

Kings Cove

Docket No. 060368-WS

Application to Increase Rates and Charges For a "Class A" Utility In

Florida

VOLUME 6

Book 7

Set 20 of 57

Containing

Containing

Additional Engineering Requirements

Monthly Operating Reports

Aqua Utilities Florida, Inc.

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Aqua Utilities Florida, Inc. Monthly Operating Reports

JS - Kings Cove

	Tab Number	Page Number
Year: 2004	,	•
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October	10	21
November	11	23
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Year: 2005	4	0.7
January	1	27
February	2	29
March	3 4	31
April		33
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August	8	41
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October	10	45
November	11	47
December	12	49



See page 4 for instructions					
I. General Information f	or the Month Year of: January-04		<u> </u>		
A. Public Water System					
PWS Name:	Kings Cove		PWS Identify	ication Number:	3350655
	☐ Non-Transient No	n-Community	Transient Non-Commu	nity 🗍	Consecutive
	nections at End of Month: 207		Total Population Served		725
PWS Owner:	AquaSource Utility, Inc.		<u> </u>		
Contact Person:	Michael Fitzgerald		Contact Person's Title:	Area Manager -	Florida
Contact Person's Mailir	ng Address: 1343 NE 17th Road		City: Ocala	State: FL	Zip Code: 34470
Contact Person's Teleph			Contact Person Person's I	ax Number:	(352) 732-3213
Contact Person's E-Mai	l Address: <u>mvfitzgerald@suburbanwate</u>	r.com			
B. Water Treatment Pla	nt Information				
Plant Name:	Kings Cove		Plant Teleph	one Number:	(352) 369-4881
Plant Address:	7478 Silver Lake Drive		City: Leesburg	State: FL	Zip Code: 34788
Type of Water Treated		Purchased Finished W.	ater		
	ay Operating Capacity of Plant, gallons per day:	378,000			
	osection 62-699.310(4), F.A.C.):		Plant Class (per subsection		
Licensed Operators	Name	License Class	License Number		Day(s)/Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287		6 Days per week
Other Operators:	Tom Felton	C	2241		6 Days per week
					6 Days per week
1991年 2007年 青寶寶					
			<u> </u>		
				<u> </u>	
II. Certification by Lead	I Chief Operator				
I, the undersigned water	treatment plant operator licensed in Florida, am th	e lead/chief operator of the	he water treatment plant	identified in Part	t I of this report. I certify that the
	this report is true and accurate to the best of my kn				
International Standard 6	0 or other applicable standards referenced in subse	ction 62-555.320(3), F.A	C. I also certify that the	following addit	ional operations records for this
plant were prepared each	n day that a licensed operator staffed or visited this	plant during the month i	ndicated above: (1) recor	ds of amounts o	f chemicals used and chemical feed
rates; and (2) if applicab	le, appropriate treatment process performance reco	ords. Futhermore, I agree	to provide these addition	nal operations re	cords to the PWS owner so the PWS
	ogether with copies of this report, at a convenient I			•	
omer can ream mem, t	ogether with copies of this report, at a controllent		 -		
	Mark March			C8287	<u></u>
Signature and Date	Printed or Type	d Name		License Number	•

PWS I	dentifica	tion Numbe	r:	3350655		Plant Name:	Kings Co	ve						
III. Da	ily Data	for the Mor	th Year of:		January-04									
			Log Virus Inacti	vintion/Pom			Eroo	Chlorin		Chloring	D::1-			Carling Chloring (Chlorenian)
		et Radiation		Viation/Reil	Other (Describe	-).	Free (Cniorin	е	Chlorine l	Dioxide		Ozone	Combined Chlorine (Chloramines)
			ual Maintained i	n Dioteilauti		·).			F OI			1: 10		
Туре о	I	Tant Kesiu	uai Maintained i	in Distributi		Company and the control of the			Free Ch				hlorine (Chlor	ramines) Chlorine Dioxide
		20.344			C1 Calculations,	or UV Dose, to I		rour-Log	Virus Inactiv	vation, if App				Energency of Abnormal Operating Conditions,
1 5 5	Days Plant							Total A			UV		学 通过"大学	
1 111111	Staffed			1. 1.	Lowest Residual	· · · · · · · · · · · · · · · · · · ·	Lowest CT	140		一种			Lowest /	。在这个人的第三人称单数
100	or		Extravel 111		Disinfectant	Disinfectant Contact Time	Provided Before or	Fre.	100			(2) (2) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	Residual	
	Visited				Concentration	(T) at C	at First				Lowest	Minimum	Disinfectant Concentration	
	by		Net Quanity		(C) Before or at	Measurement	Customer	Temp.		Minimum	Operating		at Remote	
Day of	Operator	Hours	of Finished	Agent 11	First Customer	Point During	During	of	pH of	СТ	UV Dose,	Required,	Point in	Emergency of Abnormal Operating Conditions,
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,		Required,	mW-	mW	Distribution	Repair or Maintenance Work that Involves Taking
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	C	Applicable	mg-min/L	sec/cm2	sec/cm2	System, mg/L	* Water System Components Out of Operation
1	X	24 hrs	109,000	 				Ļ					0.5	
3	X	24 hrs	121,000	 	ļ						<u> </u>		0.5	
4	X	24 hrs	121,000 87,000	ļ				<u> </u>			<u> </u>			
5	X	24 hrs 24 hrs	72,000		 			 		<u> </u>	 		0.6	
6	X	24 hrs	104,000	 				 -			ļ	 	1.3	
7	X	24 hrs	21,000	 	-			 			 		1,2	
8	X	24 hrs	64,000	 				 		 	 		1.4	
9	X	24 hrs	92,000	ļ				 			 		1.0	
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13	X	24 hrs	114,000										1.4	
14	X	24 hrs	116,000										1.7	
15	X	24 hrs	79,000										0.3	
16 🛪	X	24 hrs	105,000										0.6	
17		24 hrs	105,000											
18	X	24 hrs	56,000									Ĺ	0.7	
19	X	24 hrs	86,000					 					1.6	
21	X	24 hrs 24 hrs	64,000 90,000			·							1.8	
22	- X	24 hrs	86,000					 		<u> </u>			1.8	
23	X	24 hrs	78,000					-		 			0.4	
24		24 hrs	78,000								 		0.4	
25	Х	24 hrs	75,000					l —				f	1.6	
26	X	24 hrs	49,000								† — — —		1.9	
27	X	24 hrs	68,000								ļ — —		1.7	
28	X	24 hrs	85,000										1.8	
29	X	24 hrs	73,000										1.7	
30	X	24 hrs	89,000										1.3	
31		24 hrs	90,000											
Total			2,632,000											
Average			84,903											
Maximu	m		121,000											

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



See page 4 for instructions					
I. General Information f	or the Month Year of: February-04				
A. Public Water System					
	Kings Cove		PWS Identi	fication Number:	3350655
	X Community Non-Transient Non-Com	munity	Transient Non-Comm		Consecutive
	nections at End of Month: 207		Total Population Served		725
	AquaSource Utility, Inc.		Total Topalation Control		
	Michael Fitzgerald		Contact Person's Title:	Area Manager - Flo	orida
Contact Person's Mailin			City: Ocala	State: FL	Zip Code: 34470
Contact Person's Teleph			Contact Person Person's		(352) 732-3213
Contact Person's E-Mai			Contact I ciscii I ciccii		
B. Water Treatment Plan					
Plant Name:	Kings Cove		Plant Telep	hone Number:	(352) 369-4881
	7478 Silver Lake Drive		City: Leesburg	State: FL	Zip Code: 34788
Type of Water Treated		rchased Finished Wa			
	Pay Operating Capacity of Plant, gallons per day:	378,000			
	osection 62-699.310(4), F.A.C.):		Plant Class (per subsect	ion 62-699.310(4), F.	A.C.):
Licensed Operators	Name	License Class			ay(s)/Shift(s) Worked
Lead/Chief Operator:	Mark March	С	8287		6 Days per week
Other Operators:	Tom Felton	C	2241		6 Days per week
	Total Cool				6 Days per week
					
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				+	
				 	
et e i Cultura di William (esc. es Willeste a tra		<u> </u>			
II. Certification by Lead	Chief Operator				
		/ 1 : 6		t identified in Dont I	of this rapart. I contify that the
l, the undersigned water	treatment plant operator licensed in Florida, am the lead	chief operator of the	ne water treatment plan	t identified in Part i	of this report. I certify that the
information provided in	this report is true and accurate to the best of my knowled	lge. I certify that al	ll drinking water treatm	ent chemicals used	at thisplant conform to NSF
International Standard 60	0 or other applicable standards referenced in subsection 6	52-555.320(3), F.A	.C. I also certify that the	ne following addition	nal operations records for this
plant were prepared each	n day that a licensed operator staffed or visited this plant	during the month is	ndicated above: (1) reco	ords of amounts of o	chemicals used and chemical feed
rates: and (2) if applicab	le, appropriate treatment process performance records. F	Futhermore, I agree	to provide these addition	onal operations reco	ords to the PWS owner so the PWS
	ogether with copies of this report, at a convenient location			•	
or van rotain moin, t	against the copies of this rapart, at a conformality found		/		
	W 132			C9297	
	Mark March			C8287	
Signature and Date	Printed or Typed Nam	e		License Number	

