRAY IPPICATION
· · -	Med Wet Weather Discharge Activated
(14) Ci	mulative Days of Wet Weather Discharge <u>N/A</u>
(15) Pi	ant Staffing
Da	ay Shift Operator Class <u>C</u> . Cen. No. <u>886.3</u>
Ex	nning Shift Operator Class Cer. No
N	ght Shift Operator Class Cer: No
غا	ad Operator William Que A-6665
	Signalize Cert No

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mgd	050053	.165
(17) Permitted capacity	bgm	-	. 200
(18) Three-month average daily flow	mgd	-	.165
(19) Percent of permitted capacity	*	-	.83
(20) CBODs Effluent	mgt.	090082	4.6
(21) CBODs Ethuent	losiday	-	6.3
(22) TSS Effluent	mg/L	900201	1.5
(23) TSS Effluent	Rosting	-	2.1
(24) Minmum pH		-	6.7
(25) Maximum pH		-	7.0
(26) Total N	mg/L	000600	i
(27) TKN	mg/L	000625	
(28) Ammona (NH3 · N)	mg/L	000610	
(29) Nitrale	mg/L	071850	1.3
(30) Total Phosphorus	mg/L	000665	
(31) Minimum Chlorine Residual	mg/L	-	2.1
(32) Maximum Onionne Residual	mgL	-	5.0
(33) Other Elluert Parameters		• • • • • • • • • • • • • • • • • • •	
34 Turbidity [min]	Ntu		0.5
35 Turbidity [ Max]	Ntu		1.8
36 Fecal Coliform	M/F		<
		•	
	L		

Sta norm Tradition	Transa Part
1	

(34)																Month	October.	. War 1997
Day of the Month	Flow (mgd)	Chlorine Residual	Chlorne Resdual after Dechlonnation	CBOOS INTUEN (MOL)	TSS MILLEN (mOL.)	CBOOD Effert (mo/1)	TSS Ethueni (mg/L)	pH Effuent	TKN Ethuent (mg/L)	NH3 · N EMUENI (MOLL)	Nines Effect (mol)	Total P Emueri (mg/L)	Fecal Colilorm (artiobmi)	Turbidity (NTU)	Resours (me)	EPRICATION (me)	Rain Fall (Imb)	
-	.161	5.0			118		1.4	7.0					4	0.5		100		
2	. /83	5.0		117	114	5.1	4	49			1.4		41	0.5	.00			
3	. 192	3.2						2.0					L	1.8	OIR	1200		- <b>!</b> !
Y	. 164	2.9						6.7					<u> </u>	106		1200		······································
5	. 14 8	2.1	ļ ····—					6.8		1				10		10	120	
4	. 210	5.0			104		1.0	16.9		I			41	41	[	,110		
- 71	. 170	5.0	1	ţ	[		<b>[</b>	6.8						10		1/0		
1	. 201	5.0	1 -	1		· · · ·	<u> </u>	6.8						10.9	1	200		
•	. 11.1	5.0	l I		1At	t	1.4	1.9		Γ			4	1.0	j –	./7	<u>    i    j                            </u>	1
10	. 199	5.0	1	†			<u> </u>	6.9						0.1		110	.010	
11	. 154	50			1	1		68						10.8		.265	.20	1
12	193	3.4	<u>ا</u>		t			6.9		1		[	T	10.7		116	40	
0	138	2.4		1	166	1	2.4	20		1			41	0.6			10.2	i 1
1	. 160	N.n	<u> </u>	Ť Ť		1	T	20	<u> </u>	1		<u> </u>		0.6		2/0		1
15	. 174	5.0	†	t	1		†	2.0		t -	1	<b>†</b>	1	0.5	612	110		1 1
14	1.54	5.0	1	744	120	40	1.6	16.8		1	1.1	]	41			dll		· · · · · · · ·
17	.144	0.2	<u>•</u>				••••	6.8		1		1		0.6	T	120		
1	. 170	5.0		t	1	t		6.7	t—	1	1	1	1	1.0	i	110	•	
11	. 157	15.0	-	t—-	<u> </u>		+	14.7		1	1	<u>i</u> —			1.12	.125		· ·
	. /6	4.4	1	<u> </u>	1	1	∔	20		1	<b>†</b>	†	1	1.1		1120		•••
	.152	5.0	1	1	120	1	21	7.0		1	1	1	41	1.0	1	150		•••••••
n	. 151	5.0				1		6.5		$\mathbf{T}$	1	•	41	0.7		1200		· · · · · · · · · · · ·
21	. 164	5.0	1	1	1740	Ţ	1.4	1.9	1	1	1	1	11	05	.010			
24	. 201	3.6	!	÷		1	;	69	i		<del>;                                     </del>	1	1	0.7	1	100	<del>.</del>	
25	204	IY L	1	T	• ··· 1	1	1	16.9	<u>,</u>	•	1	1	1	05	i	110	·····	
X	. 196	15.0	1	Î	+	1 -	1	6.8	1	1		1	1	0.5		4/10		
22	.121	5.0	1	1	215	1	21	49	† —	1	T	1	4	0.7	î.		······	1
15	.119	50	T	1		1	1	14.5	1	1	1			106	1.4	111		
21	. 142	50			Γ	1	1	49	1	1	1	1		10.8		1,120		
10	.148	50	1	<b>T</b>	<u> </u>	1	T	69	1	1	1	1	1	201	1	1.120		
31	.185	5.0	\	]	<u>}                                    </u>	1	1	16.9	1	T	T	T	1	0,5	018			

Lend 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 information is true, complete, and accurate -

Soned. ( II Am Name (Please Type) .___ HILLIAM SECOY

Company Name _____ WEDGERVEID UTILIASS

CO 14

Dar 11-7-97

Warting No 100000 Time 407-568-6787

		(.	•
DEH Form a 17-601-900(1) Domestic Wasterne form Tala Monthly Oberating	er tream	Here Plan	•
Form Tele Monthly Oberening Energy Date July 1, 1991	Report		
DER Appication No		DER	

FILE

# Domestic Wastewater Treatment Plant Monthly Operating Report

(1)	Month November Year 1997
(2)	Plant's DER Identification Number 3048P03712
<b>(</b> 3)	Plant Name WEDGEFIELD UTILITIES
(4)	Plant Address
<b>^</b> (5)	City_ORLANDO
	County ORANGE
ഗ	Phone Number 407-568-6787
(8)	Permit Number <u>D- 048-259584</u>
<b>^</b> (9,	Int Type 1-C
(10)	Test Site Identification Number
(11)	Fecal Coliform Sample Method
(12)	Type of Effluent Disposal or Reclaimed Water Reuse
	GOLFCOURSE SPRAY IRRIGATION
(13)	United Wet Weather Discharge Activated
(14)	Cumulative Days of Wet Weather Discharge <u>N/A</u>
(15)	Plant Staffing
-	Day Shift Operator Class Cert. No886.3
	Evening Shift Operator Class Cen. No
	Night Shift Operator Class Cert. No
	Lead Operator William Stur A-6665

	STORET	
Units	Code	Value
mgd	050053	. 181
mgđ		.200
mgd		0.165
%		. 83
mg/L	080082	3.7
'lbs/day	-	5.6
mg/L	900201	1.6
lbs/day	—	2.4
	_	6.5
	-	7.0
mg/L	000600	
mg/L	000625	
mg/L	000610	
mg/L	071850	0.14
mg/L	000665	
mg/L	-	1.3
mg/L	-	5.0
Ntu		0.3
Ntu		2.8
M/F		<1
<u> </u>	ļ	l d
}	} .	]
	mgd mgd % mg/L '1bs/day mg/L lbs/day mg/L mg/L mg/L mg/L mg/L mg/L mg/L mg/L	Code           mgd         050053           mgd            mgd            mgd            mg/L         080082           'tbs/day            mg/L         900201           lbs/day            mg/L         900201           lbs/day            mg/L         000600           mg/L         000610           mg/L         000610           mg/L         000665           mg/L         000665           mg/L            Nttu

	17-601900()
	17-601900(1) Domostic Watermeter Treatment Plane Monthly Operating Report
Form Title_	morning containing respect
Ener De	July 1, 1991
	No
ł	(Fried in by DER)

(34)																Month	Novi	EMB I	<u> </u>	. Year	199.	7
Day of the Month	Flow (mgd)	Chlorine Residual after Contact	Chlorine Residual after Dechlorination	CBOD, Inlivent (mo/L)	TSS (nfluent (mg/L)	CBOD, Ethuri (mg/L)	TSS Ethuent (mg/L)	pH Effluent	TKN Ethuent (mg/L)	NH3 · N Effluent (mg/L)	Nitrate Effluent (mg/L)	Total P Effluent (mg/L)	Fecal Coliform (#/100ml)	TURBIDITY ( WTU)	RES. Duals (mG)	IRRICATION (ma)	RAIN FALL (Imb)					
ĩ	210	2.3						6.8						0.3	ļ	.114	0.2		<u>i                                    </u>	ļ		
2	209	5.0						6.7					L	0.4	<u> </u>	.120	0.6		<u> </u>	<b>!</b>	 	
~3	173	1.8			142		41	7.0					<1	0.4	ļ	.100			<u> </u>	ļ	<u>├──</u> ┤-	
Ý	161	2.7						6.9					ļ	0.8	ļ		.0.		<u> </u>			<u> </u>
5	159	2.4			148		4	6.9			1		41	0.5	ļ			<u></u>	1	<b> </b>	j	
6	160	3.6		248	364	3.8	1.2	6.9			0.14		<u>k/</u>	2.0	ļ	-0-			ļ	<b> </b>	<b>└──</b> ┼	!
7	182	1.5		l				6.7		ļ			<u></u> ~	0.8	:	.120				<u> </u>	<u> </u>	
8	179	3,2						6.6		<b> </b>	[]		<b></b>	1.2	į	124	-0-	<b></b>	<u></u> -	<u>{</u>		<u> </u>
2	19	3.3	L				<u> </u>	7.0					<u> </u>	0.8		1/20			į	┨────		j
10	180	5.0	<u> </u>					6.6		ļ	<b></b>		<b> </b>	2.8	ļ		-0-		<u> </u>	i	ii	
<u>//</u>	143	2.3	<u> </u>		 			6.7		 	ļ		ļ	2.3			-0-		<u> </u> -	ļ	·	
13	145	1.3	İ					6.6		L				1.1	1018	-04	-0-		 +	<b> </b>	· · · · · · · · · · · · · · · · · · ·	!
13	183	1.5	<u> </u>	1	158		1.8	6.9		ļ	ļ		<1	1.5	ļ	-0-	[- <u>o</u> - ]		<u>.</u>	<b>.</b>	·	
14	209	5.0	<u> </u>	 	104		1.3	6.5		ļ			4	1.6		¥.	2.7		<u> </u>	i	i	
- <u>'</u>	196	5.0	ļ ļ	<u> </u>	L	L		6.5		L				0.8	<u> </u>	120			• • • • • • •	1	! 	: ;
16	195_	5.0	) +					6.5		L	 			Ø.7_	ļ	120			<u> </u>	i	÷	;
17	195	15.0	<u> </u>		162	l	1.4	6.7		ļ			41	0.9	1	120				1 •		• • • • • • • • • •
18	171	37		L			i	6.6		i			<u> </u>	43.		1/24	<u>- 0 - 1</u>		: 			
18	156	2.6	Ĺ		168			6.7		ļ			41	1.8	<u> </u>	-0-						
20	188	2.0	<u>i</u>	194	204	3.5	1.6	6.7			0.14	ļ	4/	1.5		-0-					• • • • • •	
15	170	50	! 	ļ	<u> </u>		! 	6.8		1	<u>i</u>	) 	 	1.8	Ĺ		-0-		•	<b></b>		
12	196	15.0	<u>.</u>	L	i	1	·	6.5					L	1.9		-0-				<u>.</u>		
23	191	5.0	!	1	i		1	6.8	1					1.7		128	-0-		·	•••		
24		5.0	i	·	180	) 	2.0	6.7			i		4/	0.9		.114	-0-			• 	, ;	
25		5.0	<u> </u>	1	Ĺ		L	6.6	İ	Ļ			1	0.7	í	114	-0-	L	:	<u>.                                    </u>	<u>.                                    </u>	
36		5.0	! <del> </del>	<u> </u>	Ĺ			6.5			i			0.6	!	1/21	-0-			i		
7.7		23	<u> </u>	 			1.3	6.5					41	0.9	!				· ·	·	·	
28		5.0						6.7						1.1	Ì		-0-			 		]
22		5.0	1	<b>_</b>	l			7.0						1.0			.18			.ł		i
30	199	5:0	L	L	ļ	ļ		7.0	<b> </b>	ļ	ļ		┫	2.3	l	120	-0-		I	<b></b>	<b>-</b>	
	L					1		1				1	1	1		1 .			L			

Pead 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 information is true, complete, and accurate

_____

<u>Illiam</u> Signed. Name (Please Type) .___ WILLIAM SECOY

Date: 12-8-97

Company Name WEDGERIEID Utilities

Tolenhone No (Please Tunn) 407 567 6787

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058.600	17401300(1) Demonstra Westerning Frankriser Plant	•
figme Tela	Desiretic Westerney Transmust Plant Merchy Operating Report	
Effective C	July 1 1981	
DEA Add	If the an ay DER	

FILE

# Domestic Wastewater Treatment Plant Monthly Operating Report

(1)	Month December Year 1997
(2)	Plant's DER Identification Number 3048P03712
~ (3)	Plant Name WEDGEFIELD UTILITIES
(4)	Plant Address #_3100 _BANCROFT_BLV
<b>^</b> (5)	Cay_ORLANDO
(6)	CountyORANGE
(7)	Phone Number 407-568-6787
(8)	Permit Number <u>D- 048-259584</u>
Γı	ant Type1 - C
(10)	Test Site Identification Number N/A
(11)	Fecal Coliform Sample Method
(12)	Type of Effluent Disposal or Reclaimed Water Reuse
	GOLFCOURSE SPRAY IRRIGATION
(13)	Limited Wet Weather Discharge Activated
(14)	Cumulative Days of Wet Weather Discharge <u>N/A</u>
(15)	Plant Staffing
~	Day Shift Operator Class <u>C</u> Cert. No. <u>886.3</u>
	Evening Shift Operator Class Cert. No
	Night Shift Operator Cass Cert. No
	Lead Operator Alliam Alla A-6665
<u>`</u>	$\mathcal{O}$

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	тgd	050053	210
(17) Permitted capacity	mgd		,200
(18) Three-month average daily flow	mgd	—	.185
(19) Percent of permitted capacity	∿		93
(20) CBODs Etfluent	mg/L	080082	3.4
(21) CBODs Effluent	los/day		5,9
(22) TSS Ethuent	mg/L	900201	1.3
(23) TSS Effluent	lbs/day	-	2.3
(24) Minimum pH			6.3
(25) Maximum pH		-	7.2
(26) Total N	mgil	0000600	
(27) TKN	mg/L	000625	
(28) Ammonia (NH3 - N)	mg/L	000610	
(29) Nitrate	mg/L	071850	0.26
(30) Total Phosphorus	mg/L	000665	
(31) Minimum Chiorine Residual	mg/L	-	11.1
(32) Maximum Onlonne Residual	mg/L	-	5.0
(33) Other Effluent Parameters			
34 Turbidity [min]	Ntu		0.4
35 Turbidity [ Max]	Ntu		3.9
36 Fecal Coliform	M/F		<1
	<u> </u>	. 	
	ļ		 
		]	1

064 6	17-801 900(1) Dameste Western Monthly Operant	Repart Part
	July 1, 1991	
DEA Appen		-F AND IN DU DEPH

(	34)														····	ا ۲	Month	Dec	cmt	er y	ear <u>19</u>	97
~ ;	Uay of the Month	Flow (ମାସୁସ)	Chlorine Residual after Contact	Chlorine Residual after Dechlorination	CBOD, Inkuen (moll)	TSS kniwent (mg/L)	CBOOS Effuent (mol.)	TSS Effluent (mg/L)	ph Effiven	TKN Effluent (mg/L)	NH3 · N Effluent (mg/L)	Nirale Ethueni (mg/L)	Total P Ettuent (mg/L)	Fecal Coliform (#1100ml)	TURBISHY (NTU)	RES. Duols (mb)	ERRICATION (ma)	RAIN FALL (Imb)				
_	2 0/ 3 10/	42	5.0			184 198		2.1	6.8 6.9 6.9 6.9					<1 <1 <1	1.1 2.6 2.4 1.6		*	-0- -0- -0-				
_	5 / 6 / 7 /	196 53 183 169	5.0			204			6.7						1.7 0.9	.012		-0-				
- - · -	8 0/	41 134 180 234	3.7 5.0 4.5 5.0			150 178 256	· •	1,1 ≠1,0 1.2	67 67 67 69					<   <   <	0.8			.601 .601 .70 2.3		  		
Z Z		05 58 164 272	5,0 1.4 1.7						69	·					0.4 1.5 3.9 2.0			3,2 1,1 .52				
یہ بر بر بر	61, = 171, 6 181, 1	219	5.0		/38	106 122	3,1	< 1.0 <1.0	6.7			0.15		27	0,5			-0- -0-	-			
~ 2		99 87	5.0			106		1,3	6.6 6.7 617					<1	0.8 1.2		· · · · · · · · · · · · · · · · · · ·	-0- -0-		······································	· · · · · · · · · · · · · · · · · · ·	
	51	27	3.6 4.1 1.3 3.2		795	210	3.17	< ],0 < ],[	6.8			0.37		</td <td></td> <td>10n</td> <td></td> <td>•0- •0- •55</td> <td></td> <td></td> <td> ·</td> <td>· · · · ·</td>		10n		•0- •0- •55			·	· · · · ·
	29 1	200	4.000	1		104		< 1.0	17.2			 		<1	1.2		 	.20 -0- -0- .30		-		
		210	5.0			254		1.9	63				L	21	1.3	[		1-0-1				<u> </u>

Illam ______ Signed: _

Date 1-21-78

Name (Please Type) ____WILLIAM SECOY_

- Company Name

Telentione No (Please Tunni

17-601 900(1) DOMARTIN OPERATING Report From Ten Administry Operating Report Francisco Operating Report Recting Operating Report Recting Operating Report Recting Operating Report Recting Operating Report

FILE

# Domestic Wastewater Treatment Plant Monthly Operating Report

Part II - General Information

(1)	Month January Year 1998
(2)	Plant's DER Identification Number 3048P03712
~ (3)	Plant Name WEDGEFIELD UTILITIES
(4)	Plant Address
^ (5)	City_ORLANDO
(6)	County ORANGE
(7)	Phone Number 407-568-6787
(8)	Permit Number <u>D- 048-259584</u>
^ (	ant Type 1 - C
(10)	Test Site Identification Number
(11)	Fecal Coliform Sample Method
(12)	Type of Effluent Disposal or Reclaimed Water Rouse
	GOLFCOURSE SPRAY IRRIGATION
(13)	Limited Wet Weather Discharge Activated
(14)	Cumulative Days of Wet Weather Discharge <u>N/A</u>
(15)	Plant Staffing
	Day Shift Operator Class Cert. No 8863
	Evening Shift Operator Class Cert No
	Night Shift Operator Class Cert. No
	Lead Operator William C. Jouhan A4727 Signature Cen. No

			5,721
Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mgđ	050053	.191
(17) Permitted capacity	mgđ	-	200
(18) Three-month average daily flow	mgd	—	194
(19) Percent of permitted capacity	%	-	97
(20) CBODs Effluent	mg/L	080082	4.5
(21) CBODs Effluent	ibs/day		7.1
(22) TSS Effluent	mg/L	900201	1.1
(23) TSS Effluent	lbs/day	—	1.7
(24) Minimum pH		_	6.5
(25) Maximum pH		_	7,1
(26) Total N	mg/L	000600	
(27) TKN	mg/L	000625	
(28) Ammonia (NH3 · N)	mg/L	000610	
(29) Nitrate	mg/L	071850	2.44
(30) Total Phosphorus	mg/L	000665	
(31) Minimum Chlorine Residual	mg/L		12.0
(32) Maximum Chlorine Residual	mg/L	-	5.0
(33) Other Effluent Parameters	ļ	 	
34 Turbidity [min]	Ntu		0,4
35 Turbidity [ Max]	1		2.6
36 Fecal Coliform	M/F		~1
		. 	
		<u> </u>	l

5.721

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# Domestic Wastewater Treatment Plant Monthly Operating Report

(34)															1	Month	Jar	nua	14_	Year	199	8
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1				ק	_ }	(J			Ω,	Effuent (mg/L)	ર્	б <b>г</b> )	Fecal Coliform (#1100ml)	TJ-BID. HYCNTW)	Residuals (mc)	Irrigation (MC)	Rainfall (Inches)		Ì			
뮾		la I	Chlorine Residual after Dechlorination	CBODs Influent (mg/L)	JQL	Effluent (mg/L)	ISS Ettluent (mg/L)		TKN Ethuent (mg/L)		Nitrate Ethuent (mg/L)	Efflueni (mg/L)	L#)	1×	3	101	PI		Í	Í	1	
) Day of the Month	6	Chlorine Residual after Contact	lesid	fuen	TSS Influent (mg/L)	ficer	<u>כ</u> כ	=	eut (		le G	lluen	or	-	141	44	2			į		1
( the	обш	Ц Ц Ц Ц Ц Ц Ц Ц Ц Ц Ц Ц Ц Ц Ц Ц Ц Ц Ц	e e	<u>-</u>	offue	ш С	Hue	Effuent	ĒĦĊ	Z	Ē	ц Ш	3	à	i qi	. 2	3		1	]		
o ∕a	Flow (mgd)	Chlorine Resi after Contact	ter [	BOC		CBOD5	S S	Ξ	Z X	, HN	litral	Totat P	ecal	13	5	12	ai					1
			6 U	<u> </u>			-F-		•••	~	~		<u> </u>	1.2	X	<u>」</u> 米	\$					
1 2 3	1232	3.5						65						1.6		-	O	<u> </u>				
3	191	5,0						45						0,9	,OH		÷Ð					
~7	,215	4.5			1-0		1.8	6.5 7.0					<u>e</u> 1	1.3			\$ \$					
$\frac{3}{10}$	180	<u>50</u> 3.9			178		1.0	7.1	<u> </u>				-1	1.8			4	•.			i	
7	193	4.1						7.0						1.7			0.661					
<u> }</u>	1202	28	<u> </u>	13	911	41	1.3	7.1 6.8	<b></b>		057	<u>,</u>	~1 (c)	1/13			- <del>6</del> 0.64		<u> </u>		<u>`</u>	
1	1 <u>199</u> 243	5.0	1		140		Z. L.	63				····		1.4			G					
11	,201	5,0	<u> </u>	·				6.9						2.0			-6-				1	
12	,203	5.0	Ì		1-10		~1»	$\frac{\omega_1}{0.8}$		┨━──			<1_	0.6			$\frac{\Theta}{\Theta}$			<u> </u> i		
13	,183	5.0	+		253		4/.t						-1	0.5			÷				· · ·	
- 15	174	50			144		-1.0	6.T 6.5					1-1	0.8	1		0.36		!			
16	198	2.0					<u> </u>	65			ł		┟──	1.7	 		00	<u>!</u>			<u> </u>	
$\frac{1}{18}$	219	15,0	1				<u>i</u>	65						0,9		; ,	.0 .0			······	····	
19	193	5,0	1		226		<1.0	6.6			<b></b>		<1	0,7		÷	·e					
20	167	125			<b>1</b>		ļ	63		<b>↓</b>	<u> </u>		<u>{</u>	1.2			0		9:			
- 21	170	4.5		181	176	4.9	~1,1	1011 16.7		╂╌──	14		1	2.0	<u></u>	:	Tion	i	·,			
23	18L	5.0	1		182		1.0	1.7				ļ	1<1	0,9	i		0.35					
24	1204	5.0	ļ	1 1 1	Ţ		:	k.C		<b> </b>	; <del>1</del>	¦		0.4		<u>.                                    </u>	0.35		•		_ <b></b> ,	<u>;</u>
125	, <i>191</i> ,/73	5.0	1	İ	124		1.2	66		<u> </u>	<u> </u>		121	07			Trace		<u> </u>	÷		<u></u>
- 27	181	50 3.5	1	<u> </u>				4.7		1	[	ļ	1	1.9	<u> </u>	[	-O-					
23	1205	5.0			108		11	4.8						1.2	·		0.02			<u> </u>		
30	118	3.7	;		1211		<u>F1.0</u>	10:1			<u> </u>	<del> </del> —	<u>  &lt; 1</u>	11.0	<u> </u>	<u> </u>	0					
31	160	5.0			1		1	4.7		1	1	1	1	0.9			6				1	ل

- 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 information is true, complete, and accurate / Irrigation Nicter - broken

Jellean C Jouhan Signed: Name (Please Type) W. Iliam C. Furch and Company Name Wedgefield Utilities Peoplar 3

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Dale ____ - 13 - 90

Telephone No. (Please Type) 407-565-6787

DCA to 11-60: 500 "	
Enarry Dea July 1 1991	
DEA Adoreador No(Falso o or DGR)	

# Domestic Wastewater Treatment Plant FILE Monthly Operating Report

Part II - General Information

(1) Month February Year 1998 (2) Plant's DER Identification Number 3048 P03712
(3) Plani Name Wedge Field Utilities
(4) Plant Address 3100 BANCroft Blud.
15 city Olando
(6) County Oranse
(7) Phone Number 907-568-6787
1P1 Permit Number 0048-259584
1-, Man: Type C
(10) Test Site Identification Number
(11) Fecal Coliform Sample Method
(12) Type of Effluent Disposal or Reclaimed Water Reuse Colfcourse Spray Trrigation
(13) Limited Wer Weather Discharge Activated
(14) Cumulative Days of Wet Weather Discharge
(15) Plant Staffing
Day Shift Operator Class Cert. No 8863
Evening Shift Operator Class Cert No
Night Shift Operator Class Cert. No
Lead Operator _ // ellen_ (: forchard & 472)

Parameter	Units	STORET Code	Value
(16) Monthly average daily flow	mgd	050053	,201
(17) Permitted capacity	mgd	-	,200
(18) Three-month average daily flow	mgd		1201
(19) Percent of permitted capacity	%		100.5
(20) CBODs Effluent	mg/L	080082	7.3
(21) CBODs Effluent	lbs/day		12,2
(22) TSS Effluent	mg/L	900201	1,9
(23) TSS Effluent	lbs/day		3,2
(24) Minimum pH			6.4
(25) Maximum pH			6.9
(26) Total N	mg/L	000600	
(27) TKN	mg/L	000625	
(28) Ammonia (NH3 - N)	mg/L	000610	
(29) Nitrate	mg/L	071850	0.34
(30) Total Phosphorus	mg/L	000665	ļ
(31) Minimum Chlorine Residual	rīg∕L		2.1
(32) Maximum Onlonne Residual	mg/L	-	5.0
(33) Other Effluent Parameters		} }	
(34) Turbidity (min)	144	<u> </u>	015
(34) Turbidity (MAX)	NILI	Į	2.6.
36) Fecal Coliform	C+4'5	[m]	<
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	<u> </u>	<u> </u>	<u> </u>

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# Domestic Wastewater Treatment Plant Monthly Operating Report

	(34)	)															Month	Feb	ruar	¥	Year	199	`₹
~	- L		lal	Lat Ition	(mg/L)	V Q/L)	(mg/L)	91)		10/r)	(mg/L)	(mg/L)	(mg/L)	(#100ml)	(UTV),	(mG)	1 (MG)	Inches					
~	Day of the Month	Flow (mgd)	Chlorine Residual after Contact	Chlorine Residuat after Dechlorination	CBODS Influent (mg/L)	TSS Inluent (mg/L)	CBODS Ethneni (mg/L) Shr Composite	TSS Effluent (mg/L)	pH Effluent	TKN Ettivent (mg/L)	NH3 - N Efficient (mg/L)	Nitrate Effluent (mg/L)	Total P Effluent (mg/L)	Fecal Coliform (#1100ml)	TU rhidity (NTU	Residuals (MG)	Irrigation (	Rainfall C					
	72	,197	4.1			133		<i>&lt;1</i> ,0	6.5					<1	41		×	Ð					
	3	192	4.1			730		-7.0	67					-1	/.Z	<u> </u>		1.26		-+			ť
~	4	183	3.8		299	130	5,3	<1.0	6.7			0.06		<i< td=""><td>0.9</td><td></td><td></td><td>1.10</td><td></td><td>1</td><td></td><td></td><td></td></i<>	0.9			1.10		1			
	5	187	5,0			351		15	6.7					-	1.6			0				i	
	6	174	5.0						6.5					<u> </u>	1.7	ļ		e.	· · · ·			<u> </u>	
	2	,200	5.0						615						1.2			031					i
	8	,200,	5.0	[		158		<1.0	65						10,8					<u></u> !_			<u> </u>
_	- 7	170	50			125		~1.0	6.6					<u> </u>	2.3	l		-0-1 -0-1	·		<u>-</u>		
	- //	175	5.0 5.0	[		194		3,2	6.6					<u>&lt;1</u>	17	120		-0-1		-+-			
	12	.160	2.9	} 		210		2,7	6.7				—	21	1.1	100		-0-					<u></u>
	13	.162	5.0						6,5					1	07			-0-1		1	1		
	14	.189.	5,D						65						1,1			0,3	1		i	;	
	15	195	5.0						6,4					1	0.5			1.51	į	1		:	
	76	248	5,0	· · ·		160		1.2	6.9					4	1.3			1,31					1
	17	250	2.1	<u>.</u>					6.7						2.1			0 0		i	:		· · · ·
	18	216	7.6		17. (	711	011		6.8						22	J		01	!				
	17	188 24'7	5,0	<u>├</u>	176.6	142 96	9.4	1.7	6.7			O.L.		<u>~</u> ]	1.6	i		125		i			
	21	232.	5.0			90		2,2	67					<	214	; ;		· <i>∂</i> -	-1.	• • •		·	
~	22.	235	3.6	<b>;</b>					9.1					<u> </u>	13	<u> </u>		<u>+0-</u>					
	23	251	5.0	i		130		2.5	6.5				l	<1	25	;		0.94		·			
	24	203	510					<u> </u>	Gib						10		;	÷ <del>Q</del> -					
	25		15,0	<b>}</b>		124		2.3	Gile					<1	i/ 7			P					?
	26	19Z	5,0			96		5.5	6,5					<1				. <del>Q</del>			- <u> </u>		
~	27	198	15.O	ļ					6.5						26			-0-					
	28	207	5.0						6.5						2,4			.9		- 4			1
	<b> </b>	·	<u> </u> i	i								┝──┦			ļ	┟───┪							
	}	·	<b>+</b>																				
	L	L	<b>.</b>		L						L	L		I.,		l1		i					

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 information is true complete and accurate.

han C. Jouchan Signed: ____ William C. Forehano Name (Picase Type) ____

• •

3, 98 Date: _

Tolombana his (Diama Timo)

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# Domestic Wastewater Treatment Plant Monthly Operating Report

Part II - General Information

(1)	Month MArch Year 1998
	Plant's DER Identification Number 3048P03712
• •	Plant Name WEDGEFIELD UTILITIES
(د) _	Hant Name
(4)	Plant Address # 3100 BANCROFT BLV
- (5)	CityORLANDO
(6)	County ORANGE
(7)	Phone Number 407-568-6787
(8)	Permit Number <u>D- 048-259584</u>
~ (č	nt Type1 - C
10)	Test Sile Identification Number <u>N/A</u>
• •	Fecal Coliform Sample Method
<b>C:</b> 2)	Type of Effluent Disposal or Reclaimed Water Reuse
(13)	Limited Wet Weather Discharge Activated
<b>〔</b> 14}	Cumulative Days of Wet Weather Discharge N/A
(15)	Plant Staffing
	Day Shift Operator Class Cert. No886.3
•	Evening Shift Operator Class Cert. No
	Night Shift Operator Class Cen No
	Lead Operator William C. Highand A472 Signature Cert. No.
_	

[	Parameter	Units	STORET	Value
			Code	
·	(16) Monthly average daily flow	mgd	050053	,193
	(17) Permitted capacity	mgd		1200
	(18) Three-month average daily flow	mgd	_	195
	(19) Percent of permitted capacity	%	-	97
	(20) CBODs Effluent	mg/L	080082	40
	(21) C80Ds Effluent	lbs/day	_	6.5
•	(22) TSS Effluent	mg/L	900201	1.6
	(23) TSS Effluent	ibs/day	_	2,6
	(24) Minimum pH		_	6,3
	(25) Maximum pH	_	_	6.7
	(26) Total N	mg/∟	000600	
;	(27) TKN	mg/L	000625	
.	(28) Ammonia (NH3 · N)	mg/L	000610	
	(29) Nitrate	mg/L	071850	1.55
i	(30) Total Phosphorus	mg/L	000665	1
1	(31) Minimum Chlorine Residual	mg#:	-	12,8
	(32) Maximum Ohlorine Residual	mg/L	-	5.0
	(33) Other Effluent Parameters		1	
	34 Turbidity [min]	Ntu		,04
	35 Turbidity [ Max]	Ntu		3,9
	36 Fecal Coliform	M/F		<1
:				
			<u> </u>	

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### Domestic Wastewater Treatment Plant FILE Monthly Operating Report

(34)	•			•.												Month	MA	erce e	1	Year	19	9 <i>8</i>
Day of the Month	Flow (mgd)	Chlorine Residual after Contact	Chlorine Residual after Dechlorination	CBODS INWERN (MORL)		CBOD, Effluent (mg/L)	ISS Ettuent (mg/L)	pH Effuent	TKN Effuent (mg/L)	NH3 · N Ethnent (mg/L)	Nitrate Ethuen (mor)	Total P Effluent (mg/L)	Fecal Coliform (#1100ml)	Turbidity (NTU)	Residuals (MG)	Irrigation Flow	Paintall CTuches					
o -	E 1232		5툯	Ö	12	Ü	۴	а 616	¥	Ź	ž	P		1-	Ŕ	7	2		 			
	1204	5.0			2,26		1.0	610					<	1.3			Ð					
	1204	5.0			000		110	6.7	·					1.1			-8-		ĺ		j	j
~ 1	191	50	+i	199	164	4.0	2.7	6.6			0.61	1	<1	1.8			Ð			!		
5	1182	5.0			136		2.3	6.5	-				<1	1.7			\$ \$ \$				i	
6	,170	5.0					l i	1. 6			1			2.2	124		8	•			Ì	
7	198	5.0						6.5 6.5						19			æ	<u> </u>	<u> </u>			
3	1301	5.0			ļ			6.5		ļ	ļ	<u> </u>	<u> </u>	11.6			1.08			ļ	•	
	182_	5.0 5.0 5.0 5.0	<b></b>	 	188		3,1	63		<b> </b>	<b> </b>		<u> &lt;1</u>	0.4	ļ		10		<u> </u>			
^	183	5.0		}				lada			<u> </u>			47			1 De				1	
	185	9.0	ļ	<b>↓</b>	170		-10	6.5			<b> </b>	<u> </u>	<u>  ~  </u>	45			400			<u> </u>		!
<u><u><u>p</u></u></u>	116	15.0	<u> </u>	<u> </u>	116_	}	2.0	W1		<u> </u>	<u> </u>		<u> 4:1_</u>	12.0	<b>_</b>		0					<u>;</u>
$-43_{-1}$	153	5.0	· · · ·	1	<u> </u>		<u> </u>	612		<u> </u>	ł		┨────	1.5			-Er		<u> </u>	1		!
	186		1				1			┨	<u> </u>	+	<u> </u>	26		!	e		. <u></u>			
$\sim \frac{K}{W}$	198	4.7			149		2.1	65					61	3.9		<u>-</u>	1-0-					
<u> </u>	121	150	<u> </u>	<del>;</del>	111			65			i ──			2.4		A	1					ļ
-11-	197	5.0	┼	<u> </u>	211-	<u> </u>	1.8	6.4			†	<u> </u>	1<1	2.4		,229	0,13			;	<b>-</b> .	
-11	226	5,0	+ ·······	1	216	<u> </u>	3.1	66		+	<u> </u>	1		2.7	<u> </u>	,021	1.27		: ;	<u>+</u>		
-4-3 26	772	5,0	<u>†</u>	Ì	111-1-	1	1	6.5	·	†	<u>†</u>	4	1	25	÷	.009	.20		•	÷		
21	1.8/2	5.0	1	1	1		<u>+</u>	6.5		1	1	1	Ť	17.7	i	1026	Ð				•• ••••	
22	187	50	4 · · · · · · ·	† 	]			6.3		1	1	1	1	15		123	÷ •		:			
23	,207	5.0	1	1	138	1	1.3	65		1	1	1	<1	2,3		, 285	-Gr		1			
24	187	5.0	1	1			1	64			Ì	1		1.3	1	1289	Ð			· .		
25		15.0	1	240			1,0			1	2.5	1	1<1	11.1	1	300	: 0					
26	185	5.0	i +	1	206		1.5	6.4			1		1-1	1.4	1	,302	2			: 		
- 2]	1177	5.0	<u> </u>	<b></b>	Ì	ļ	·	64	[	<b> </b>	ļ	<u> </u>	<u> </u>	45	6024	280	$\Theta$		:	<del></del>		
23	1194	50		<b> </b>	4	ļ		64	ļ	<u> </u>	1		·	1.9	ļ	2.56	E-		<b>↓</b>			
29	192	5.0	<b> </b>	<b>↓</b> ,	1770	<u> </u>	100	614 61 64	{		<b>{</b>	<b> </b>		0.9	┨	324	e		<u> </u>	<u> </u>		
150	1176	3.5		<u> </u>	168	<u> </u>	1.9	61	<b> </b>				<u> &lt; </u>	315	<u> </u>	347	1) 6-		<u> </u>	┼╌──┥		
3/	177	INV	4	L	I	J		۲ م ا	L	J	<u> </u>	<u>ــــــــــــــــــــــــــــــــــــ</u>	J	111	<u>l</u>	,000			J	I I		J

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 information is true, complete, and accurate.