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											£84,£7		9.45 14.5	Average
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												24 hrs		: 0€
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											000'9L	24 hrs		- 87
	1.1										000'9L	24 hrs	X	* LT
	£.1										43,000	24 hrs	X	- 97
	Þ.I _										000,74	24 hrs	X	- 25
	0.1										000,06	24 hrs	X	74
	6.0										000'99	24 hrs	X	23
	I.I										000'94	24 hrs	X	
											100,000	24 hrs		71
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and the second s	L'I								ļ		000'601	24 hrs	X	- II
	t.1	ļ									000,78	24 hrs	X	10
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	L'I	<u> </u>									000,69	24 hrs	X	S b
	8.0	ļ-—-				\vdash					000'49	24 hrs	X	. F
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	6.0				<u> </u>	\vdash					000,83	24 hrs	X	l
Water System Components Out of Operation	System, mg/L:	sec/cm2	zec/cm2	J/nim-gm	Applicable	3	J\nim-gm	səmuim	Tow, mg/L	Rate, gpd	Produced, gal	Operation	("X"	Month
Q	nonudrusia	Wm	-Wm	Redured,	Water, if	Water,	Peak Flow,	Peak Flow,	During Peak	Peak Flow	Water	ni insl¶	Sosiq)	əu)
Emergency or Abnormal Operating Conditions,	Point in £	Required,	UV Dose,	ı	lo Hq	Jo	During	Point During	First Customer		pədsini To	smoH	Operator	5.5.5
	at Remote	UV Dose	Operating	muminiM		Lemp	Customer	Measurement	(C) Before or at		Net Quanty		ρλ	
	Concentration	Minimum	Lowest				tenia ta	O 118 (T)	Сопсепианоп			발명된 회교속	DonisiV	Sec.
	Disinfectant						Before or	Contact Time	Disinfectant				10	
	Residual						Provided	Disinfectant	Lowest Residual			W.A. 1.1.2	Staffed	
	Lowest				ladi (1) Januarjang Salatan		Lowest CT						Plant	7
	triviti.	9800	J VU				Snous				4.		Days	
Emergency or Announal Operating Conditions,	#65% / 15 S		*əldsəi	lqqA ii ,notts	Virus Inactiv	go.l-wo	Cemonstrate I	or UV Dose, to I	CT Calculations,					
amines) Chlorine Dioxide	hlorine (Chlor	D bənidm	Col	ərine	Free Chl				n System:	n Distributio	i bənistnisM lsı	ctant Residi	Disinfe	Type or
								:(Other (Describe			noitaibaA t		
Combined Chlorine (Chloramines)	əuoz(\Box	əpixoi	Chlorine C	- :	hlorine	Free C			лацоп/Кет	irus Inacti			
		<u>- L.J.</u>							February-04		th Year of:			
									701021		4	1 4 - 4,	(1	- CI III
		",				Э	Kings Cov	Plant Name:	<u> </u>	3320655		egwny uoi	rentificat	LWSIG

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



See page 4 for instructions

1. General Information 1	for the Month Year of: March-04										
A. Public Water System											
PWS Name:	Kings Cove		PWS Identifie	cation Number: 3350655							
	☐ Non-Transient Non-Comm	munity	Transient Non-Commun	nity Consecutive							
Number of Service Con	nnections at End of Month: 207		Total Population Served a	t End of Month: 725							
	AquaSource Utility, Inc.										
	Michael Fitzgerald		Contact Person's Title:	Area Manager - Florida							
Contact Person's Mailir				State: FL Zip Code: 34470							
Contact Person's Telepi			Contact Person Person's F	Fax Number: (352) 732-3213							
Contact Person's E-Mai	l Address: <u>mvfitzgerald@suburbanwater.com</u>										
B. Water Treatment Pla	nt Information										
Plant Name: Kings Cove Plant Telephone Number: (352) 369-4881											
Plant Address: Corner of Picciola Road & Twin Palms City: Lecsburg State: FL Zip Code: 34788											
Type of Water Treated		rchased Finished W	ater								
	7 1 8 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	378,000									
Plant Category (per subsection 62-699.310(4), F.A.C.): Plant Class (per subsection 62-699.310(4), F.A.C.):											
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked							
Lead/Chief Operator:	Mark March	C	8287	6 Days per week							
Other Operators:	Tom Felton	C 2241 6 Days per week									
[출발](육시 중시 : 유민 : 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1											
All Contractions											
and the state of the state of the											
			<u> </u>								
II. Certification by Lead	Chiat Operator										
	treatment plant operator licensed in Florida, am the lead/o										
	this report is true and accurate to the best of my knowledge										
International Standard 6	0 or other applicable standards referenced in subsection 6	2-555.320(3), F.A	.C. I also certify that the	following additional operations records for this							
plant were prepared each	n day that a licensed operator staffed or visited this plant of	during the month i	ndicated above: (1) record	ds of amounts of chemicals used and chemical fee							
rates: and (2) if applicab	le, appropriate treatment process performance records. F	uthermore. I agree	to provide these addition	al operations records to the PWS owner so the PW							
	ogether with copies of this report, at a convenient location			•							
owner can retain them, t	ogether with copies of this report, at a convenient issued										
	Mark March			C8287							
Signature and Date	Printed or Typed Name	<u> </u>		License Number							
	~1										

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											000'011	24 hrs		LT
	0.1										000'601	24 hrs	X	97
	7.7										103,000	say 42	X	57
	7.7										124,000	24 hrs	X	74
	61										107,000	sad 42	X	73
	7.7										000,76	24 hrs	X	77
	7.2										103,000	24 hrs	X	71
											104,000	24 hrs		70
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Water System Components Out of Operation	System, mg/L	ушэ/ээг	sec/cm2		Applicable	ာ	J\nim-gm	səmuim	J\gm ,wol4	Rate, gpd	Produced, gal	nonsragO	("X"	Month
Repair of Maintenance Work that Involves Taking	noitudrusiQ	Wm	-Wm	Redured	Mater, if	Water,	Peak Flow,	Peak Flow,	During Peak	Peak Flow	TotaW	ni insl4	(Place	əųı
Emergency or Abnormal Operating Conditions;	ni mio4	Required,	UV Dose,	. , .	lo Hq	\.^_ ìo −	. BurinG	gnimG inio9	First Customer		bodzini 7 Jo	STUOH	Operator	Day of
	at Remote	UV Dose	gnustago	mminiM	COME NO.	Temp	Customer	Measurement	(C) Before or at	16.41 22.25	Net Quanty		þλ	
	Concentration	muminiM	Lowest	5.00			izii I is	(T) 31 C	Concentration				batistV	
	Disinfectant	医凝结矫	Dr. Auderia, Gree	mumily.			веготе от	Contact Time	Disinfectant			le distance	10	
	Residual				FM - F	1.1	Provided	Disinfectant	Lowest Residual			1	Staffed	,
	Isowest	Li Sisabik		李拉维。		70.44	LowestCT		177人 不可能發達的	S			Plant	1
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Energency or Abnormal Operating Conditions, and an arranged and a state of the stat	K 27%	980(AND IN	THE TEST	生産が大	TATE OF STREET		CT Calcul	CONTRACTOR SERVICES				Days	
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	hlorine (Chlora	D bənidm	ЮЭ	orine	Free Chl				n System:	oitudittsiQ n	ial Maintained is	tant Residu	Disinfec	Type of
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Combined Chlorine (Chloramines)	- auozo	Γ	əpixoi	Chlorine D		hlorine	J 5914]		viation/Remo	ritog Virus Inactiv			
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^{*} Refer to the instructions for this report to determine which plants must provide this information.



See page 4 for instructions

1. General Information t	for the Month Year of:	April-04									
A. Public Water System	(PWS) Information					-					
PWS Name:	Kings Cove		<u>.</u>		PWS Identifi	cation Number:	3350655				
PWS Type:	X Community	Non-Transient Non-Com	munity	Transier	nt Non-Commu	nity	Consecutive				
Number of Service Con	nections at End of Month:	207		Total Popu	lation Served a	at End of Month:	725				
PWS Owner:	AquaSource Utility, Inc.										
	Michael Fitzgerald			Contact Pe	erson's Title:	Area Manager - F	lorida				
Contact Person's Mailin				City:	Ocala	State: FL	Zip Code: 34470				
Contact Person's Teleph				Contact Pe	erson Person's F	ax Number:	(352) 732-3213				
Contact Person's E-Mai		ald@aquaamerica.com									
B. Water Treatment Pla	nt Information										
Plant Name: Kings Cove Plant Telephone Number: (352) 369-4881											
	Corner of Picciola Road & Twin Pa	lms		City:	Leesburg	State: FL	Zip Code: 34788				
Type of Water Treated			rchased Finished Wa	ater							
	Day Operating Capacity of Plant, gall	ons per day:	378,000								
	bsection 62-699.310(4), F.A.C.):					on 62-699.310(4), F					
Licensed Operators	Name		License Class	Licen	se Númber 🔭	有品化 Service D	ay(s)/Shift(s) Worked				
Lead/Chief Operator:	Mark Marc	h	C		8287		6 Days per week				
Other Operators:	Tom Felton	1	C	2241			6 Days per week				
等于1.7%。2.5% 增 数。					<u> </u>						
	<u> </u>										
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Commence of the second of the			l.,								
II. Certification by Lead	I Chi of On sustan										
	treatment plant operator licensed										
information provided in	this report is true and accurate to	the best of my knowled	ge. I certify that al	l drinking	water treatmer	nt chemicals used	at thisplant conform to NSF				
International Standard 60	0 or other applicable standards re	ferenced in subsection 6	52-555.320(3), F.A.	.C. I also c	ertify that the	following addition	onal operations records for this				
plant were prepared each	i day that a licensed operator staf	fed or visited this plant	during the month in	ndicated ab	ove: (1) recor	ds of amounts of	chemicals used and chemical feed				
							ords to the PWS owner so the PWS				
	ogether with copies of this report,	•	. •			F					
oor can retain them, t	Secure with copies of this report,	at a convenient locatio	or at reast ton ye	u. J.							
		Mark March				C8287					
Signature and Date		Printed or Typed Name	e			License Number					
~		7.									

Page 1

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	I'I										144,000	24 hrs	X	90
	2.2										122,000	24 hrs	X	56
	9.1										198,000	24 hrs	X	87
	7.2										138,000	24 hrs	X	LT.
	7.7										000,26	24 hrs	X	97
	2.2		Ĺ		Ĺ						120,000	24 hrs	X	52
										i	000,891	24 hrs		- 74
	7.7					<u> </u>					198,000	24 hrs	Χ	53
	£.1										144,000	24 hrs	X	55 .*
	1.1										000'011	24 hrs	X	51
	17.1					<u> </u>					109,000	24 hrs	X	≥:07
	£.1										116,000	24 hrs	X	61
	2.1										000,741	24 hrs	X	81
	<u> </u>										133,000	24 hrs		LI
	1.1					L					134,000	24 hrs	X	91
	2.1										000'18	24 hrs	X	SI
	8.1	<u> </u>				ļ					133,000	24 hrs	X	ेग
	7.7										000,86	24 hrs	X	EI
	7.7										000,82	24 hrs	X	17
	8.1										000,68	24 hrs	X	- 11
											144,000	24 hrs		- 01
	I					ļ					145,000	24 hrs	X	6
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	8.1			L							000,531	24 hrs	X	L
	7.7										000,721	24 hrs	X	. 9
	1.2										137,000	24 hrs	X	ς
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	0.0										138,000	24 hrs		#3.4 € *;
	8.0	L							ļ		138,000	24 hrs	X	7
nonnadoso no misitalmos mas (o min il ser	E.I	TITIO DOG	Commission of the		aronavdda e		2	9		10.	000,68	24 hrs	X	·
Repair or Mainfenance Work that shivolves Taking Water System Components Out of Operation	System, mg/L	Sec/cm2	sec/cm2	J\nim-3m	Applicable	ွာ	J/nim-gm	sajnuiu	J\gm ,woH	Rate, gpd	Produced, gal	Operation	("X"	Month
Persure Ecite Val. Applying Specialing Containers.	nothudirisiQ	Required,	-Wm	,baninpaA	Yater, if	Water,	Peak Flow,	Peak Flow,	During Peak	Peak Flow	Water	Flant in	eplace.	əqı
	et Remote Point in	1 To 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	UV Dose,	Minimum	10 Hq	IO.	grimG	SurmG trio9	Tirst Customer		bədsini To	SmoH	Operator	lo yed
	Concentration	UV Dose	gnusiegO		14. 化多种	Temp	Customer	Measurement	(C) Before or at		VinsuQ 19M.		ρλ	
		muminiM	Lowest			100	izui Tis	2 Dig (T)	Concentration				bətisiV	
	Disinfectant			37.43	14.	- KE-7	Before or	Contact Time	Disinfectant				10	
16. 万千4.4.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	Residual					¥.5.1	Provided	Disinfectant	Lowest Residual				Staffed	ê l
	Isəwo.l					生物數	LowestCT						Plant	f l
A Company of the Comp		950(ΙΛΩ	1 TAN 1 TAN	100 May 1800	XX CO	Suone	CT Calcul	1. 1944 444	Market 1			Days	î:
Haragency or Abromal Operating Conditions: Sepan or Maintenace Work that the Prevence Taking	\$ \$ 98per 0.168	4.5	cable*	IqqA Yi ,nous	Virus Inactiv	god-wo	emonstrate F	or UV Dose, to L	CT Calculations,	100				1.
amines) Chlorine Dioxide	hlorine (Chlora	O bənidm	Co	orine	Free Chl				n System:	n Distributio	i bənistnisM İst	tant Residu	District	i ype oi
								:(Other (Describe			r Radiation		
Combined Chlorine (Chloramines))zone) []	əpixoi	Chlorine D		hlorine	Liee C	`		шэм/попы ш	ritosal suriV go.	t b∽a∷t. kuiR LogiL-r	AL MORES	SHESIA
(<u>′. </u>		110		-:14	J - 4-4 [and and italia				
									₽0-linqA		th Neur of	act fredt m	(Lete(L))	"CI III
						2	vings Cov	Plant Name:	I	3320655	• 1	on Number	neaumear	DI CAL I
							J : A			ココフひコして		Immily do	10011:100	1 3/114

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



See page 4 for instructions

I. General Information t	for the Month Year of: May-04				
A. Public Water System			·		
	Kings Cove		PWS Identifie	cation Number:	3350655
	☐ Non-Transient Non-Com	munity	Transient Non-Commun		Consecutive
	nnections at End of Month: 207		Total Population Served a		725
 	AquaSource Utility, Inc.	***	1. Ovar 1 oparavior oct voa a		
	Michael Fitzgerald		Contact Person's Title:	Area Manager - Flor	rida
Contact Person's Mailin			City: Ocala	State: FL	Zip Code: 34470
Contact Person's Teleph			Contact Person Person's F	ax Number:	(352) 732-3213
Contact Person's E-Mai	il Address: mvfitzgerald@aquaamerica.com		·		
B. Water Treatment Pla	int Information				
Plant Name:	Kings Cove		Plant Telepho	one Number:	(352) 369-4881
Plant Address:	Corner of Picciola Road & Twin Palms		City: Leesburg	State: FL	Zip Code: 34788
Type of Water Treated	by Plant: X Raw Ground Water Pu	rchased Finished Wa	ter		
		378,000			
	bsection 62-699.310(4), F.A.C.):		Plant Class (per subsection		
Licensed Operators	Name	License Class	License Number	Day	y(s)/Shift(s);Worked
Lead/Chief Operator:	Mark March	C	8287		6 Days per week
Other Operators:	Tom Felton	С	2241		6 Days per week
			<u> </u>		
II. Certification by Lead	Chief Operator				
	treatment plant operator licensed in Florida, am the lead/				
information provided in	this report is true and accurate to the best of my knowled	lge. I certify that al	l drinking water treatmer	t chemicals used at	t thisplant conform to NSF
International Standard 60	0 or other applicable standards referenced in subsection 6	52-555.320(3), F.A.	C. I also certify that the	following additiona	al operations records for this
plant were prepared each	h day that a licensed operator staffed or visited this plant of	during the month ir	dicated above: (1) record	ls of amounts of ch	emicals used and chemical feed
rates: and (2) if applicab	ole, appropriate treatment process performance records. F	uthermore, I agree	to provide these addition	al operations record	ds to the PWS owner so the PWS
	ogether with copies of this report, at a convenient location			•	
omer can ream mem, c	ogether with copies of this report, as a convenient rotation	ii tot at teast ten ye.			
	Mark March			C8287	
Signature and Date	Printed or Typed Name	e		License Number	