Signed Unillean C. Artelland Name (Please Type) W. Mam C. Forehand Comoso . Nome Lites ()

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Oate:

Talanhana Nia (Plasca Turni

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FILE

## DOMESTIC WASTEWATER TREATMENT PLANT MONTHLY OPERATING REPORT

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Part II - General Information

(1) Month / Yea	r: April 1998	Parameter	Units	Storet Code	Value
(2) Plant's DER I	dentification Number 3048P03712	(16) Monthly average daily flow	mgd	50053	0.175
(3) Plant Name:	Wedgefield Utilities ( Utilities Inc.)	(17) Permitted capacity	mgd	-	0.200
		(18) Three month average daily flo	nıgd	-	0,189
(4) Plant Addres	s 3100 Bancrott Blvd.	(19) Percent of permitted capacity	%	-	88 %
		(20) CBOD ₅ Effluent	mg/l	80082	4.97
(5) City:	Orlando	(21) CBOD ₂ El'fluent	lbs/day		7.25
(6) County:	Orange	(22) TSS Effluent	mg/L	-	2.24
(7) Phone Numb	x (407) 568-6787	(23) TSS Effluent	lbs/day		3.27
(8) Permit Numb	0(DO48-259584	(24) Minimum pH		-	6.3
(9) Plant Type:	1-C	(25) Maximum pH		-	6.8
(10) Test Site Ide	emilication Number: 178	(26) Total N	_mg/1	000600	-
(11) Fecal Colife	orm Sampie Method.	(27) TKN	mg/l	000625	-
🔀 Membr	ane Filter 👘 Most Probable Numb	er(28) Ammonia (NH ₂ - N)	mg/l	000610	-
(12) Type of Eff	luent Disposal or Reclaimed Water Reus	e (29) Maximum Nitrate	mg/l	071850	3.50
Public Acce	ss Golfcourse Spray Irrigation	(30) Total Phosphorous	mg/l	000665	-
(13) Limited We	t Weather Discharge Activated	(31) Minimum Chlorine Residual	mg/1		3.4
Yes [	No 🛛 🚺 Not Applicable	(32) Maximum Chlorine Residual	mg/ł		5.0
(14) Cumulative	Days of Wet Weather Discharge:	(33) Other Effluent Parameters			<b>1</b> .7
n/a		Fecal Coliform			<1
(15) Plant Staffin	119	Golf Course Irrigation	Avg		0.336
Day Shift O	perator Class C-8864 A-4727	NTU MIN.			0.53
Evening Sh	ift Operator Class	NTU MAX.	ļ	 	1.70
Night Shift	Operator Class Cert. No.			ļ	
Lead Opera	tor <u>Mathan Hoter</u> B-7677 Signature Cert. No.			   	

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### DOMESTIC WASTEWATER TREATMENT PLANT MONTHLY OPERATING REPORT

## Wedgefield Utilities ( Utilities Inc.)

Company Name:

Utilities Inc.

Month / Year

April 1998

Day	Flow (MGD)	Chlorine Residual After Contact Chlorine Residual	after Dechlonation CBOD, Influent (mg/) 8 Hour Composit	TSS Influent (mg/l)	CBOD, Effluent (mg/) 8 Hour Composit	TSS Effluent (mg/l)	pH Effluent	TKN Effluent (mg/l) NH3 - N Effluent (mg/l)	Nitrate Effluent (mg/l)	Total P (mg/l)	Fecal Coliform (#/100ml)	(NTU) Turbidity	Residuals Hauled (MG)	Irrigation Flow (MG)	Rain Fall ( Inches )
1	0.173117	5.0	233	288	4.8	1.0	6.5	<b>.</b>	3.4	0	<1	1.50		0.348	
2	0.191799	5.0		171	·	1.9	6.5			<u>.</u>	<1	1.50		0.297	0.32
3	0.173640	5.0			•		6.4			, 		0.90		0.294	
4	0.194805	5.0			د	• • • • •	6.5		•		•	0.90		0.281	· · · · · · · · · · · · · · · · · · ·
5	0.207964	5.0					6.4					0.80		0.005	
6	0.165745	4.5		196	1	2.8	6.5	:	-	• •	<1	0.80		0.342	
7	0.170509	5.0					6.4		•		<b></b>	1.70		0.348	
8	0.169401	5.0		240	l j	2.4	6.4				<1	1.40		0.394	
9	0.177853	5.0		272	·	3.9	6.3				<1	0.90		0.349	
10 :	0.192819	: 3.9:	: ,				6.5	;	:	;		0.90		0.310	•
11	0.179234	5.0	• •				6.5	1	-	:	•	0.80		0.324	
12	0.177446	4.1					6.5	)				1.20		0.314	
13	0.167825	5.0		132	2	1.5	6.4		- -		<1	0.75		0.325	
14	0.159096	5.0					6.5					0.68		0.334	
15	0.181006	3.5	235	197	5.2	1.9	6.4		3.	50	~1	0.65		0.403	
16	0.172062	3.5					6.4		•			0.64		0.313	
17	0.160839	5.0					6.7		•			0.60		0.364	
18	0 197469	5.0					6.5		•			0.20		0.322	
19	0.203024	5.0	۱.				6.7				•	1.10		0.346	
20	0.174173	5.0		308	;	2.7	6.8				<1	0.58	• • •	0.323	
21	0.161281	5.0					6.4		•		• • •	0.58		0.346	0.12
22	0.179209	5.0	·	152	2	1.4	6.5				<1	0.57		0.390	
23	0.156655	3.4		118	,	4.2	6.6				<1	0.57		0.546	· -1.
24	0.153983	5.0	i para n		·•		6.5	·····		•		0.57		0.366	······································
25	0.177304						6.5	•				0.99		0.382	
26	0.175765			•		·	6.4		;	····		0.63		0.400	· · · · · ·
27	0.159040			122	· · ·	1.0	6.6	;		:	1 -	0.57		0.282	
28	0.157524				· - •		6.6				• ••	0.56		0.587	
29 .	0.170041	5.0		158	· · · ·	1.4	6.5				- 1	0.55	8,000	0.475	
30	0.175302	5.0	178	303	4.9	3.0	6.5	· · · · · · ·	1.	0	_ <1	0.53	6,000	0.313	0.28
31 ead Oper Signed			an familiar with The r V		_		- 1925 герся	and that	to the Le	st of my	ability .o.d	bebef dar ni	formation	is true, con	plete and accurate

Telephone #:(please type)

(407) 568-6787

DER Form 17-601-900(1) Form Type: Domestic Wastewater Treatment Plant Monthly Operating Report Effective Date: July 1, 1991 DER Application No. (filled in by DEP)  $\checkmark$ 

FILE

# DOMESTIC WASTEWATER TREATMENT PLANT MONTHLY OPERATING REPORT

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Part II - General Information

(1) Month / Year: May, 1998	Parameter	Units	Storet Code	Value
(2) Plant's DER Identification Number: 3048P03713	(16) Monthly average daily flow	mgd	50053	0.191
(3) Plant Name: Wedgefield Utilities	(17) Permitted capacity	mgd	-	0.200
( Utilities Inc. of Florida )	(18) Three month average daily flow	mgd	•	0.186
(4) Plant Address: 3101 Bancroft Blvd.	(19) Percent of permitted capacity	%	-	93%
	(20) CBOD, Effluent	mg/l	80082	5.55
(5) City: Orlando	(21) CBOD ₅ Effluent	lbs/day	-	8.83
(6) County: Orange	(22) TSS Effluent	mg/L	-	2.69
(7) Phone Number: (407) 568-6738	(23) TSS Effluent	lbs/day		4.28
(8) Permit Number: DO48-259585	(24) Minimum pH			6.2
(9) Plant Type: 1-C	(25) Maximum pH			6.9
(10) Test Site Identification Number: n/a	(26) Total N	mg/1	000600	-
(11) Fecal Coliform Sample Method:	(27) TKN	mg/l	000625	-
Membrane Filter 🔲 Most Probable Number	(28) Ammonia (NH3 - N)	mg/l	000610	
(12) Type of Effluent Disposal or Reclaimed Water Reuse	(29) Maximum Nitrate	mg/l	071850	5.58
Public Access Golfcourse Spray Irrigation	(30) Total Phosphorous	mg/l	000665	•
(13) Limited Wet Weather Discharge Activated	(31) Minimum Chlorine Residual	mg/l		2.4
🎦 Yes 🚺 No 🛛 🚺 Not Applicable	(32) Maximum Chlorine Residual	mg/l	.≁-	5.0
(14) Cumulative Days of Wet Weather Discharge:	(33) Other Effluent Parameters			
n/a	(34) Fecal Coliform			<1
(15) Plant Staffing B-7942	(35) Golf Course Irrigation	Avg		0.40
Day Shift Operator Class <u>C-8864 A-4727</u>	(36) NTU Minimum	NTU		0.36
Evening Shift Operator Class	(37) NTU Maximum	NTU		4.08
Night Shift Operator Class Cert. No.				
Lead Operator Natura / article B-7676				
Signature Cert. No.				

* Note : On May 20, 21, & 22, the flow was diverted to the substandard pond. *

DER Form 17-601-900(1)

Form Type. Domestic Wastewater Treatment Plant Monthly Operating Report

Effective Date: July 1, 1991

DER Application No.

(filled in by DEP)

### DOMESTIC WASTEWATER TREATMENT PLANT MONTHLY OPERATING REPORT

### Wedgefield Utilities

17

Month / Year May, 1998

Wed	gefield Utili	tles													N	ionth /	Year		May,	1998
Day	Flow (MGD)	Chlorine Residual	After Contact Chlorine Residual	after Dechloination CBOD, Influent (me/l)	8 Hour Composit	TSS Influent (mg/l)	CBOD5 Effluent (mg/) 8 Henr Composit	TSS Effluent (mg/l)	pH Effluent	TKN Effluent (mg/l)	NH3 - N Effuerit (mg/l)	Nitrate Effluent (mg/l)	8 Hour Composit	Total P (mg/l)	Fecal Coliform (#/100ml)	(NTU) Turbidity	Residuals Hauled (MG)	Imgation Flow (MG)	Rain Fall ( Inches )	
1	0.151438	+	.0		 i		1 <u> </u>		6.4	4-i+ 1					i i	0.53		0.304		······································
2	0.166676	-+	i.0	1			!	!	6.4	1		:				0.66		0.375		
3	0.164323		.0				•••• ••		6.5	 'i		; :			t	0.53		0.406		
4	0.163549		0	•	· ··· ·· ·	208		2.8	6.7		-	;			<1	0.48		0.387	0.1	i
5	0.152183	5	0						6.5			!			1 1	0.48		0.391	0.2	
6	0,167904	2	.4			162	-	1.3	6.7					ì	<1	0.48		0.413		
7	0.108353	5	5.0			230		1.2	6.6		:		_		<1	0.48		0.403		
8	0.275975	5	5.0				:	1	6.6			1				0.47		0.407		
9	0.284270	) 5	5.0						6.4	;		;		1	;	1.46		0.376		
10	0.191635	5	5.0				1	i	6.3		:	•		• •	;;	1.03		0.372		
11	0.175354	• ••	8			158	: .	1.4	6.5			•		•	<1	0.43		0.430		i i
12	0.170173	s 4	9				:	1	6.5					l		0.42		0.488		
13	0.178744	5	5.0	· · · · <b>]</b> - · ·	171	220	5.0	5 2.4	6.5			i 5	5.58		<1	0.42		0.495		
14	0.180530		5.7	i		148		1.7	6.6	ļ		Ţ		i	<1	0.41		0.452		
15	0.152782	2 2	2.5						6.4	1		i			1	0.40		0.490		
16	0.192784	5	5.0						6.5	1		1		1		0.68		0.396		
17	0.200414	5	5.0	Ī			:		6.2	1	:	1		1		0.79		0.440		: ! •
18	0.177822	2: 5	5.0	i		126		2.5	6.5						<1	0.38		0.709		<u>.                                    </u>
19	0.267796	5. 3	3.4				ļ	Ì	6.5					1	ļ	0.36		0.427	0.3	· · · · · · · · · · · · · · · · · · ·
20	0.257709	4	.7			156		5.2	6.9	<u>.</u>		, 		•	<1	4.02	· 	0.473	0.01-	!
21	0.213671	5	5.0			276		4.1	6.6	51					<1	3.94		0.956		· · · · ·
22	0.189236	5 5	5.0	:			;		6.6	<u>.</u>	:	1			 	4.08		0.442		• • • •
23	0.190544	5	5.0				:		6.7	<u>ni</u>		į.				2.63		0.346		·
24	0.186445	5 5	5.01	ļ				1	6.8	}	:	! 	,			1.81		0.084		; +
25	0.189137	7 5	5.0	•				1	6.8	1	<u> </u>	-				1.40		0.464		<u></u>
26	0.190341	4	.4			172		3.5	6.6	;		; ;		! 	<1	1.04		0.592	<b>_</b>	• • • • • •
27	0.166290	) 5	5.0		237	150	5.	5 2.6	6.6	<u>i</u>		<u>  1</u>	.70	<u>.</u>	<1	0.77		0.503		·
28	0.183987	1: 5	5.0			192		3.6	6.5	;l	:				<1	0.89		0.340	0.1	+
29	0.190566	5 5	5.0	!		ļ			6.7	/		1		 	، ا	0.73		0.024		
30	0.185681	4	1.7				1		6.5	<u>نا</u>		<u>i</u>		 		0.49		0.007		i
31	0.205827	1 5	5.0				1		6.5	5	1	1		İ	1	0.64		0.012		

Lead Operator. This is to certify that I am familiar with the information contained in this report and that to the best of my ability and belief this information is true, complete and accurate. * Note : On May 20, 21, & 22, the flow was diverted to the substandard poud during filter media replacement. *

Nather Var meto Signed:

Name:

Nathan Van Meter Utilities Inc. of Florida Company Name:

Date: 6-11-98 Telephone # :

(407) 568-6787

ISTR From 12601 From Form Type (formestic Wastewater Treatment) | Plant Monthly (gestating Report |Effective Date: July 1, 1991 |DER Appleation No ||(601ed in by DEP)

FILE V

# DOMESTIC WASTEWATER TREATMENT PLANT MONTHLY OPERATING REPORT

Part II - General Information

(1) Month / Year: June, 1998	Parameter	Units	Storet Code	Value
(2) Plant's DER Identification Number: 304SP03713	(16) Monthly average daily flow	mgđ	50053	0.216
(3) Plant Name: Wedgefield Utilities	(17) Permitted capacity	mgd	-	0.200
(Utilities Inc. of Florida)	(18) Three month average daily flow	mgd	-	0.194
(4) Plant Address: 3101 Bancroft Blvd.	(19) Percent of permitted capacity	%	-	97%
	(20) CBOD ₅ Effluent	mg/l	80082	5.25
(5) City: Orlando	(21) CBOD ₅ Effluent	lbs/day	-	9.48
(6) County: Orange	(22) TSS Effluent	mg/1.	-	2.47
(7) Phone Number: (407) 568-6783	(23) TSS Effluent	lbs/day		4.46
(8) Permit Number: DO48-259585	(24) Minimum pH		-	5.1
(9) Plant Type: <u>1-C</u>	(25) Maximum pH		-	6.8
(10) Test Site Identification Number: n/a	(26) Total N	mg/l	000600	-
(11) Fecal Coliform Sample Method:	(27) TKN	mg/l	000625	-
🔀 Membrane Filter 🛛 🔲 Most Probable Number	(28) Ammonia (NH3 - N)	mg/1	000610	. <u>-</u>
(12) Type of Effluent Disposal or Reclaimed Water Reuse	(29) Maximum Nitrate	mg/l	071850	3.10
Public Access Golfcourse Spray Irrigation	(30) Total Phosphorous	mg/l	000665	
(13) Limited Wet Weather Discharge Activated	(31) Minimum Chlorine Residual	mg/i		1.3
🔲 Yes 🚺 No 🛛 🔀 Not Applicable	(32) Maximum Chlorine Residual	mg/l		5.0
(14) Cumulative Days of Wet Weather Discharge:	(33) Other Effluent Parameters			
<u>n/a</u>	(34) Fecal Coliform		•	144
(15) Plant Staffing B-7942	(35) Golf Course Irrigation	Avg		0.43
Day Shift Operator Class C-8864 A- 4727	(36) NTU Minimum	NTU		0.27
Evening Shift Operator Class	(37) NTU Maximum	NTU		1.67
Night Shift Operator Class Cert. No.	/ /			
Lead Operator Wattie Un Metter B-7676 Signature Cert. No.	· · · · · · · · · · · · · · · · · · ·			

* DEP notified on 7-8-98 of high feeal count from 6-25-98.

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() Ex Barni M. (1997) 1. m. (Mys. ) and the Wattewater Treasurest Tiad Monthly Operating Report

Effective Date July 1, 1991

(filled in by DEP)

## DOMESTIC WASTEWATER TREATMENT PLANT MONTHLY OPERATING REPORT

Wedgefield Utilities

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**`C**;

Month / Year June, 1998

DER Application No

Day	Flow (MGI))	Chlorine Residual After Contact Chlorine Residinal	after Dechloination	8 Hour Composit	TSS Influent (mg/l)	8 Hour Composit	TSS Effluent (mg/l)	pH Effluent	[[KN Effluent (mg/l)	NH3 - N Effluent (mg/	Nitrate Effluent (mg/l) 8 Hour Composit	Total P (mg/l)	Fecal Coliform (#/100ml)	(NIU) Turbidity	Residuals Hauled (MG)	Irrigation Flow ( MG )	Rain Fall ( Inches )	
1	0.229755	5.0			94		3.6	6.8				·	<1.	0.97		0.548	0.5	
2	0.214767	<u>3.9</u>						6.8		 			 	0.68		0.473	و و ، م م م م	•
3	0.180846	5.0		'	140		3.9	6.5						1.07		0.557		
4	0.182042	· 5.0·			66		2.9	6.6	<del>.</del>				, <1 -	0.99		• 0.671+	• •• •	
5	0.181223	4.5				: 		6.6	•		, 	•	هانه د بدله	0.83		0.505		<b>.</b>
6	0.299226	4.6		:				6.7					;	0.93		0.525		
7	0.309434	5.0						6.8	( 	 <del> </del>	 	;	، ، <del>ہ۔۔۔۔ہ</del>	0.73		0.467		, •
8	0.373232	5.0			124		1.5	6.8				<u>.</u>	<1	1.67		0.489	0.7	<u>}</u>
9	0.227081	4.2						6.8		;	l 	; 	: i	1.16		0.579	-	: t
10	0.177473	5.0		191	189	5.3	2.5	6.7	 		3.10	· 		0.73		0.541		•
11 .	0.169892	1.3			165		2.6				• 		. <1 .	0. <b>89</b> -		0.555	_	4
12	0.182090	5.0	<b>,</b>					6.5					· .	0.63		0.524	0.0	
13	0.204105	5.0	<b>.</b>					6.5						0.46		0,449		
14	0.197305	5.0						6			<b>.</b>			0.87		0.425		:
15	0.178416	5.0			125		1.1	6.7					_ <]	0.64		0.523		
16	0.189144	4.2						6.8			• · · ·			0.42		0.620		
17	0.186226	4.1	• •-•		129		1.8	. 6.5	5		<b></b>		· 1	0.41		0.530		•
18	0.182897	5.0			136		2.8	6.	<u>}</u>				$\frac{1}{2}$	0.31		0.474	0.1	
19	0.125016	5.0						6.4		÷-	·· <b>-</b> · ····	•	• ·	0.27		0.067	1.0	• • · · ·
20	0.364104	5.0					1	5.1	÷				1.	0.33		0.073	0.70	
21	0.260064	5.0						6.0	; 	:	; ,	: 		0.86		0.116		
22	0.199870	5.0			613		1.0	6.	<u>;</u>	<u>.</u>			<u></u>	0.43		0.136	0.0	<u>م</u>
23:	0.195325	5.0.			•			6.			•		· · ·	0.60		0.526	• • • · ·	i 
24 ;	0.209521	5.0		200	122	5.2			5	: 	1.80	); /	<u>i &lt;1</u>	0.65		0.093	:	•
25	0.198039	5.0			150		2.5						144	0.35		0.347	0.4	:
26	0.181140	5.0					;	6.		·	•	• 	: 	0.38		0.488	···· ·	
27	0.178168	3 5.0	•					6	3	·		• .		0.49	·	0.488	··· <b>···</b> ····	÷
28	0.325927	7 5.0					· _	6.	<b>4</b> -					0.45		0.489		
29	0.20472	1 3.5			] 133		2.2	6.0	5		•		. <1	0.49		0.513		•
30	0.19985:	5.5.0					<b>.</b> -	6.4	<b>!</b>					0.40		0.533.		

* DEP notified on 7-8-98 of high feest count from 6-25-98.

Signed:

Natto Varte

Name:

Nathan Van Meter

Company Name:

Utilities Inc. of Florida

Date: July 9, 1998

Telephone # (407) 568-6787

Wedgefield Utilities, Inc.

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Docket No. 991437-WU

25.30-440 (5) Sanitary Survey and Inspection Report

Test Year Ended June 30, 1999

## State of Florida Department of Environmental Protection Central District

# WATER TREATMENT PLANT COMPLIANCE INSPECTION REPORT

				<b>—</b> .	
·	Plant name wids field PSis (Case OBL) Address 20751 3. 12. 520 ORL. FL	County Or an s		PWS 10 3480149	
	Address 10751 J. R. 520 ORL. FL	72833	· · · · · · · · · · · · · · · · · · ·	Phone 407/ 867-19	19
	Owner name wades field will TY INC		// 4 9	Contact Bol cross	
	Owner address D. O. Box 161149 ALTEND	NTO Samer FL	32716-	Phone 4+1/ 173 -/	<u>19</u>
			<u> </u>		<u>1                                    </u>
	PWS Type: Community D Non-Transient 1	Non-Community		ommunity	~
	Service area characteristics 16 CillenTicL	No		ce connections 78	
	Food service? 17 Yes Sk.No		Serv	ed population 2,76	L
	OPERATION & MAINTENANCE	STORAGE TANKS		(E) Elevated	
	Certified operator: 👰 Yes 🗆 No 🗂 N/A Operator & certification class-number:			Imatic/flow-through	
	church For shand "C" SE28				
	O&M log: yes no	Tank type	GII	H/1	
	WELL	Capacity Cla.	354000	12 000	
	Number of wells 2- Standby well?	Grevity drain	Lic	405	
ر کې	Auxiliary power 🔀 yes 🗆 no 🗆 N/A	By-pass piping	405	405	
12,0	6'x 6'x 4" pad 🛛 🔀 yes 🗔 no	Pressure Dauge	A/A	445	
<b>1</b> -	Sanitary seal 🕅 OK 📋	On/Off pressure		55/65	
	Raw water tap: 🖉 yes 🗋 no		<b>⊢-</b> —		
	🗆 not smooth nosed	Sight glass		- yes	
	Check valve 🛱 yes 🔲 no	Fittings for eight glass	_		
	Fence/housing 🕅 yes 🗋 no	Air release velve	-		
~	Sanitary hazards	Pressure relief valve	_		
C C	CHLORINATION Chlorinator type: D Gas C Hypo	Access pedlocked	705	705	
Ň	Cl. residual: Plant [ .] ] Fim Remote .3 PPM		· · · · · · · · · · · · · · · · · · ·	L / / / / / / / / / / / / / / / /	
2	DPD-type test kit	DEFICIENCIES / C	OMMENT	s	
i.	Gas cylinder scale			•	
" c	Gas cylinder chained gyes 🗆 no				
7	Adequate air-pak Kyes 🗋 no			· ····	
50	S Fresh ammonia solution 🖸 yes 🔲 no 👘		0	N	
へく	Adequate ventilation Qyes 🗋 no	DPA17			
	Dual chlorination 🕅 yes 🗆 no		<u>d</u>		
	Auto-switchover	- Te il			
		[^		YV	
	AERATION: Type <u>CGScade(1.000 Gpm)</u> Condition				
		<del></del>		•	
	OTHER TREATMENT PROCESSES:				<u> </u>
	Disienfaction / Soft anyar				
	OTHER	Remin dei	ANNY	Lalim	
	Flow measuring device:				
61	M meter I elapsed time clock I none	195 Mitric	C+ MIT.	AT I a Paint	<u>الان</u>
÷.	Backflow prevention devices: Dyes Dno	Dec. 31 1989.			
¥.	Cross-connections NUNJ Obcerry	. 1			
	1				
	PLEASE CORRECT THE INDICATED DEFICIENC	TIES AND PROVIDI		TEN STATEMENT T	O THE
	DEPARTMENT NO LATER THAN			T ALL LISTED DEFICI	
	HAVE BEEN CORRECTED; FAILURE TO DO	SO WILL RESULT	IN THE	TAKING OF APPRO	PRIATE
	ENFORCEMENT ACTION BY THE DEPARTMEN	T. Send your respi	onse to: 🕻	Department of Enviror	mental
	Protection, 3319 Maguire Blvd., Suite 232, Orla	ando, Florida 32803	3. Phone:	(407)894•7555	
	Inspector Roberto C. Comy	Title Car h 9	· ·	Date 6 1	17158
					111
	Received by Marlie Mahand	_ Title	<u>0 ^</u>	Date <u>6</u>	(7198
		<i>,</i>			
	Form left: Then site D with water plan	in oberator A Mi	in water		v 02/15/94
				/*****	



### ENVIRONMENTAL PROTECTION DIVISION ANNA H. LONG, Manager

Leeds Commerce Center 800 Mercy Drive, Suite 4 Orlando, Fiorida 32808-7896 (407) 836-1400 • Fax (407) 836-1499 www.citizens-first.co.orange.fl.us

June 10, 1999

Mr. Donald Rasmussen Econ Utilities Corporation 200 Weatherfield Avenue Altamonte Springs, Florida 32714

RECEIVED JUN 1 6 1999 BY:

FILE

Domestic Wastewater Treatment Facility -Wedgefield Golf & Country Club RE:

OCEPD Permit: DO95-01

Expires: January 3, 2000

Dear Mr. Rasmussen:

On May 26, 1999, an inspection of the above-referenced facility was conducted by a representative of this Division. At the time of inspection, the overall operation of your facility was found to be in compliance with the terms and conditions of the referenced permit.

Please review the enclosed inspection report for any comments and recommendations that may have been noted during the course of the inspection and record review.

Your efforts to help maintain our environment are appreciated. If you have any questions, contact me at the above address or at (407) 836-1454.

Sincerely,

Ricardo A. nlove.

Ricardo A. Moore Environmental Specialist

RAM/CS:bk

Enclosure

C: FDEP Central File

001-068-2420-4343 **INVOICE TO FOLLOW** 

FILE: 19.2/ Werge Field WWTF

#### ORANGE COUNTY ENVIRONMENTAL PROTECTION DEPARTMENT COMPLIANCE INVESTIGATION CHECKLIST WASTEWATER TREATMENT FACILITIES (DOMESTIC)

Wedgefield Golf: Contry Club Date: 5/26/99 Facility Name: Econ Utilities Corporation Owner: Econ Utilities Corporation Facility Location: 20750 State Red 520 Attn: Mr. RQSMUSSEN Mailing Address: 200 Weathersfield All. Orange Co. Permit # DOGSON Expires: 1/3/2000 Type: 1 & Q Orange Co. Permit # D095-01 1/3/200 Type State Fermit # Permit Verification: Has permit been reviewed prior No N/A 1. to inspection? No N/A Correct name and mailing 2. address of permittee. Facility is as described No N/A 3. in permit. ίNο N/A Amendments to permit 4. Yes Explain: Compliance Schedules: Permittee meeting compliance N/A No 1. schedules? Facility submitting all monitoring (Ye: No N/A 2. data as required by the permit? Νo Extenuating circumstances which Yes N/A з. would affect the permittee's compliance schedules? Records and Reports: Records and reports maintained No N/A 1. as required by permit. If no explain: No N/A 2. Is Monthly Operating Report complete and received in a timely manor? No N/A з. Is operators daily log on site and up to date? No Sludge analysis on file NZA 4. No N/A 5. Current well monitoring data, if required.