Page 1

DEP Form 62-555.900(3)Alternate

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		· · · · · · · · · · · · · · · · · · ·									4,631,000		in all the t	otal
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	6.0	ļ									215,000	24 hrs	X	30
			1	<u> </u>		L					272,000	24 hrs		56
	8.0	<u> </u>									140,000	24 hrs	X	87
	11										115,000	24 hrs	X	7.7
	1.2										202,000	24 hrs	X	- 97
	I.I										203,000	24 hrs	X	52
	1.2						T			1	218,000	24 hrs	X	74
	1.1				T	1				1	000'16	24 hrs	X	23
					1						000,581	24 hrs	1	77
	8.0						1			 	186,000	24 hrs	X	17
	7.1				1		1	·		†	162,000	24 hrs	$\frac{X}{X}$	70
	9.1	1				<u> </u>	 	 		-	144,000	54 hrs	1 x	61
I	0.1					1	1			 	215,000	24 hrs	$\frac{1}{x}$	81
	5.1						 				000,18	24 hrs	$\frac{\lambda}{X}$	<u> </u>
	8.1									 	138,000	24 hrs	$\frac{\Lambda}{X}$	91
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	1.2						<u> </u>	<u> </u>		 	180,000	24 hrs	X	bI.
	7.7					 			 	t	125,000	24 hrs	1 ^	
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	t'I	 		 	 	 			 	<u> </u>	104,000	24 hrs	X	9
	9.1			 	 	+					000'96	24 hrs	X	ç
	8.1	ļ	 	 	 	 			 	 	103,000	24 hrs	X	7
	9.1		 		 	 	 		·	ļ	176,000	24 hrs	<u> </u>	<u>. ε</u>
				 							000'65	24 hrs	X	7
Water System Components Out of Operation	System, mg/L	zwo/oəs	zwo/oos	J/uim-gm	Applicable	Э	J\nim-gm	rninutes	T Ams was x	nd9 (ann)	20,000	24 hrs		I
repair of intaintenance work inal involves Laking	Distribution	Wm	-W _{rit}	Required.	Water, if	Water,	Peak Flow,		J\gm,wo⊡	Rate, gpd	Produced, gal	Operation	("X"	Month
Emergency, or Althoural Operating Conditions:	mi mioq.	Rednited,	UV Dose,	E G	lo Hq	10	Suring Wolf Jeeg	Peak Flow,	During Peak	Peak Flow	Water	ni insl9	(Place	əti
	at Remote	UV, Dose	Operating	mminiM		Lemp	Customer	Point During	First Customer		bodzini To	smoH	Operator	Day of
	Concentration	mummiM	Lowest	41.71.11		TUOT		Measurement	ts to proled (D)		Net Quanity	1	ρλ	
	Disinfectant	Tues		100			st First	Ois(I)	Concentration	Si dina	F-124	1	Visited	
			180	Miles In			Before or	Contact Time	Disinfectant			1	10	
	LeubizeA		2.5				Provided	Distrifectant	Lowest Residual		ŀ	-	Staffed	1.5
	Lowest	学院 等。《查			\$5.00 to 1.00		Lowest CT			14 T		1		
ATTENDED TO THE PERSON OF THE		2010 m 7 20		SE 223	3 _e	S. 4. 5.		1 1 1 1 1 1 1 1 1			1. 1		plant	1 .
	WAR STOR	əso	TAN -		12 To 12	A 56 T	ations	CT Calcul	a thirty is been	4 1	to the second		Days	'
		100	cable*	ilqqA ir aoui	Virus Inactiva	go_mo	Semonstrate P	01 UV DOSC, 10 L	CT Calculations,		1			
	hlorine (Chlora	Donnom	(0)	oune	Free Chlo					Ompouncier	U pallimilini	DDIGON, MARINE		16
					110 3						ri bənistnisM lst			
Combined Chlorine (Chloramines)	2007	. 🖂	anivai	a annone			🗀	.(Other (Describe			r Radiation	Mraviole) []
(2001mgack Chloring (Chloropace))zone		shixoi	Chlorine D		hlorine) 5514		* :lsvc	/iation/Remo	virus Inactiv	J-mo4 gniv	of Achie	Means
									40-yeM		क्ष मुख्या वर्	or the Mont	i enect și	III. Dai
														لتكند
							Kings Cov	Plant Name:	- "	3350655	:1	іоп Митре	dentificat	I SMd
										~				

DEP Form Form 62-555.900(3) Alternate

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



See page 4 for instructions

I. General Information for	or the Month Year of: June-04				
A. Public Water System	(PWS) Information				
PWS Name:	Kings Cove		PWS Identifi	ication Number:	3350655
PWS Type:	X Community Non-Transient Non-Con	nmunity	Transient Non-Commu	nity	Consecutive
Number of Service Con	nections at End of Month: 207		Total Population Served	at End of Month:	725
	AquaSource Utility, Inc.				
	Michael Fitzgerald		Contact Person's Title:	Area Manager - Flori	
Contact Person's Mailin			City: Ocala	State: FL	Zip Code: 34470
Contact Person's Teleph			Contact Person Person's I	Fax Number:	(352) 732-3213
Contact Person's E-Mail		<u>n</u>			
B. Water Treatment Plan	nt Information				
Plant Name:	Kings Cove		Plant Teleph		(352) 369-4881
	Corner of Picciola Road & Twin Palms		City: Leesburg	State: FL	Zip Code: 34788
Type of Water Treated		urchased Finished Wa	ter		
	ay Operating Capacity of Plant, gallons per day:	378,000			
	section 62-699.310(4), F.A.C.):		Plant Class (per subsection		
Licensed Operators	Name	* License Class	License Number		(s)/Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287		Days per week
Other Operators:	Tom Felton	С	2241		Days per week
一、"这么一样,我们们					
				<u></u>	
			<u> </u>	<u> </u>	
	C1: CO				
II. Certification by Lead					
I, the undersigned water	treatment plant operator licensed in Florida, am the lead	l/chief operator of th	ne water treatment plant	identified in Part I of	f this report. I certify that the
information provided in t	this report is true and accurate to the best of my knowled	dge. I certify that al	I drinking water treatme	nt chemicals used at	thisplant conform to NSF
	or other applicable standards referenced in subsection				
	day that a licensed operator staffed or visited this plant				
rates: and (2) if applicable	le, appropriate treatment process performance records.	Futhermore Lagree	to provide these addition	nal operations record	Is to the PWS owner so the PWS
	ogether with copies of this report, at a convenient location			nar operations record	
owner can retain them, to	gether with copies of this report, at a convenient location	on for at least ten ye	ais.		
	Mark March			C8287	
Signature and Date	Printed or Typed Nam		·····	License Number	
Signature and Date	Trined of Typed Nati			Discuse Humber	

PWS Id	lentificat	ion Numbe	r:	3350655		Plant Name:	Kings Cov	'e						
BL Dai	ly Data f	or the Mon	th Year of:		June-04									
			og Virus Inacti				Free C	Chlorine	.	Chlorine I	Dioxide		Dzone	Combined Chlorine (Chloramines)
🖂 t	Ultraviole	t Radiation	1		Other (Describe	e):			ر					
Type of	Disinfe	ctant Residu	ual Maintained i	n Distributio					Free Chl				hlorine (Chlor	
				8 0 V 3 V	CT Calculations,		Demonstrate I	our-Log	Virus Inactiv	ation, if Appl		建 数分析		
当鱼	Days			K BARRATAN		CT Calcu	lations	1、東勢			∵ ∗UVI	Dose :		
	Plant						Lowest CT	10 mg			4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		Lowest	
	Staffed				Lowest Residual	Disinfectant	Provided						Residual	
	or Visited				Disinfectant Concentration	Contact Time (T) at C	Before or« at First	Temps	ph of a	Minimum	Lowest	Minimum	Disinfectant Concentration	
1. 134	by		Net Quanity	1	(C) Before or at	Measurement	Customer	Temps	4	Minimum	Operating	UV Dose	at Remote	Emergency or Abnormal Operating Conditions,
Day of	Operator	Hours	of Finished		First Customer	Point During	During	of	pH of	- "CT	UV. Dose,"	Required,	Point in	Emergency or Abnormal Operating Conditions,
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	wwalci, ii	Evedanca,	mW	mW	Distribution	Repair or Maintenance work that involves taking
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	C	Applicable	mg-min/L*	sec/cm2	sec/cm2	System, mg/L	Water System Components Out of Operation 💥
2	X	24 hrs 24 hrs	2,000 2,000					-					0.4	
3	X	24 hrs	94,000				<u> </u>	1			- -		0.3	
4	X	24 hrs	116,000					f					1.0	
-5		24 hrs	54,000			· · · · · · · · · · · · · · · · · · ·								
6	X	24 hrs	31,000										1.6	
7	X	24 hrs	85,000										2.2	
8	X	24 hrs	85,000										0.6	
9	X	24 hrs	190,000										0.7	
10 11	X	24 hrs 24 hrs	105,000 80,000				ļ	 					1.4	
12		24 hrs	78,000	}										
13	X	24 hrs	0			·							1.6	
14	X	24 hrs	59,000										2.2	
15	X	24 hrs	74,000										2.2	
16	X	24 hrs	102,000										2.2	
17 7	X	24 hrs	92,000				ļ				ļ.——		2.2	
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20	X	24 hrs 24 hrs	70,000				 	-			<u> </u>	ļ	1.3	
21	$\frac{\lambda}{X}$	24 hrs	78,000	 			 	t			<u> </u>	<u> </u>	1.7	
22	X	24 hrs	68,000										1.4	
23	X	24 hrs	102,000										2.2	
24	X	24 hrs	61,000										2.2	
25	X	24 hrs	87,500	 			<u> </u>				<u> </u>	 	1.7	
26		24 hrs	87,500					ļ			ļ	 	1.0	
27.*	X	24 hrs	100,000 42,000	 			<u> </u>						1.8	
28** 29	X	24 hrs 24 hrs	144,000				 	 			 	 	1.4	
30	$\frac{X}{X}$	24 hrs	158,300			-	 	-			<u> </u>		1.2	
31		24 hrs	,											
Total 🐰	i_{i_1,i_2} i_{i_1}	1. <u>11.</u> 2.	2,441,300											

Maximum

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



See page 4 for instructions

L. Consul Information	Sanda Manda Vanas Sa	Terley O.4													
I. General Information f		July-04													
A. Public Water System	_ `					Inviori -	C - C - No - b	2250655							
	Kings Cove						fication Number:	3350655							
	X Community	Non-Transient N	lon-Com	imunity		Transient Non-Comm		Consecutive							
	nections at End of Month:	207				Total Population Served	at End of Month:	725							
	Aqua Utilities Florida					IO D	.)/								
	Brian Heath	6 2. 4				Contact Person's Title:	Area Manager - Flo								
Contact Person's Mailin						City: Leesburg	State: FL	Zip Code: 34748 352/787-6333							
Contact Person's Teleph						Contact Person Person's	rax Number:	332/187-0333							
Contact Person's E-Mai		th@aquaamerica.													
B. Water Treatment Pla															
	Plant Address: Corner of Picciola Road & Twin Palms City: Leesburg State: FL Zip Code: 34788														
							State: FL	Zip Code: 34788							
Type of Water Treated			Pt	urchased Finish	d Wa	iter									
	ay Operating Capacity of Plant, g	allons per day:		378,000		Tri + 01 / 1 /	(2 (00 210/4) F	4.6							
Plant Category (per subsection 62-699.310(4), F.A.C.): Licensed Operators Name License Class License Number Day(s)/Shift(s) Worked Day(
		 	<u> </u>	·	ass		132-25								
Lead/Chief Operator:	Will Fon			<u>C</u>		6813		6 Days per week							
Other Operators:	John Wo	rrell		C		6597		6 Days per week							
							<u> </u>								
															
3 (A. 7)															
						 									
															
				 											
				<u> </u>		<u> </u>									
II. Certification by Lead	Chief Operator														
							:	Cutt I I I I I I I I I I I I I I I I I I							
I, the undersigned water	treatment plant operator licens	ed in Florida, am	the lead	chief operator	of th	ie water treatment plant	identified in Part I	of this report. I certify that the							
information provided in	this report is true and accurate	to the best of my l	knowled	lge. I certify t	nat all	l drinking water treatm	ent chemicals used	at thisplant conform to NSF							
International Standard 6	0 or other applicable standards	referenced in subs	section 6	52-555.320(3)	F.A.	 C. I also certify that th 	e following addition	nal operations records for this							
plant were prepared each	day that a licensed operator s	taffed or visited th	is plant	during the mo	nth in	ndicated above: (1) reco	ords of amounts of c	themicals used and chemical feed							
rates: and (2) if applicab	le, appropriate treatment proce	ss performance re	cords. F	Futhermore, I a	gree	to provide these addition	onal operations reco	ords to the PWS owner so the PWS							
	ogether with copies of this repo														
omner can retain them, t	ogether with copies of this top	ore, at a convenien	. iocano	toi ut ioust t	, ••										
		Will Fontaine					C6813								
Signature and Date		Printed or Typ		e			License Number								
		•													

PWS Id	lentificat	ion Numbe	r:	3350655		Plant Name:	Kings Cov	/e						
III. Dai	ly Data f	or the Mon	th Year of:		July-04									
			og Virus Inacti	viation/Rem			Free C	Chlorin	e	Chlorine I	Dioxide		Ozone	Combined Chlorine (Chloramines)
		et Radiation			Other (Describe	e):								
Type of	Disinfe	ctant Residu	ual Maintained i	n Distributio	on System:				Free Chl	orine	Co	mbined C	hlorine (Chlor	ramines) Chlorine Dioxide
					CT Calculations,	or UV Dose, to I	Demonstrate I	our-Log	Virus Inactiv	ation, if App				
	Days		10.0		ker daga 25-4	CT Calcu	lations	- 141				Dose ! √ →		
	Plant						Lowest CT				14. 海	1.46	Lowest	
1	Staffed		। १९४४ के स्टब्स्		Lowest Residual	Disinfectant	Provided					1. 187 8	Residual	
	or				Disinfectant	Contact Time	Before or				Encode 4	3 (4.1)	Disinfectant	
	Visited				Concentration	(T) at C	at First				Lowest	TATITUTE COLUMN	:Concentration	
D	by	Hours	Net Quanity of Finished		(C) Before or at	Measurement	Customer	Temp.		Minimum CT	Operating UV Dose,	UV Dose	at Remote	Emergency or Abnormal Operating Conditions;
Day of the	Operator (Place	Plant in	Water	Peak Flow	First Customer During Peak	Point During Peak Flow,	During Peak Flow,	Water	pH of Water, if	Required,	mW-	Required, mW	Point in , Distribution	Repair or Maintenance Work that Involves Taking
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	C	Applicable	mg-min/L	sec/cm2	sec/cm2	System, mg/L	Water System Components Out of Operation
1	X	24 hrs	93,200	, , , , , , , , , , , , , , , , , , ,	1.8			 	Прриссои	tug muse	, sourcing ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1.5	Jan System State S
2	Х	24 hrs	26,800		1.5								1.3	
3	X	24 hrs	100		1.6					i				
4		24 hrs	100											
5	X	24 hrs	105,100		1.8	-							1.5	
6	X	24 hrs	15,000		1.5		<u> </u>	Ĺ					1.2	
7	X	24 hrs	76,200		1.3	<u> </u>				ļ			1	
8	X	24 hrs	8,500		1.7			ļ				ļ	1.3	
9	X	24 hrs	54,300		1.5		ļ	ļ				ļ	1.1	
10	X	24 hrs	161,700	 -	1.5			ļ				<u> </u>		
11	X	24 hrs 24 hrs	161,700 359,800	<u> </u>	1.8					<u> </u>			1.3	
13	X	24 hrs	88,700	 	1.7			 		<u> </u>			1.4	
14	X	24 hrs	174,900		16						 	ļ	1.2	
15	X	24 hrs	156,400		1.4								1.1	
16	X	24 hrs	119,900		1.5								1.1	
17	X	24 hrs	131,000		1.5									
18		24 hrs	131,000											
19	X	24 hrs	253,400		1.3		ļ			ļ.——		ļ	1.0	
20	X	24 hrs	59,900		1.3	_		<u> </u>					0.1	
21	X	24 hrs	126,000		1.3		ļ	 				 	0.9 1.0	
22	X	24 hrs 24 hrs	91,500 114,300		1.3		 	 			 		0.9	
24	$\frac{\lambda}{X}$	24 hrs	127,800		1.2	~~~							0.9	
25	_^-	24 hrs	127,800		1.4			·			 		· · · · · · · · · · · · · · · · · · ·	
26	Х	24 hrs	248,900		1.2							<u> </u>	0.9	
27	X	24 hrs	81,500		ı								0.7	
28	Х	24 hrs	118,800		1.1								0.7	
29	X	24 hrs	92,250		1.1								0.7	
30	X	24 hrs	195,750		1							ļ	0.7	
31	X	24 hrs	184,500		1.2		<u> </u>	L			L	L	L	<u> </u>
Total	La Harris		3,686,800	l										
Average		3.55	118,929	I										

359,800

Maximum

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



See page 4 for instructions

I. General Information f	or the Month Year of: August-04			
A. Public Water System	(PWS) Information			
	Kings Cove		PWS Identifi	ication Number: 3350655
	X Community Non-Transient Non-Com	munity	Transient Non-Commu	nity Consecutive
Number of Service Con	nections at End of Month: 207		Total Population Served	at End of Month: 725
PWS Owner:	Aqua Utilities Florida			
Contact Person:	Brian Heath		Contact Person's Title:	Area Manager - Florida
Contact Person's Mailin	g Address: 2315 Griffin Road, Suite 4		City: Leesburg	State: FL Zip Code: 34748
Contact Person's Teleph			Contact Person Person's I	Fax Number: 352/787-6333
Contact Person's E-Mai	l Address: <u>beheath@aquaamerica.com</u>			
B. Water Treatment Pla	nt Information			
Plant Name:	Kings Cove		Plant Teleph	
Plant Address:	Corner of Picciola Road & Twin Palms		City: Leesburg	State: FL Zip Code: 34788
Type of Water Treated		rchased Finished Wa	ater	
		378,000		
	osection 62-699.310(4), F.A.C.): V		Plant Class (per subsection	
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	6 Days per week
Other Operators:	John Worrell	С	6597	6 Days per week
लक्ष्मानीके अपने सम्बद्धाः ज				
중 - 뭐.하는 결과 고기		, <u> </u>		
			1	
II. Certification by Lead	Chiaf Operator			
	treatment plant operator licensed in Florida, am the lead/			
information provided in	this report is true and accurate to the best of my knowled	ge. I certify that a	ll drinking water treatme	nt chemicals used at thisplant conform to NSF
	0 or other applicable standards referenced in subsection 6			
plant were prepared each	n day that a licensed operator staffed or visited this plant	during the month i	ndicated above: (1) recor	rds of amounts of chemicals used and chemical feed
rates: and (2) if applicab	le, appropriate treatment process performance records. F	outhermore Lagree	to provide these addition	nal operations records to the PWS owner so the PWS
				nui operations records to the 1 was a wife so and 1 was
owner can retain them, to	ogether with copies of this report, at a convenient location	n for at least ten ye	ars.	
	Will Fontaine			C6813
Signature and Date	Printed or Typed Name			License Number
orginature and Date	rinica of Typea Ivania	•		Liverine Lamber