1

45-18 (3/91)

pages 1 - 6

# Facility Site Review:

### Headworks

1.	Lift station, (grease build up)	Yes	Ŕ	N/A
2.	Evidence of lift station overflow	Yes	P	N/A
з.	Are pumps adequate, maintained		ND	N/A
4.	Are the bar screens/comminutors maintained.		No	N/A
5.	Rags/Trash collected/stored/ properly disposed of.	105	No	NZA
6.	Are the grit chambers routinely cleaned?	Yes	No	MAR A
7.	Offensive/obnoxious odors	Yes	<b>₽</b>	N/A
Flo	w Equalization:			
1.	Sufficient capacity	YOF	No	N/A
2.	Adequate aeration	Yœ	No	N/A
з.	Odor Control		No	N/A
Pri	mary Clarifiers:			
1.	is there evidence of solids loss?	Yes	No	NXA
2.	ls there a problem with bulking?	Yas	No	NXA
3.	Are the skimmers functioning properly?	Yes	No	NĂA
4.	Are the weirs level?	Yes	No	NXA
5.	Are effluent weirs clean?	Yes	No	NXA
Sec	ondary Clarifiers:			
1.	ls there evidence of solids loss?	Yəş	(F)	N/A
2.	ls there a problem with bulking?	Yes	ND	N/A
з.	is the depth of the sludge blanket acceptable?	Yes	No	N/A
4.	Are the skimmers functioning properly?	Tas	No	N/A

2

		-		
5.	Are the weirs level?		No	N/A
6.	Are the effluent weirs clean?	Yes	No	NZA
7.	Does tank surface indicate poor sludge management (i.e. floating solids, gas)	Yes	<b>1</b>	N/A
Aeı	ration Basins:			
1.	Aerator type: Mechanical, Bl	lower	<u> </u>	·
2.	Mixed liquor Color: Black, Dark	C Brow	<u>`X_</u>	_,
	Med Brown,	Light	Brow	יר,
з.	Foaming: Heavy, Moderate $X_{-}$ , L	_ight_	•	
4.	Odors: Strong, Moderate, Li	ight_	<u>Қ</u> .	
5.	Air distribution: Excellent, Ad	iequa t	•	, Poor
Ret	turn Sludge Unit:			
i.	is there adequate sludge return back to the head of the plant?	•••	No	N/A .
2.	Sludge Color: Black, Brown_X_,	Ligh	t Bro	wn
Dig	gestors:		_	
1.	Digestor Type: Alnaerobic Aero	bic_	<u>(</u> .	
2.	Digestor Sludge Color: Black, D	ark B	rown_	<b></b> , Brown
з.	Digestor Odor: None, Musty,	Hydr	ogen	Sulfide_X
4.	Does the facility have dewatering devices?	Yes	No	NXA
5.	Are they functional? Y		No	NXA
6.	ls the facility wasting sludge properly?	Yes	No	man
Slu	udge Processing:			
1.	Frovide name of hauler:			
2.	Disposal Site: Dwner Name:		<u> </u>	
	Location:			
з.	Grade of Sludge:			

З

	Final Filters:	K	
	1. Performing satisfactory	Tes N/A	
	2. General Conditions of Frocess:	- //	
	Explain: Filters had just bo M'gh turbidity. Trickling Filters:	on machinashed causing	
	1. Performing Satisfactory	Yes No N/A	
	2. General Condition of Process:		
	Explain:		
	Disinfection:		
	1. Chlorinator Type: Gas $X$ , Hype	ochlorination,	
	Other, 1	Explain:	
	<ol> <li>Adequate baffles in contact chamber. (Minimum of 2)</li> </ol>	Mes No N/A	
	3. Is there solids evident in the chlorine contact chamber	YES NO N/A Turbidity hu	`Q
•	4. Is chlorine residual adequate?	YES NO N/A	
	<ol> <li>Is there adequate ventilation, proper location of exhaust fan in the chlorine room?</li> </ol>	NO N/A	
• ,	<ol><li>Is there a gas mask available?</li></ol>	S NO N/A	
	7. Are there duel scales and auto- matic switch over devices availa	able? No N/A	
_	Effluent:		
	1. The quality of the effluent appe	ears: Excellent,	
	Good Poor		
	<ol><li>Is there solids carry-over in the effluent?</li></ol>	Yes No N/A	
	Perc Pond Disposal Sites:	~	
•	<ol> <li>Are the ponds being maintained a rotated routinely?</li> </ol>	and es No N/A	
	2. Are the ponds over grown?	Yes No N/A	

**⊷** .

3.	Do the pond bottoms need cleaning out?	Yes No	
4.	Are the ponds exceeding capacity?	Yes No	
5.	Are there odors7	Y#5 No	
6.	Appearance of pond surface:	Weeds	, Algao,
	Scum, B	ubbles	Other
7.	Appearance of pond water:	Black	_, Brown, X gree
			, Clear
Spr	ay Field Disposal Site:		
1.	ls there adequate field rotation?	Yes No	A NYA
2.	Is there evidence of ponding?	Yes No	
з.	Is there evidence of runoff?	Yes No	D N A
4.	is there an accumulation of solids in the fields?	Yes No	S NXA
5.	Are the fields maintained (i.e. mowed, no broken spray heads. etc)?		NXA
Gen	eral Plant Conditions:		
1.	<pre>Is plant staffed properly by certified operators?</pre>	tes No	D N/A
2.	Are the site grounds adequately maintained?	es No	
з.	is water supply adequate for chlorination systems?	No.	D N/A
4.	ls water provided for plant wash down?	Yes No	D N/A
5.	ls there adequate potable water protection?	Ves No	D N/A
6.	ls auxilliary power excercised periodically?	Yes No	N N A.
7.	is the site fenced and locked?	Yes No	N/A

Inspectors Comments: operations appear satisfactory 10 Janine Kneemer licardo Moore 199 (Inspected by Da

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# Department of Environmental Protection

Response irginia B. Wetherell Secretary

Do Copy for action

OCD-C-WW-98-0586

FILE

Lawton Chiles Governor Central District 3319 Maguire Boulevard, Suite 232 Orlando, Florida 32803-3767

UTILITIES INCORPORATED OF FLORIDA 200 WEATHERFIELD AVENUE ALTAMONTE SPRINGS FLORIDA 32714

ATTENTION DONALD RASMUSSEN

Orange County - DW Wedgefield Subdivision Wastewater Facility - Permit No. DO48-259584 Noncompliance Letter

Dear Mr. Rasmussen:

On June 1, 1998, Department personnel conducted a routine inspection of your wastewater facility. A copy of the inspection report is enclosed for your review. During the course of the inspection, and/or determined from records on file in this office, the following deficiencies were noted:

- 1. Correction fluid was used on the Monthly Operating Reports (MORs) for June and August through November 1997. Corrections should be made by crossing a single line through the error and writing in the correction and the initials of the person making the correction.
- 2. The field meter, which is used to check the total residual chlorine continuous analyzer, did not have a record of daily calibrations against known standards.
- 3. The MORs are being submitted with an incorrect permit number.
- 4. A review of the ground water files for this facility indicated the following deficiencies:
  - a. Please provide the Department with a detailed explanation of the field procedures used to collect samples from the ground water monitoring wells.
  - b. Please ensure that the quarterly monitoring reports are completed in full with accurate information. Additionally, the report must include the appropriate reference to the preservation methods used. At a minimum the samples must be iced to 4°C in the field immediately after sample collection.
  - c. The fourth quarter of 1996 and the first and second quarters of 1997 Ground Water Monitoring Reports have not been received by the Department's Central District Office. Please submit the missing report to the Central District Office in Orlando, Florida. Please ensure that the quarterly ground water monitoring reports are submitted in a timely manner.

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

Wedgefield Subdivision OCD-C-WW-98-0586 Page 2

- d. The ground water elevations have not been reported on the quarterly reports received for 1996 and 1997. Additionally, the well completion reports provided to the Department show that the monitoring wells were constructed with 3 foot PVC pipe riser; however, a surveyed measurement for the well's top of casing (i.e., riser) is not included. Please provide the Department with a survey report of all of the monitoring well top of casing elevations in feet National Geodetic Vertical Datum (NGVD). The report must be certified by a Professional Land Surveyor (PLS). Additionally, please provide a summary of the ground water elevation data in a tabular format for the last eight (8) quarters. At a minimum, the table will include each monitoring well's top of casing in feet NGVD, ground surface elevation in feet NGVD, depth to ground water in feet, and water level elevation in feet NGVD. Accuracy of the elevation data shall be to 0.10 feet.
- 5. The Department lacks a current sludge analysis for this facility.

Please respond to these items, in writing, with a schedule of corrective action. Pursuant to Rule 62-4.100(2), F.A.C., failure to comply with pollution control rules shall be grounds for permit suspension or revocation and initiation of formal enforcement action. Your reply is requested within 14 days from the date of this letter. Your reply and any questions should be addressed to Michael E. Hall at (407) 893-3313.

Sincereh

Gary P. Miller Program Manager Wastewater Compliance/Enforcement

Date: <u>September 18, 1448</u>

GM/mh/ww

Enclosure

cc: Orange County Environmental Protection Department Ground Water Section, FDEP

 $\sum_{i=1}^{n} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i}^{i}(x_{i})}{\partial x_{i}} = \int_{-\infty}^{\infty} \frac{\partial f_{i$ 

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FLORIDA DEPARTMENT OF ENVIRONMENTAL PROT

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# WASTEWATER COMPLIANCE INSPECTION REF

Nam	e and Physical Location of Facility	GM	IS ID:	County		Entry	Date/Time
NEC	GEFIELD SUBDIVISION, WWTF	304	8203712	ORANGE		1JUN	11998 3:18 PM
1920	4 MEREDITH PKWY			Phone		<b>@</b> E:	xit Time/Date
ORA				568-6787	,	4:00	PM 1JUN1998
lam	e(s) of Fleld Representatives(s)	Title	e			Pho	ne
IATI	HAN VAN METER	OPI	ERATOR				
TIU 00 V	e and Address of Permittee or Designated R ITIES INCORPORATED OF FLORIDA / DONA WEATHERFIELD AVE MONTE SPRINGS, FLORIDA 32714			Phone	2	e c	Operator Certification #
spe	ection Type C E I Samples 1	Taken(Y/N):	N Ø Sar	nple ID#: NA		Samp	ies Split (Y/N): N
X	Domestic Industrial	Were	Photos Taken(Y/N): N	@ Log bo	ook Vol	ume : 1	@ Page 153-16
Co	mpliance With Permit Conditions (Y/N): N	 I	······································			·	<u></u>
ecc	mmended Actions: NONCOMPLIANCE			· · · · · · · · · · · · · · · · · · ·			
				District Off	lealDh	na Number	Date
	e(s) and Signature(s) of Inspector(s)	1/2 lo	/			one Number 3-3313	Date 9/8/96
	e(s) and Signature(s) of Inspector(s) ael E. Hall Africhael	fals	/	District Off Central (4			Date 9/8/44
	e(s) and Signature(s) of Inspector(s) ael E. Hall Africhael	fals					
lich	e(s) and Signature(s) of Inspector(s) ael E. Hall <u>A. C. heal</u> Signature of Reviewer In Gottwald			Central (4	107) 89	3-3313 Dine Number	
lich	ignature of Reviewer n Gottwald FACILI	<i>HUALI</i> ty co		Central (4 District Off Central / (4 EAS EVAL	107) 89 11ce/Pho 407) 89 UA1	3-3313 Dine Number 03-3313	9/8/98 Date 9/14/98
lich	ignature of Reviewer n Gottwald FACILI	<i>HUALI</i> ty co	MPLIANCE AR	Central (4 District Off Central / (4 EAS EVAL	107) 89 11ce/Pho 407) 89 UA1	3-3313 Dine Number 03-3313	9/8/98 Date 9/19/48
lich	iael E. Hall Afic had	<i>HUNLIX</i> TY CO =Marginal;	MPLIANCE AR U=Unsatisfactory; Bla	Central (4 District Off Central / ( EAS EVAL ink=Not Evaluato	107) 89 11ce/Pho 407) 89 U A 1 ed *Se	3-3313 Dine Number 03-3313 FED See Commen	9/8/98 Date 9/14/98
lich Sare	ignature of Reviewer n Gottwald FACILI S=Satisfactory: M=	<i>HUNLIX</i> TY CO =Marginal;	MPLIANCE AR U=Unsatisfactory; Bla 6. Sampling	Central (4 District Off Central / ( EAS EVAL ink=Not Evaluato	107) 89 11ce/Pho 407) 89 U A 7 ed *Se	3-3313 Dine Number 03-3313 E D see Commen 11. Effluent	9/8/98 Date 9/19/48 ts
lich sare	iael E. Hall Afic. had Signature of Reviewer In Gottwald FACILI S=Satisfactory, M= 1. Permit DO48-259584 2. Compliance Schedule	(full) TY CO =Marginal;	M P L I A N C E. A R U=Unsatisfactory; Bla 6. Sampling 7. Self-Monitoring Program	Central (4 District Off Central / ( EAS EVAL ink=Not Evaluato	07) 89	3-3313 Dine Number 03-3313 E D see Commen 11. Effluent 12. Grounde 13. Disposa	9/8/98 Date 9/19/48 ts
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been received by the Department's Central District Office. Please submit the missing report to the Central District Office in Orlando, Florida. Please ensure that the quarterly ground water monitoring reports are submitted in a timely manner. The ground water elevations have not been reported on the quarterly reports sceived for 1996 and 1997. Additionally, the well completion reports provided to the Department show that the monitoring wells were constructed with 3 foot PVC pipe riser; however, a surveyed measurement for the

well's top of casing (i.e., riser) is not included. Please provide the Department with a survey report of all of the monitoring well top of casing elevations in feet National Geodetic Vertical Datum (NGVD). The report must be certified by a Professional Land Surveyor (PLS). Additionally, please provide a summary of the ground water elevation data in a tabular format for the last eight (8) quarters. At a minimum, the table will include each monitoring well's top of casing in feet NGVD, ground surface elevation in feet NGVD, depth to ground water in feet, and water level elevation in feet NGVD. Accuracy of the elevation data shall be to 0.10 feet.

<u>DISPOSAL METHOD:</u> Satisfactory Reject pond well maintained with >1 ft. freeboard. Golf course well maintained with signs posted.

RESIDUALS MANAGEMENT: Marginal Contract with Brownies Environmental Services for sludge hauling on file. Current sludge analysis not available.

#### WEDGEFIELD UTILITIES, INC. AN AFFILIATE OF UTILITIES, INC. 2001 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS, FLORIDA 32714

CORPORATE OFFICES: **7335 Sanders Road inthbrook**, Illinois 60062 **Felephone:** 847-498-6440

Telephone: 407-869-1919 Florida: 800-272-1919 Fax: 407-869-6961

September 29, 1998

Mr. Michael E. Hall Florida Department of Environmental Protection 3319 Maguire Boulevard - Suite 232 Orlando, FL 32803-3767

RE: Wedgefield WWTF Orange County Response to Department's Noncompliance Letter Dated September 18, 1998

Dear Mr. Hall:

- In response to the referenced noncompliance letter from the Department and pursuant to Rule 62-4.100(2), F.A.C. a schedule of corrective action is outlined below. The unsatisfactory items outlined in the referenced letter are reprinted below in **bold** type, with our response immediately following.
  - 1. Correction fluid was used on the Monthly Operating Reports (MORs) for June and August through November 1997. Corrections should be made by crossing a single line through the error and writing in the correction and the initials of the person making the correction.

Operation personnel have been notified of this deficiency.

2. The field meter, which is used to check the total residual chlorine continuous analyzer, did not have a record of daily calibrations against known standards.

Bound log books have been placed at the treatment facility with known standards. Operations personnel have been notified of this deficiency.

3. The MOR's are being submitted with an incorrect permit number.

All MOR's submitted from the date of this letter will be submitted with the permit number as DO48-259584.

- 4. A review of the ground water files for this facility indicated the following deficiencies:
  - a. Please provide the Department with a detailed explanation of the field procedures used to collect samples from the ground water monitoring wells.

Our ground water monitoring wells are sampled by a contracted Laboratory, either Tri-Tech Labs or PBS&J. It is our understanding that the laboratories have a standard operating protocol on file with the Department. If a recent operating protocol is not on file please advise and we will have the labs forward a copy to the Central District Office. Mr. Michael E. Hall Florida Department of Environmental Protection `age Two

**b.** Please ensure that the quarterly monitoring reports are completed in full with accurate information. Additionally, the report must include the appropriate reference to the preservation methods used. At a minimum the samples must be iced to 4"C in the field immediately after sample collection.

Please refer to the laboratory operating protocol for field preservation of the samples. If additional information is required on the standard reporting format we will notify the laboratory of the proper reporting format. Please forward a copy of the standard reporting format if a change has occurred after January 01, 1993.

c. The fourth quarter of 1996 and the first and second quarters of 1997 Ground Water Monitoring Reports have not been received by the Department's Central District Office. Please submit the missing reports to the Central District Office in Orlando, Florida. Please ensure that the quarterly ground water monitoring reports are submitted in a timely manner.

Enclosed with this letter are the ground water monitoring reports as requested.

d. The ground water elevations have not been reported on the quarterly reports received for 1996 and 1997. Additionally, the well completion reports provided to the Department show that the monitoring wells were constructed with 3 foot PVC pipe riser; however, a surveyed measurement for the well's top of casing (i.e., riser) is not included. Please provide the Department with a survey report of all of the monitoring well top of casing elevations in feet National Geodetic Vertical Datum (NGVD). The report must he certified by a Professional Land Surveyor (PLS). Additionally, please provide a summary of the ground water elevation data in a tabular format for the last eight (8) quarters. At a minimum, the table will include each monitoring well's top of casing in feet NGVD, ground surface elevation in feet NGVD, depth of ground water in feet, and water level elevation in feet NGVD. Accuracy of the elevation data shall be to 0.10 feet.

Enclosed is a certified report from a Professional Land Surveyor indicating the top of casing elevations and ground elevation based on Orange County Datum and reported in NGVD. Also, enclosed is a breakdown in tabular format of the information requested for the last eight (8) quarters.

5. The Department lacks a current sludge analysis for this facility.

Enclosed is the latest Sludge Analysis for this facility.

September 29, 1998

Mr. Michael E. Hall Florida Department of Environmental Protection 1ge Three

If you require additional information please contact our office.

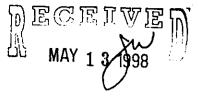
Sinderely,

David L. Orr, E.I. Assistant Operations Manager

cc: Don Rasmussen, V.P., UIOF Bryan Gongre, Area Manager, UIOF Charlie Förehand, Asst. Area Manager, UIOF File



ENVIRONMENTAL PROTECTION DEPARTMENT ANNA HACHA-LONG, Manager 2002 East Michigan Street Orlando, Florida 32806-4999



FILE

May 7, 1998

Donald Rasmussen Utilities Incorporated 200 Weatherfield Avenue Altamonte Springs, FL 32714

Re: Domestic Wastewater Treatment Facility - Wedgfield Gold & Country Club

OCEPD Permit: D095-01

Expires: January 3, 2000

Dear Mr. Rasmussen:

On May 6, 1998, an inspection of the above-referenced facility was conducted by a representative of this Department. At the time of inspection, the overall operation of your facility was found to be in compliance with the terms and conditions of the referenced permit.

Please review the enclosed inspection report for any comments and recommendations which may have been noted during the course of the inspection and record review.

Your efforts to help maintain our environment are appreciated. If you have any questions, contact me at the above address or at (407) 836-7454.

Sincerely,

icardo A. Moore.

Ricardo A. Moore Environmental Inspector

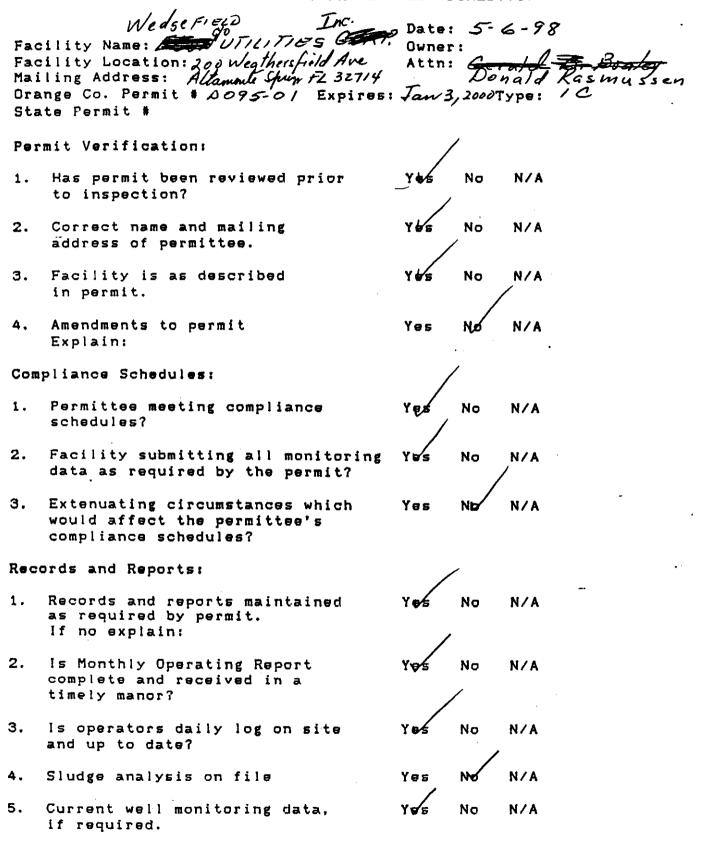
RAM/OJ/BE/AHL:mll Enclosure

> FDEP Central File

c:

001-068-2420-4343 INVOICE TO FOLLOW

#### ORANGE COUNTY ENVIRONMENTAL PROTECTION DEPARTMENT COMPLIANCE INVESTIGATION CHECKLIST WASTEWATER TREATMENT FACILITIES (DOMESTIC)

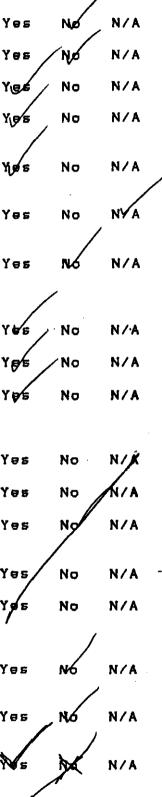


45-18 (3/91)

### Facility Site Review:

### Headworks

1.	Lift station, (grease build up)	Yes
2.	Evidence of lift station overflow	Yes
з.	Are pumps adequate, maintained	Yœe
4.	Are the bar screens/comminutors maintained.	Y o s
5.	Rags/Trash collected/stored/ properly disposed. of.	Ye s
6.	-Are the grit chambers routinely cleaned?	Yes
7.	Offensive/obnoxious odors	Yes
Flo	w Equalization:	
1.	Sufficient capacity	YUS
2.	Adequate aeration	¥₽∕₽
з.	Odor Control	Y 🕫 5
Pri	mary Clarifiers:	
i.	is there evidence of solids loss?	Yəs
2.	ls there a problem with bulking?	Yes
з.	Are the skimmers functioning properly?	Yəs
4.	Are the weirs level?	Yes
5.	Are effluent weirs clean?	Yе́б
Sec	ondary Clarifiers:	•
1.	Is there evidence of solids loss?	Yəs
2.	ls there a problem with bulking?	Yes
з.	ls the depth of the sludge blanket acceptable?	Ns
4.	Are the skimmers functioning	Yes



No

N/A

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properly?

		/		
5.	Are the weirs level?	Yes	No	N/A
6.	Are the effluent weirs clean?	Yes	No	, N/A
7.	Does tank surface indicate poor sludge management (i.e. floating solids, gas)	Yes	No	N/A
Aeı	ation Basins:		/	/
1.	Aerator type: Mechanical,	Blower_	<u> </u>	
2.	Mixed liquor Color: Black, Da	/		
	Med Brown	_, Light	Brøw	n
з.	Foaming: Heavy, Moderate	, Light_	<u> </u>	
4.	Odors: Strong, Moderate,			,
5.	Air distribution: Excellent,	Adequat		, Poor
Ret	urn Sludge Unit:		1	/
1.	Is there adequate sludge return back to the head of the plant?	Yes	No	N/A
2.	Sludge Color: Black, Brown	, Ligh	t Brow	WR+
Dig	estors:		/	
1.	Digestor Type: Almaerobic As	erobic 🗸	<u> </u>	1
2.	Digestor Sludge Color: Black	Dark B	rown_1	Brown
з.	Digestor Odor: None, Musty	, Hydro	ogen S	Sulfide
4.	Does the facility have dewatering devices?	Yes	No	N¥A
5.	Are they functional?	Yes / I	1 o <i>r</i>	NVA
6.	is the facility wasting sludge properly?	Yws	No	N/A
Slu	dge Processing:			
1.	Frovide name of hauler:	<u></u>		
2.	Disposal Site: Owner Name:			
	Location:			
э.	Grade of Sludge:			

Fir	nal Filters:	/		
1.	Performing satisfactory	Yers	No	N/A
2.	General Conditions of Frocess:			
	Explain:			<u>.                                    </u>
Tri	ickling Filters:			
1.	Ferforming Satisfactory	Yes	No	NYA
2.	General Condition of Process:			
	Explain:			
Dis	sinfection:			
1.	Chlorinator Type: Gas, Hypoch	lorina	tion_	*
	Other, Exp		, _	
2.	Adequate baffles in contact	Yes	No	N/A ·
2.	chamber. (Minimum of 2)	1 63		- N/ A
з.	ls there solids evident in the chlorine contact chamber?	Yes	NG	N/A
4.	ls chlorine residual adequate?	YUS	No	N/A
5.	ls there adequate ventilation, proper location of exhaust fan in the chlorine room?	YAS	No	N/A
6,	ls there a gas mask available?	Yuss	/No	N/A
7.	Are there duel scales and auto- matic switch over devices available	Yes	No	N/A
Eff	luent:			/
1.	The quality of the effluent appears	: Exe	cellen	t,
	Good Poor			
2.	ls there solids carry-over in the effluent7	Yes	NO	NZA
Per	c Pond Disposal Sites:	/	/	
1.	Are the ponds being maintained and rotated routinely?	YVS	No	N/A /
2.	Are the ponds over grown?	Yes	Ne	NZA
			-	

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3,	Do the pond bottoms need cleaning out?	Yes	Nø	N/A		
4.	Are the ponds exceeding capacity?	Yes	No	N/A		
5.	Are there odors7	Yes	Nø	N/A		
6.	Appearance of pond surface:	Weeds_	······································	Algae		
	Scum, B	upples		Other		
7.	Appearance of pond water:	Black	,	Brown,		
		Cloud	/	Clear		
Spra	ay Field Disposal Site:		<b>/</b> .			
1.	Is there adequate field rotation?	Yes	No	NZA		
2.	is there evidence of ponding?	Yes	NG	N/A		
з.	Is there evidence of runoff?	Yes	NO	N/A		
4.	ls there an accumulation of solids in the fields?	Yes	Na	N/A ·		
5.	Are the fields maintained (i.e. mowed, no broken spray heads, etc)?	Yes	No	N/A		
Gen	General Plant Conditions:					
1.	is plant staffed properly by certified operators?	Yes	No	N/A		
2.	Are the site grounds adequately maintained?	Yes	No	N/A		
з.	ls water supply adequate for chlorination systems?	Yes	No	N/A		
4.	ls water provided for plant wash down?	Yes	No	N/A		
5.	is there adequate potable water protection?	Yes	No	N/A		
6.	ls auxilliary power excercised periodically?	Yes	No	NXA		
7.	Is the site fenced and locked?	Yws	No	N/A		

Inspectops Comments: Mant operations are ratifactory at this time. Anloor.

Inspected by

Date

5-6-98

Wedgefield Utilities, Inc.

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Docket No. 991437-WU

25.30-440 (6) Permits

Test Year Ended June 30, 1999

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# Department of Environmental Protection

FEBLO 2 199919

Virginia B. Wetherell

Secretary

Lawton Chiles Governor

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Central District 3319 Maguire Boulevard, Suite 232 Orlando, Florida 32803-3767

NOTICE OF PERMIT

In the Matter of an Application for Permit by: WEDGEFIELD UTILITIES INC 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS FL 32714

Orange County - DW Wedgefield WWTF Wastewater Permit Application DEP File Number: FLA010900-001

ATTENTION DONALD RASMUSSEN VICE PRESIDENT

Enclosed is Permit Number FLA010900-001 to construct and operate a domestic wastewater facility issued under Section(s) 403.087 and 403.0885 of the Florida Statutes.

Any party to this order (permit) has the right to seek judicial review of the permit under section 120.68 of the Florida Statutes, by the filing of a Notice of Appeal under rule 9.110 of the Florida Rules of Appellate Procedure, with the Clerk of the Department of Environmental Protection, Office of General Counsel, Mail Station 35, 3900 Commonwealth Boulevard, Tallahassee, Florida 32399-3000 and by filing a copy of the notice of appeal accompanied by the applicable filing fees with the appropriate district court of appeal. The notice of appeal must be filed within thirty days after this notice is filed with the Clerk of the Department.

Executed in Orlando, Florida.

#### STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

DILA Christianne C. Ferraro, P.E.

Program Administrator Water Facilities 3319 Maguire Boulevard, Suite 232 Orlando, FL 32803-3767 Phone: (407)894-7555

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

Printed on recycled paper.

FILING AND ACKNOWLEDGMENT FILED, on this date, under Section 120.52(7), Florida Statutes, with the designated Department Clerk, receipt of which is hereby acknowledged.

Cherasafardin Clerk <u>29/99</u> Date

CCF/lm/cs

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Enclosures: Permit and DMR

Copies furnished to: Compliance Section Groundwater Section Eduardo Avellaneda, P.E. Orange County Environmental Protection Department

# CERTIFICATE OF SERVICE



# Department of Environmental Protection

Lawton Chiles Governor Central District 3319 Maguire Boulevard, Suite 232 Orlando, Florida 32803-3767

Virginia B. Wetherell Secretary

# STATE OF FLORIDA DOMESTIC WASTEWATER FACILITY PERMIT

**PERMITTEE:** 

Wedgefield Utilities, Inc. Mr. Donald Rasmussen Vice President 200 Weathersfield Avenue Altamonte Springs, FL 32714 PERMIT NUMBER: ISSUANCE DATE: EXPIRATION DATE: GMS I.D. NO.: FLA010900-001 January 25, 2004 3048P03712

# FACILITY:

Wedgefield WWTF 3100 Bancroft Boulevard Orlando, FL Orange County Latitude: 28° 30' 00" N Longitude: 81° 05' 00" W

This permit is issued under the provisions of Chapter 403, Florida Statutes, and applicable rules of the Florida Administrative Code. The above named permittee is hereby authorized to construct and operate the facilities shown on the application and other documents attached hereto or on file with the Department and made a part hereof and. specifically described as follows:

#### TREATMENT FACILITIES:

An existing 0.200 million gallon per day (MGD) annual average daily flow (AADF) permitted capacity ring steel contact stabilization activated sludge domestic wastewater treatment plant consisting of flow equalization, influent screening, contact aeration, reaeration, secondary clarification, two multi-media filters, a chlorination tank, electronic chlorine and turbidity sensors and motorized valves for reject water diversion, and aerobic digestion of residuals.

Facilities also include an existing  $0.92\pm$  acre, 2.15 million gallon reject water storage/percolation pond with pumping provisions to return reject water to the plant headworks for proper treatment, and a 5± acre, 7.18 million gallon lined wet weather reclaimed water storage/equalization pond.

Construction includes the addition of a second identical 0.200 MGD AADF permitted capacity ring steel contact stabilization wastewater treatment plant, a new influent splitter box with bar screen, chemical feed facilities, two new Aqua-Disk membrane filters (0.5 MGD total treatment capacity) followed by a common filtration blending tank, a second parallel chlorine contact tank followed by a common chlorination blending tank, electronic chlorine and turbidity sensors with motorized valves for reject water diversion, raise and rebuild the effluent pump station (which will increase wet weather storage capacity to 12+ million gallons) and add a standby emergency power generator.

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

Printed on recycled paper.

Wedgefield Utilities, Inc. 200 Weathersfield Avenue Altamonte Springs, FL 32714 PERMIT NUMBER: EXPIRATION DATE: FACILITY: FLA010900-001 January 25, 2004 Wedgefield WWTF

# **REUSE:**

Land Application: An existing 0.270 MGD AADF permitted capacity slow-rate public access system (R001) consisting of irrigation at the 120± acre Wedgefield Golf Course. The golf course is located approximately at Latitude 28° 30' 31.5" N and Longitude 81° 06' 43.7" W.

Expansion of reuse system R001 includes construction of three additional irrigation areas around the treatment plant site with the following disposal capacities: Zone 1 @ 5.07 acres and 11,400 GPD, Zone 2 @ 16.36 acres and 63,400 GPD and Zone 3 @ 10.34 acres and 23,200 GPD, for an additional disposal capacity of 98,000 GPD, and a total expected disposal capacity of 0.368 MGD AADF.

NOTE: Flows through the treatment plant are initially limited to 0.200 MGD AADF, the permitted treatment capacity. Upon completion of construction of the second treatment plant and expansion of the R001 reuse system, and depending on the results of the overall load test for disposal capacity (see Condition III.6. of this permit), flows through the treatment plant may be increased to 0.368 MGD AADF.

OTHER PERMITS: Existing Department operation permit DO48-259584, was issued January 9 1995 and expires January 3, 2000. That permit, and the conditions contained therein or attached thereto, will be considered null and void and replaced by this permit FLA010900-001, upon issuance.

IN ACCORDANCE WITH: The limitations, monitoring requirements and other conditions set forth in Pages 1 through 18 of this permit.

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PL	.ÍTTEE:	Wedgefield Utilities, Inc. 200 Weathersfield Avenue Altamonte Springs, FL 32714	PERMIT N BER: EXPIRATION DATE: FACILITY:	FLA010900-001 January 25, 2004 Wedgefield WWTF

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# I. RECLAIMED WATER AND EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS

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# A. Reuse and Land Application Systems

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1. During the period beginning on the issuance date and lasting through the expiration date of this permit, the permittee is authorized to direct reclaimed water to Reuse System R001. Such reclaimed water shall be limited and monitored by the permittee as specified below:

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		Ĩ	Reclaimed Water Limitations			Monitoring Requirements				
Parameter	Units	Max/Min	Annual Average	Monthly Average	Weekly Average	Single Sample	Monitoring Frequ <del>en</del> cy	Sample Type	Monitoring Location Site Number	Notes
Flow, total through treatment plant	MGD	Maximum'	0.200	-		-	Continuous	Recording flow meters and totalizers	EFF-I	See Cond. I.A.4.
BOD, Carbonaceous 5 day, 20C	mg/L	Maximum	20.0	30.0	45.0	60.0	Every Two Weeks	8-hour flow proportioned composite	EFA-1	
Nitrogen, Nitrate, Total (as N)	mg/L	Maximum	-	-	-	12.0	Monthly	8-hour flow proportioned composite	EFA-1	See Cond. 1.A.8.
Solids, Total Suspended	mg/L	Maximum	-	-	-	5.0	3 Days/Week	Grab	EFB-1	See Cond. I.A.5.
pH	s.u.	Range	-	-	-	6.0 to 8.5	Continuous	Analyzer	EFA-I	See Cond. I.A.3.
Coliform, Fecal		I	See Permit Cor	ndition I.A.5.	L		3 Days/Week	Grab	EFA-1	
Total Residual Chlorine (For Disinfection)	mg/L	Minimum	-	-	-	1.0	Continuous	Analyzer	EFA-1	See Cond. I.A.6.
Turbidity	NTU's	Maximum		See Permit Co	ndition I.A.7.	·	Continuous	Analyzer	EFB-1	See Cond.