Page 1

PWS I	lentifica	tion Numbe	er:	3350655		Plant Name:	Kings Co	ve								
III. Da	ly Data I	for the Mon	nth Year of:		August-04					-						
Means	of Achie		Log Virus Inacti	viation/Rem		a).	Free (Chlorin	e	Chlorine I	Dioxide		Ozone	Combined Chl	orine (Chlorar	nines)
			ual Maintained i	in Distributio		-).			Free Chl	orine	C	mbined C	hlorine (Chlor	ramines)	Chlori	ne Dioxide
Type o	Distille	Ctairt Kesiu	1	I Distribution		, or UV Dose, to I	Na-sanat-ata 1	Care V as				mionied C	to accept the Society of the	Emergency or A	学売を終えからかり	127 34 A
					CI Calculadolis,				Yata Aa			Dose	Lowest			
	Days					C1 Calcu	Lowest CT			计通信 (1987年2月25年		Dusc .	4.96 (
	Plant Staffed	EVACES.			Lowest Residual	Disinfectant	Provided	a 120	Shirt Wit.				Lowest Residual	7 7 4	使在一块。 "艺	
1	or		CAGA 1 DE	and start	Disinfectant	Contact Time	Before or					1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Disinfectant		A A	
	Visited				Concentration	(T) at C	at First		***		Lowest	Minimum	Concentration			
45	by		Net Quanity		(C) Before or at	Measurement	Customer	Temp.		Minimum	Operating		at Remote	rige (i.g. sign)	8 6 5 7 7	
Day of	Operator	Hours	of Finished		First Customer	Point During	During -	* of	−. pH of	· cT	UV Dose,	Required,	Point in a	Emergency or A	bnormal Operati	ng Conditions;
the	(Place	Plant in 🖫	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,		Required,	mW-	mW "	Distribution	Repair or Mainter	nance Work that	Involves Taking
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	·c	Applicable	mg-min/L	sec/cm2	sec/cm2	System, mg/L	→ Water System	Components Out	of Operation
1		24 hrs	112,500					ļ								
2	X	24 hrs	112,500	ļ	1.3								1			
3	X	24 hrs	58,500		1.3			ļ					0.9			
5	X	24 hrs	148,500 114,750		1.2			<u> </u>	ļ		 	ļ	0.9			
6	X	24 hrs 24 hrs	83,250		1.2		<u> </u>		ļ		 	ļ	0.8			
7	X	24 hrs	135,000		1.2		ļ	 			 		0.8	 		
8		24 hrs	86,625		1.2	 	<u> </u>					ļ — — —				
9	X	24 hrs	86,625		1.1						ļ <u>.</u>		0.8			
10	X	24 hrs	108,000		1.4				l				1.0			
11	Х	24 hrs	108,000		1.5						<u> </u>		1.2			
12	X	24 hrs	108,000		1.3								1.0			
13	X	24 hrs	108,000		1.4								1.0			
14	X	24 hrs	108,000		1.5								1.2			
15		24 hrs	108,000													
16	X	24 hrs	108,000		1.3								1.0			
17	X	24 hrs	108,000		1.3			<u> </u>			ļ		1.1			
18	X	24 hrs	108,000		1.2			<u> </u>					0.9			
19 20	X	24 hrs	108,000		1.3								1.0			
21	X	24 hrs 24 hrs	108,000 108,000		1.2								1.0			
22		24 hrs	108,000		1.3			-					1.0			
23	X	24 hrs	108,000		1.1								0.8			
24	$\frac{x}{x}$	24 hrs	108,000		1.3					-			1.1			
25	$\frac{\pi}{x}$	24 hrs	105,800		1.3						<u> </u>		1.0			
26	X	24 hrs	92,300		1.3								1.1			
27	Х	24 hrs	92,300		1.3						· · · · · · · · · · · · · · · · · · ·		1			
28	X	24 hrs	117,000		1.4											
29		24 hrs	108,000								L.					
30	X	24 hrs	108,000		1.2								0.9			
31	X	24 hrs	63,000		1.3						l		1.1			
Total	<u> 1 14 e</u>		3,244,650										·			

148,500

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



See page 4 for instructions

I. General Information f	or the Month Year of: September-04					****		
A. Public Water System								
	Kings Cove		1	PWS Identif	ication Number	er:	3350655	
	X Community □ Non-Transient Non-Com	nmunity	Transient N	Non-Commu	nity	Co	nsecutive	
Number of Service Con	nections at End of Month: 207		Total Popula	tion Served	at End of Mon	ıth:	725	
PWS Owner:	Aqua Utilities Florida							
	Brian Heath		Contact Person	on's Title:	Area Manag	er - Florida		
Contact Person's Mailin			City: I	Leesburg	State:	FL	Zip Code:	
Contact Person's Teleph			Contact Person	on Person's l	Fax Number:		352/787-63	33
Contact Person's E-Mai								
B. Water Treatment Plan	nt Information							
	Kings Cove			Plant Teleph	one Number:		(352) 369-4	
	Corner of Picciola Road & Twin Palms		City:	Leesburg	State:	FL_	Zip Code:	34788
Type of Water Treated		urchased Finished Wa	ter					
	ay Operating Capacity of Plant, gallons per day:	378,000						
	osection 62-699.310(4), F.A.C.): V				on 62-699.310			
Licensed Operators	Name	License Class	License	Number		Day(s)/	Shift(s) Wor	ked
Lead/Chief Operator:	Will Fontaine	C	68	313			ays per week	
Other Operators:	John Worrell	C	65	97		6 Da	ays per week	
45.70					<u> </u>			
THE STATE OF THE S								
					<u> </u>			
					ļ			
and the state of t		<u></u>	.		<u> </u>			
II. Certification by Lead	Chiaf Operator							
I, the undersigned water	treatment plant operator licensed in Florida, am the lead							
	this report is true and accurate to the best of my knowled							
	0 or other applicable standards referenced in subsection 6							
plant were prepared each	a day that a licensed operator staffed or visited this plant	during the month in	dicated abov	/e: (1) recor	rds of amoun	ts of chemi	cals used a	nd chemical feed
rates; and (2) if applicab	le, appropriate treatment process performance records. F	Futhermore, I agree	to provide th	ese additio	nal operation	s records to	the PWS	owner so the PWS
owner can retain them, to	ogether with copies of this report, at a convenient locatio	on for at least ten yea	ars.					
·	· ·	•						
	Will Fontaine				C6813			
Signature and Date	Printed or Typed Nam	ie			License Nun	nber		

PWS lo		ion Number		3350655		Plant Name:											
III Dai	b Doto (or the Mont	th Wann of		September-04												
			og Virus Inactiv			-	Free C	Chlorine		Chlorine I)iovide		Ozone	Combined Chl	orine (('hloramines)	
		ving rour-t et Radiation		viation/Rem	Other (Describe	۸.		MIOHI		Chlorine	Joxide)2011c	Combined Citi	ornic (C	moramines	
			ual Maintained i	Dist illusion		:):			Free Chl				hlasiaa (Chlos	-aminaa)	$\overline{}$	Chlorine Diox	ida
Type o	Disinie	ctant Residu	iai Maintained i	n Distributio			<u> </u>						hlorine (Chlor	ammes)	1965 - 17 8 e	Chiorine Dio	Hue
				1.0	CT Calculations,			our-Log	Virus inactiv	ation, if Appl	icable*					App areasings	15.458
	Days				- 1996度が第二位数(CDS) - 1997年第三位数(2017)	CT Calcu	1		1 mars in the second		UVI	Jose San G	i i i				
1	Plant	. 4					Lowest CT			78	1160	Feb. E.A	Lowest				7.35
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Staffed				Lowest Residual Disinfectant	Disinfectant Contact Time	Provided Before or						Residual Disinfectant	Park a may			N. YE
	or Visited				Concentration	(T) at C	at First				d owed	Minimum	Concentration				
1	by		Net Quanity		(C) Before or at	Measurement	Customer	Temp.		Minimum	Operating		at Remote				
Day of	Operator	Hours	of Finished		First Customer	Point During	During	of	pH of	CT 🔭	UV Dose,	Required,	Point in	Emergency or A	bnormal	Operating Cond	tions.
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	Required,	mW-	mW	Distribution	Repair or Mainte			
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	С	Applicable	mg-min/L	sec/cm2	sec/cm2	System, mg/L	Water System	Compone	ents Out of Open	tion*
1	X	24 hrs	56,250		1.2								0.9				
2	X	24 hrs	58,500		1.2								1				
3	X	24 hrs	76,800		1.3								1				
4	X	24 hrs	78,800		1.2			<u> </u>									
5		24 hrs	63,000					<u> </u>									
6	X	24 hrs	63,000		1.3			·					1				
7	X	24 hrs	75,600		1.2								1				
8	X	24 hrs	76,500_	.,,,,,,	1.3								1.1				
9	X	24 hrs	68,200		1.3			-					1.1				
10	X	24 hrs	75,050 55,800		1.3		!	-				<u> </u>	1.0				
11 12		24 hrs 24 hrs	48,800		1.3												
13	X	24 hrs	48,800		1.3			<u> </u>	,—				1.0	<u> </u>		``	
14	X	24 hrs	44,700		1.3			-					1.0				
15	X	24 hrs	46,500		1.4								1.0				
16	X	24 hrs	47,600		1.4		·						1.2				
17-	X	24 hrs	50,400		1.4								1.1				
18	Х	24 hrs	47,500		1.5	-											
19		24 hrs	88,200														
20	X	24 hrs	88,200		1.2								0.9				
21	X	24 hrs	49,500		1.4								1.0				
22	X	24 hrs	57,200		1.3					ļ			1.0		,		
23	X	24 hrs	53,800		1.3			<u> </u>				ļ	1.0				
24	X	24 hrs	69,600		1.3						ļ	ļ	1.1	ļ			
25	Х	24 hrs	66,900		1.3			ļ						 -			
26		24 hrs	71,050				 				ļ	<u> </u>	1.2				
27	X	24 hrs	71,050		1.4		-						1.2				
28	X	24 hrs	66,700		1.3			-				 	1.1	 			
29	X	24 hrs	68,600		1.4			<u> </u>					1.1				
30	Х	24 hrs	45,400		1.4		 			 			1.4				
Total	5, 7, 14, 15, 15,	24 hrs	1,878,000		L		J	L	L	L	l	<u> </u>	I	<u> </u>			
TOM	SE COLOR OF SERVICE		1,070,000														

88,200

Maximum

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



See page 4 for instructions General Information for the Month Year of: October-04 A. Public Water System (PWS) Information PWS Name: PWS Identification Number: 3350655 Kings Cove PWS Type: X Community Transient Non-Community Consecutive Non-Transient Non-Community Number of Service Connections at End of Month: 207 Total Population Served at End of Month: 725 PWS Owner: Agua Utilities Florida Contact Person: Brian Heath Contact Person's Title: Area Manager - Florida Contact Person's Mailing Address: Zip Code: 34748 2315 Griffin Road, Suite 4 City: Leesburg State: FL 352/787-6333 Contact Person's Telephone Number: 352/787-0980 Contact Person Person's Fax Number: Contact Person's E-Mail Address: beheath@aguaamerica.com B. Water Treatment Plant Information (352) 369-4881 Plant Name: Kings Cove Plant Telephone Number: Zip Code: 34788 Plant Address: Corner of Picciola Road & Twin Palms Leesburg State: FL City: Type of Water Treated by Plant: X Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 378,000 Plant Class (per subsection 62-699.310(4), F.A.C.) Plant Category (per subsection 62-699.310(4), F.A.C.): Licensed Operators License Class License Number Day(s)/Shift(s) Worked Name Lead/Chief Operator: 6813 6 Days per week \mathbf{C} Will Fontaine C6597 6 Days per week Other Operators: John Worrell II. Certification by Lead Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge. I certify that all drinking water treatment chemicals used at thisplant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Futhermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years. C6813 Will Fontaine

Page 1

License Number

Printed or Typed Name

Signature and Date

											118,000		w w	mmixs N
											12,113	Mari u L		Average
											2,328,500	17 T. V. C.		[EJO]
		ļ	<u> </u>			ļ			<u></u>		000,27	24 hrs		31
			ļ			↓			1.2		004,001	24 hrs	X	≥ 0€
	6.0						<u> </u>		1.2		002,97	24 hrs	X	67
4.00	6.0	ļ							11		73,100	24 hrs	X	87
	1	<u> </u>							7.1		118,000	24 hrs	X	L7
	8.0								1.1		72,700	24 hrs	X	. 97
	8.0		<u> </u>						1.2		85,200	24 hrs	X	52
		<u> </u>	<u> </u>	ļ							85,200	24 hrs		ુ ≱7
		<u> </u>							1.3		001,07	24 hrs	X	73
	1.0	<u> </u>	<u> </u>			↓			<u> t'I </u>		000,45	24 hrs	X	77
	0.1	ļ		1	Ĺ	1	Ĺ		1.3		007,08	24 hrs	X	71
	0.1		<u> </u>						7.1		005,20	24 hrs	X	70
	1.0				<u> </u>				1.2		45,100	24 hrs	X	61
	6.0								7.1		001,67	24 hrs	X	8 I
											001,67	24 hrs		LI.
									1.1		004,69	24 hrs	X	- 9I
	8.0	<u> </u>							1.1		006'L9	24 hrs	X	SI
	0.1								1.2		009'19	24 hrs	X	ÞΙ
	1.0		L						1.2		007,23	24 hrs	X	13.0
	1.1		<u> </u>						€.1		901,08	24 hrs	X	12 ×
	0.1				<u> </u>				1.3		94,500	24 hrs	X	in II.
					<u> </u>						94,500	24 hrs		10
									Þ'I		110,100	24 hrs	X	6
- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	1								£.1		000°5L	24 hrs	X	8
	1					ļ			1.3		006,09	24 hrs	X	L.
	2.1								p.I		00£'£9	24 hrs	X	9
	1.1								1.4		009'79	24 hrs	X	S =
	1.1		L						1.3		94,200	24 hrs	X	
			1			L					94,200	24 hrs		3.
		<u> </u>				ļ			p.I		48,900	24 hrs	X	-7
Water System Components Out of Operation	System, mg/L	zec/cm2	sectent	J/nim-gm					1.3		62,200	24 hrs	X	- PF
Emergency or Abnormal Operating Conditions: Repair of Maintenance Work that Involves Taking	1.000csi Skesidual Disinfectant Concentration st Romote st Romote Point in Point in Distribution	Kedmical Munimum Munim	Wm. Security	gedm.eq CL Mummm Mummm	PH of August Aug	Temp of Water,	Ations ations are a stored or Provided Before or at Pirst Customer During Peak Flow, mg-min/L	OT Calcul- Dismicedant Contact Time (I) at C Measurement Point During Peak Flow, minutes	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Peak Flow Raie, gpd	Met Quantity of Finished Water Water	Hours Plant in Operation	Days Plant Staffed or Visited by Operator (Place	Day of, the
The state of the s	Piomo) amici					он-1 оч	4 stentanoma(7 of 920G VU 10	CT Calculations,					
amines) Chlorine Dioxide	stoldO) anitolr	n banida			Free Chlo	<u>L</u>				nitudintsiQ r	ii baniainiaM la			
(02.00.000.000.000.000.000.000.000.000.0								:(Other (Describe			Radiation		
Combined Chlorine (Chloramines)	Duoz		əbixoi	Chlorine D		эпітоІЛ	D 9914			məA\noitsi\	ritəsal zuriV go.			
									October-04		h Year of:	or the Mont	l mad g	ligO .III
1						Э	Kings Cov	Plant Name:	I	CCOUCEE	1.	iou ianiioci	cumear.	DECMA

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



See page 4 for instructions

1. General Information for

1. General Information f	for the Month Year of: November-04				
A. Public Water System	(PWS) Information				
PWS Name:	Kings Cove		PWS Identific	cation Number:	3350655
	☐ Non-Transient Non-Com	munity	Transient Non-Commur	nity Con	nsecutive
Number of Service Con	nections at End of Month: 207		Total Population Served a	t End of Month:	725
	Aqua Utilities Florida				
	Brian Heath		Contact Person's Title:	Area Manager - Florida	
Contact Person's Mailin			City: Leesburg		Zip Code: 34748
Contact Person's Teleph			Contact Person Person's F	ax Number:	352/787-6333
Contact Person's E-Mai					
B. Water Treatment Pla	nt Information				
	Kings Cove		Plant Telepho		(352) 369-4881
	Corner of Picciola Road & Twin Palms		City: Leesburg	State: FL	Zip Code: 34788
Type of Water Treated		rchased Finished Wa	iter		
		378,000			
Plant Category (per sub	bsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection		Ĉ
Licensed Operators	Name	License Class	License Number	Day(s)/S	Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	С	6813	6 Da	ys per week
Other Operators:	John Worrell	С	6597	6 Da	ys per week
allignatora in exci					
F467-11-11-11-11-11-11-11-11-11-11-11-11-11					
ANT TOTAL					
为 [1] [1] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2					
	No. 11 and 12 an				
II. Certification by Lead					
I, the undersigned water	treatment plant operator licensed in Florida, am the lead/	chief operator of the	ne water treatment plant is	dentified in Part I of thi	is report. I certify that the
	this report is true and accurate to the best of my knowled				
	0 or other applicable standards referenced in subsection 6				
	n day that a licensed operator staffed or visited this plant of				
	le, appropriate treatment process performance records. F			ai operations records to	the Pws owner so the Pws
owner can retain them, to	ogether with copies of this report, at a convenient location	n for at least ten ye	ars.		
	Well 6			0(912	
6	Will Fontaine			C6813	
Signature and Date	Printed or Typed Name	e		License Number	