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2. Reclaimed water samples shall be taken at the monitoring site locations listed in Permit Condition I. A. 1. and as described below:

Monitoring Location Site Number	Description of Monitoring Location
EFB-1	After filtration and before disinfection or at the post filtration blending tank
EFA-1	Discharge from the chlorination tank or at the post chlorination blending tank
EFF-1	Master flow meter at chlorination tank(s)

- 3. Hourly measurement of pH during the period of required operator attendance may be substituted for continuous measurement. [Chapter 62-601, Figure 2, Footnotes 1 and 2, 12-24-96]
- 4. Recording flow meters and totalizers shall be utilized to measure flow and calibrated at least annually. [62-601.200(17) and .500(6), 12-24-96]
- 5. Over a 30 day period, 75 percent of the fecal coliform values (the 75th percentile value) shall be below the detection limits. Any one sample shall not exceed 25 fecal coliform values per 100 mL of sample. Any one sample shall not exceed 5.0 milligrams per liter of total suspended solids (TSS) at a point before application of the disinfectant. Note: To report the 75th percentile value, list the fecal coliform values obtained during that month in ascending order. Report the value of the sample that corresponds to the 75th percentile (multiply the number of samples by 0.75). For example, for 30 samples, report the corresponding fecal coliform value for the 23rd value of ascending order. [62-600.440(5)(f), 12-24-96]
- 6. The minimum total chlorine residual shall be limited as described in the approved operating protocol, such that the permit limitation for fecal coliform bacteria will be achieved. In no case shall the total chlorine residual be less than 1.0 mg/L. [62-600.440(5)(b), 12-24-96; 62-610.460(2), 1-9-96; and 62-610.463(2), 1-9-96]
- The maximum turbidity shall be limited as described in the approved operating protocol, such that the permit limitations for total suspended solids and fecal coliforms will be achieved. [62-610.463(2), 1-9-96]
- Nitrate nitrogen (NO₃) concentration in the water discharged to the reject water storage/percolation pond shall not exceed 12.0 mg/L, or as required to comply with Rule 62-610.510, F.A.C. [62-610.510, 1-9-96]

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# I. RECLAIMED WATER AND EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS (con't)

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# B. Other Limitations and Monitoring and Reporting Requirements

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1. During the period beginning on the issuance date and lasting through the expiration date of this permit, the treatment facility shall be limited and monitored by the permittee as specified below:

				Limitations			Monitoring Requirements			
Parameter	Units	Max/Min	Annual Average	Monthly Average	Weekly Average	Single Sample	Monitoring Frequency	Sample Type	Monitoring Location Site Number	Notes
Flow, total from Groundwater makeup well	MGD	Report					Continuous	Recording flow meters and totalizers	EFF-6	See Cond I.B.4.
Flow, total to Zone 3	MGD	Maximum	0.0232	•	-	-	Continuous	Recording flow meters and totalizers	EFF-5	See Conc LB.4.
Flow, total to Zone 2	MGD	Maximum	0.0634	-	-	-	Continuous	Recording flow meters and totalizers	EFF-4	See Cond LB.4.
Flow, total to Zone 1	MGD	Maximum	0.0114	-	-	-	Continuous	Recording flow meters and totalizers	EFF-3	See Cond I.B.4.
Flow, total to golf course	MGD	Maximum'	0.270	-	-	-	Continuous	Recording flow meters and totalizers	EFF-2	See Cond I.B.4.
BOD, Carbonaceous 5 day, 20C	mg/L	Report	-	-	-	-	Every Two Weeks	8-hour flow proportioned composite	INF-1	See Cond I.B.3.
Solids, Total Suspended	mg/L	Report	-	-	-	-	Every Two Weeks	8-hour flow proportioned composite	INF-1	See Conc I.B.3.

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2. Samples shall be taken at the monitoring site locations listed in Permit Condition I. B. 1 and as described below:

Monitoring Location Site Number	Description of Monitoring Location
INF-1	Influent to surge tank or influent sample box
EFF-2	Flow meter in line to golf course
EFF-3	Flow meter in line to Zone 1
EFF-4	Flow meter in line to Zone 2
EFF-5	Flow meter in line to Zone 3
EFF-6	Flow meter on groundwater makeup well

- 3. Influent samples shall be collected so that they do not contain digester supernatant or return activated sludge, or any other plant process recycled waters. [62-601.500(4), 12-24-96]
- 4. Recording flow meters and totalizers shall be utilized to measure flow and calibrated at least annually. [62-601.200(17) and .500(6), 12-24-96]
- 5. Parameters which must be monitored as a result of a surface water discharge shall be analyzed using a sufficiently sensitive method in accordance with 40 CFR Part 136. Parameters which must be monitored as a result of a ground water discharge (i.e., underground injection or land application system) shall be analyzed in accordance with Chapter 62-601, F.A.C. [62-620.610(18), 12-24-96]
- 6. The permittee shall provide safe access points for obtaining representative influent, reclaimed water, and effluent samples which are required by this permit. [62-601.500(5), 12-24-96]
- 7. During the period of operation authorized by this permit, the permittee shall complete and submit to the Department on a monthly basis Discharge Monitoring Report(s) (DMR), Form 62-620.910(10), as attached to this permit. The permittee shall make copies of the attached DMR form(s) and shall submit the completed DMR form(s) to the Department's Central District Office at the address specified in Permit Condition I.B.10. by the twenty-eighth (28th) of the month following the month of operation. [62-620.610(18), 12-24-96][62-601.300(1), (2), and (3), 12-24-96]
- 8. During the period of operation authorized by this permit, reclaimed water or effluent shall be monitored annually for the primary and secondary drinking water standards contained in Chapter 62-550, F.A.C., (except for turbidity, total coliforms, color, and corrosivity). Twenty-four hour composite samples shall be used to analyze reclaimed water or effluent for the primary and secondary drinking water standards. These monitoring results shall be reported to the Department annually on the Reclaimed Water or Effluent Analysis Report, Form 62-620.910(15), or in another format if requested by the permittee and if approved by the Department as being compatible with data entry into the Department's computer system. During years when a permit is not renewed, a certification stating that no new non-domestic wastewater dischargers have been added to the collection system since the last reclaimed water or effluent analysis report or the certification shall be completed and submitted in a timely manner so as to be received by the Department's Central District Office by January 1st of each year. [62-601.300(4), 12-24-96][62-601.500(3), 12-24-96]
- 9. The permittee shall submit an annual report of reclaimed water utilization using Form 62-610.300(4)(a)2. by January 1st of each year. [62-610.870(3), 1-9-96]

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10. Unless specified otherwise in this permit, all reports and notifications required by this permit, including 24-hour notifications, shall be submitted to or reported to, as appropriate, Orange County Environmental Protection Department and the Department's Central District Office at the address specified below:

Florida Department of Environmental Protection Central District Office 3319 Maguire Boulevard Suite 232 Orlando, Florida 32803-3767

Phone Number - (407) 894-7555 FAX Number - (407) 897-2966 All FAX copies shall be followed by original copies.

# **II. RESIDUALS MANAGEMENT REQUIREMENTS**

- The method of residuals use or disposal by this facility is transport, by Agreements with Mid-Florida Environmental Services, Inc., to the Lake Monroe Residuals Management Facility (RMF), located in the I-4 Industrial Park, Sanford, Florida, and/or Brownies Environmental Services Residuals Management Facility (RMF), located in Orlando, Florida, for lime stabilization and land application. The Department shall be notified at least sixty (60) days prior to the termination of either Agreement between the permittee and Mid-Florida Environmental Services, Inc. and /or Brownies Environmental Services.
- 2. The permittee shall be responsible for proper treatment, management, use, and land application or disposal of its residuals. [62-640.300(5), 3-30-98]
- 3. The permittee shall not be held responsible for treatment, management, use, or land application violations that occur after its residuals have been accepted by a permitted residuals management facility with which the source facility has an agreement in accordance with Rule 62-640.880(1)(c), F.A.C., for further treatment, management, use or land application. [62-640.300(5), 3-30-98]
- 4. The permittee shall keep hauling records to track the transport of residuals between facilities. The hauling records shall contain the following information:

#### Source Facility

- 1. Date and Time Shipped
- 2. Amount of Residuals Shipped
- 3. Degree of Treatment (if applicable)
- 4. Name and ID Number of Residuals Management Facility or Treatment Facility

**Residuals Management Facility or Treatment Facility** 

- 1. Date and Time Received
- 2. Amount of Residuals Received
- 3. Name and ID Number of Source Facility
- 4. Signature of Hauler
- 5. Signature of Responsible Party at Residuals Management Facility or Treatment Facility

These records shall be kept for five years and shall be made available for inspection upon request by the Department. A copy of the hauling records information maintained by the source facility shall be provided upon delivery of the residuals to the residuals management facility or treatment facility. The permittee shall report to the Department within 24 hours of discovery any discrepancy in the quantity of residuals leaving the source facility and arriving at the residuals management facility or treatment facility. [62-640.880(4), 3-30-98]

5. Storage of residuals or other solids at the permitted facility shall require prior written notification to the Department. [62-640.300(4), 3-30-98]

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# **III. GROUND WATER MONITORING REQUIREMENTS**

- During the period of operation authorized by this permit, the permittee shall continue to sample ground water at the existing monitoring wells identified in Items III.4 below, in accordance with this permit and the approved ground water monitoring plan prepared in accordance with Rule 62-522.600, F.A.C. Within 90 days of placing the new reuse facilities in operation, the permittee shall begin sampling ground water at the new monitoring wells identified in Items III. 4 below, in accordance with this permit and the approved groundwater monitoring plan. [62-522.600, 4-14-94][62-610.412, 62-610.463, 1-9-96]
- 2. All new ground water monitoring wells identified in Item III. 4. below, shall be installed within 90 days of the issuance of this permit. Within 30 days of installation of a new monitoring well, the permittee shall submit a well location map and detailed information on the well's construction on the attached DEP Form 62-522.900(3). [62-522.600, 4/14/94]
- Prior to construction of the new ground water monitoring well, a soil boring shall be made at the new monitoring well location in order to properly size the well depth and screen interval. [62-522.900(3), 4/14/94]
- 4. The following monitoring wells shall be sampled quarterly for Land Application System R001:

DEP Well Name	GMS#	WAFR #	10.00 C. 10.00 C. 10.00 C.	Aquifer Monitore d	Well Type	New or Existing	
Golf Course						· · · ·	
MW-1	348A13413	6006	15	Surficial	Background	Existing	
MW-2	348A13414	6005	15	Surficial	Background	Existing	
MW-3	348A13415	6004	15	Surficial	Background	Existing	
MW-4	348A13416	6003	17.5	Surficial	Intermediate	Existing	
MW-6	348A13418	6001	17.5	Surficial	Compliance	Existing	
MW-7	348A13419	6000	19.5	Surficial	Intermediate	Existing	
On-Site Irrigation							
MWC-1	None	32995		Surficial	Compliance	New	
MWC-2	None	32996		Surficial	Compliance	New	
MWC-3	None	32997		Surficial	Compliance	New	

- 5. The following parameters shall be analyzed for each of the monitoring wells identified in the Permit Condition III.4:
  - a. Water level (field measurement)
  - b. Nitrate (as N)
  - c. Total dissolved solids
  - d. Chloride
  - e. Fecal Coliform
  - f. pH
  - g. Turbidity

[62-522.600 (11) (b), 4-1-94] [62-601.300(3), 62-601.700, and Figure 3 of 62-601, 5-31-93]



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6. A load test shall be conducted as outlined in the Civil Engineering Group letter dated December 4, 1998. Since this permit provides only a conditional approval of the effluent disposal capacity (0.27 MGD for the golf course and 0.098 MGD for the on-site irrigation areas), the load test must be conducted for a duration of one year to determine the actual disposal capacity of the site. Based on the results of the load test to be obtained for a year, the Department will readjust, through a modification of this permit, the effluent disposal capacity of the site, as deemed necessary.

As part of the load test requirements, two existing piezometers (Well #1 and Well #2 near the bayhead as shown on Sheet C-12 dated 12/1/98) and three staff gauges (at ponding area south of wetland, storage basin, and reject pond) must be utilized for water level measurements as outlined in the aforementioned letter. The results of water level measurements from these locations shall be reported along with the reporting requirements presented in Item III. 11. below.

- 7. Ground water monitoring wells shall be purged prior to sampling to obtain representative samples. [62-601.700(5), 5-31-93]
- 8. In accordance with Part D of Form 62-620.910(10), water levels shall be recorded before purging wells for sample collection. Elevation references shall include the top of the well casing and land surface at each well site (NGVD) at a precision of plus or minus 0.1 foot. [62-610.424(3), 4-2-94]
- 9. Ground water monitoring parameters shall be analyzed in accordance with Chapter 62-601, F.A.C. [62-620.610(18), 11-29-94]
- 10. Analyses shall be conducted on un-filtered samples, unless filtered samples have been approved by the Department as being more representative of ground water conditions. [62-620.320(6), 12-24-96]
- Ground water monitoring test results shall be submitted on Part D of Form 62-620.910(10). Results shall be submitted with the April, July, October and January DMR's for each year during the period of operation allowed by this permit. A completed Certification Page shall accompany each quarter of monitoring data. Load test data for the quarter shall be submitted with the quarterly monitoring data. [62-4.070(3), 7/4/95, 62-522.600(10) and (11)(b), 4/14/94] [62-601.300(3), 62.601.700, and Figure 3 of 62-601] [62-620.610(18), 11-29-94]
- 12. If a monitoring well becomes damaged or cannot be sampled for some reason, the permittee shall notify the Department with a written report within seven days detailing the circumstances and remedial measures taken or proposed to be taken. Replacement of monitoring wells shall be approved in advance by the Department. [62-620.320(6), 12-24-96]
- 13. Note: this facility is not required to provide an annual summary report of ground water monitoring data. [62-4.070(3), 10-16-95]

# IV. ADDITIONAL REUSE AND LAND APPLICATION REQUIREMENTS

#### Part III Public Access System(s)

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1. All ground water quality criteria specified in Chapter 62-520, F.A.C., shall be met at the edge of the zone of discharge. For users of reclaimed water, the zone of discharge shall extend horizontally 100 feet from the application site or to the user's property line, whichever is less, and vertically to the base of the surficial aquifer. [62-520.200(23), 12-9-96] [62-522.400 and 62-522.410, 12-9-96]

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- 2. The treatment facilities shall be operated in accordance with the approved operating protocol. Only reclaimed water that meets the criteria established in the approved operating protocol may be released to system storage or to the reuse system. Reclaimed water that fails to meet the criteria in the approved operating protocol shall be directed to reject storage for subsequent additional treatment. The operating protocol shall be reviewed and updated periodically to ensure continuous compliance with the minimum treatment and disinfection requirements. Updated operating protocols shall be submitted to the Department's Central District Office for review and approval upon revision of the operating protocol and with each permit application. [62-610.320(6) and 62-610.463(2), 1-9-96]
- 3. Cross-connections to the potable water system are prohibited. [62-610.469(7), 1-9-96]
- 4. A cross-connection control program shall be implemented and/or remain in effect within the areas where reclaimed water will be provided for use. [62-610.469(7), 1-9-96]
- 5. Maximum obtainable separation of reclaimed water lines and potable water lines shall be provided and the minimum separation distances specified in Rule 62-610.469(7), F.A.C., shall be provided. Reuse facilities shall be color coded or marked. Underground piping which is not manufactured of metal or concrete shall be color coded using Pantone Purple 522C using light stable colorants. Underground metal and concrete pipe shall be color coded or marked using purple as the predominant color. [62-610.469(7), 1-9-96]
- 6. In constructing reclaimed water distribution piping, the permittee shall maintain a 75-foot setback distance from a reclaimed water transmission facility to public water supply wells. No setback distances are required to other potable water supply wells or to any nonpotable water supply wells. [62-610.471(3), 1-9-96]
- 7. A setback distance of 75 feet shall be maintained between the edge of the wetted area and potable water supply wells, unless the utility adopts and enforces an ordinance prohibiting potable water supply wells within the reuse service area. No setback distances are required to any nonpotable water supply well, to any surface water, to any developed areas, or to any private swimming pools, hot tubs, spas, saunas, picnic tables, barbecue pits, or barbecue grills. [62-610.471(1), (2), (5), and (7), 1-9-96]
- Reclaimed water shall not be used to fill swimming pools, hot tubs, or wading pools. [62-610.469(4), 1-9-96]
- 9. Low trajectory nozzles, or other means to minimize aerosol formation shall be used within 100 feet from outdoor public eating, drinking, or bathing facilities. [62-610.471(6), 1-9-96]
- 10. A setback distance of 100 feet shall be maintained from indoor aesthetic features using reclaimed water to adjacent indoor public eating and drinking facilities. [62-610.471(8), 1-9-96]
- The public shall be notified of the use of reclaimed water. This shall be accomplished by posting of advisory signs in areas where reuse is practiced, notes on scorecards, or other methods. [62-610.468(2), 1-9-96]
- 12. Routine aquatic weed control and regular maintenance of storage pond embankments and access areas are required. [62-610.414 and 62-610.464, 1-9-96]
- 13. Overflows from emergency discharge facilities on storage ponds shall be reported as an abnormal event to the Department's Central District Office within 24 hours of an occurrence as an abnormal event. The provisions of Rule 62-610.800(9), F.A.C., shall be met. [62-610.800(9), 1-9-96]

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# V. OPERATION AND MAINTENANCE REQUIREMENTS

#### Staffing Requirements

1. During the period of operation authorized by this permit, the wastewater facilities shall be operated under the supervision of a(n) operator(s) certified in accordance with Chapter 61E12-41, F.A.C. In accordance with Chapters 62-699 & .610, F.A.C., this facility is a Category II, Class C facility and, at a minimum, operators with appropriate certification must be on the site as follows:

A Class C or higher operator 6 hours/day for 7 days/week. The lead operator must be at minimum Class B. Acceptable quality reclaimed water may be diverted to the public access reuse systems at all times contingent upon the following: (a) Automatic monitoring equipment and automatic diversion equipment must be in operation and functional at all times including weekends and holidays, and (b) a Class C certified operator, or higher, must be available by phone or pager at all times when not in

attendance at the wastewater treatment plant site.

[62-620.630(3), 12-24-96] [62-699.310 &.311, 5-20-92] [62-610.462, 1-9-96]

2. A certified operator shall be on call during periods the plant is unattended. [62-699.311(1), 5-20-92]

# Capacity Analysis Report and Operation and Maintenance Performance Report Requirements

- 3. The application to renew this permit shall include an updated capacity analysis report prepared in accordance with Rule 62-600.405, F.A.C. [62-600.405(5), 12-24-96]
- 4. The application to renew this permit shall include a detailed operation and maintenance performance report prepared in accordance with Rule 62-600.735, F.A.C. [62-600.735(1), 12-24-96]

#### **Record Keeping Requirements**

- 5. The permittee shall maintain the following records and make them available for inspection on the site of the permitted facility:
  - a. Records of all compliance monitoring information, including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation and a copy of the laboratory certification showing the certification number of the laboratory, for at least three years from the date the sample or measurement was taken;
  - b. Copies of all reports required by the permit for at least three years from the date the report was prepared;
  - c. Records of all data, including reports and documents, used to complete the application for the permit for at least three years from the date the application was filed;
  - d. Monitoring information, including a copy of the laboratory certification showing the laboratory certification number, related to the residuals use and disposal activities for the time period set forth in Chapter 62-640, F.A.C., for at least three years from the date of sampling or measurement;
  - e. A copy of the current permit;

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f. A copy of the current operation and maintenance manual as required by Chapter 62-600, F.A.C.;

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- g. A copy of the facility record drawings;
- h. Copies of the licenses of the current certified operators; and
- i. Copies of the logs and schedules showing plant operations and equipment maintenance for three years from the date of the logs or schedules. The logs shall, at a minimum, include identification of the plant; the signature and certification number of the operator(s) and the signature of the person(s) making any entries; date and time in and out; specific operation and maintenance activities; tests performed and samples taken; and major repairs made. The logs shall be maintained on-site in a location accessible to 24-hour inspection, protected from weather damage, and current to the last operation and maintenance performed.

[62-620.350, 12-24-96][61E12-41.010(1)(e), 11-02-93]

# **VI. SCHEDULES**

1. The following construction schedule for the expanded facilities shall be followed, unless a minor permit revision is issued to amend the schedule:

	Implementation Step	Completion Date			
1	Plans and Specification Complete	July 15, 1998			
2	Begin Construction	February 15, 1999			
3	End Construction	December 1, 1999			
4	Operational Level Attained, Begin Reuse	December 15, 1999			
Footnote 1: Contingent upon compliance with Specific Condition VIII.1. below.					

[62-620.400, 12-24-96]

# VII. INDUSTRIAL PRETREATMENT PROGRAM REQUIREMENTS

This facility is not required to have a pretreatment program at this time. [62-625.500, 1-8-97]

# VIII. OTHER SPECIFIC CONDITIONS

- 1. Prior to placing the modified portions of the existing facilities into operation or any individual unit processes into operation, for any purpose other than testing for leaks and equipment operation, the permittee shall complete and submit to the Department DEP Form 62-620.910(12), Notification of Completion of Construction for Domestic Wastewater Facilities. This notification shall include assurance that the bayhead discharge culvert has been plugged and/or properly abandoned to preclude any off-site discharge to surface waters. [62-620.630(2), 12-24-96]
- Within six months after a facility is placed in operation, the permittee shall provide written certification to the Department on Form 62-620.910(13) that record drawings pursuant to Chapter 62-600, F.A.C., and that an operation and maintenance manual pursuant to Chapters 62-600 and 62-610, F.A.C., as applicable, are available at the location specified on the form. [62-620.630(7), 12-24-96]
- 3. If the permittee wishes to continue operation of this wastewater facility after the expiration date of this permit, the permittee shall submit an application for renewal, using Department Forms 62-620.910(1) and (2), no later than one-hundred and eighty days (180) prior to the expiration date of this permit. [62-620.410(5), 12-24-96]

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- 4. Florida water quality criteria and standards shall not be violated as a result of any discharge or land application of reclaimed water or residuals from this facility. [62-610.850(1)(a) and (2)(a), 1-9-96]
- 5. In the event that the treatment facilities or equipment no longer function as intended, are no longer safe in terms of public health and safety, or odor, noise, aerosol drift, or lighting adversely affects neighboring developed areas at the levels prohibited by Rule 62-600.400(2)(a), F.A.C., corrective action (which may include additional maintenance or modifications of the permitted facilities) shall be taken by the permittee. Other corrective action may be required to ensure compliance with rules of the Department. [62-600.410(8), 12-24-96]
- 6. The deliberate introduction of stormwater in any amount into collection/transmission systems designed solely for the introduction (and conveyance) of domestic/industrial wastewater; or the deliberate introduction of stormwater into collection/transmission systems designed for the introduction or conveyance of combinations of storm and domestic/industrial wastewater in amounts which may reduce the efficiency of pollutant removal by the treatment plant is prohibited.
   [62-604.130(3), 12-26-96]
- 7. Collection/transmission system overflows shall be reported to the Department in accordance with Permit Condition IX. 20. [62-604.550, 12-26-96] [62-620.610(20), 12-24-96]
- 8. The operating authority of a collection/transmission system and the permittee of a treatment plant are prohibited from accepting connections of wastewater discharges which have not received necessary pretreatment or which contain materials or pollutants (other than normal domestic wastewater constituents):
  - a. Which may cause fire or explosion hazards; or
  - b. Which may cause excessive corrosion or other deterioration of wastewater facilities due to chemical action or pH levels; or
  - c. Which are solid or viscous and obstruct flow or otherwise interfere with wastewater facility operations or treatment; or
  - d. Which result in treatment plant discharges having temperatures above 40°C.

[62-604.130(4), 12-26-96]

- 9. The treatment facility, storage ponds, rapid infiltration basins, and/or infiltration trenches shall be enclosed with a fence or otherwise provided with features to discourage the entry of animals and unauthorized persons. [62-600.400(2)(b), 12-24-96]
- Screenings and grit removed from the wastewater facilities shall be collected in suitable containers and hauled to a Department approved Class I landfill or to a landfill approved by the Department for receipt/disposal of screenings and grit. [62-701.300(1)(a), 4-23-97]
- 11. The permittee shall provide adequate notice to the Department of the following:
  - a. Any new introduction of pollutants into the facility from an industrial discharger which would be subject to Chapter 403, F.S., and the requirements of Chapter 62-620, F.A.C. if it were directly discharging those pollutants; and
  - b. Any substantial change in the volume or character of pollutants being introduced into that facility by a source which was identified in the permit application and known to be discharging at the time the permit was issued.

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Adequate notice shall include information on the quality and quantity of effluent introduced into the facility and any anticipated impact of the change on the quantity or quality of effluent or reclaimed water to be discharged from the facility.

[62-620.625(2), 12-24-96]

# IX. GENERAL CONDITIONS

- 1. The terms, conditions, requirements, limitations and restrictions set forth in this permit are binding and enforceable pursuant to Chapter 403, Florida Statutes. Any permit noncompliance constitutes a violation of Chapter 403, Florida Statutes, and is grounds for enforcement action, permit termination, permit revocation and reissuance, or permit revision. [62-620.610(1), 12-24-96]
- 2. This permit is valid only for the specific processes and operations applied for and indicated in the approved drawings or exhibits. Any unauthorized deviations from the approved drawings, exhibits,
- specifications or conditions of this permit constitutes grounds for revocation and enforcement action by the Department. [62-620.610(2), 12-24-96]
- 3. As provided in Subsection 403.087(6), F.S., the issuance of this permit does not convey any vested rights or any exclusive privileges. Neither does it authorize any injury to public or private property or any invasion of personal rights, nor authorize any infringement of federal, state, or local laws or regulations. This permit is not a waiver of or approval of any other Department permit or authorization that may be required for other aspects of the total project which are not addressed in this permit. [62-620.610(3), 12-24-96]
- 4. This permit conveys no title to land or water, does not constitute state recognition or acknowledgment of title, and does not constitute authority for the use of submerged lands unless herein provided and the necessary title or leasehold interests have been obtained from the State. Only the Trustees of the Internal Improvement Trust Fund may express State opinion as to title. [62-620.610(4), 12-24-96]
- 5. This permit does not relieve the permittee from liability and penalties for harm or injury to human health or welfare, animal or plant life, or property caused by the construction or operation of this permitted source; nor does it allow the permittee to cause pollution in contravention of Florida Statutes and Department rules, unless specifically authorized by an order from the Department. The permittee shall take all reasonable steps to minimize or prevent any discharge, reuse of reclaimed water, or residuals use or disposal in violation of this permit which has a reasonable likelihood of adversely affecting human health or the environment. It shall not be a defense for a permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of this permit. [62-620.610(5), 12-24-96]
- 6. If the permittee wishes to continue an activity regulated by this permit after its expiration date, the permittee shall apply for and obtain a new permit. [62-620.610(6), 12-24-96]
- 7. The permittee shall at all times properly operate and maintain the facility and systems of treatment and control, and related appurtenances, that are installed and used by the permittee to achieve compliance with the conditions of this permit. This provision includes the operation of backup or auxiliary facilities or similar systems when necessary to maintain or achieve compliance with the conditions of the permit. [62-620.610(7), 12-24-96]
- This permit may be modified, revoked and reissued, or terminated for cause. The filing of a request by the permittee for a permit revision, revocation and reissuance, or termination, or a notification of planned changes or anticipated noncompliance does not stay any permit condition. [62-620.610(8), 12-24-96]

Wedgefield Utilities, Inc. 200 Weathersfield Avenue Altamonte Springs, FL 32714

PERMIT NUMBER: EXPIRATION DATE: FACILITY: FLA010900-001 January 25, 2004 Wedgefield WWTF

- 9. The permittee, by accepting this permit, specifically agrees to allow authorized Department personnel, including an authorized representative of the Department and authorized EPA personnel, when applicable, upon presentation of credentials or other documents as may be required by law, and at reasonable times, depending upon the nature of the concern being investigated, to:
  - a. Enter upon the permittee's premises where a regulated facility, system, or activity is located or conducted, or where records shall be kept under the conditions of this permit;
  - b. Have access to and copy any records that shall be kept under the conditions of this permit;
  - c. Inspect the facilities, equipment, practices, or operations regulated or required under this permit; and
  - d. Sample or monitor any substances or parameters at any location necessary to assure compliance with this permit or Department rules.

[62-620.610(9), 12-24-96]

- 10. In accepting this permit, the permittee understands and agrees that all records, notes, monitoring data, and other information relating to the construction or operation of this permitted source which are submitted to the Department may be used by the Department as evidence in any enforcement case involving the permitted source arising under the Florida Statutes or Department rules, except as such use is proscribed by Section 403.111, Florida Statutes, or Rule 62-620.302, Florida Administrative Code. Such evidence shall only be used to the extent that it is consistent with the Florida Rules of Civil Procedure and applicable evidentiary rules. [62-620.610(10), 12-24-96]
- 11. When requested by the Department, the permittee shall within a reasonable time provide any information required by law which is needed to determine whether there is cause for revising, revoking and reissuing, or terminating this permit, or to determine compliance with the permit. The permittee shall also provide to the Department upon request copies of records required by this permit to be kept. If the permittee becomes aware of relevant facts that were not submitted or were incorrect in the permit application or in any report to the Department, such facts or information shall be promptly submitted or corrections promptly reported to the Department. [62-620.610(11), 12-24-96]
- 12. Unless specifically stated otherwise in Department rules, the permittee, in accepting this permit, agrees to comply with changes in Department rules and Florida Statutes after a reasonable time for compliance; provided, however, the permittee does not waive any other rights granted by Florida Statutes or Department rules. A reasonable time for compliance with a new or amended surface water quality standard, other than those standards addressed in Rule 62-302.500, F.A.C., shall include a reasonable time to obtain or be denied a mixing zone for the new or amended standard. [62-620.610(12), 12-24-96]
- 13. The permittee, in accepting this permit, agrees to pay the applicable regulatory program and surveillance fee in accordance with Rule 62-4.052, F.A.C. [62-620.610(13), 12-24-96]
- This permit is transferable only upon Department approval in accordance with Rule 62-620.340,
   F.A.C. The permittee shall be liable for any noncompliance of the permitted activity until the transfer is approved by the Department. [62-620.610(14), 12-24-96]
- 15. The permittee shall give the Department written notice at least 60 days before inactivation or abandonment of a wastewater facility and shall specify what steps will be taken to safeguard public health and safety during and following inactivation or abandonment. [62-620.610(15), 12-24-96]

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Wedgefield Utilities, Inc. 200 Weathersfield Avenue Altamonte Springs, FL 32714 PERMIT NUMBER: EXPIRATION DATE: FACILITY: FLA010900-001 January 25, 2004 Wedgefield WWTF

- 16. The permittee shall apply for a revision to the Department permit in accordance with Rules 62-620.300, 62-620.420 or 62-620.450, F.A.C., as applicable, at least 90 days before construction of any planned substantial modifications to the permitted facility is to commence or with Rule 62-620.300 for minor modifications to the permitted facility. A revised permit shall be obtained before construction begins except as provided in Rule 62-620.300, F.A.C. [62-620.610(16), 12-24-96]
- 17. The permittee shall give advance notice to the Department of any planned changes in the permitted facility or activity which may result in noncompliance with permit requirements. The permittee shall be responsible for any and all damages which may result from the changes and may be subject to enforcement action by the Department for penalties or revocation of this permit. The notice shall include the following information:
  - a. A description of the anticipated noncompliance;
- b. The period of the anticipated noncompliance, including dates and times; and
  - c. Steps being taken to prevent future occurrence of the noncompliance.

[62-620.610(17), 12-24-96]

- 18. Sampling and monitoring data shall be collected and analyzed in accordance with Rule 62-4.246, Chapters 62-160 and 62-601, F.A.C., and 40 CFR 136, as appropriate.
  - a. Monitoring results shall be reported at the intervals specified elsewhere in this permit and shall be reported on a Discharge Monitoring Report (DMR), DEP Form 62-620.910(10).
  - b. If the permittee monitors any contaminant more frequently than required by the permit, using Department approved test procedures, the results of this monitoring shall be included in the calculation and reporting of the data submitted in the DMR.
  - c. Calculations for all limitations which require averaging of measurements shall use an arithmetic mean unless otherwise specified in this permit.
  - d. Any laboratory test required by this permit for domestic wastewater facilities shall be performed by a laboratory that has been certified by the Department of Health (DOH) under Chapter 64E1, F.A.C., to perform the test. On-site tests for dissolved oxygen, pH, and total chlorine residual shall be performed by a laboratory certified to test for those parameters or under the direction of an operator certified under Chapter 61E12-41, F.A.C.
  - e. Under Chapter 62-160, F.A.C., sample collection shall be performed by following the protocols outlined in "DER Standard Operating Procedures for Laboratory Operations and Sample Collection Activities" (DER-QA-001/92). Alternatively, sample collection may be performed by an organization who has an approved Comprehensive Quality Assurance Plan (CompQAP) on file with the Department. The CompQAP shall be approved for collection of samples from the required matrices and for the required tests.

# [62-620.610(18), 12-24-96]

 Reports of compliance or noncompliance with, or any progress reports on, interim and final requirements contained in any compliance schedule detailed elsewhere in this permit shall be submitted no later than 14 days following each schedule date. [62-620.610(19), 12-24-96]

Wedgefield Utilities, Inc. 200 Weathersfield Avenue Altamonte Springs, FL 32714

FLA010900-001 January 25, 2004 Wedgefield WWTF

- 20. The permittee shall report to the Department any noncompliance which may endanger health or the environment. Any information shall be provided orally within 24 hours from the time the permittee becomes aware of the circumstances. A written submission shall also be provided within five days of the time the permittee becomes aware of the circumstances. The written submission shall contain: a description of the noncompliance and its cause; the period of noncompliance including exact dates and time, and if the noncompliance has not been corrected, the anticipated time it is expected to continue; and steps taken or planned to reduce, eliminate, and prevent recurrence of the noncompliance.
  - a. The following shall be included as information which must be reported within 24 hours under this condition:
    - 1. Any unanticipated bypass which causes any reclaimed water or effluent to exceed any permit limitation or results in an unpermitted discharge,
    - 2. Any upset which causes any reclaimed water or the effluent to exceed any limitation in the permit,
    - 3. Violation of a maximum daily discharge limitation for any of the pollutants specifically listed in the permit for such notice, and
    - 4. Any unauthorized discharge to surface or ground waters.
  - b. If the oral report has been received within 24 hours, the noncompliance has been corrected, and the noncompliance did not endanger health or the environment, the Department shall waive the written report.

[62-620.610(20), 12-24-96]

- 21. The permittee shall report all instances of noncompliance not reported under Permit Conditions IX. 18. and 19. of this permit at the time monitoring reports are submitted. This report shall contain the same information required by Permit Condition IX. 20 of this permit. [62-620.610(21), 12-24-96]
- 22. Bypass Provisions.
  - a. Bypass is prohibited, and the Department may take enforcement action against a permittee for bypass, unless the permittee affirmatively demonstrates that:
    - 1. Bypass was unavoidable to prevent loss of life, personal injury, or severe property damage; and
    - 2. There were no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment downtime. This condition is not satisfied if adequate back-up equipment should have been installed in the exercise of reasonable engineering judgment to prevent a bypass which occurred during normal periods of equipment downtime or preventive maintenance; and
    - 3. The permittee submitted notices as required under Permit Condition IX. 22. b. of this permit.

Wedgefield Utilities, Inc. 200 Weathersfield Avenue Altamonte Springs, FL 32714 PERMIT NUMBER: EXPIRATION DATE: FACILITY: FLA010900-001 January 25, 2004 Wedgefield WWTF

- b. If the permittee knows in advance of the need for a bypass, it shall submit prior notice to the Department, if possible at least 10 days before the date of the bypass. The permittee shall submit notice of an unanticipated bypass within 24 hours of learning about the bypass as required in Permit Condition IX. 20. of this permit. A notice shall include a description of the bypass and its cause; the period of the bypass, including exact dates and times; if the bypass has not been corrected, the anticipated time it is expected to continue; and the steps taken or planned to reduce, eliminate, and prevent recurrence of the bypass.
- c. The Department shall approve an anticipated bypass, after considering its adverse effect, if the permittee demonstrates that it will meet the three conditions listed in Permit Condition IX. 22. a. 1. through 3. of this permit.
- d. A permittee may allow any bypass to occur which does not cause reclaimed water or effluent limitations to be exceeded if it is for essential maintenance to assure efficient operation. These bypasses are not subject to the provisions of Permit Condition IX. 22, a. through c. of this permit.

**[62-620.610**(22), 12-24-96]

- 23. Upset Provisions
  - a. A permittee who wishes to establish the affirmative defense of upset shall demonstrate, through properly signed contemporaneous operating logs, or other relevant evidence that:
    - 1. An upset occurred and that the permittee can identify the cause(s) of the upset;
    - 2. The permitted facility was at the time being properly operated;
    - 3. The permittee submitted notice of the upset as required in Permit Condition IX. 20. of this permit; and
    - 4. The permittee complied with any remedial measures required under Permit Condition IX. 5. of this permit.
  - b. In any enforcement proceeding, the permittee seeking to establish the occurrence of an upset has the burden of proof.
  - c. Before an enforcement proceeding is instituted, no representation made during the Department review of a claim that noncompliance was caused by an upset is final agency action subject to judicial review.

[62-620.610(23), 12-24-96]

Executed in Orlando, Florida.

# STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

Christianne C. Ferraro, P.E.

Program Administrator Water Facilities

Jan. 29 999 DATE: 18

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# POST OFFICE BOX 1429

PALATKA, FLORIDA 32178-1429 SUNCOM 904-880-4500 TDD SUNCOM 860-4450 TELEPHONE 904-329-4500 TDO 904-329-4450 FAX (Executive) 329-4125 (Legal) 329-4485 (Permitting) 329-4315 WATER SERVICE CENTERS MANAGEMENT 7775 Bay PERMITTING: 305 East Drive 618 E. South Street vs Wav DISTRICT Orlando, Florida 32801 407-897-4300 inciganatie Florida 32256 TDD 407-597-5960 904-730-5270 CONSUMPTIVE USE PERMITPD 904-448-7900

TDD 407-722-5368

Mebourne, Floride 32904 407-984-4940

OPERATIONS: 2133 N. Wichem Roed Mebourne, Florida 32935-8109 407-752-3100 TDD 407-752-3102

(Administration/Finance) 329-4508

CHAPTER 40C-20, F.A.C.

PERMIT NO. 20-095-0013R DATE ISSUED: September 16, 1997

AUTHORIZATION:

सुराष्ट्रकोः तस्यवन

USE OF GROUND WATER FROM THE FLORIDAN AOUIFER FOR THE HOUSEHOLD USE OF 3125 PEOPLE IN 10 YEARS, COMMERCIAL/INDUSTRIAL USE, AND WATER UTILITY USE. FORMERLY KNOWN AS 2-095-0278AUM.

LOCATION: Section 01; Township 23; Range 32 EAST Orange County WEDGEFIELD UTILITIES, INC.

WEDGEFIE

CUD.

SEP 2 2 1997

ISSUED TO: (owner)

WEDGEFIELD UTILITIES, INC. ATTN: DONALD RASMUSSEN 200 WEATHERSFIELD AVE ALTAMONTE SPRINGS, FL 32714

This document shall serve as the formal permit for water use in accordance with Chapter 40C-20, F.A.C. This permit is issued by the St. Johns River Water Management District and subject to the enclosed limiting conditions.

This permit is a legal document and should be read and kept with your other important records. The referenced permit conditions may require submittal of additional information including water use reporting on form EN-50. All information submitted as compliance with permit conditions must be submitted to the nearest District Service Center and should include the above referenced permit number.

Permit issuance does not relieve the permittee from the reponsibility of obtaining permits from any federal, state, and/or local agencies asserting concurrent jurisdiction over this work. Permittee agrees to hold and save the St. Johns River Water Management District and its successors harmless from any and all damages, claims, or liabilities which may arise from permit issuance. Said application, including all maps and specifications attached thereto, is by reference made a part hereof. This permit does not convey to Permittee any property rights nor any rights or privileges other than those specified herein, nor relieve the Permittee from complying with any law, regulation, or requirement affecting the rights of other bodies or agencies.

Tam M. Segal, CHAIRMAN	Dan Roach, VICE CHAIR	MAN James	T. Swann, TREASURER	Otis Mason, secre	TARY
MATLAND Griffin A. VERO B	FERNANDINA BEACH	James H. Williams ocata		ST. AUGUSTINE ia T. Harden Sanford	Reid Hughes Daytona beach

#### 20-095-0013R WEDGEFIELD UTILITIES, INC.

Please be advised that the period of time within which a third party may request an administrative hearing on this permit may not have expired by the date of issuance. A potential petitioner has 19 days from the date on which the notice is received or 14 days from the date on which the notice is published, to file a petition for an administrative hearing pursuant to Chapter 120.57, F.S. Receipt of such a petition by the District may result in this permit becoming null and void.

This permit may be revoked or transferred at anytime pursuant to the appropriate provisions of Chapter 373, Florida Statues.

Sincerely,

Dwight T. Jenkins, Esq., P.G. Director Division of Water Use Regulation

Enclosures: Notice of Rights Conditions for Issuance

CC: District Permit File

#### "EXHIBIT A"

# CONDITIONS FOR ISSUANCE OF PERMIT NUMBER 20-095-0013R

#### WEDGEFIELD UTILITIES, INC.

#### DATED September 16, 1997

- District authorized staff, upon proper identification, will have permission to enter, inspect and observe permitted and related facilities in order to determine compliance with the approved plans, specifications and conditions of this permit.
- 2. Nothing in this permit should be construed to limit the authority of the St. Johns River Water Management District to declare a water shortage and issue orders pursuant to Section 373.175, Florida Statutes, or to formulate a plan for implementation during periods of water shortage, pursuant to Section 373.246, Florida Statutes. In the event a water shortage, as declared by the District Governing Board, the permittee must adhere reductions in water withdrawals as specified by the District.
- 3. Prior to the construction, modification, or abandonment of a well, the permittee must obtain a Water Well Construction Permit from the St. Johns River Water Management District or the appropriate local government pursuant to Chapter 40C-3, Florida Administrative Code. Construction, Modification, or abandonment of a well will require modification of the consumptive use permit when such construction, modification or abandonment is other than that specified and described on the consumptive use permit application form.
- Leaking or inoperative well casings, valves, or controls must be repaired or replaced as required to eliminate the leak or make the system fully operational.
- 5. Legal uses of water existing at the time of permit application may not be significantly adversely impacted by the consumptive use. If unanticipated significant adverse impacts occur, the District shall revoke the permit in whole or in part to curtail or abate_ the adverse impacts, unless the impacts can be mitigated by the permittee.
- 6. Off-site land uses existing at the time of permit application may not be significantly adversely impacted as a result of the consumptive use. If unanticipated significant adverse impacts occur, the District shall revoke the permit in whole or in part to curtail or abate the adverse impacts, unless the impacts can be mitigated by the permittee.

- 7. The District must be notified, in writing, within 30 days of any sale, conveyance, or other transfer of a well or facility from which the permitted consumptive use is made or within 30 days of any transfer of ownership or control of the real property at which the permitted consumptive use is located. All transfers of ownership or transfers of permits are subject to the provisions of section 40C-1.612, F.A.C..
- 8. A District-issued identification tag shall be prominently displayed at each withdrawal site by permanently affixing such tag to the pump, headgate, valve or other withdrawal facility as provided by Section 40C-2.401, Florida Administrative Code. Permittee shall notify the District in the event that a replacement tag is needed.
- 9. If the permittee does not serve a new projected demand located within the service area upon which the annual allocation was calculated, the annual allocation will be subject to modification.
- 10. Landscape irrigation is prohibited between the hours of 10:00 a.m. and 4:00 p.m., except as follows:
  - A. Irrigation using a micro-irrigation system is allowed anytime.
  - B. The use of reclaimed water for irrigation is allowed anytime, provided appropriate signs are placed on the property to inform the general public and District enforcement personnel of such use. Such signs must be in accordance with local restrictions.
  - C. Irrigation of, or in preparation for planting, new landscape is allowed any time of day for one 30 day period provided irrigation is limited to the amount necessary for plant establishment.
  - D. Watering in of chemicals, including insecticides, pesticides, fertilizers, fungicides, and herbicides when required by law, the manufacturer, or best management practices is allowed anytime within 24 hours of application.
  - E. Irrigation systems may be operated anytime for maintenance and repair purposes not to exceed ten minutes per hour per zone.
- 11. A water sample must be taken from the well(s) designated by the District in May and October of each year for the duration of the permit. The samples must be collected immediately following an irrigation cycle, whenever possible. If this is

not possible, the well must be allowed to discharge at design capacity for at least 20 minutes before the sample is collected. The samples must be analyzed for chlorides (C1-). In addition to the analyses, the report submitted to the District must include the date of sampling, well number, the length of time the well discharged before the sample was taken, the name of the person collecting the sample and the name of the company or person doing the actual analysis. These reports must be submitted to the District within 30 days of sampling.

- 12. Treated effluent must be used as irrigation water when it becomes available, economically feasible, and permissible under applicable state and federal statutes or regulations promulgated thereunder.
- 13. All submittals made to demonstrate compliance with this permit must include the CUP number 20-095-0013R plainly labeled.
- 14. This permit will expire 10 years from the date of issuance.
- 15. Maximum annual ground water withdrawals for household use must not exceed:

88.3 million gallons in 1997, 93.8 million gallons in 1998, 99.4 million gallons in 1999, 104.9 million gallons in 2000, 110.4 million gallons in 2001, 116.0 million gallons in 2002, 121.5 million gallons in 2003, 127.0 million gallons in 2004, 132.5 million gallons in 2005, 138.0 million gallons in 2006.

16. Maximum daily ground water withdrawals for household use must not exceed:

0.300 million gallons in 1997, 0.319 million gallons in 1998, 0.338 million gallons in 1999, 0.356 million gallons in 2000, 0.375 million gallons in 2001, 0.394 million gallons in 2002, 0.413 million gallons in 2003, 0.431 million gallons in 2004, 0.450 million gallons in 2005, 0.469 million gallons in 2006.

- Maximum annual ground water withdrawals for commercial/industrial use must not exceed 4.8 million gallons.
- Maximum annual ground water withdrawals for water utility use must not exceed: 1.1 million gallons in 1997,

1.1 million gallons in 1998, 1.2 million gallons in 1999, 1.3 million gallons in 2000, 1.4 million gallons in 2001, 1.5 million gallons in 2002, 1.5 million gallons in 2003, 1.7 million gallons in 2004, 1.8 million gallons in 2005, 1.9 million gallons in 2006.

- 19. Maximum daily withdrawals for essential use (fire protection) must not exceed 1.4 million gallons.
- 20. Wedgefield Utilities, Inc. shall provide reclaimed water to the Wedgefield Golf and Country Club for the duration of this permit unless the permittee demonstrates that it is not economically, environmentally, or technically feasible to do so. In order to maximize reuse of reclaimed water, the permittee shall also endeavor to identify other feasible recipients to take reclaimed water. When other feasible recipients are identified, the permittee shall deliver, to the Wedgefield Golf and Country Club, only that amount of reclaimed water that is necessary for the conservative irrigation of the golf course, and shall provide any additional reclaimed water to the identified recipients.
- 21. Wells B and C, as listed on the application, are equipped with in-line totalizing flow meters. These flow meters must maintain 95% accuracy, be verifiable and installed according to manufacturer s specifications.
- 22. Total withdrawals from wells B and C, as listed on the application, must be recorded continuously, totaled monthly, and reported to the District at least every six months from the initiation of the monitoring using District Form No. EN-50. The reporting dates each year will be as follows:

Reporting Period	Report Due Date
January - June	July 31
July - December	January 31

- 23. The permittee must maintain all flow meters. In case of failure or breakdown of any meter, the District must be notified in writing within 5 days of its discovery. A defective meter must be repaired or replaced within 30 days of its discovery.
- 24. The permittee must have all flow meters checked for accuracy at least once every 3 years within 30 days of the anniversary date of permit issuance, and recalibrated if the difference between the actual flow and the meter reading is greater than 5%. District Form No. EN-51 must be submitted to the District within 10 days of the inspection/calibration.

# NOTICE OF RIGHTS

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- 1. A person whose substantial interests are or may be determined has the right to request an administrative hearing by filing a written petition with the St. Johns River Water Management District (District). Pursuant to District rule 40C-1.511, Florida Administrative Code, the petition must be filed at the office of the District Clerk at District Headquarters, Highway 100 West, Palatka, Florida 32178-1429 within nineteen (19) days of the District depositing notice of its intent in the mail (for those persons to whom the District mails actual notice) or within fourteen (14) days of newspaper publication of the notice of its intent (for those persons to whom the District does not mail actual notice). Such a petition must comply with District rule 40C-1.521, Florida Administrative Code.
- 2. If the Governing Board took action which substantially differs from the notice of intent to grant or deny the permit application, a person whose substantial interests are or may be determined has the right to request an administrative hearing. Pursuant to District rule 40C-1.511, Florida Administrative Code, the petition must be filed at the office of the District Clerk at District Headquarters, Highway 100 West, Palatka, Florida 32178-1429, within nineteen (19) days of the District depositing notice of final agency action the the mail (for those persons to whom the District mails actual notice) or within fourteen (14) days of newspaper publication of the notice of its final agency action (for those persons to whom the District does not mail actual notice). Such a petition must comply with District rule 40C-1.521, Florida Administrative Code.
- 3. A substantially interested person has the right to a formal administrative hearing pursuant to Section 120.57(1), Florida Statutes, where there is a dispute between the District and the party reqarding an issue of material fact. A petition for formal hearing must comply with the requirements set forth in Section 40C-1.521(2), Florida Administrative Code.
- 4. A substantially interested person has the right to an informal hearing pursuant to Section 120.57(2), Florida Statutes, where no material facts are in dispute. A petition for an informal hearing must comply with the requirements set forth in Section 40C-1.521(2), Florida Administrative Code.
- A petition for an administrative hearing is deemed filed upon delivery of the petition to the District Clerk at the District headquarters in Palatka, Florida. (Section 40C-1.013, Florida Administrative Code)
- Failure to file a petition for an administrative hearing, within the requisite time frame shall constitute a waiver of the right to an administrative hearing. (Section 40C-1.511, Florida Administrative Code)
- 7. The right to an administrative hearing and the relevant procedures to be followed are governed by Chapter 120, Florida Statutes, and Chapter 40C-1, Florida Administrative Code.

# NOTICE OF RIGHTS

- 8. An applicant with a legal or equitable interest in real property who believes that a District permitting action is unreasonable or will unfairly burden the use of his property, has the right to, within 30 days of receipt of notice of the District's intent to grant or deny a permit application, apply for a special master proceeding under section 70.51, Florida Statutes, by filing a written request for relief at the office of the District Clerk located at District headquarters, Highway 100 West, Palatka, Florida 32178-1429. A request for relief must contain the information listed in subsection 70.51(6), Florida Statutes.
- 9. A timely filed request for relief under section 70.51, Florida Statutes, tolls the time to request an administrative hearing under paragraph no. 1 or 2 above. (Paragraph 70.51(10)(b), Florida Statutes) However, the filing of a request for an administrative hearing under paragraph no. 1 or 2 above waives the right to a special master proceeding. (Subsection 70.51(10)(b), Florida Statutes)
- Failure to file a request for relief within the requisite time frame shall constitute a waiver of the right to a special master proceeding. (Subsection 70.51(3), Florida Statutes)

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- 11. Any substantially affected person who claims that final action of the District constitutes an unconstitutional taking of property without just compensation may seek review of the action in circuit court pursuant to Section 373.617, Florida Statutes, and the Florida Rules of Civil Procedures, by filing an action in circuit court within 90 days of the rendering of the final District action, (Section 373.617, Florida Statutes).
- 12. Pursuant to Section 120.68, Florida Statutes, a person who is adversely affected by final District action may seek review of the action in the district court of appeal by filing a notice of appeal pursuant to the Florida Rules of Appellate Procedure, within 30 days of the rendering of the final District action.
- 13. A party to the proceeding before the District who claims that a District order is inconsistent with the provisions and purposes of Chapter 373, Florida Statutes, may seek review of the order pursuant to Section 373.114, Florida Statutes, by the Florida Land and Water Adjudicatory Commission, by filing a request for review with the Commission and serving a copy on the Department of Environmental Protection and any person named in the order within 20 days of adoption of a rule or the rendering of the District order.
- 14. For appeals to the District courts of appeal, a District action is considered rendered after it is signed on behalf of the District, and is filed by the District Clerk.

# NOTICE OF RIGHTS

15. Failure to observe the relevant time frames for filing a petition for judicial reviews described in paragraphs #11 and #12 or for Commission review as described in paragraph #13 will result in waiver of that right to review.

# CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a copy of the foregoing Notice of Rights has been sent by U.S. Mail to:

WEDGEFIELD UTILITIES, INC. ATTN: DONALD RASMUSSEN 200 WEATHERSFIELD AVE ALTAMONTE SPRINGS, FL 32714

at

4:00 p.m. this 17 day of SEPTEMBER, 1997

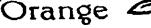
Slovia Gean Lenio

Permit Data Services Director, Gloria Lewis

St. Johns River Water Management District Post Office Box 1429 Palatka, FL 32178-1429 (904) 329-4566

20-095-0013AR

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County

Environmental Protection Department 2002 East Michigan Street Orlando, Flurida 32806-4999 Telephone (407) 836-7400

#### PERNITTEE:

Econ Utilities Corporation 20750 State Road 520 Orlando, FL 32833

Attn: Gerald B. Braley Vice President I.D. Number: EPD - 94-39 Permit/Certification #: D095-01 Date of Issue: Jan. 17, 1995 Expiration Date: Jan. 3, 2000 Latitude/Longitude: 26 30'00"N/81 05'32"E PROJECT: Wedgefield Subdivision Wastewater Treatment Facility and Disposal System

This permit is issued under the provisions of Chapter 15, Section 15-33, Orange County Code. 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 specifically described as follows:

Operate: A 0.200 mgd annual average daily flow (AADF) design capacity contact stabilization wastewater treatment facility with flow equalization, tertiary filtration and disinfection by chlorination. The disinfected, reclaimed water is discharged to groundwater via a  $0.92\pm$  acre, 7 day off line percolation/reject pond or a 36 day in line, reuse/wet weather, lined storage pond ( $5\pm$  acre total wetted/storage area equalization basin). Waters from the reuse lined storage pond will be used for the public access spray irrigation of the 120 $\pm$  acre Wedgefield Golf Course, with a design disposal capacity of 0.339 mgd. Flows to the facility are limited to 0.200 mgd AADF, the capacity of the treatment facility. There shall be no discharge to surface waters except in accordance with Specific Condition #26 of this permit.

Location: 19204 Merideth Parkway (Bancroft Blvd. and Nettleton St.) Orlando, Florida 32833

Treatment Required: (A) For discharge to the reuse/wet weather storage pond and/or the golf course spray irrigation system, treatment heyond secondary, which results in total suspended solids (TSS) not to exceed 5.0 mg/L and high level disinfection. (B) Secondary treatment, basic disinfection and nitrate nitrogen (NO₃) concentration, not to exceed 12.0 mg/L for discharge to the percolation/reject storage pond or as required to comply with Rule 62-610.510 (formerly Rule 17-610.510), FAC. Econ Utilities Wedgefield Subdivision/Operate Permit Continued/Page 2

Operators Required: This is a Category I, Class C, wastewater treatment facility. In accordance with Chapters 62-699 (formerly Rule 17-699) and 62-610 (formerly Rule 17-610), FAC, a <u>Class C</u>, or higher certified operator shall be on site for six (6) hours per day for, seven (7) days per week as a minimum. The lead/chief operator must be a Class E, or higher, certified operator. Acceptable quality reclaimed water may be diverted to the reuse storage pond for public access irrigation only during periods when the certified operator is on-site or when the acceptable quality of reclaimed water is monitored remotely by electronic surveillance and such electronic equipment is functioning properly.

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## GENERAL CONDITIONS:

- 1. The terns, conditions, requirements, limitations, and restrictions set forth herein are "Permit Conditions" and as such are binding upon the permittee. The permittee is hereby placed on notice that the Environmental Protection Officer will review this permit periodically and may initiate enforcement action for any violation of the "Permit Conditions" by the permittee, its agents, employees, servants or representatives.
- 2. This permit is valid only for the specific processes and operations applied for and indicated in the approved drawings or exhibits. Any unauthorized deviation from the approved drawings, exhibits, specifications, or conditions of this permit may constitute grounds for revocation and enforcement action by the Environmental Protection Officer.
- 3. This permit does not relieve the permittee from liability for harm or injury to human health or welfare, animal, plant or aquatic life or property and penalties therefore caused by the construction or operation of this permitted source.
- 4. This permittee shall at all times properly operate and maintain the facility and systems of treatment and control (and related appurtenances) that are installed or used by the permittee to achieve compliance with the conditions of this permit, as required by the Environmental Protection Officer.
- 5. The permittee, by accepting this permit, specifically agrees to allow authorized Environmental Protection personnel, upon presentation of credentials or other documents as may be required by law, access to the premises, at reasonable times* where the permitted activity is located or conducted for the purpose of:
  - a. Having access to and copying any records that must be kept under the conditions of the permit:
  - Inspecting the facility, equipment, practices and operations for compliance with conditions of this permit; and,
  - c. Sampling or monitoring any substances or parameters at any location reasonably necessary to assure compliance with this permit.

*Reasonable time may depend on the nature of the concern being investigated.

#### General Conditions (continued)

- 6. If, for any reason, the permittee does not comply with or will be unable to comply with any condition or limitation specified in this permit, the permittee shall immediately notify and provide the Environmental Protection Officer with the following information:
  - a. a description of and cause of non-compliance; and,
  - b. the period of non-compliance, including exact dates and times; or, if not corrected, the anticipated time the non-compliance is expected to continue, and steps being taken to reduce, eliminate, and prevent recurrence of the non-compliance.

The permittee shall be responsible for any and all damages which may result and may be subject to enforcement action by the Environmental Protection Officer for penalties or revocation of this permit.

- 7. This permit is required to be kept at the work site of the permitted activity during the entire period of construction or operation.
- 8. When requested by the Environmental Protection Officer, the permittee shall within a reasonable time furnish any information required by law which is needed to determine compliance with the permit. If the permittee becomes aware that relevant facts were not submitted or were incorrect in the permit application or in any report to the Environmental Protection Officer, such facts or information shall be submitted or corrected promptly.
- 9. Records of monitoring information shall include:
  - a. the date, exact place and time of sampling or measurements;
  - b. the person responsible for performing the sampling or measurements;
  - c. the dates analyses were performed;
  - d. the person responsible for performing the analyses;
  - e. the analytical techniques or methods used; and,
  - f. the results of such analyses.

SEE SPECIFIC CONDITIONS (NEXT PAGE)

Econ Utilities Ccrp. Wedgefield Subdivision/Operate Permit

#### SPECIFIC CONDITIONS:

1. The required sampling of reclaimed water produced at the wastewater treatment plant shall be as follows:

Parameter	Location	<u>Recording or Sampling Frequency</u>
Flow	A	continuous
Chlorine residual	A	continuous
рН	Ä	continuous
Turbidity	В	continuous
CBOD_*	A	once every 2 weeks***
Nifrate nitrogen as N	λ	once every 2 weeks***
/ TSS#)	B	daily, A days per week**
Fecal coliform	Ä	daily, 3 days per week**
* Influent and efflue	ent	A After disinfection
** Grab samples requir peak flow period./	ed during	B After filtration, prior to disinfection
*** Flow proportioned 8 composite sample re		Per Specific Condition #23

The sampling and analysis required above shall be in accordance with Chapter 62-601 (formerly Chapter 17-601), FAC, and approved standard methods. Properly executed reports shall be submitted monthly to Orange County Environmental Protection Department and the Florida Department of Environmental Protection by the 28th day of the following month.

In accordance with Rule 62-601.400(3) (formerly Rule 17-601.400(3)), FAC, any laboratory test required by this permit shall be performed by a laboratory that has been certified by DHRS in accordance with Rule 10D-41.100 - .113, FAC, to perform the test. Onsite tests for dissolved oxygen, pH, and total chlorine residual shall be performed by a laboratory certified to test for dissolved oxygen, pH, and total chlorine the direction of an operator certified in accordance with Chapter 61E12-41, FAC.

In accordance with Rule 62-160.300 (6), (formerly Rule 17-160.300(6), FAC, sample collection shall be performed by following the protocols outlined in "DER Standard Operating Procedures for Laboratory Operations and Sample Collection Activities" (DER-QA-001/92). Alternatively, sample collection may be performed by an organization who has an approved Comprehensive Quality Assurance Plan (CompQap) on file with DEP. This CompQap shall be approved for collection of samples from the required matrices and for the required tests./ Econ Utilities/Wedgefield Subdivision; Operate Permit Specific Conditions (continued)

- 2. The reclaimed water delivered to the public access reuse system(s) shall be adequately chlorinated at all times so as to maintain a minimum of 1.0 mg/L total chlorine residual after a minimum contact period of 15 minutes (based upon peak hourly flow) or as required to comply with Rule 62-600.440(5) [formerly Rule 17-600.440(5)], FAC.
- J. Groundwater monitoring shall be performed in accordance with the Groundwater Monitoring Plan Implementation Schedule.
- 4. The treated effluent discharged to the percolation/reject effluent storage pond shall be adequately chlorinated at all times so as to maintain a minimum of 0.5 mg/L total chlorine residual after a minimum contact period of 15 minutes (based upon peak hourly flow).
- 5. Facilities discharging to groundwaters shall be operated and maintained at all times so as to prevent overflow or seepage of water to adjacent ground surfaces or runoff to surface waters.
- 6. The maintenance and operation log required pursuant to Chapter 61E12-41, FAC, shall be stored on-site in a weather resistant structure.
- 7. The boundary of the zone of discharge shall be 100 feet from the site (wetted disposal area) boundary or to the installation's property boundary whichever is less. The zone of discharge shall be the volume underlying the surface within this boundary to the base of the unconfined aquifer.
- 8. Operational difficulties, including any collection/transmission system overflows, which may cause or result in non-compliance with the requirements of this permit, shall be reported within 24 hours to the Orange County Environmental Protection Department and the Florida Department of Environmental Protection.
- 9. The permittee shall submit the prescribed application and supporting data for an operation permit no later than 60 days prior to expiration date of this permit.
- 10. Domestic residuals (sludge) disposal shall be in accordance with Rule 62-640, (formerly Rule 17-640), FAC. Residuals shall be analyzed annually and the results submitted with each Agricultural Use Plan (AUP) update. AUP's shall be resubmitted annually for approval, on appropriate Department forms, beginning one (1) year from the date of permit issuance. The present AUP identifies aerobically digested residuals landspreading on 5.0 dedicated acres on the Clonts Ranch site located at 146 Hillcrest Street, Oviedo, Seminole County, Florida.

Econ Utilities/Wedgefield Subdivision; Operate Permit Specific Conditions (continued)

- 11. The Reclaimed Water Analysis Report Form 17-602.900(4) shall be submitted annually beginning one year from the date of permit issuance. Alternatively, the permittee may certify each year to the Department that no new non-domestic connections to the collection system have occurred.
- 12. Future reuse on sites with edible crops and reuse sites outside the designated service area, will require permit modification utilizing DEP Form 17-610.910(1).
- 13. Where potable water and sanitary sewer mains cross with less than eighteen (18) inches vertical clearance, the sewage main shall be twenty (20) feet of either ductile iron pipe, concrete encased PVC pipe or encased in a watertight carrier pipe, centered on the point of crossing. A minimum horizontal separation of ten (10) feet (edge to edge) between potable water mains and sewage mains shall be maintained when practical. When the appropriate horizontal separation cannot be maintained the sewage main shall be either ductile iron pipe, concrete encased pipe or encased in a watertight pipe carrier.
- 14. Maximum obtainable separation of public access reclaimed water mains and sanitary sewer mains shall be maintained. A minimum horizontal separation of five (5) feet (center to center) or three (3) feet (cutside to outside) shall be maintained between reclaimed water mains and sewage mains. Where reclaimed water and sanitary sewage mains cross with less than eighteen (18) inches vertical clearance, the sanitary sewage main shall be twenty 920) feet of either ductile iron pipe, concrete encased pipe or encased in a watertight carrier pipe, centered on the point of crossing.
- 15. Maximum obtainable separation of public access reclaimed water mains and potable water mains shall be maintained. A minimum horizontal separation of five (5) feet (center to center) or three (3) feet (cutside to outside) shall be maintained between reclaimed water mains and potable water mains. Where reclaimed water and potable water mains cross with less than eighteen (18) inches vertical clearance, the reclaimed water main shall be twenty (20) feet of either ductile iron pipe, concrete encased pipe or encased in a watertight carrier pipe, centered on the point of crossing.
- 16. All reclaimed water hose bibbs, hand-operated connections and outlets shall be contained in underground service vaults and shall be appropriately tagged or labeled to warn the public and employees that the water is not intended for drinking. All reclaimed water piping, pipelines, valves and outlets shall be color coded, or otherwise marked, to differentiate reclaimed water from potable or other water.

Econ Utilities/Wedgefield Subdivision; Operate Permit Specific Conditions (continued)

17. Vaults for reclaimed water, hose bibbs and outlets shall be locked or require a special tool for operation of hose bibbs and outlets.

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- 18. A 75 foot setback distance shall be provided from a public access reclaimed water transmission facility/transmission mains to any public potable water supply wells.
- 19. A 75 foot setback distance shall be provided from public access reuse wetted areas to any public and any private potable water supply wells.
- 20. Low trajectory nozzles are required within 100 feet of any outdoor public eating, drinking or bathing facilities.
- 21. Existing water or sewer mains currently not being used for reclaimed water and which may be proposed for conversion to reclaimed water mains in the future, will require separate written approval from the Department. This does not include existing irrigation system piping.
- 22. Signs shall be posted in the vicinity of public access reclaimed water reuse irrigation systems, or notes placed on score cards at golf courses, advising the public that reuse is practiced.
- 23. Daily or monthly flow records for reclaimed water discharged to the golf course and for reject water discharged to the percolation/reject effluent storage pond shall be maintained and a summary submitted each month with the Monthly Operating Reports (MORs). Documentation shall be provided to the Department demonstrating the total amount of reuse capacity that has been achieved prior to the expiration date of this permit.
- 24. An operating protocol designed to ensure that the high-ievel disinfection and TSS treatment requirements will be met before the reclaimed water is released to the public access reuse systems, has been developed and approved by the department. An updated protocol shall be submitted annually for approval.
- 25. Reclaimed water that fails to meet minimum treatment requirements as determined by the operating protocol, shall not be released into any public access reuse system or system storage. Such substandard reclaimed water (reject water) shall be discharged to the reject storage pond. Each incident of failure shall be completely recorded in the operating and maintenance log and the corrective action submitted/included with the monthly operating reports. Reject water which is discharged to the reject storage pond is required to meet the effluent limitations described in

Econ Utilities/Wadgefield Subdivision; Operate Permit Specific Conditions (continued)

this permit. Any discharge of reject water to the reject storage pond which does not meet secondary standards, nitrate limits and the effluent limitations described in Specific Condition #4, will be considered as a non-compliance event and must be reported to the Department.

- 26. Any emergency discharge of water from the percolation/reject effluent storage pond and/or the reuse/wet weather storage pond will be considered a violation of this permit unless as a result of the storm event which produces rainfall in excess of 7.0 inches for any day or the cumulation of rainfall greater than 10 inches for any three consecutive days. To document the rainfall, it is required that rain gauge readings be taken at the same time <u>each day</u>. It should be noted that discharge is allowed only in amount equal to the volume of excess rainfall (i.e., rainfall in excess of 7.0 inches for any day or the accumulation of rainfall greater than 10 inches for any three (3) consecutive days) times the surface area of pond(s). Within 24 hours of both commencement and ending of discharge, the permittee must notify the event to the department in writing. Within 10 days a report must be provided containing information on the time of discharge, volume discharged, a log of daily rain gauge reading, and wastewater characteristics for pH, CBOD₅, TSS, TN and TP.
- 27. Vegetation along the pond berms shall be kept mowed for aesthetic purposes and to allow visual inspection of the berm slopes for erosion and deterioration.
- 28. In accordance with the schedule submitted with the permit application, construction of Phase II-A, the second 0.200 MGD wastewater treatment plant and 0.154 MGD of additional reuse will begin by June, 1995, and be on-line by June, 1996.

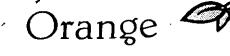
Issued this 17th day of January, 1995

h.

Nicholas M. Sassic, Interim Manager Environmental Protection Department Orange County

FD:NS/nr

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County

Environmental Protection Departmen.

Anna Hacha-Long, Manager 2002 East Michigan Street Orlando, Florida 32806-4999 Telephone (407) 836-7400 FAX (407) 836-7499

KL:

Certified Mail: P 889 328 344

NON-COMPLIANCE LETTER

May 31, 1996

Utilities Incorporated of FL 200 Weathersfield Ave. Altamonte Springs, FL 32714

Attn: Donald Rasmussen

Ref: Domestic Wastewater Treatment and Disposal System Wedgefield Golf and Country Club

OCEPD Permit: D095-01

Expires: January 3, 2000

Dear Mr. Rasmussen:

On May 2, 1996, an inspection of the above referenced facility was conducted by a representative of this Department. A copy of the inspection report is enclosed for your review. During the course of the inspection, and/or determined from a review of the records on file in this office, the following permit non-compliance issue(s) were noted:

- 1. The rubber liner on the inside of the public access irrigation pond was ripped and exposed in several locations along the south beam.
- 2. It has come to the attention of this department, that the wastewater treatment facility is under new ownership. In accordance with Orange County code, Chapter 15, Section 15-140; The new owner must apply by letter for a transfer of permit within 30 days. For your convenience, we have enclosed the application for transfer of permit. Please complete and return to this Department along with your check in the amount of \$56.00, made payable to the Board of Orange County Commissioners, as payment for the application fee.

May 31, 1996 Wedgefield Golf and Country Club Page 2.

Your written response is required within ten (10) days of receipt of this letter indicating the corrective action(s) initiated.

Sincerely,

Ernie Browne

Environmental Inspector

cc: F.D.E.P.

001-068-2420-4343 INVOICE TO FOLLOW



County

Environmental Protection Department Anna Hacha-Long, Manager 2002 East Michigan Street Orlando, Florida 32806-4999, Julij Telephone (407) 836-7400 FAX (407) 836-7499

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### NON-COMPLIANCE LETTER

May 9, 1996

Certified Mail:

Wedgefield Golf and Country Club c/o Econ Utilities Corporation 20751 State Road 520 Orlando, Florida 32833

Attn: Gerald Braley

Ref: Domestic Wastewater Treatment and Disposal System -Wedgefield Golf and County Club

OCEPD Permit: D095-01 Expires: January 3, 2000

Dear Mr. Braley:

On May 2, 1996, an inspection of the above referenced facility was conducted by a representative of this Department. A copy of the inspection report is enclosed for your review. During the course of the inspection, and/or determined from a review of the records on file in this office, the following permit non-compliance issue was noted:

1. The rubber liner on the inside of public access irrigation pond was ripped and exposed in several locations along the south berm. This condition requires your immediate attention.

Your written response is required within ten (10) days of receipt of this letter indicating the corrective action(s) initiated.

Sincerely,

Efnie G. Browne

Environmental Inspector

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cc: /F.D.E.P.

001-068-2420-4343 INVOICE TO FOLLOW

DOMESTIC WASTE MALFUNCTION REPORT

J~ 3/18

TO BE DELIVERED TO APPROPRIATE SECTION IMMEDIATELY

(CLEARLY HANDWRITTEN, NOT TYPED)

REPID TO RECORDER 03/17 @ 8:25 A., DATE: 03/18/96 TIME: 8:09 (AM/PM) RECEIVED BY: R. LAUGMEN REPORTED BY: BULL SOSSAMAN NAME OF PLANT/SYSTEM: WEDGEFIELD S/D. COUNTY: ORANGE. ADDRESS: PHONE: (407) 568 - 6787 OWNER: UTILITIES INC (ECON UTILITIES) DATE & TIME OF FAILURE: 03-16 @ 8:00 A M. NATURE OF PROBLEM: FERC POND FILLING WY RAIN WATER - ~ 30,000 SUB-STANDARD WATER DISCHARGED THERU OVERFLOW TO ADJACENT PROPERTY. CORRECTIVE ACTION TAKEN: 03-16 @ 2:00 p.m. EXPECTED BACK IN SERVICE BY (DATE & TIME): 03-16 @ 2:00 p.m. REMARKS : FOLLOW-UP IN WRITING: (Y/N)



# Department of F Environmental Protection

Central District 3319 Maguire Boulevard, Suite 232 Orlando, Florida 32803-3767

Virginia B. Wetherell Secretary

Lawton Chiles Governor

November 17, 1994

OCD-DW-C94-0433

NICK SASSIC INTERIM MANAGER ORANGE COUNTY ENVIRONMENTAL PROTECTION DEPARTMENT 2002 EAST MICHIGAN AVENUE ORLANDO FL 32806

> Orange County - DW <u>Complaint Forwarded for Investigation</u>

Dear Mr. Sassic:

Enclosed is a copy of a complaint that originated in Orange County.

Please investigate the subject complaint in accordance with General Provisions of the General Agreement executed between your office and this Department, and forward the results of your investigation directly to the complainant.

If you have any questions concerning this matter, please contact Gary P. Miller at (407) 894-7555.

Sincerely,

ianne C. Ferraro

Christianne C. Ferraro, P.E. Program Manager Domestic Waste

CCF/qm/bn

Enclosure

cc: Maureen Gergora Jones

Thy LONGING CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANANA CANA

Al 11/16 Gra: Plo

November 14, 1994

State of Florida Department of Environmental Protection 3319 Maguire Boulevard Suite 232 Orlando, Fl. 32803

**RE:** Sewage Treatment Station

#### TO WHOM IT MAY CONCERN:

In February, 1994, I purchased a home from the builder, The Genesis Group, who builds homes in the Wedgefield Division in East Orange County. At the time the lot was cleared, I noticed an electric pole on the side of my property, on an easement. When I questioned the builder, I was told that it was needed to run a water processing box which resided on the front of the easement. Thinking nothing more about it, we signed our contract and purchased the home.

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When we moved in we started noticing a sewer smell and inquired of our builder what the smell was. We were then advised that it was a sewer processing box. We then realized that every time it rained, a brown mucky liquid would puddle on the sidewalk next to box. We contacted both the builder and Econ Utilities, which never responded to the problem.

I am presently pregnant and started to become concerned about not only the constant smell but the brown mucky liquid that seems to come out when it rains.

I do not know if you will be able to assist me, however, I would like to be advised by you if you are the proper agency to tell me if this sewer treatment box is environmentally safe around adults and children. I believe the box has been there since before the development of this side of the block.

If you are unable to help me, can you advise me as to whom I should contact?

Thank-you for your time.

Sincerely,

2831 Abalone Boulevard Orlando, Fl. 32833

cc: M. Couch, State Representative file

Gm 6/13

#### DOMESTIC WASTE MALFUNCTION REPORT

TO BE DELIVERED TO APPROPRIATE SECTION IMMEDIATELY

(CLEARLY HANDWRITTEN, NOT TYPED)

DATE: 06/12/95 TIME: 3:34 (AM/PM) RECEIVED BY: K. LANGALIN REPORTED BY: BILL SOSSAMON NAME OF PLANT/SYSTEM: NEDGEFIELD SD COUNTY: DRANGE ADDRESS: PHONE: (407) 568-6787 OWNER: FOON UTILITIES DATE & TIME OF FAILURE:  $06 - 11 - 95 @ 9:00 \mu.m$ . NATURE OF PROBLEM: ALARIFIER INFLUENT FIPE STOPPED FLOWING - FLOW BACKING UP IN PLANT OVERLOAD BEING HAULED BY BROWNIES CORRECTIVE ACTION TAKEN: DRAINING DOWN PLANT TO REPLACE PIPE ~ WED (06/14) EXPECTED BACK IN SERVICE BY (DATE & TIME): 06/15 @ 9.00 A.m.REMARKS : FOLLOW-UP IN WRITING: (Y/N)

Wedgefield Utilities, Inc.

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Docket No. 991437-WU

25.30-440 (7) DEP Correspondence

Test Year Ended June 30, 1999



### ENVIRONMENTAL PROTECTION DEPARTMENT

ANNA H. LONG, Manager Leeds Commerce Center 800 Mercy Drive, Suites 4 & 5 Orlando, Florida 32808-7896 (407) 836-1400 = Fax (407) 836-1499 http://www.citizens-first.co.orange.fl.us

February 2, 1999

Mr. Donald Rasmussen Wedgefield Utilities c/o Utilities Inc. of Florida 200 Weathersfield Avenue Altamonte Springs, Florida 32714

CC: BRYAN CHAQUE F. WEDGEFIELD PLANT

RECEIVE

FEB 0

FILE

ORIGINAL TO FILE

Re: Domestic Wastewater Treatment Facility-Wedgefield Golf & Country Club

OCEPD Permit: DO95-01

Expires: January 3, 2000

Dear Mr. Rasmussen:

On February 1, 1999 an inspection of the above-referenced facility was conducted by a representative of this Division. At the time of inspection, the overall operation of your facility was found to be in accordance with the terms and conditions of the referenced permit.

Please review the enclosed inspection report for any comments and recommendations which may have been noted during the course of the inspection and record review.

Your efforts to help maintain our environment are appreciated. If you have any questions, contact me at the above address or at (407)836-1440.

Sincerely,

Mark Overstreet Environmental Specialist

MO/08/BE/AHL:mil Encidence

c: FDEP Central File

001-068-2420-4343 INVOICE TO FOLLOW

#### ORANGE COUNTY ENVIRONMENTAL PROTECTION DEPARTMENT COMPLIANCE INVESTIGATION CHECKLIST WASTEWATER TREATMENT FACILITIES (DOMESTIC)

Fac Fac Mai Ora Sta	cility Name: WEAGE Field Milifies cility Location: Clo Utilities INC. of ling Address: Altamonte Speings, Fo ange Co. Permit # 30 85-01 Expires ate Permit #	Date: Owner EAttn: 232714 1-3-20	2-1 : )e	1-99 D <i>LAIC</i> Type:	Rasi IC	nussi	EK
Per	mit Verification:						
1.	Has permit been reviewed prior to inspection?	Yes	No	N/A			
2.	Correct name and mailing address of permittee.	Yer	No	N/A			
з.	Facility is as described in permit.	Yes	No	N/A		-	
4.	Amendments to permit Explain:	Yes	No	N/A			
Con	pliance Schedules:						
1.	Permittee meeting compliance schedules?	Yex	No	N/A			
2.	Facility submitting all monitoring data as required by the permit?	Yes	No	N/A			
з.	Extenuating circumstances which would affect the permittee's compliance schedules?	Yеs	Ne	N/A			
Rec	ords and Reports:	•					•
1.	Records and reports maintained as required by permit. If no explain:	Yes	No	N/A			
2.	ls Monthly Operating Report complete and received in a timely manor?	Yes	No	N/A			
з.	ls operators daily log on site and up to date?	Yps	No	NZA			
4.	Sludge analysis on file	yes	No	N/A			
5.	Current well monitoring data, if required.	YES	No	N/A			•

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# Facility Site Review:

Headworks

1.	Lift station, (grease build up)	Yes	ŅÓ	N/A
<b>2.</b> [.]	Evidence of lift station overflow		Nø	N/A
з.	Are pumps adequate, maintained	Yes	Nσ	N/A
4.	Are the bar screens/comminutors maintained.	Yes	No	N/A
5.	Rags/Trash collected/stored/ properly disposed.of.	Yes	No	N/A
6, [.]	- Are the grit chambers routinely cleaned?	Yøs	No	N/A
7.	Offensive/obnoxious odors	Yes	NO	NZA
Flò	w Equalization:			
1.	Sufficient capacity	Y 🚽 S	No	N7 A
2.	Adequate aeration	Yes	No	N/A
з.	Odor Control	Yps	No	N/A
Pri	mary Clarifiers:			
i.	Is there evidence of solids loss?	Yes	No	N/A
2.	ls there a problem with bulking?	Yəs	No	NIA
3.	Are the skimmers functioning properly?	Yes	No	N/A
4.	Are the weirs level?	Yes	No	N/A
5.	Are effluent weirs clean?	Yes	No	N/A
Sec	ondary Clarifiers:			
1.	ls there evidence of solids loss?	¥өб	Np	N/A
2.	is there a problem with bulking?	Yes	Nþ	N/A
э.		V	No	N/A
э.	ls the depth of the sludge blanket acceptable?			N/ A

5.	Are the weirs level?	Yes	No	N/A
6.	Are the effluent weirs clean?	Yes		
7.	Does tank surface indicate poor sludge management (i.e. floating solids, gas)	Yes	No	N/A
Ası	ation Basins:			
1.	Aerator type: Mechanical, H	3lower_		·
2.	Mixed liquor Color: Black, Dan	rk Brow	/n	
	Med Brown	, Light	Brou	wn
	Foaming: Heavy, Moderate,			
	Odors: Strong, Moderate, 1			
5.	Air distribution: Excellent,	Adequat		_, Poor
	urn Sludge Unit:			
	is there adequate sludge return back to the head of the plant?			
2.	Sludge Color: Black, Brown	_, Ligh	it Bro	own
	estors:			
i.	Digestor Type: Almaerobic Ae	robic	<u>_</u> .	
2.	Digestor Sludge Color: Black,	Dark E	rown_	, Brown
з.	Digestor Odor: None, Musty	_, Hydr	ogen	Sulfide
4.	Does the facility have dewatering devices?	Yes	No	NA
5.	Are they functional?	Yes	No	NA
6.	Is the facility wasting sludge properly?	Yes	No	N/A
Slu	dge Processing:			
1.	Provide name of hauler:			
2.	Disposal Site: Owner Name:			
	Location:	·	<u></u>	
з.	Grade of Sludge:			

З

Fin	al Filters:			
	Performing satisfactory	Yes	No	NA
2.	General Conditions of Process:			2
	Explain:			
<b>T</b>	ckling Filters:			
	-			
1.	Performing Satisfactory	Yes	No	N A
2.	General Condition of Process:			
	Explain:			
	infection:			
<b>i</b> .	Chlorinator Type: Gas, Hypochl	orina	tion_	
	Other, Expl	ain:_		
2.	Adequate baffles in contact chamber. (Minimum of 2)	Yes	No	N/A '
з.	ls there solids evident in the chlorine contact chamber?	Yes	NO	NZA
4.	ls chlorine residual adequate?	Yers	No No	NZA
5.	ls there adequate ventilation, proper location of exhaust fan in the chlorine room?	Yers	No	N/A
6.	ls there a gas mask available?	Yes	No	N/A
7.	Are there duel scales and auto- matic switch over devices available	Yes ?	No	N/A
Eff	luent:			
1.	The quality of the effluent appears	Exc	celler	1t,
	Good Poor			· · · ·
2.	ls there solids carry-over in the effluent?	Yes	No	NZA
Per	c Pond Disposal Sites:			
1.	Are the ponds being maintained and rotated routinely?	Yes	No	N/A
			/	NZA

э.	Do the pond bottoms need cleaning out?		NG	
4.	Are the ponds exceeding capacity?	Yes	NO	N/A
5.	Are there odors7	Yes	Nø	N/A
6.	Appearance of pond surface:	Veeds	4	Algae,
	Scum, B	ubbles	·,	Other
7.	Appearance of pond water:	Black	۲ <u> </u>	Brown
		Cloud	ly	, Clear
Spr	ay Field Disposal Site:			
1.	ls there adequate field rotation?	Yes	No	N/A
2.	Is there evidence of ponding?	Yes	NO	N/A
з.	is there evidence of runoff?	Yes	NO	N/A
4.	ls there an accumulation of solids in the fields?		NO	
5.	Are the fields maintained (i.e. mowed, no broken spray heads, etc)?	Yes	No	N/A
Gen	eral Plant Conditions:			
1.	is plant staffed properly by certified operators?	Yes	No	N/A
2.	Are the site grounds adequately maintained?	Yes	No	NZA
з.	Is water supply adequate for chlorination systems?	Yes	No	N/A
4.	ls water provided for plant wash down?	Yes	No	N/A
5.	ls there adequate potable water protection?	Yes	No	N/A
6.	ls auxilliary power excercised periodically?	yee	No	N/A
7.	is the site fenced and locked?	Yes	No	N/A

# Inspectors Comments:

M. Oven street

Inspected by

2-1-99

•

Date

I	)	ļ	)	)	)	) <u>DOMESTIC WA</u> MALFUNCTION REPO	) <u>STE</u> RT FORM	) (6 ^{12/10}
						TO BE DELIVERED TO APPRO		NH
						(CLEARLY HANDWRITTEN	, NOT TYPED)	
				DATE	: 12/10/98	тіме: <u>8 20</u> (ДДИРМ)	RECEIVED BY: <u>J2</u>	ß
				REPO	DRTED BY: Nollan	VanMeter	·····	
				NAM	E OF PLANT/SYSTEM:	Wedgefield Subdiverses	COUNTY	: Orange
				ADDF	RESS:	·		
				TELE	PHONE: ( ) 568-6	787		
				OWN	ER:			
				DATE	& TIME OF FAILURE:	11/11/98 + 11/24/98		
						reedance of Nitrak love	15 01 11/11/92 (14)	wy/c) and
						lo rolitory sample was run	•	
					it on the c.oc. s			
						EN: Notify FDEP and side of	orater.	
				•				
				EXPE	CTED BACK IN SERVI	CE BY: (DATE & TIME)	· · · · · · · · · · · · · · · · · · ·	
				REMA	RKS:			
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			1		<u> </u>	<u>.                                    </u>		<u></u>
								, <u></u>
				FOLLO	OW-UP IN WRITING: (	//N)		
					JUNE 6, 1989			

)

### DOMESTIC WASTE MALFUNCTION REPORT FORM

### TO BE DELIVERED TO APPROPRIATE SECTION IMMEDIATELY

KG 12/10 MH 12/14

### (CLEARLY HANDWRITTEN, NOT TYPED)

REPORTED BY:	Natha_	Un Meter			
NAME OF PLANT	SYSTEM:	ledgefied subdit	UISTON	COUNTY:	Orange
	3100 BM				-
TELEPHONE: (	) 582-678	·7		··· <u>·</u> ····	
	FAILURE:				<u> </u>
	BLEM:		•	•	
	022m. <u> </u>				
<b>.</b>					
CORRECTIVE AC	TION TAKEN:	Testa blower	away for	iepairs . Utiliz	ing back-
CORRECTIVE AC	TION TAKEN:	Testa blaver	away for	iepairs Utiliz	ing back-
blowpr			· · · · · · · · · · · · · · · · · · ·	·	
Lilower EXPECTED BACH	( IN SERVICE BY:		· · · · · · · · · · · · · · · · · · ·	·	
blowpr	( IN SERVICE BY:		· · · · · · · · · · · · · · · · · · ·	·	
EXPECTED BACH	( IN SERVICE BY:		· · · · · · · · · · · · · · · · · · ·	·	
Lilower EXPECTED BACH	( IN SERVICE BY:		· · · · · · · · · · · · · · · · · · ·	·	
Lilower EXPECTED BACH	( IN SERVICE BY:		· · · · · · · · · · · · · · · · · · ·	·	
blower EXPECTED BACH	( IN SERVICE BY:		· · · · · · · · · · · · · · · · · · ·	·	



# Department of Environmental Protection

Lawton Chiles Governor Central District 3319 Maguire Boulevard, Suite 232 Orlando, Florida 32803-3767

Virginia B. Wetherell Secretary

OCD-C-WW-98-0586

UTILITIES INCORPORATED OF FLORIDA 200 WEATHERFIELD AVENUE ALTAMONTE SPRINGS FLORIDA 32714

ATTENTION DONALD RASMUSSEN

Orange County - DW Wedgefield Subdivision Wastewater Facility - Permit No. DO48-259584 Noncompliance Letter

Dear Mr. Rasmussen:

On June 1, 1998, Department personnel conducted a routine inspection of your wastewater facility. A copy of the inspection report is enclosed for your review. During the course of the inspection, and/or determined from records on file in this office, the following deficiencies were noted:

- 1. Correction fluid was used on the Monthly Operating Reports (MORs) for June and August through November 1997. Corrections should be made by crossing a single line through the error and writing in the correction and the initials of the person making the correction.
- 2. The field meter, which is used to check the total residual chlorine continuous analyzer, did not have a record of daily calibrations against known standards.
- 3. The MORs are being submitted with an incorrect permit number.
- 4. A review of the ground water files for this facility indicated the following deficiencies:
  - a. Please provide the Department with a detailed explanation of the field procedures used to collect samples from the ground water monitoring wells.
  - b. Please ensure that the quarterly monitoring reports are completed in full with accurate information. Additionally, the report must include the appropriate reference to the preservation methods used. At a minimum the samples must be iced to 4°C in the field immediately after sample collection.
  - c. The fourth quarter of 1996 and the first and second quarters of 1997 Ground Water Monitoring Reports have not been received by the Department's Central District Office. Please submit the missing report to the Central District Office in Orlando, Florida. Please ensure that the quarterly ground water monitoring reports are submitted in a timely manner.

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

Wedgefield Subdivision OCD-C-WW-98-0586 Page 2

- d. The ground water elevations have not been reported on the quarterly reports received for 1996 and 1997. Additionally, the well completion reports provided to the Department show that the monitoring wells were constructed with 3 foot PVC pipe riser; however, a surveyed measurement for the well's top of casing (i.e., riser) is not included. Please provide the Department with a survey report of all of the monitoring well top of casing elevations in feet National Geodetic Vertical Datum (NGVD). The report must be certified by a Professional Land Surveyor (PLS). Additionally, please provide a summary of the ground water elevation data in a tabular format for the last eight (8) quarters. At a minimum, the table will include each monitoring well's top of casing in feet NGVD, ground surface elevation in feet NGVD, depth to ground water in feet, and water level elevation in feet NGVD. Accuracy of the elevation data shall be to 0.10 feet.
- 5. The Department lacks a current sludge analysis for this facility.

Please respond to these items, in writing, with a schedule of corrective action. Pursuant to Rule 22-4.100(2), F.A.C., failure to comply with pollution control rules shall be grounds for permit uspension or revocation and initiation of formal enforcement action. Your reply is requested *i*th' 14 days from the date of this letter. Your reply and any questions should be addressed to icc. J.E. Hall at (407) 893-3313.

Sincerely Gary P. Miller

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Program Manager Wastewater Compliance/Enforcement

Date: ______ September 18, 1948

lynk Vmh/ww

-vosure

Orange County Environmental Protection Department Ground Water Section, FDEP

Darstient 15 Fourses By unstead to Compliance Inspection Report

## ENTERED JUN 0 1 195

### FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

# WASTEWATER COMPLIANCE INSPECTION REPORT

F	ACILITY	AND	INSPECTION INFORMATION	🗗 = Optional
F	ACILITY	AND	INSPECTION INFORMATION	🗗 = Optiona

	······································					
Name	and Physical Location of Facility	Gl	M\$ ID:	County		Entry Date/Time
WED	GEFIELD SUBDIVISION, WWTF	30	48P03712	ORANGE		1JUN1998 3:18 PM
19204	MEREDITH PKWY			Phone		Exit Time/Date
ORAN				568-6787		4:00 PM 1JUN1998
Name	e(s) of Field Representatives(s)	ти	lie			Phone
NATH	IAN VAN METER	OF	PERATOR			
Name	and Address of Permittee or Designated Rej	presentati	ve Title	Phone		Operator Certification #
UTILI	TIES INCORPORATED OF FLORIDA / DONAL	RASMUS	SSEN			
200 V	/EATHERFIELD AVE					
ALTA	MONTE SPRINGS, FLORIDA 32714					
Inspe	ction Type C E I Samples Tai	ken(Y/N):	N @ Sample	D#: NA		Samples Split (Y/N): N
$\boxtimes$	Domestic Industrial	Were	Photos Taken(Y/N): N	😧 Log bo	ok Vol	ume: 1 @ Page 153-154
			······································			•
	mpliance With Permit Conditions (Y/N): N			····-		
Reco	mmended Actions: NONCOMPLIANCE		· · · · · · · · · · · · · · · · · · ·			
Name	(s) and Signature(s) of Inspector(s)			District Off	ce/Pho	ne Number Date
	ael E. Hall Afic head f	U_L	/	Central (40	)7) 893	3-3313 9/F/9F
MICN						
	Afiched I					
e si	·			District Offic	ce/Pho	
e si	· · · · · · · · · · · · · · · · · · ·				ce/Pho	
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#### INSPECTION COMMENTS

0.200 MGD AADF design capacity contact stabilization activated sludge wastewater treatment facility with flow equalization, reaeration, settling, tertiary filtration and disinfection by gas chlorination. the disinfected reclaimed water is discharged to groundwater via a 7 day off line percolation/ reject effluent storage pond or a 36 day In line reuse/wet weather lined storage pond and then by spray irrigation at the Wedgefield Golf Course.

PERMIT: Satisfactory Permit Number DO48-259584 on site, expires 1/3/2000.

<u>RECORDS AND REPORTS:</u> Marginal Bound logbook on site with at least 1 year data available. Operator of appropriate level of certification on site as required by permit. MORs reviewed 6/97 - 6/98, all submitted as required. Correction fluid used on June, August - November 1997 MORs. MORs are being submitted with incorrect permit number.

SAMPLING: Marginal Field Cl₂ meter had no calibration log.

Continuous meter readings:

pH - 6.82 SU
Cl ₂ - 5.00 mg/L
Turbidity - 0.627 NTU

FACILITY SITE REVIEW: Satisfactory

i	
	Access - Fenced
	Blowers - Two, one on at time of inspection
	Mixed Liquor - Dark brown, no odor, no foam, good air distribution.
	Return Activated Sludge Line - On
	Digester - Storage capacity available
	Clarifier - Clear, clear over weir
	Sand Filters - Two sand filter, appear to be in good working order
	Chlorine Contact Chamber - Slightly turbid (due to backwashing of filters), no solids leaving plant.
	Chlorination - Two gas cylinders on scale and chained in place. Air pack available. Light and fan in working order.
	RPZ - OK
	FLOW MEASUREMENT: Satisfactory Flow meter with totalizer, last calibration 9/97.

en received by the Department's Central District Office. Please submit the missing report to the Central Jistrict Office in Orlando, Florida. Please ensure that the quarterly ground water monitoring reports are submitted in a timely manner. The ground water elevations have not been reported on the quarterly reports received for 1996 and 1997. Additionally, the well completion reports provided to the Department show that the monitoring wells were constructed with 3 foot PVC pipe riser; however, a surveyed measurement for the well's top of casing (i.e., riser) is not included. Please provide the Department with a survey report of all of the monitoring well top of casing elevations in feet National Geodetic Vertical Datum (NGVD). The report must be certified by a Professional Land Surveyor (PLS). Additionally, please provide a summary of the ground water elevation data in a tabular format for the last eight (8) quarters. At a minimum, the table will include each monitoring well's top of casing in feet NGVD, ground surface elevation in feet NGVD, depth to ground water in feet, and water level elevation in feet NGVD. Accuracy of the elevation data shall be to 0.10 feet.

<u>DISPOSAL METHOD</u>: Satisfactory Reject pond well maintained with >1 ft. freeboard. Golf course well maintained with signs posted.

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<u>RESIDUALS MANAGEMENT:</u> Marginal Contract with Brownies Environmental Services for sludge hauling on file. Current sludge analysis not available.



County

Certified Mail: P 486 608 365

NON-COMPLIANCE LETTER

December 9, 1996

Wedgefield Golf & Country Club 200 Wethersfield Avenue Altamonte Springs, FL 32714

Attn: Don Rasmusser

Ref: Wedgefield Golf & Country Club Wastewater Treatment Plant

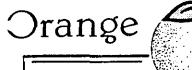
OCEPD Permit: D095-01 Expires: January 3, 2000

Dear Mr. Rasmusser:

On November 20, 1996, an inspection of the above referenced facility was conducted by a representative of this Department. A copy of the inspection report is enclosed for your review. During the course of the inspection, and/or determined from a review of the records on file in this office, the following permit non-compliance issue(s) were noted:

- 1. The electronic surveillance dialer is out of service. The daily log did not disclose continuous monitoring of the permit parameter for effluent which is discharging to the public access irrigation pond.
- 2. A review of the monthly operating report for September 1996, disclose the sampling for CBOD5, TSS, Fecal Coliform and Nitrate Nitrogen as N were not sampled as required by permit Specific Conditions, Para 1. In addition, the MOR's do not indicate the 8-hour flow proportion sampling.
- 3. To date, we have not received the daily or monthly flow records as required by permit specific condition Para 23.
- 4. A review of our files disclose we have not received an updated protocol as required by permit specific conditions Para 24.





Environmental Protection Department Anna Hacha-Long, Manager 2002 East Michigan Street Orlando, Florida 32806-4999 Telephone (407) 836-7499 FAX (407) 836-7499 GAMJJJ 6 FFC FL GAMJJJ 6 FFC FL DE DIST

Certified Mail: P 486 608 313

NON-COMPLIANCE LETTER

September 10, 1996

Utilities Incorporated of Florida 200 Weathersfield Avenue Altamonte Springs, Florida 32714

Attn: Donald Rasmussen

Ref: Wedgefield Golf & Country Club Wastewater Treatment Plant

County

OCEPD Permit: D095-01

Expires: January 3, 2000

Dear Mr. Rasmussen:

On August 29, 1996, an inspection of the above referenced facility was conducted by a representative of this Department. A copy of the inspection report is enclosed for your review. During the course of the inspection, and/or determined from a review of the records on file in this office, the following permit non-compliance issue(s) were noted:

- 1. The operating protocol manual was not located at the plant site: Reference: Paragraph 24 of the permit for annual review and approval.
- 2. A review of our files disclose the following data is delinquent:
  - a. Operating report for April, May and June 1996.
  - b. Reclaimed water analysis report.
  - c. Sludge analysis required annually.
  - d. Agricultural use plan (AUP) or contract with an approved domestic residuals processor.
  - e. Groundwater monitoring well analysis for the 2nd quarter

Donald Rasmussen September 6, 1996 Page Two

3. The electronic surveillance dialer was not in operation.

4. The chlorine and pH analyzer has been removed for repair. According to the onsite operator, the re-use water is not being diverted to the non-compliance pond. Please explain how the plant is being monitored for compliance after staffing hours.

Your written response is required within ten (10) days of receipt of this letter indicating the corrective action(s) initiated.

Sincerely,

Comin Brune-

Environmental Inspector Ernie Browne

EB:CS/df cc: F.D.E.P.

001-068-2420-4343 INVOICE TO FOLLOW



ENVIRONMEN1 PROTECTION DEPARTMENT ANNA HACHA-LUNG, Manager 2002 East Michigan Street Oriando, Florida 32806-4999 (407) 836-7400 • Fax (407) 836-7499 http://www.cluzens-first.co.orunge.fl.us CERTIFIED MAIL: Z 281 793 484

December 2, 1997

Mr. Donald Rasmussen Utilities Incorporated 200 Weatherfield Avenue Altamonte Springs, FL 32714

Re: Wedgefield Golf and Country Club

OCEPD Permit: D095-01

Expires: January 13, 2000

Dear Mr. Rasmussen:

On November 17, 1997, an inspection of the above-referenced facility was conducted by a representative of this Department. A copy of the inspection report is enclosed for your review. During the course of the inspection, and/or determined from a review of the records on file in this office, the following permit non-compliance issue(s) were noted:

- 1. A review of our files disclosed that we have not received the (3rd quarter) groundwater monitoring well data.
- 2. The operating protocol for the facility is not on file with this office. Please forward a copy of this document to this office.

Your written response is required within ten (10) days of receipt of this letter indicating the corrective action(s) initiated.

Sincerely. Math

Mark Overstreet Environmental Inspector

MO/CS/BE/AHL:ajs Enclosure



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### CERTIFIED MAIL: P 034 525 696

June 27, 1997

Mr. Ronald Rasmussen Wedgefield Golf and Country Club 200 Weathersfield Avenue Altamonte Springs, FL 32714

Re: Wedgefield Golf and Country Club Wastewater Treatment Plant

OCEPD Permit: DO95-01

Expires: January 3, 2000

Dear Mr. Rasmussen:

On May 29, 1997, an inspection of the above-referenced facility was conducted by a representative of this Department. A copy of the inspection report is enclosed for your review. During the course of the inspection, and/or determined from a review of the records on file in this office, the following permit non-compliance issue(s) were noted:

- 1. Heavy rust has deteriorated the base of the motor control electrical panel. In addition, the conduit supporting the electrical wires at ground level, has separated from the panel and is exposing the wires.
- 2. The main incoming voltage panel is inadequately secured to the concrete base. The panel rocks back and forth.
- 3. Heavy sand build up was being removed from the equalization tank. This condition was creating an obvious odor that permenated the area. No odor masking agent was being utilized.

Your written response is required within ten (10) days of receipt of this letter indicating the corrective action(s) initiated.

Sincerely,

Ernie Browne

Environmental Engineer

EB/OS/BE/AHL:mg Enclosure

c: PDEP Central File Correspondence File

001-068-2420-4343 INVOICE TO FOLLOW

> ENVIRONMENTAL PROTECTION DEPARTMENT ANNA HACHA-LONG, Manager 2002 East Michigan Street • Orlando, Florida 32806-4999 Telephone (407) 836-7400 • FAX (407) 836-7499 • http://www.citizens-first.co.orange.fl.us





DOMESTIC WASTE MALFUNCTION REPORT

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15/87

TO BE DELIVERED TO APPROPRIATE SECTION IMMEDIATELY

(CLEARLY HANDWRITTEN, NOT TYPED)

DATE: 113196 TIME: 12:07 (AM/OM) RECEIVED BY: PICARDy KGottwald
REPORTED BY: Richard Eck, Operator
NAME OF PLANT/SYSTEM: Widgefield Unite county: Orange
ADDRESS :
PHONE:
OWNER :
DATE & TIME OF FAILURE: Ne didn't say
NATURE OF PROBLEM: 50 g. al. oniflow of raw servage
from manhale + c/s.
CORRECTIVE ACTION TAKEN: <u>Fumped down and spread</u>
EXPECTED BACK IN SERVICE BY (DATE & TIME):
REMARKS: Will Call Monday with more information.
FOLLOW-UP IN WRITING: (Y/N)

Revised June 6, 1989

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KG 12/4 AM 12/4 DOMESTIC WASTE MALFUNCTION REPORT TO BE DELIVERED TO APPROPRIATE SECTION - IMMEDIATELY (CLEARLY HANDWRITTEN, NOT TYPED) DATE: 10/4/910 TIME: 11:00 AM RECEIVED BY Cindu REPORTED BY Roger Holsapple NAME OF PLANT/SYSTEM Wedgefield Utilities COUNTY: Orange Address Melville S PHONE (407) 568-6787 OWNER -DATE AND TIME OF FAILURE 12/3/96 6:30 pm NATURE OF PROBLEM Sand in Sewer system caused overflow, 50 gals of water spilled CORRECTIVE ACTION TAKEN Cleaned lines, HTH on Spill, hosed down area EXPECTED BACK IN SERVICE BY (DATE & TIME) 1213196 9:15 Pm REMARKS NO Waterways in area

ITG (1/19 AM "**1**21

#### DOMESTIC WASTE MALFUNCTION REPORT

TO BE DELIVERED TO APPROPRIATE SECTION IMMEDIATELY

(CLEARLY HANDWRITTEN, NOT TYPED)

DATE: 11 19196 TIME: 11:05 (AD)PM) RECEIVED BY: C. ANDERSON
REPORTED BY: RICHARD ECK
NAME OF PLANT/SYSTEM: WEDGEFETLD S/D COUNTY: ORANGE
ADDRESS:
PHONE: 1407 568-6787
OWNER :
• · · ·
DATE & TIME OF FAILURE: $11/19/96$ 10:00
NATURE OF PROBLEM: MH BACKUP, SPILL 200 GALS
DUE TO BLOCKAGE.
•
CORRECTIVE ACTION TAKEN: CHECK PUMPS & MAIN. CLENN
\$ DISINFECT AREA.
EXPECTED BACK IN SERVICE BY (DATE & TIME) : 11/19/96 10.40
REMARKS :
FOLLOW-UP IN WRITING: $(Y/N)$

RL 6/24

### DOMESTIC WASTE MALFUNCTION REPORT

TO BE DELIVERED TO APPROPRIATE SECTION IMMEDIATELY

(CLEARLY HANDWRITTEN, NOT TYPED)

DATE: 6 1 181 96 TIME: 2:45 (AM (PM)) RECEIVED BY: C. ANDORSON
REPORTED BY: BILL HUGAPPLE
NAME OF PLANT/SYSTEM: WODGEFIGED COUNTY: ORANGE
ADDRESS:
PHONE: () <u>568-6787</u>
OWNER :
· · · · · · · · · · · · · · · · · · ·
DATE & TIME OF FAILURE: 6/17/96 2:00
NATURE OF PROBLEM: GUING TO REJECT PUND
DUE CONSTRUCTION ON MAIN 4/S.
,
CORRECTIVE ACTION TAKEN:
EXPECTED BACK IN SERVICE BY (DATE & TIME) : 6/19/96 PM
REMARKS :
FOLLOW-UP IN WRITING: (Y/N)

Wedgefield Utilities, Inc.

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Docket No. 991437-WU

25.30-440 (8) Field Employees

Test Year Ended June 30, 1999

### Employees involved in Wedgefield Operations:

Don Rasmussen, Vice President of Operations: Oversees all operations and employees in Florida.

David L. Orr, E.I., Regional Operations Manager: Manages operations and employees for all central Florida operations. Central Florida Operations includes Lake, Marion, Orange, and Seminole counties.

Bryan Gongre, Area Manager: Supervises day to day operations for central Florida operations.

Charlie Forehand, Assistant Area Manager: Assists Area Manager in day to day operations. Efforts were concentrated at the Wedgefield facilities during the test year.

Field Employees:

Roger Holsapple, Operator: Roger holds a Class C drinking water and Class C wastewater license.

Nathan Van Meter, Operator: Nathan holds a Class B wastewater license.

Robert Risner, Operator: Robert currently holds a Class A water and Class C wastewater license.

Chris Phillips & James Yingling

### Facilities:

Wedgefield Wastewater Treatment Facility:

Requires staffing 6 hours per day 7 days per week with a minimum class B certification for the lead operator. To fulfill these requirements two full time operators work 40 hours per week. The lead operator is on site Monday through Friday, the second operator is on site Wednesday through Sunday.

Water Treatment Facility:

Requires staffing of 3 hours per day Monday through Friday and 1 visit each weekend day. The same operator working at the wastewater plant Wednesday through Sunday operated the water treatment plant on these days.

Duties and Responsibilities:

- a) Responsible for performing treatment plant operation and maintenance duties. Duties to be completed in a reasonable and professional manner consistent with the standard operating practices in order to meet state standards and rules. Also, perform duties consistent with the protection of public health and the environment.
- b) Perform responsible, efficient and effective on-site management and supervision over all plant functions.
- c) Submit complete, accurate, and timely plant monthly operating reports.
- d) Report to the Permittee and the Department of Environmental Protection and serious plant breakdown or condition causing or likely to cause serious, inefficient or unsafe treatment plant

operation, or discharge of water or wastewater in a manner not authorized by the current permit.

- e) Submit accurate reports relative to treatment plant operation, sampling and laboratory analysis.
- f) Maintain an operation and maintenance log for each plant, current to the last operation and maintenance performed.
- g) Perform preventative maintenance and either repair or request the Permittee repair equipment or distribution/collection systems as needed to keep the treatment plant operating as permitted.
- h) Perform various work order functions to include but not limited to the following: customer complaints, reading and checking meters, cross-connection inspections, replacing and installing meters, installing or repairing distribution/collection systems, and water conservation activities.
- i) Maintain visual aesthetics of facilities to company standards.

Wedgefield Utilities, Inc.

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Docket No. 991437-WU

25.30-440 (9) Vehicles

Test Year Ended June 30, 1999

## WEDGEFIELD UTILITIES, INC.

			Owned or		
Assigned to:	Vehicle #	Description	Leased	Ori	ginal Cost
Forehand, Charlie	9,810	'98 Dodge Dakota	Owned	\$	17,115
Gongre, Brian	9,636	'96 Ford Ranger	Owned	\$	17,978
Holsapple, Roger	9,815	'98 Chevy S-10	Owned	\$	16,487
Orr, David	9,526	'95 Ford Taurus	Owned	\$	17,125
Phillips, Christopher	9,814	'98 Chevy S-10	Owned	\$	16,487
Rasmussen, Don	9,627	'96 Ford Crown Victoria	Owned	\$	24,440
Risner, Robert	9,806	'98 Dodge Dakota	Owned	\$	17,115
Ying Ling, James	9,813	'98 Chevy S-10	Owned	\$	16,487
Van Meter, Nathan	9,523	'95 Chevy S-10	Owned	\$	13,923

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Wedgefield Utilities, Inc.

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Docket No. 991437-WU

25.30-440 (10) Customer Complaints

Test Year Ended June 30, 1999

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)	)	)	)		)	.)_10-00	)	)	)	)
(912) SERVIC	E ORDERS WITH	COMPLAINTS FOR	SUBUIVISION	1 647 SY 3	506 10:02:27	10-10-22				·
- SUBDIVISION-		<u></u>			·····			· · · · · · · · · · · · · · · · · · ·		
ROUTE	<b>:.</b>									
SERVICE ORDE	R <b># :.</b> 335183									
- ACCOUNT#	<del>:.</del> 6491023	711								
CUSTOMER NAM	1E :. 1									
SERVICE ADDR	RESS:.									
- DDATE		*8			<u> </u>					
TYPE	:. 42								,	
	:. WU									
- COMMENT		GHBOR OF THIS CL	JSTUMER CALL	ED TO SAY TI	HAT-WATER-IS-	SHOOTING_OUT		· · · · · · · · · · · · · · · · · · ·		- <u></u>
	. IN THE	FRONT OF THIS CO	JSTOMERS YAR	D.						
	, CHECK 1	THE AREA FOR RUNI	NING WATER							
- RESOLUTION		OR WENT-TO SITE !	SAID-ALL WAS	GLEAR AND	DF:Y			·····		

RESOLUTION	:. OPERATOR WENT-TO SITE SAID ALL WAS CLEAR AND DRY
	_ SG/NV
RDATE	:. 07/01/98
SUBDIVISION	I. 649
SERVICE ORDER#-	
	: 649000000
CUSTOMER NAME	
SERVICE ADDRESS	
	:. 08/30/98
	1. 39
	: SEVERAL ADDRESSES IN WEDGEFIELD CALLED ANSWERING SERVICE TO REPORT
	+. ROGER RESPONDED TO ALARM, L/S #2. PUMP #2 RURNED OUT. STARTED BURNED
	. OUT. PUMPING WITH #1 PUMP.
	- STARLING ELECTRIC CHECKED OUT L/S+ NEEDS PUMP REFLACED. NEEDS STARTERS
	. RELAYS, START/RUN CAPACITORS. STARLING WORKING ON L/S REPAIRS.
	•
	. NVM/DAMe
RDATE	:. 08/30/98
OUDDIVIDION	
SUBDIVISION	
SERVICE ORDER#	
ACCOUNT#	
CUSTOMER NAME	
SERVICE ADDRESS	
DDATE	
	:. 43
FOPER	2. WU
COMMENT	: SEVERAL CALLS ON ANSWERING SERVICE REGARDING NO WATER. PLEASE FX
	. TO OFFICE THE PROBLEM AND RESOLUTION. NOTE: A BEAUTY PARLOR SAID
	. THEY WERE OUT OF WATER WHILE PUTTING CHEMICALS IN THEIR CUSTOMER'S
	HAIR, THEY HAD TO TAKE THE CUSTOMER TO THE CUSTOMER'S HOUSE TO RINSE
•	THEM OUT.
RESOLUTION	: 10/24/98 SUNSHINE BUILDERS WAS WORKING ON A FIRE HYDRANT ON MAXIM
	PARKWAY WHEN THEY SHUT THAT PART OF THE WATER MAIN DOWN.
	IT ALSO SHUT DOWN ABALONE BLVD WHICH IS CONNECTED TO THE
	BEAULY PARLOR.
	ROGER STATES HE IS GOING TO CHECK FACH VALVE IN THE LOOP TO BE SURE EACH
	. ROGER STATES HE IS GOING TO CHECK EACH VALVE IN THE LOOP TO BE SURE EACH . VALVE IS OPEN, RH/DAMC

······	
	: 10/13/98
SUBDIVISION	:. 649
	:. 1
SERVICE ORDER#	
ACCOUNT#	
	: MANALAD, ALBERT
	2281 ARDON AVE
DDATE	
	r. 36
	: WU
	:CUSTOMER FHONED DIRECTLY TO FLANT REGARDING SEWER BACK UF
	. PLEASE ADVISE :. 1/27/99 GENESIS GROUP CALLED ROGER AND SAID WE HAD A SEWER BACK UP AT
RESOLUTION	. 1/27/99 GENESIS GROUP CALLED RUGER AND SAID WE HAD A SEMER BACK OF AT
	. STREAM. I SHOWED THE OWNER THAT OUR MAIN WAS NOT PLUGGED.
	. 1/28/99 THE PLUMBER FOR GENESIS GROUP CALLED TO MEET WITH HIM AT SITE
	. WHEN ARRIVED, THE PLUMBER HAD THE PIPE DUG UP WHERE THE CUSTOMER'S PIPE
	. CONNECTS TO OUR LATERAL, WHEN PLUMBER RAN SNAKE DOWN OUR LATERAL IT THEN
	. CUNNELTS TO OUR LATERAL, WHEN PLOMBER RAN SMARE DOWN OUR CHTERAL IT THEN
	J'ULEAKED'INE ULEU ULA EMIEKAEUUT-E'IU D'FIJITTET UED JUDIN MADEI
	· , RH/DAMc
RDATE	, RH/DADC
SUBDIVISION	. 649
ROUTE	
SERVICE ORDER#	
	• 6491017023
CUSTOMER NAME	
	: 20311 MACON PKWY
	. 03/27/99
FOPER :	
	. PER ANSWERING SERVICE, WATER MAIN BREAK IN FRONT OF THIS CUSTOMERS HOME
	- PLEASE FAX RESOLUTION TO OFFICE
	. HOMEOWNER HAD GRAVEL DELIVERED. RAN OVER HIS NEIGHBORS VALVE AND
	. BROKE PVC ON CUSTOMER SIDE OF METER. TURNED OFF WATER AND TAGGED
	DOOR
RDATE :	. 03/27/9%
	- 649
	· 1
SERVICE ORDER# :	
ACCOUNT# I	
CUSTOMER NAME :	
	. 2208 BAGDAD AVE
DDATE	
	. 29
FOPER :	WU AND THE THAT WATER IS RECURN AND THERE IS A HOLE IN THE FRONT
COMMENT	- CUSTOMER-STATES THAT-WATER IS BROWN AND THERE IS A HOLE IN THE FRONT
	. YARD THAT NEEDS TO BE REPAIRED ALSO CUSTOMERS CLOTHES ARE BROWN
	. TAG HOUSE WITH THE FINDINGS 
RESOLUTION	
	. RED-B-G FOR HIS STAINED CLOTHERS. THE HOLE HE IS TALKING ABOUT IS BE-
	. SIDE A STORM DRAIN SO IT IS NOT OUR PROBLEM.

## (912) SEF E ORDERS WITH COMPLAINTS FOR SUBDIVISION 649 BY SF 15:52:27 10-18-99

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NUALE	•••••••••••••••••••••••••••••••••••••••
SURDIVISION	:. 649
ROUTE	
SERVICE ORDER#	
ACCOUNT#	:. 649000000
CUSTOMER NAME	
SERVICE ADDRESS	
	:. 02/11/99
	•• 29
FOPER	
	:. THE FOLLOWING COMPLAINTS WERE HEARD AT THE HOMEOWNER'S ASSOCIATION
	- MEETING ON-FEB10.,-1999
	. 2414 ABALONE - SAID'WATER CAUSING RINGS IN TOILET
	. 29819 MAXIM - SAID WATER CAUSING RINGS IN TOILET
	-, 20531-MAXIM CUSTOMER'S WATER TREATMENT SYSTEM CAUSING TILES-DISCOLOR-
RESOLUTION	:. 2414 ABALONE: STOPPED BY 9:31 A.M. MR PLANTER NOT HOME, LEFT PHONE
	. NUMBER WITH DAUGHTER AND ASKED THEY CALL ME.
<u> </u>	
	, 20819 MAXIM PARKWAY: STOPPED BY 9:40 AM, SPOKE TO MRS. REEVES, ADVISED
	, CUSTOMER THAT WE WOULD FLUSH MORE.
	. 20531 MAXIM PARKWAY SPOKE TO CUSTOMER, BLUE TILE PROBLEM NOT PRESENT
	. BEFORE THEY HAD WATER TREATMENT IN HOME.
RUATE	r. <u>02/15/99</u>
SUBDIVISION	
ROUTE	
SERVICE ORDER#	:. 6491024042
CUSTOMER NAME	
	:. 2257 ARDON AVE
	: 09/30/98
COMMENT	BLEAST REREAD AND CHECK FOR LEAKS
	CUSTOMER-SAYS METER IS SPINNING WITH EVERYTHING OFF IN THE HOUSE.
RESOLUTION	RH TALKED WITH HOMEDWNER, SHUT OFF VALVE OUTSIDE THE HOUSE AND THE
	METER QUIT TURNING. CUST HAS A LEAK INSIDE THE HOUSE SOMEWHERE
RDATE	. 09/30/98
SUBDIVISION	. 649
SERVICE ORDER# :	
ACCOUNT#	. 6491023111
	AWRENCE, VIKTORIA
	. 20614 MAJESTIC CT
	. 10/13/98
-	. 28
COMMENT :	CUSTOMER REPORTING VERY LOW PRESSURE
	. STATES IF SHE FLUSHES THE COMMODE THEY CANNUT BATHE.
	. MR 4844230 HOUSE VALVE WAS TURNED OFF 1/4 OF THE WAY, OPENED ALL . THE WAY, CURB STOP OPENED ALL THE WAY. TAGGED WITH FINDINGS.

· · · · · · · · · · · · · · · · · · ·	
	, RH/DAMe
RDATE	:. 03/31/99
SUBDIVISION	:. 649
	:. 1
SERVICE ORDER#	
ACCOUNT#	
· · · · · · · · · · · · · · · · ·	: MANALAD,ALBERT
	:. 2281 ARDON AVE :. 03/30/99
	·· 36
=	·· »»
	+ PER ANSWERING SERVICE, CUSTOMER PHONED REGARDING DRAINAGE BACKING UP
	. PLEASE FAX INFORMATION TO OFFICE.
	: BROWNIES CLEARED THE SEWER LATERAL. CALLED TOTAL SEPTIC TO HAVE THE
	, LINE TV'D CAMERA PER CHARLIE F, THIS LINE HAD BEEN PLUGGED UP THREE
	. TIME IN PAST THREE MONTHS. TOTAL SEPTIC WILL BRING TAP BY THE OFFICE
	. RH/DAMc
RDATE	••••••
	:. 649
ROUTE	
SERVICE ORDER#	
ACCOUNT#	:. 6491029131 :. FLANNERY,SEAN
	:. 2234 BAKER AVE
DDATE	
	•. 28
FOPER	· WU
COMMENT	:, CUSTOMER IS EXPERIENCING LOW PRESSURE. PLEASE CHECK IT OUT
RESOLUTION	: MR 585200 NO LEAKS. CANNOT TELL IF WATER SOFTENER IS USED.
	, PSI IS AT ZERO. NEXT DOOR ON SAME LINE, PSI IS 60. CURB STOP AND
	. HOUSE VALVE ARE WIDE OPEN, TAGGED DOOR TO SERVICE WATER SOFTENER
	-, CALL OFFICE IF THEY DO NOT HAVE SOFTENER NVM/DAMC
RDATE	:. 04/06/99
SUBDIVISION	• 449
ROUTE	
SERVICE ORDER#	
ACCOUNT#	. 6491024183
CUSTOMER NAME	:. MURPHY,CORETTA B
	:. 2264 ARCHER BLVD
DDATE	
	. 43
+	: WU - der Anguertine gernager dag no lates
COMMENT	I FER ANSWERING SERVICE CUSTOMER HAS NO WATER
RESOLUTION	. PLEASE ADVISE :. NO PSI ADVISED CUSTOMER TO HAVE WATER SOFTENER CHECKED.
	RH/DAME
	• KH/DANE
i sheri Ti Emaini i	
SUBDIVISION	· · · · · · · · · · · · · · · · · · ·
	. 2
SERVICE ORDER# :	. 335577

(912) SERVICE ORDERS WITH COMPLAINTS FOR SUBDIVISION 649 BY SUB 15:52:27 10-18-99 ) ) )

)

CUSTOMER NAME :. MCGREGOR : GEORGE SERVICE ADDRESS: 2346 ABALONE BLVD :, 28 TYPE ±. W⊔ FOFER -. PER-ANSWERING-SERVICE,-CUSTOMER PHONED-WITH-LOW PRESSURE--COMMENT-. STATED HOUSE WILL BURN DOWN IF NO WATER PRESSURE. PLEASE ADVISE OFFICE . IS THIS RELATED TO FIRES THERE, ETC -- CHECK CUSTOMER'S PRESSURE RESOLUTION :. THIS IS DUE TO THE EXCESSIVE DRAW OF WATER DURING THE FIRES . NVM/DAMc -RDATE--:. 07/06/98-SUBDIVISION 1. 647 -ROUTE SERVICE ORDER# :. 335574 ACCOUNT# :. 6494033111 SERVICE ADDRESS:. 2310 BABBITT AVE :. 07/04/98 DDATE -TYPE FOPER :. WU COMMENT :. FER ANSWERING SERVICE, DON FROM A PLUMBING SERVICE CALLED REGARDING . BACK TO OFFICE. THANK YOU RESOLUTION :. ROGER STATED PLUMBER RAN 75' SNAKE BUT WAS NOT LONG ENOUGH TO REACH THE -. STREET PUT IT DID REACH LATERAL. ROGER WENT TO SITE AFTER PLUMBER CALLED . AND ROGER SAID NOT OUR PROBLEM. HOWEVER, ROGER CHECKED BOTH MANHOLES AND . THEY WERE CLEAR. THEN ROGER CONTACTED BRYAN G, WHICH ADVISED ROGER TO . CONTACT BROWNIES. BROWNIES CLEANED LATERAL, CLOG BECAME CLEAR THEN. CLOG . WAS IN OUR LATERAL. BLOCKAGE ON OUR SIDE. CUSTOMER PAID THE PLUMBER . AND IS NOW REQUESTING WE REIMBURSE HER FOR THE PLUMBER'S FEES. . COPY OF INVOICE FROM PLUMBER IS ATTACHED. DAMC -- RDATE -:. 07/04/98-SUBDIVISION : 649 - 2--ROUTE SERVICE ORDER# :. 343852 ACCOUNT# : 6494032154 - CUSTOMER NAME ... JOHNSON RAYMOND SERVICE ADDRESS: 2344 BAGDAD AVE DDATE :. 08/25/98 -TYPE-FOPER :. 602 :, MS. CALLED STATING WATER 1S BACK UP AT CURB SO BAD SHE CAN'T MOW. PLEASE COMMENT -. -RESOLUTION---. THE SIDEWALK. SUNSHINE CALLED 8/25/98, CONFIRMATION NO. 618197 . NVM/DAMc . SUNSHINE REPAIRED ON 9/3/98 RDATE :. 08/25/98

TYPE	<del>;, 36</del>
FOPER	
COMMENT	:. CUSTOMER PHONED ANSWERING SERVICE REGARDING SEWER BACK UP
	PLEASE FAX INFORMATION TO-OFFICE
RESOLUTION	:. 1/4/99 BLOCKAGE BETWEEN CLEANDUT AND MAIN. MAIN FLOWING FREELY.
	. ATTEMPTED TO DISLODGE BLCOKAGE WITH SEWER BALLOON BUT WAS NOT
·····	SUCCESSFUL. VERIFIED WITH BRYAN THAT CUSTOMER RESPONSIBILITY GOES
	. TO PROPERY LINE AT EASEMENT. INFORMED CUSTOMER THEY WILL HAVE TO
	. HAVE PLUMBER DO REPAIR. PROBLEM IS LIKELY CAUSED BY TREE ROOTS AS LINE
	- RUNS-UNDER SEVERAL TREES. (SUSTOMER ASKED ABOUT PROBABLE CAUSE OF
RDATE	:. 01/04/99
SUBDIVISION	:. 649
ROUTE	
-SERVICE-ORDER#	
ACCOUNT#	:. 6491165081
	: MARCH, WALTER
	2751 BANGROFT BLVD
DDATE	:. 01/28/99
TYPE	29
	:. CUSTOMER STATES THERE IS SCUM IN WATER PLEASE CHECK AND ADVISE
RESOLUTION	:. TALKED WITH WALT AND LOOKED AT HIS PROBLEM. FOUND BLACK SCUM IN THE
	-, BATHROOM-FAUCET, WENT OUTSIDE TO LOOK AT HIS SOFTENER, FOUND HE HAD
	. TWO FILTERS ONE BEFORE THE SUFTENING AND ONE AFTER. THE ONE AFTER
	. HAD BLACK PARTICALS, GREEN AND RED IN COLOR. KEN MILLER SAID HE HAD A
	- MAGANESE PROBLEM IN HIS SOFTENER, I WENT BACK TO WALT'S AND SHOWED
	, HIM WHERE HIS PROBLEM IS. RH/DAMC
RDATE	;, 01/28/99
SUBDIVISION	:. 649
ROUTE	:. 2
SERVICE ORDER#	
ACCOUNT#	:. 6493047252
	: EUDARIC MD+PHILLIPPE
DDATE	:. 04/08/79
	1. 04/08/97 1. 28
COMMENT	:. CUSTOMER EXPERIENCING LOW PRESSURE PLEASE CHECK AND ADVISE
	: COSTONER EXPERIENCING LOW PRESSORE FLEMSE CHECK HAD ADVIGE
F\12/1318	•, •4/08/99
SUBDIVISION	:. 649
	· · · · · · · · · · · · · · · · · · ·
SERVICE ORDER#	
	:. 378823 :. 6491165081
-GUSTOMER NAME	
	: 2751 BANCROFT BLVD
	:, 04/08/99
	<del>; 33</del>
	:, WU - Curtomer on ter date de las varr to thotal derivare 70 during
	:. CUSTOMER CALLED SAID WE DOUG UP HIS YARD TO INSTALL NEW SERVICE TO NEW
	HOUSE-BEING-BUILT NEXT DOOR, WOULD LIKE TO HAVE THE GRASS ON HIS
	. PROPERTY WE LEFT OUT REPLACED. SHOULD TAKE 1 OR 2 PIECES OF BAHAYA SOD
	. WOULD LIKE TO HAVE DONE ASAP. HE

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()12) SERVICE JRDERS WITH (JMPLAINTS FOR) SUBDIVISION ) 649 BY SUL) 15:52:27 (0-18-99 ) ) ) ) ) ) )

	<u>1. 649</u>
ROUTE	
SERVICE ORDER#	
	:. SHUGA, STEPHEN
	:. 2325 BANCROFT BLVD
DDATE	:. 10/20/98
TYPE	:. 32
FOPER	ε. WU
COMMENT	: PER CUSTOMER'S CORRESPONDENCE, THEY CLAIM WATER TASTES BAD AND IS BEING
	. TESTED FOR HEALTH CONCERNS. PLEASE CHECK AND ADVISE CUSTOMER YOU ARE
	. THERE DOING SO. ADVISE OFFICE OF FINDINGS.
RESOLUTION	
112002011014	CL2 RESIDUAL WAS 2.3 AT HOSE BIB. FLUSHED FIRE HYDRANT ACROSS
	. STREET FROM CUSTOMER FOR SIX MINUTES. TAGGED DOOR WITH FINDINGS
	ALSO ADVISED TO SERVICE WATER SOFTNER IF THEY HAVE ONE.
·····	NVM/DAMc
RDATE	10/19/98
	- 642
SERVICE ORDER#	
	. 6494031181
CUSTOMER NAME :	
	2370 BAKER AVE
	. 28
FOPER	
	. CUSTOMER COMPLAINT: LOW PRESSURE, ESPECIALLY IN MORNINGS. PLEASE CHECK
	. TAG RESIDENCE YOU RESPONDED
RESOLUTION :	. TOOK PRESSURE, TESTED 55 PSI. ADVISED CUSTOMER TO CHECK SOFTENER
	. 10/21/78
	. 649
-	
SERVICE ORDER# :	
ACCOUNT#	
	. DE LA FUENTE, DAN
SERVICE ADDRESS:	. 2426 ALBION AVE
-DDATE :	· 11/27/98
TYPE :	. 36
FOPER :	, WU
	- PER ANSWERING SERVICE, CUSTOMER CALLED 11/27/98 TO REPORT SEWER IS
	. BACKED UP PLEASE FAX RESOLUTION OF THIS TO OFFICE
	SEWER BACK UP IS ON CUSTOMER'S SIDE. RH/DAMC
	- 11/27/98
SUBDIVISIÓN :	
	. 649
	. 2
SERVICE ORDER# :	
	. 6492042161
CUSTOMER NAME +	- DE LA FUENTE+DAN
SERVICE ADDRESS:	2426 ALBION AVE
DDATE :	. 01/04/99

	RH PUT SOD IN HOLE, THE HOLE IS ONLY 22.5 " LONG , I SHOVELED WIDTH
RESOLUTION	. WIDE WHERE I DUG WAS IN FRONT OF HIS METER BOX TO LOCATE THE WATER
	. SERVICE FOR THE LOT NEXT TO HIS. THIS CUSTOMER WAS ARRESTED FOR
	. SERVICE FOR THE LOS NEXT TO HIS. THIS COSTONER WAS ARRESTED FOR
	• RH/DAMc • 04/08/99
RDATE	1. 04/08/99
SUBDIVISION	
	······································
SERVICE ORDER#	
ACCOUNT#	:. 6493046374
	:. ESCURRA,PATRICIA-M
	: 2388 ALABASTER AVE
	1. 04/16/99
TYPE	+. 35
FOPER	
COMMENT	: CUSTOMER STATES THAT THERE ARE DEEP HOLES WITH OUR DRAINAGE PIPES
	- FOR THE SEWER AND WOULD LIKE THEM FILLED SO THAT CHILDREN DONT GET HURT
	: 4/16/99 I TAGGED HOUSE TO ADVISE THE DRAINAGE SYSTEM BELONGS TO
	. RANGER DRAINAGE DISTRICT , WHICH I ALSO CONTACTED AND TOLD THEM ABOUT
	THE PROBLEM
	. THE HOLE IS BESIDE THE DRIVEWAY, UNDER THE DRAIN FIPE
	••••••••••••••••••••••••••••••••••••••
SUBDIVISION	• 449
	1. 2
SERVICE ORDER#	
ACCOUNT#	1. 6491160081 1. MARCH, WALTER
	:, 2751 BANCROFT BLVD
	:. 04/22/99
	<del>:. 28</del>
COMMENT	:. CUSTOMER WANTS THE PRESSURE TO HIS HOME TESTED. HE HAS VERY LOW WATER
	· PRESSURE FLEASE TEST AND TAG DOOR WITH RESULTS.
RESOLUTION	:. PRESSURE AT WTP IS 45-60 PSI M/R 525160
	· PRESSURE AT HOUSE 55 PSI
	- PESSURE AT METER 55 PSI RH.DAMC
RDATE	:. 04/22/99
SHADIVISIAN	• • • • • • • • • • • • • • • • • • • •
ROUTE	
SERVICE ORDER#	
ACCOUNT#	
CUSTOMER NAME	
	:, 2301 BAGDAD AVE
	······································
	:. 28
FOPER ;	
COMMENT	: MS. CALLED STATING SHE HAVE VERY LOW WATER PRESSURE.
	· PLEASE TEST PRESSURE, CHECK FOR LEAKS AND TAG DOOR WITH YOUR FINDINGS.
RESOLUTION	
	. MR 29610 PRESSURE 60 LBS TAGGED WITH INFO

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(912) SERV	VICE ORDERS WIT	H COMPLAINT	S FOR SUBDIVISION	649	BY SUB	15:52:27	10-18-99	,	,	,

SUBDIVISION	
ROUTE	
SERVICE ORDER#	:. 338453
ACCOUNT#	:. 538405 :. 6494048421
	:. FARLEY, CHRISTINA
	: 2753 ABALONE BLVD
DDATE	:
TYPE	
FOPER	
COMMENT-	- CUSTOMER CALLED - SPOKE WITH DAVID ORR REGARDING SECOND LEAK IN LINE
	ACROSS THE ROAD, CHARLIE INSTRUCTED TO REPAIR TODAY AND
	. CONTACT CONTRACTOR TO REPAIR LINE
TRACK UTION	. CONTRACT CONTRACTOR TO REFAIR LINE 10:30 A.M. , SPOKE TO JOHN BUSH AT SUNSHINE, WILL HAVE REPAIRED 7/26
RESULUTION	10:30 A.M. · SPUKE IU JUHN BUSH AT SUNSHINE, WILL MAVE REPAIRED //20
	•
	. CALLED SUNSHINE FOR LOCATES. TICKETS 2753, 2754, 2808 ABALONE BLVD FOR
······································	- LONGTAP
	. CHARLIE AND NATHAN REPAIRED LEAKS, LEAKS IN TWO PLACES. NVM/DAMC
RDATE	
SUBDIVISION	4. 649
ROUTE	
SERVICE ORDER#	
ACCOUNT#	. 6493052031
-CUSTOMER NAME	
	:. 20722 MAXIM PKWY
	07/27/98
-TYPE	
COMMENT	. CUSTOMER COMPLAINS OF STRONG ODOR TO WATER
	·
	. PAGED TO JOE 3:25PM
	•
	TOE AND CHARLES WENT OVER MONDAY AND THEY DID NOT SMELL ANY ODOR
RESOLUTION :	JOE AND CHARLIE WENT OVER MONDAY AND THEY DID NOT SMELL ANY ODOR THEY TOOK A SAMPLE. (AWALTING FOR RESULTS) ELUSHED HYDRANT HE AND
	. THEY TOOK A SAMPLE: (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND
	. THEY TOOK A SAMPLE: (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAMe
	. THEY TOOK A SAMPLE: (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND
	. THEY TOOK A SAMPLE: (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAMe . 07/27/98
	. THEY TOOK A SAMPLE: (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAMe . 07/27/98
RDATE :	. THEY TOOK A SAMPLE: (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAMe . 07/27/98 . 649
RDATE : SUBDIVISION ( ROUTE :	. THEY TOOK A SAMPLE: (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAMe . 07/27/98 . 649 . 3
RDATE : SUBDIVISION : ROUTE : SERVICE ORDER# :	<ul> <li>THEY TOOK A SAMPLE: (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND</li> <li>DOWN STREAM. RH/DAMe</li> <li>07/27/98</li> <li>649         <ul> <li>3</li> <li>355273</li> </ul> </li> </ul>
RDATE : SUBDIVISION : ROUTE : SERVICE ORDER# : ACCOUNT# :	<pre>. THEY TOOK A SAMPLE; (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAMe . 07/27/98 . 649 . 3 . 355273 . 6494058214</pre>
RDATE : SUBDIVISION : ROUTE : SERVICE ORDER# : ACCOUNT# : CUSTOMER NAME :	<ul> <li>THEY TOOK A SAMPLE; (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND</li> <li>DOWN STREAM. RH/DAMs</li> <li>07/27/98</li> <li>649</li> <li>355273</li> <li>6494056211</li> <li>MIRANDA; JESUS</li> </ul>
RDATE : SUBDIVISION : ROUTE : SERVICE ORDER# : ACCOUNT# : CUSTOMER NAME : SERVICE ADDRESS:	<ul> <li>THEY TOOK A SAMPLE; (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND</li> <li>DOWN STREAM. RH/DAME</li> <li>07/27/98</li> <li>649</li> <li>355273</li> <li>6494058211</li> <li>MIRANDA; JESUS</li> <li>2910 ABALONE BLVD</li> </ul>
RDATE : SUBDIVISION : ROUTE : SERVICE ORDER# : ACCOUNT# : CUSTOMER NAME : SERVICE ADDRESS:	<ul> <li>THEY TOOK A SAMPLE; (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND</li> <li>DOWN STREAM. RH/DAME</li> <li>07/27/98</li> <li>649</li> <li>355273</li> <li>6494056211</li> <li>MIRANDA; JESUS</li> </ul>
RDATE : SUBDIVISION : ROUTE : SERVICE ORDER# : ACCOUNT# : CUSTOMER NAME : SERVICE ADDRESS: DDATE :	. THEY TOOK A SAMPLE: (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAMe . 07/27/98 . 649 . 3 . 355273 . 6494065211 . MIRANDA,JESUS . 2910 ABALONE BLVD . 11/06/98
RDATE : SUBDIVISION : ROUTE : SERVICE ORDER# : ACCOUNT# : CUSTOMER NAME : SERVICE ADDRESS: DDATE : TYPE :	. THEY TOOK A SAMPLE: (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAMe . 07/27/98 . 649 . 3 . 355273 . 355273 . 6494058211 . MIRANDA,JESUS . 2910 ABALONE BLVD . 11/06/98 . 30
RDATE : SUBDIVISION : ROUTE : SERVICE ORDER# : ACCOUNT# : CUSTOMER NAME : SERVICE ADDRESS: DDATE : TYPE : FOPER :	. THEY TOOK A SAMPLE; (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAMe . 07/27/98 . 649 . 3 . 355273 . 6494058211 . MIRANDA; JESUS . 2910 ABALONE BLVD . 11/06/98 . 30 . WU
RDATE : SUBDIVISION : ROUTE : SERVICE ORDER# : ACCOUNT# : CUSTOMER NAME : SERVICE ADDRESS: DDATE : TYPE : FOPER : CONMENT :	. THEY TOOK A SAMPLE; (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAMe . 07/27/98 . 649 . 3 . 355273 . 6494058211 . MIRANDA, JESUS . 2910 ABALONE BLVD . 11/06/98 . 30 . WU . CUSTOMER PHONED REQUESTING HARDNESS OF WATER
RDATE : SUBDIVISION : ROUTE : SERVICE ORDER# : ACCOUNT# : CUSTOMER NAME : SERVICE ADDRESS: DATE : TYPE : FOPER : CONMENT : RESOLUTION :	. THEY TOOK A SAMPLE; (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAMs . 07/27/98 . 649 . 3 . 355273 . 6494058211 . MIRANDA; JESUS . 2910 ABALONE BLVD . 11/06/98 . 30 . WU . CUSTOMER_PHONED REQUESTING HARDNESS OF WATER . DON R. GAVE HARDNESS NUMBER TO CHRIS HOLT TO CALL FOR CUSTOMER
RDATE : SUBDIVISION : ROUTE : SERVICE ORDER# : ACCOUNT# : CUSTOMER NAME : SERVICE ADDRESS: DATE : TYPE : FOPER : CONMENT : RESOLUTION :	. THEY TOOK A SAMPLE; (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAMs . 07/27/98 . 649 . 3 . 355273 . 6494058211 . MIRANDA, JESUS . 2910 ABALONE BLVD . 11/06/98 . 30 . WU . CUSTOMER PHONED REQUESTING HARDNESS OF WATER
RDATE : SUBDIVISION : ROUTE : SERVICE ORDER# : ACCOUNT# : CUSTOMER NAME : SERVICE ADDRESS: DATE : TYPE : FOPER : CONMENT : RESOLUTION :	. THEY TOOK A SAMPLE; (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAMs . 07/27/98 . 649 . 3 . 355273 . 6494058211 . MIRANDA; JESUS . 2910 ABALONE BLVD . 11/06/98 . 30 . WU . CUSTOMER_PHONED REQUESTING HARDNESS OF WATER . DON R. GAVE HARDNESS NUMBER TO CHRIS HOLT TO CALL FOR CUSTOMER
RDATE : SUBDIVISION : ROUTE : SERVICE ORDER# : ACCOUNT# : CUSTOMER NAME : SERVICE ADDRESS: DDATE : TYPE : FOPER : CONMENT : RESOLUTION :	. THEY TOOK A SAMPLE; (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAME . 07/27/98 . 649 . 3 . 355273 . 64940E8211 . MIRANDA; JESUS . 2910 ABALONE BLVD . 11/06/98 . 30 . WU . CUSTOMER PHONED REQUESTING HARDNESS OF WATER . DON R. GAVE HARDNESS NUMBER TO CHRIS HOLT TO CALL FOR CUSTOMER . HARDNESS IS 7.47 THIS GIVEN TO CUSTOMER . DAME
RDATE : SUBDIVISION : ROUTE : SERVICE ORDER# : ACCOUNT# : CUSTOMER NAME : SERVICE ADDRESS: DDATE : TYPE : FOPER : CONMENT : RESOLUTION :	. THEY TOOK A SAMPLE: (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAME . 07/27/98 . 649 . 3 . 355273 . 355273 . 4694065211 . MIRANDA, JESUS . 2910 ABALONE BLVD . 11/06/98 . 30 . WU . CUSTOMER PHONED REQUESTING HARDNESS OF WAIER . CUSTOMER PHONED REQUESTING HARDNESS OF WAIER . DON R. GAVE HARDNESS NUMBER TO CHRIS HOLT TO CALL FOR CUSTOMER . HARDNESS IS 7.47 THIS GIVEN TO CUSTOMER
RDATE : SUBDIVISION : ROUTE : SERVICE ORDER# : ACCOUNT# : CUSTOMER NAME : SERVICE ADDRESS: DDATE : COMMENT : RESOLUTION : RDATE :	. THEY TOOK A SAMPLE: (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAMe . 07/27/98 . 649 . 3 . 355273 . 6494058211 . MIRANDA.JESUS . 2910 ABALONE BLVD . 11/06/98 . DON R. GAVE HARDNESS NUMBER TO CHRIS HOLT TO CALL FOR CUSTOMER . HARDNESS IS 7.47 THIS GIVEN TO CUSTOMER . 11/06/98
RDATE : SUBDIVISION : ROUTE : SERVICE ORDER# : ACCOUNT# : CUSTOMER NAME : SERVICE ADDRESS: DDATE : CUMMENT : RDATE : SUBDIVISION ;	. THEY TOOK A SAMPLE; (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAME . 07/27/98 . 449 . 3 . 3555273 . 4494068211 . MIRANDA; JESUS . 2910 ABALONE BLVD . 11/06/98 . 30 . MU . CUSTOMER PHONED REQUESTING HARDNESS OF WATER . DON R. GAVE HARDNESS NUMBER TO CHRIS HOLT TO CALL FOR CUSTOMER . HARDNESS IS 7.47 THIS GIVEN TO CUSTOMER . DAME . 11/06/98 . 649
RDATE : SUBDIVISION : ROUTE : SERVICE ORDER# : ACCOUNT# : CUSTOMER NAME : SERVICE ADDRESS: DDATE : COMMENT : RESOLUTION : RDATE :	. THEY TOOK A SAMPLE; (AWAITING FOR RESULTS) FLUSHED HYDRANT UP AND . DOWN STREAM. RH/DAME . 07/27/98 . 449 . 3 . 3555273 . 4494068211 . MIRANDA; JESUS . 2910 ABALONE BLVD . 11/06/98 . 30 . MU . CUSTOMER PHONED REQUESTING HARDNESS OF WATER . DON R. GAVE HARDNESS NUMBER TO CHRIS HOLT TO CALL FOR CUSTOMER . HARDNESS IS 7.47 THIS GIVEN TO CUSTOMER . DAME . 11/06/98 . 649

	THE SPIGOT ON THE OTHER SIDE OF THE HOUSE AFTER IT GOES THROUGHT THEIR
	. SOFTENER IS ONLY BOLDS. I TAGGED THE HOUSE WITH THE RESULTS REQUESTING . THEY CLEAN THEIR SOFTNER AND THE AERATORS ON THE SINKS.
	RH/DAMe
	:. 03/11/99
	•. 649
	<b>;</b> , 3
ERVICE ORDER#	. 374074
	:, BERGLUND, BILL
	: 20314 MELVILLE ST
	;, 03/12/99
	:. 28
	: WU - OPENER THE THE THE OPENER OF REPORT OF THE THE
MMENT	:. CUSTOMER STATES THAT THEY HAVE LOW PRESSURE CUSTOMER WOULD LIKE THE
	. PSI TAKEN AND ALSO REQUESTS A FLOW TEST PLEASE NOTIFY CUSTOMER . WITH THE RESULTS
SOLUTION	:. CHARLIE WILL TRY TO BRING-METER TEST EQUIPMENT TO WEDGEFIELD ON WED.
	. DAMC/NVM
	. START 0464521.1 STOP 0464527.6 AT HOUSE
	-, START 00001.0 NEW-METER STOP 00007.5 AT HOUSE
	. START 0464528.2 AT METER
	. STOP 0464569.5 R.H.
	THE PROBLEM-IS ON CUSTOMER'S SIDE OF METER
ATE	:. 03/12/99
BDIVISION	· · · · · · · · · · · · · · · · · · ·
	i. 3
RVICE ORDER#	
EOUNT#	
	: ESPINOSA, JOSEPH
	20634 NETTLETON ST
	. 04/06/97
	:. 28
—	:. WU
	CUSTOMER BELIEVES THAY HAVE A LEAK AND STATE THAT THEIR WATER PRESSURE
	. IS VERY LOW PLEASE CHK FOR LEAKS AND FIND OUT WHAT THEIR WATER
	. PRESSURE IS TAG HOUSE WITH THE FINDINGS
SOLUTION	. MR 109710 - 55 PSI. CUSTOMER OPENED HOSE BIB, AND PSI-DROPPED TO 50
	. BEFORE AND AFTER SOFTENER LOOKS GOOD. NO APPARENT LOOKS. CUSTOMER
	. HOME AND DISCUSSED FINDINGS WITH HIM. NVM/DAMC
ATE	
	· · -
	. 649
UTE OPDER# .	
VICE ORDER# :	
	. 6494048231 
	2511 ABALONE BLVD
	. 04/12/99
	<u>, 28                                    </u>
	, WU . Chetamed states she has live deersher poor sme . Disars shere and advise
	CUSTOMER STATES SHE HAS LOW PRESSURE PROBLEMS. PLEASE CHECK AND ADVISE
	- OF FINDINGS.
SOLUTION :	. 4/12/99 MR 227630 THERE WAS 30 FSI AT HOSE BIB, BUT 60 PSI AT METER . THERE WAS A LOT OF BACK PSI WHEN TOOK METER OFF. TAGGED CUSTOMER TO

TYPE : 32 FOPER : UU COMMENT : CUSTOMER STATES THAT THEY MAVE A VERY EAD ODOR IN THEIR MATER SYSTEM MAY NEED TO BE FLUGHED TO BE FLUGHED FLEASE TAG DOOR WITH THE FINDINGS RESOLUTION : FLUGHED MAIN. TAGGED DOOR MW/DAME RESOLUTION : 649 ROUTE : 01/04/99 SUBDIVISION : 649 ROUTE : 3 SERVICE ODDER# : 371646 ACCOUNT# : 6495005153 CUSTOMERNAME : SMITH.LOWELL E SERVICE ADDRESS: 2412 ARMEY AVE DDATE : 02/26/99 TYPE : 36 FOPER : MU COMMENT : CUSTOMERS TOILET IS FLUSHING "SLOWLY" AND FEELS THERE MAY BE A CLOG IN THE SHEER PLEASE CHECK IT OUT. RESOLUTION : THIS IS CUSTOMER'S PROBLEM. ADVISED CUSTOMER NUMDAME RDATE : 02/26/99 SUBDIVISION : 649 SUBDIVISION : 649 RDATE : 02/26/99 SUBDIVISION : 649 RDATE : 02/26/99 SUBDIVISION : 649 RDATE : 02/26/99 SUBDIVISION : 649 RDATE : 02/26/99 SUBDIVISION : 649 RDATE : 02/26/99 SUBDIVISION : 649 RDATE : 02/26/99 SUBDIVISION : 649 RDATE : 02/26/99 SUBDIVISION : 649 RDATE : 02/26/99 SUBDIVISION : 649 RDATE : 02/26/99 SUBDIVISION : 649 RDATE : 02/26/99 SUBDIVISION : 649 RDATE : 02/26/99 SUBDIVISION : 649 RDATE : 02/26/99 SUBDIVISION : 649 RDATE : 02/26/99 SUBDIVISION : 649 RDATE : 02/26/99 SUBDIVISION : 649 RDATE : 02/26/99 SUBDIVISION : 649 RDATE : 02/26/99 SUBDIVISION : 649 RDATE : 02/26/99 SUBDIVISION : 649 RDATE : 03/11/V* IN THE SECOND IN MELE IN THE RESOLUTION : THIS IS CUSTOMER'S PROBLEM. ADVISED CUSTOMER RDATE : 03/11/V* IN THE SECOND IN MELEN IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND IN THE SECOND I	)12) SERVICE DR	RDERS WITH . DMPLAINTS FC.) SUBDIVISION ) 649 BY SL ) 15:52:27 10-18-99 ) ) ) ) ) )
CUSTORER NAME : SCAOL JARINI.JOHN SERVICE ADRESS : 2825 ADREY AVE DDAT : 11/20/09 DDAT : 11/20/09 DDAT : HAU COMMENT : ADD WATCE SHOPTING CUT INTO THE STREET FLEASE FAX INFORMENTION RESOLUTION : 12/1/98 I' SERVICE STUE UP HIT BY MOMER. FEPAIRED AND BURIED. : NUMURANC RESOLUTION : 12/1/98 SUBSINISTION : 449 SUBSINISTON : 449 SUBSINISTON : 449 SUBSINISTON : 449 SUBSINISTON : CUSTORER MAR STATES THAT THEY MAVE A VERY BAD DDCR IN THEIR MATER SUBSINISTON : CUSTORER MAR STATES THAT THEY MAVE A VERY BAD DDCR IN THEIR MATER SUBSINISTON : CUSTORER MAR STATES THAT THEY MAVE A VERY BAD DDCR IN THEIR MATER SUBSINISTON : CUSTORER MAR STATES THAT THEY MAVE A VERY BAD DDCR IN THEIR MATER SUSTEM THAT STATES THAT THEY MAVE A VERY BAD DDCR IN THEIR MATER SUSTEM MAY MEED TO BE FLUSHED FLEASE TAG DOCK MITH THE FINDINGS RESOLUTION : VAR JI20/00 : NUMURANC BADTE : CUSTORER MAR STATES THAT THEY MAVE A VERY BAD DDCR IN THEIR MATER SUSTEM MAY MEED TO BE FLUSHED FLEASE TAG DOCK MITH THE FINDINGS RESOLUTION : VAR JI20/00 : NUMURANC BADTE : CUSTORER STATES THAT THEY MAVE A VERY BAD DDCR IN THEIR MATER SUSTEM MAY MEED TO BE FLUSHED FLEASE TAG DOCK MITH THE FINDINGS RESOLUTION : VAR JI20/00 : NUMURANC BADTE : CUSTORER STATES THAT THEY MAVE A VERY BAD DDCR IN THEIR MATER SUSTEM MAY MEED TO BE FLUSHED FLEASE TAG DOCK MITH THE FINDINGS RESOLUTION : VAR JI20/00 : NUMURANC BADTE : CUSTORER STATES THAT THEY MAVE A VERY BAD DDCR IN THEIR MATER SUSTEM THE CUSTORER STATES THAT THEY MAVE A VERY BAD DDCR IN THE FINDINGS RESOLUTION : VAR JI20/00 : NUMURANC BADTE : CUSTORER STATES THAT THEY MAVE A VERY BAD SUSTEM THEY SUSTEM THE STATES THAT THEY MAVE A VERY BAD SUSTEM THEY SUSTEM THE SUSTEM STATES STATES STATES SUSTEM THEY SUSTEM THE SUSTEMENT STATES STATES STATES STATES SUSTEMENT : CUSTORER STATES THAT THE PLANT : CUSTORER STATES STATES STATES STATES STATES STATES STATES STATES SUSTEMENT : CUSTORER STATES STATES STATES STATES STATES STATES STATES STATES STATES STATES STATES STATES STATES STATES STATES STATES STATES STATES STATES STATES STATES STATES ST		
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ROUTE I: 3 ROUTE : 449001022 CUSTOMEN ARCAN CVRIL 6 GERVICE - ADDRESSI - 2405 ARALOVE BLVD DDATE : 01/04/99 CUSTOMEN ARCAN CVRIL 6 GERVICE - ADDRESSI - 2405 ARALOVE BLVD DDATE : 01/04/99 CUSTOMEN AN ARED TO BE FLUGHED PLEASE TAG DOOR NITH THE FINDINGS RESOLUTION : FLUGHED MAIN. TAGGE DOOR MR 1120960 NVM/DATC RDATE : 01/04/99 SUBDIVISION : 449 SUBDIVISION : 449 SUBDIVISION : 449 SERVICE ADDRESS : 71646 ACCOUNTE : 4495006153 CUSTOMEN ARCAN COMENT - 5104 CUSTOMEN ARCAN COMENT - 5104 CUSTOMEN ARCAN COMENT - 5104 CUSTOMEN ARCAN COMENT - 5104 CUSTOMEN ARCAN COMENT - 549 SUBDIVISION : 449 SUBDIVISION : 449 SUBDIVISION : 449 SUBDIVISION : 449 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 049 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0449 SUBDIVISION : 0	RDATE :	. 12/02/98
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ACCOUNT 4 : 4495001022 CUSTOMER NAME : CAESAR.CVRIL 6 GERVICE ADDRESS: 2406 AEALONE BLVD DDATE : 01/04/95 TYPE : 32 GPREAL		
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COMMENT :. CUSTOMER STATES THAT THEY HAVE A VERY BAD COOR IN THEIR HATER SYSTEM MAY NEED TO BE FLUGHED TO LEASE TAG DOOR WITH THE FINDINGS MULTION :. FLUGHED HAIN. TAGGED DOOR MUK/DAME RESOLUTION :. 649 ROUTE :. 649 ROUTE :. 3 SUBDIVISION :. 649 ROUTE :. 4495006183 CUSTOMER HAN RESOLUTION :. 649 COMMENT :. CUSTOMERS TOILET IS FLUGHING "SLOWLY" AND FEELS THERE MAY BE A CLOG IN THE-SELER FLEASE CHECK. IT OUT KESOLUTION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE :. 62/26/99 SUBDIVISION :. 649 ROUTE		
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RESOLUTION - FLUGHED-MAIN-TAGGED-DOOR - NYM/DAMC RDATE - 01/04/99 SUBDIVISION : 649 ROUTE - 2 SUBDIVISION : 649 ROUTE - 2 SERVICE ORDER# : 371446 ACCOUNT# : 6495006153 CLUSTOMER NAME + SHITH+LOWELL-E SERVICE ADDRESS: 2412 ARNEY AVE DDATE : 02/26/99 TYPE - 26 COMMENT : CUSTOMER'S TOILET IS FLUSHING "SLOWLY" AND FEELS THERE MAY BE A CLOG - COMMENT : CUSTOMER'S TOILET IS FLUSHING "SLOWLY" AND FEELS THERE MAY BE A CLOG - COMMENT : CUSTOMER'S TOILET IS FLUSHING "SLOWLY" AND FEELS THERE MAY BE A CLOG - COMMENT : CUSTOMER'S PROBLEM. ADVISED CUSTOMER - NUM/DAMC RDATE - 02/26/99 - SUBDIVISION : 649 ROUTE - 3 SUBDIVISION : 649 ROUTE - 3 SUBDIVISION : 649 ROUTE - 3 SUBDIVISION : 649 ROUTE - 3 SUBDIVISION : 649 ROUTE - 3 SUBDIVISION : 649 ROUTE - 3 SUBDIVISION : 649 ROUTE - 03/11/96 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000 - 000		
<pre>H/R 1120960 NNM/DAME RDATE + 01/04/99 SUBDIVISION : 649 SOUTE + 3 SERVICE ORDER* 1: 371646 ACCOUNT* : 6495006153 CURSTOMER.NAME - SMITH.LOWELL E SERVICE ADDRESS: 2412 ARMEY AVE DDATE : 02/26/99 TYPE - 3 SERVICE ADDRESS TOTLET IS FLUGHING "SLOWLY" AND FEELS THERE MAY BE A CLOG COMMENT : CURSTOMER'S TOTLET IS FLUGHING "SLOWLY" AND FEELS THERE MAY BE A CLOG COMMENT : 101510 CURSTOMER'S PROBLEM. ADVISED CUSTOMER NUM/DAME RDATE - 02/26/99 SUBDIVISION : 1649 SERVICE ADDREF* : 372859 SCOUNT* : 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03/11/95 HE - 03</pre>		
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SUBDIVISION : 649 ROUTE : 371646 ACCOUNT : 6495006153 CUSTOMER NAME : SMITH-LOWELL E SERVICE ODDRESS: 2412 ABEN AVE DDATE : 02/26/99 TYPE : 36 FOPER : WU COMMENT : CUSTOMERS TOILET IS FLUSHING "SLOWLY" AND FEELS THERE MAY BE A CLOG IN THE SEMER. PLEASE CHECK.IT.OUT RESOLUTION : THIS IS CUSTOMER'S PROBLEM. ADVISED CUSTOMER NVMYDAMC RDATE : 02/26/99 SUBDIVISION : 649 RQUITE : 3 SERVICE ONDER : 373559 ACCOUNT# : 6494063091 CUSTOMER NAME : DERGLUND-BILL SERVICE ONDER : 2359 ACCOUNT# : 6494063091 CUSTOMER NAME : DERGLUND-BILL SERVICE ADDRESS: 20314 MELVILLE ST DDATE : 03/11/99 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYPE : 28 TYP		
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2012) SERVIL- (	RDERS WITH COMPLAINTS FOR SUBDIVISION 649 BY SUE 5:52:27 10-18-99
(912) BERVICE	
SUBDIVISION	1. 649
ROUTE	:. 3
SERVICE ORDER#	:. 385573
ACCOUNT#	<del></del>
CUSTOMER NAME	:. VERMILLION, DEAN
SERVICE ADDRESS	:, 2750 BABBITT AVE
DOATE	•••• 05/15/97
TYPE	:. 32
FOPER	:. WU
COMMENT	+. PER ANSWERING SERVICE, WATER HAS ODOR.
RESOLUTION	: FLUSHED HYDRANTS ON BOTH SIDES OF HOUSE. RH/DAMC
RDATE	:. 05/15/99
SUBDIVISION	:. 649
ROUTE	1. 3
SERVICE ORDER#-	
ACCOUNT#	:. 6496002252
•••	: 0307E0,MARCOS
	1. 0301E01MARCOS
• • • • • • • • • • • • • • • • • • • •	
DDATE	:. 06/11/99
TYPE	:. 32
-OPER	·, WU
COMMENT	:. CUSTOMER STATES HER WATERS SMELLS PLS CHECK AND ADVISE
RESOLUTION	:. FLUSHED ALL HYDRANTS ALL AROUND CUSTOMER HOME. TAGGED DOOR TO
	FLUSH-FAUCETS-INSIDE HOME TO CLEAR SERVICE LINE
RDATE	:. 06/11/99
SUBDIVISION	:. 649
ROUTE	•• 3
SERVICE ORDER#	
ACCOUNT#	:. 6494048391
USTOMER NAME	
	+ 2729 ABALONE BLVD
	:. 06/14/99
TYPE	1. 26
OMMENT	:. PER ANSWERING SERVICE, BREAK IN MAIN BETWEEN HOUSES
	. PLEASE FAX INFORMATION TO OFFICE
ESOLUTION	+. 6/14/99 SERVICE LINE BETWEEN SIDEWALK AND METER. WILL FOX ON WED.
	WITH NATHAN'S HELP
	- 6/16/99 PLEASE REPAIR AS ABOVE.
<u>~</u>	. 6/17/99 LEAK REPAIRED. WILL REPAIR SIDEWALK ONCE RAIN STOPS. RH
DATE	:. 06/14/99
UBDIVISION	:, 649
ERVICE ORDER#	
	; 6494063291
	;, PALAMINO, CHRIS
	1. 2727 BALLARD AVE
	:. 06/24/99
	:. 28
OPER	· → ₩U
OMMENT	:, CUSTOMER STATES THEY HAVE LOW PRESSURE :. CUSTOMER HAS 60 PSI - THIS IS A VOLUME PROBLEM. SUNGHINE TO CHECK OUT

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	RDERS WITH COMPLAINTS FOR SUBDIVISION 649 BY 3 15:52:27 10-18-99
(912) & IVE W	(DERS WITH COMPLAINTS FOR SUBDIVISION 64% ST 5 10:02:27 TO IS 27
	- CHECK WATER SOFTNER FILTER. NVM/DAMC
	. 4/13/99 NVM RETURNED TO HOME WITH SAME COMPLAINT. CUSTOMER ADVISES
	. SHE DOES NOT HAVE WATER SOFTNER. NATHAN VERIFIED SOFTNER DOES NOT
	- EXIST. CHARLIE F. TO ADVISE OF SITUATION AND SUBMIT REPORT REGARDING
	. THIS INFORMATION. CUSTOMER REQUESTING WRITTEN INFO TO SUBMIT TO THE
	BUILDER. DAMC
RDATE	<b>:.</b> 04/12/79
SUBDIVISION :	: 649
ROUTE	
SERVICE ORDER# :	
	:. 6494051161
	- ALABACTED AVE
SERVICE ADDRESS	1. 2702 ALABASTER AVE
DDATE :	:. 04/21/99 :- <del>28</del>
	1. 28
	: NU :, CUSTOMER CONCERNED WITH LOW PRESSURE , ESPECIALLY WITH THE FIRE
	- SITUATION OCCURRING FLEASE SEE CUSTOMER PER REQUEST
RESOLUTION :	:. PRESSURE AT WTO IS 45-60 PSI MR 267510
	. PRESSURE AT HOUSE 55 PSI
	PRESSURE AT METER 55 PS1
	. RH/DAMcc
RDATE :	:. 04/21/99
SUBDIVISION :	
	1. 3
SERVICE ORDER# 1	
ACCOUNT# :	:, 6492041621
CUSTOMER NAME :	:, TOWNSEND, JOHN
SERVICE ADDRESS:	1. 2636 ALBION AVE
DDATE :	
	s, 36
	€. AU
	: PLEASE CHECK FOR CLOGGED SEWER : PROBLEM IS ON CUSTOMER SIDE. CUSTOMER ALREADY HAD PLUMBER THERE
	. UNCLOGGED SEWER. ADVISED CUSTOMER TO HAVE LINE CAMERA'D TO PINPOINT
	PROBLEM AND HAVE LINE REPAIRED
	, PROBABLE CAUSE, TREE NEAR LINE, NVM/DAMec
	1, 04/26/99
	:. 649
ROUTE I	
SERVICE ORDER# :	
	:. 6496003102 <del>VERMILLION→DEAN</del>
	:, 2750 BABBITT AVE
DDATE :	
TYPE	
FOPER :	:. WU
	. CUSTOMER SAID THE WATER SMELLS LIKE ROTTEN EGGS.
	· · · · · · · · · · · · · · · · · · ·
	, PAGED ROGER AND HE IS TAKING CARE OF IT SCG , THEN OPERATOR APPLITED, NORODY HOME - ROESENEE HAS BE
	HERE WAS NO APPARENT ODOR TO WATER RESSURE WAS 55
	. THERE WAS NO APPARENT ODOR TO WATER RH/DAMC

$\geq$	SIRVICE	ORDER. WITH	COMPLA	MIS FUR	لوحدتيات	Yewsen	. · · ·

			1
		OVER-WEEKENDTHEY-TAPPED-THIS	
	_	NVM/DAMC	
re	:.	06/25/99	
VISION		649	
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, <u> </u> ₩ <del>₩₽₽₽</del>		3 	
DUNT#		6496002252	
		ACOTED MARCINS	
		06/30/99	1
Ξ	٤.	32 WU	
			- (
MENT	•	MRS CALLED AND STATED THAT THE WATER HAS A BAD ODOR AND THE WATER IS ORANGE IN THE TOILET BOWL.	
DEUTION	÷.	MR 538220 - FLUSHED	
		NVM/DAMc	ŀ
re.	٤.	06/30/99	
			-
DIVISION	:.	649	
TE			
VICE ORDER#			
		6494039053	1
TOMER NAME			
		20342 MARLIN ST	ļ
		08/31/98	
	1.		
E <del>R</del>	+	WU	Ì
		CUSTOMER STATES THE WATER IS TYOFF. PLEASE CHECK IT OUT. PAGED NATHAN @ 9:50A.M.	
OLUTION	+	8/31/98 SOMEONE HAD TURNED OFF HOUSE VALVE. TURNED ON. INFORMED	-
		CUSTOMER NVM/DAMC	
TE		08/31/78	ļ
			-j
DIVISION	± .	649	ļ
TE			
VICE ORDER#			{
		<del>533340</del>	- 1
			- (
IUMEK NAME	<b>E</b> 4	BACHMAN, JOHN	_
		2220 ALBION AVE	
		11/10/98	
	:.		
	17		1
		CUSTOMER STATES THEY DO NOT HAVE WATER. PLEASE CHECK IT OUT. PAGED DAVID RYNIAK	
<u>OLUTION</u>		OPERATOR TURNED ON AGAIN, SAID HE TURNED ON 11/9 AND SOMEONE HAD TURNED OFF. NVM/DAMC	1
TE	:.	11/10/98	i
DIVISION _	:.	649	1
VICE ORDER#-			
	-	6490010871	
	-	BATTAGLIA+MICHAEL	
	-	2600 PINE-GLEN-CT	
		04/06/99	

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POPER	:. WU
COMMENT	:. CUSTOMER IS EXPERIENCING SPERATIC LOW PRESSURE THROUGH OUT THE DAY. . THIS LOW PRESSURE HAS BEEN GOING ON FOR ABOUT A WEEK NOW. PLEASE 
RESOLUTION	:, MR 73030 48 PS1, CLIMBED TO 61 OPENED SPRINKLER, DROPPED TO 54 . LOOKS LIKE POSSIBLE VOLUME PROBLEM. CURB STOP AND HOUSE VALVES OPEN 
RDATE	. NVM/DAMc :. 04/05/99
BUBDIVISION	
ROUTE <del>Service order#</del>	:. 4
ACCOUNT≇	:. 6494038023
CUSTOMER NAME SERVICE ADDRES	:. TOLLMAN,BILL M 5:. 20122 MARLIN-ST
DDATE	1, 04/29/99
TYPE	r. 11
F <del>OPER</del> COMMENT	:. WU :. CUSTOMER SAID THAT HE CALLE ON 4/27 TO GET WATER TURNED ON AND IT STILL . IS NOT ON.
RDATE	. THIS ACCT DOES NOT FINAL UNTIL 5/7/99 :. 04/29/99
RDATE SUBDIVISION ROUTE	
SUBDIVISION ROUTE SERVICE ORDER#	:. 04/29/99 :. 649 :. 5 :. 5 :. 370756
SUBDIVISION ROUTE SERVICE ORDER# ACCOUNT# CUSTOMER NAME	:. 04/29/99 :. 649 :. 5 :. 370756 :. 6490005041 :. WEDGEFIELD DEVELOPMENT;
SUBDIVISION ROUTE SERVICE ORDER# ACCOUNT# CUSTOMER NAME SERVICE ADDRES	:. 04/29/99 :. 649 :. 5 :. 370766 :. 6490005041 :. WEDGEFIELD DEVELOPMENT; St. 20751 SR 520
SUBDIVISION ROUTE SERVICE ORDER# ACCOUNT# CUSTOMER NAME	:. 04/29/99 :. 649 :. 5 :. 370755 :. 6490005041 :. WEDGEFIELD DEVELOPMENT; :. WEDGEFIELD DEVELOPMENT; :. 02/23/99 :. 02/23/99
SUBDIVISION ROUTE SERVICE ORDER# ACCOUNT# CUSTOMER NAME SERVICE ADDRES: DDATE TYPE FOPER	:. 04/29/99 :. 649 :. 5 :. 370756 :. 6490005041 :. WEDGEFIELD DEVELOPMENT: :. 20751 SR 520 :. 02/23/99 :. 43 :. WU
SUBDIVISION ROUTE SERVICE ORDER# ACCOUNT# CUSTOMER NAME SERVICE ADDRES DDATE TYPE COPER COMMENT	:. 04/29/99 :. 649 :. 5 :. 370756 :. 6490005041 :. WEDGEFIELD DEVELOPMENT: :. 20751 SR 520 :. 02/23/99 :. 43 :. WU :. RADIOED TO CHARLIE FOREHAND
SUBDIVISION ROUTE SERVICE ORDER# ACCOUNT# CUSTOMER NAME SERVICE ADDRES DDATE TYPE COFER COMMENT	:. 04/29/99 :. 649 :. 5 :. 5 :. 370766 :. 6490005041 :. WEDGEFIELD DEVELOPMENT, :. 20751 SR 520 :. 02/23/99 :. 43 :. WU :. RADIDED TO CHARLIE FOREHAND :. WU :. CUSTOMER CALLED BECAUSE THEIR WATER IS OFF AND THEY WANT TO KNOW WHY.
SUBDIVISION ROUTE SERVICE ORDER# ACCOUNT# CUSTOMER NAME SERVICE ADDRES DDATE TYPE COPER COMMENT RESOLUTION	:. 04/29/99 :. 649 :. 5 :. 370756 :. 6490005041 :. WEDGEFIELD DEVELOPMENT, :. 20751 SR 520 :. 02/23/99 :. 43 :. WU :. RADIOED TO CHARLIE FOREHAND :. RADIOED TO CHARLIE FOREHAND :. CUSTOMER CALLED BECAUSE THEIR WATER IS OFF AND THEY WANT TO KNOW WHY. :. THE WATER WAS TURNED OFF TEMPORARILY TO REPAIR IRRIGATION LEAK. . WHEN OPERATOR (RH) GOT THERE, THE WATER WAS BACK ON.
SUBDIVISION ROUTE SERVICE ORDER# ACCOUNT# CUSTOMER NAME SERVICE ADDRES DDATE TYPE COPER COMMENT	:. 04/29/99 :. 649 :. 5 :. 370756 :. 6490005041 :. WEDGEFIELD DEVELOPMENT: :. 20751 SR 520 :. 02/23/99 :. 43 :. WU :. RADIOED TO CHARLIE FOREHAND
SUBDIVISION ROUTE SERVICE ORDER# ACCOUNT# CUSTOMER NAME SERVICE ADDRES DDATE TYPE COPER COMMENT RESOLUTION	:. 04/29/99 :. 649 :. 5 :. 370766 :. 6490005041 :. WEDGEFIELD DEVELOPMENT, :. 20751 SR 520 :. 02/23/99 :. 43 :. WU :. RADIOED TO CHARLIE FOREHAND :. RADIOED TO CHARLIE FOREHAND :. CUSTOMER CALLED BECAUSE THEIR WATER IS OFF AND THEY WANT TO KNOW WHY. :. THE WATER WAS TURNED OFF TEMPORARILY TO REPAIR IRRIGATION LEAK.
SUBDIVISION ROUTE SERVICE ORDER# ACCOUNT# CUSTOMER NAME SERVICE ADDRES DDATE TYPE FOPER COMMENT RESOLUTION	:. 04/29/99 :. 649 :. 5 :. 370766 :. 4390005041 :. MEDGEFIELD DEVELOPMENT, :. 20751 SR 520 :. 02/23/99 :. 43 :. WU :. RADIOED TO CHARLIE FOREHAND :. RADIOED TO CHARLIE FOREHAND :. CUSTOMER CALLED BECAUSE THEIR WATER IS OFF AND THEY WANT TO KNOW WHY. :. THE WATER WAS TURNED OFF TEMPORARILY TO REPAIR IRRIGATION LEAK. 
SUBDIVISION ROUTE SERVICE ORDER# ACCOUNT# CUSTOMER NAME SERVICE ADDRES: DDATE TYPE COMMENT RESOLUTION	:. 04/29/99 :. 649 :. 5 :. 370766 :. 4390005041 :. MEDGEFIELD DEVELOPMENT, :. 20751 SR 520 :. 02/23/99 :. 43 :. WU :. RADIOED TO CHARLIE FOREHAND :. RADIOED TO CHARLIE FOREHAND :. CUSTOMER CALLED BECAUSE THEIR WATER IS OFF AND THEY WANT TO KNOW WHY. :. THE WATER WAS TURNED OFF TEMPORARILY TO REPAIR IRRIGATION LEAK. 
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