PWS I	lentificat	ion Numbe	r:		Plant Name:	Kings Cov	⁄e										
III. Dai	ly Data f	or the Mon	th Year of:		November-04								·				
		ving Four-Let Radiation	Log Virus Inacti	viation/Rem	oval: * Other (Describ	۵)،	Free (Chlorin	e 🗌	Chlorine I	Dioxide		Ozone	Combined Cl	ılorine (Chloramines)	
			ual Maintained i	in Dietributic		<u>e).</u>			Free Chl	lorine	T Co	mhined C	Chlorine (Chlor	ramines)	$\neg \neg$	Chlorine Dioxie	de
Турс о	Distille	ctant icesia	l viamamed	Distribute		, or UV Dose, to	Demonstrate I	Cour-Los					mornie (Cinor	armics)			
	D		10 mm	ole	Cr Calcaptions	CT Calcu			, virus illuctiv			Dose :	計画 多马				
	Days Plant			100			Lowest CT		Augusta de		14. 152344		Lowest				45 -
	Staffed				Lowest Residual	Disinfectant	Provided				2.0		Residual				
	or			1 2	Disinfectant	Contact Time	Before or			19 - ELLA			Disinfectant				
14, 25, 1	Visited	***		75 \ 5	Concentration	(T) at C	at First	が、用力でも となったが			Lowest	Minimum	Concentration	13447ag.			
	by		Net Quanity		(C) Before or at	Measurement	Customer	Temp.		- Minimum			at Remote		1.0	Table Sale	
Day of	Operator	Hours	of Finished		First Customer	Point During	During	of ,	pH of	cr .	UV Dose,	Required;	Point in			l Operating Condition	
the Month	(Place "X")	Plant in Operation	Water Produced, gal	Peak Flow Rate, gpd	During Peak Flow, mg/L	Peak Flow, minutes	Peak Flow, mg-min/L	Water, C	Water, if Applicable	Required, mg-min/L	mW- sec/cm2	mW sec/cm2	Distribution System, mg/L			ork that Involves Ta	
1	X	24 hrs	221,400	Katc, gpa	1.1	, minutes	- mg-mive		Applicable	ing-innvi	SCOCIIIZ	SCOULTZ	0.8	water System	п сопроп	cus ou onoperati	Outerstan
2	X	24 hrs	85,800	T	1.2		†	 	<u> </u>	 	 		0.8	-			
3.0	Х	24 hrs	118,500		1.2		· · · · · ·						0.9	1			
4	X	24 hrs	116,900		1.2					<u> </u>			1.0				
5	X	24 hrs	77,500		1.2			I					_ 1				
6	X	24 hrs	96,900	ļ	1.3		ļ				<u> </u>						
7		24 hrs	101,300	ļ			ļ			ļ	ļ						
- 8	X	24 hrs	101,300	 	1.2		ļ						0.8	<u> </u>			
- 9	X	24 hrs	59,400		1.2	ļ		ļ					0.9				
÷10	X	24 hrs 24 hrs	103,100 88,400	 	1.4	ļ	<u> </u>	 		 	 	 	1.1	 			
12	X	24 hrs	93,000		1.3	 	<u> </u>			 	ļ		0.9				
13	X	24 hrs	87,500		1.2	 	†			 	 		<u> </u>	<u> </u>			
14		24 hrs	82,600	 -									·····	1			
15	X	24 hrs	82,600		1.1						†		0.9				
16">	X	24 hrs	57,400		1.4								1.1				
17	X	24 hrs	87,100		1.3								1.1				
18	X	24 hrs	93,300	<u> </u>	1.1	<u> </u>	ļ			ļ	ļ	<u> </u>	0.8	 			
19	X	24 hrs	65,900		1.1		ļ						0.8				
20	X	24 hrs	98,500		<u> </u>	ļ				<u> </u>	ļ	<u> </u>					
21		24 hrs	75,750	-			ļ			ļ		ļ	0.7	 			
22	X	24 hrs 24 hrs	75,750 63,300	 	1 1	ļ	 			 	 	 	0.7				
24	X	24 hrs	95,600				 	 -		 		 	0.7	 			
25	X	24 hrs	60,900		0.8	 	 		 	 	 	 	0.5				
26	X	24 hrs	79,700	 	0.9	<u> </u>	†		 	 	 	t	0.7				
27	X	24 hrs	76,400		0.8		<u> </u>	1			1		0.6				
28		24 hrs	70,150														
29	_ X	24 hrs	70,150		1								0.8				
30	X	24 hrs	60,900		1.1								0.8				
31		24 hrs					<u> </u>	<u> </u>	L	<u> </u>	<u> </u>	<u> </u>	1	<u> </u>			
Total :-	135 14513		2,647,000	1													

221,400

Maximum

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



See page 4 for instructions								
I. General Information f	for the Month Year of: Decemb	er-04						
A. Public Water System	(PWS) Information							
	Kings Cove		-		PWS Identif	ication Numb	er: 335	50655
	X Community Non-Transie	nt Non-Con	nmunity	Transi	ient Non-Commu	nity	Conse	cutive
	nections at End of Month: 207			Total Po	pulation Served	at End of Mor	nth: 725	5
PWS Owner:	Aqua Utilities Florida							
Contact Person:	Brian Heath			Contact	Person's Title:	Area Manag	ger - Florida	
Contact Person's Mailin				City:	Leesburg			Code: 34748
Contact Person's Teleph	none Number: 352/787-0980			Contact	Person Person's I	Fax Number:	352	2/787-6333
Contact Person's E-Mai	l Address: <u>beheath@aquaameri</u>	ca.com						
B. Water Treatment Pla	nt Information							
Plant Name:	Kings Cove	7.3			Plant Teleph	one Number:	(35	52) 369-4881
	Corner of Picciola Road & Twin Palms			Cîty:	Leesburg	State:	FL Zip	Code: 34788
Type of Water Treated	by Plant: X Raw Ground Water	Pt Pt	urchased Finished Wa	ater			·	
Permitted Maximum D	Day Operating Capacity of Plant, gallons per day:		378,000					
Plant Category (per sub	osection 62-699.310(4), F.A.C.): V				ass (per subsection	on 62-699.310)(4), F.A.C.)	C
Licensed Operators	Name		License Class	Lic	ense Number		Daÿ(s)/Shif	ft(s) Worked 🧈 💸 🖟
Lead/Chief Operator:	Will Fontaine		С		6813	!	6 Days	per week
Other Operators:	John Worrell		С		6597			per week
	Marty Neal		С		10027		6 Days	per week
TAGER ME TO ME NOT								
				<u> </u>		<u> </u>		
			<u></u>	<u></u>		<u> </u>		
 Certification by Lead 	Chief Operator							
I, the undersigned water	treatment plant operator licensed in Florida, a	ım the lead	/chief operator of th	ne water i	treatment plant	identified in	Part I of this re	eport. I certify that the
information provided in	this report is true and accurate to the best of n	ny knowlec	loe I certify that al	l drinkin	g water treatme	nt chemicals	used at thispla	ant conform to NSF
	0 or other applicable standards referenced in s							
-14	Jor other appricable standards referenced in s	1 41-114	02-333.320(3), 1 .74. .:	.C. Taisc	obaves (1) reach	de of amoun	ts of chamical	s used and chemical feed
	day that a licensed operator staffed or visited							
	le, appropriate treatment process performance				de these addition	nai operatior	is records to th	e PwS owner so the Pw.
owner can retain them, to	ogether with copies of this report, at a conven	ient locatio	on tor at least ten ye	ars.				
	Will Fonta					C6813		
Signature and Date	Printed or	Typed Nam	ne			License Nu	mber	

											005,76	1 1		umixeN
											740'69			Average
	••••					.					2,140,300			IsioT
	6.0					↓			£.1	ļ	004,28	24 hrs	X	- 16
	6.0				ļ	ļ	ļ	<u> </u>	1.1		25,200	24 hrs	X	30
	6.0		ļ	ļ	<u> </u>	ļ			11		004,87	24 hrs	X	56
	1.1		1		ļ	<u> </u>			ÞΊ		005,59	24 hrs	X	82
	[1			<u> </u>	<u> </u>	ļ			£'1		008,64	24 hrs	X	7.7
				ļ				ļ	tΊ		96,200	24 hrs	X	- 97
		<u> </u>		ļ <u>.</u>		ļ		<u> </u>	<u></u>		001'95	24 hrs	<u> </u>	52
	0.1		<u> </u>	<u> </u>		.			£.1		000,52	24 hrs	X	74
	2.0	ļ			<u> </u>	ļ		ļ	8.0		005,00	24 hrs	X	23
	8.0	<u></u>	ļ	ļ <u>.</u>		_			1		00€,78	24 hrs	X	-77
	8.0		<u></u>						1.1		009,12	S14 hrs	X	-21
	8.0			ļ	<u> </u>				7.1		00£,87	24 hrs	X	50
											00Zʻ9L	24 hrs		61
					l	<u> </u>			I		71,200	24 hrs	X	81
	L'0			L				<u></u>	I .		004,69	24 hrs	X	LI
	1.0							L	2.1		006,68	24 hrs	X	91.
	8.0					<u> </u>			11		000,48	24 hrs	X	ST
	1.1		i .	l		<u> </u>		L	7.1		001,84	24 hrs	X	ÞΙ
	8.0		1			1		L	1.1		005,88	24 hrs	X	EI
						<u> </u>		L			002,86	24 hrs		15
						<u> </u>			TT		007,17	24 hrs	X	H
	6.0						I		1.2		001,76	24 hrs	X	01
	8.0			I					I		005'17	24 hts	X	6
	8.0		i						l		005,76	S.14 P.Z	X	- 8
	I								2.1		52,800	24 hrs	X	- L
	8.0								ľľ		001,17	24 hrs	X	9
											001,17	24 hrs		. · S
									1.2		001,68	24 hrs	X	.
	8.0	<u> </u>							I		005'18	24 hrs	X	ε
	8.0								I		007,26	24 hrs	X	- \ .7 .:-
	9.0								6.0		008,18	24 hrs	X	48.4 1 - 2.
Timegency or Abnormal Operating Conditions: Repair or Mainfenance Work that Involves Taking Water System Components Out of Operation	Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Minimum UV-Dose Required Mm sec/cm2	Lowest Operating UV Dose, INW- sec/cm2	Minimum CT Required Medianed	pH of Water, if	C Mater Temp	Provided Before or at First Customer During Peak Flow, ngare	Disinfectant Contact Time (1) at C Measurement Point During Peak Flow, minutes	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Peak Flow Rate, gpd	Met Quanity of Finished Water Water	Hours Plant in Operation	Staffed or Visited by Operator (Place	Day of. sati
	isamo [art s				go.1-wo	ations Lowest CT	or UV Dose, to D CT Calcula	CT Calculations,				Plays Plant	
Chlorine Dioxide	hlorine (Chlora	O bənidm	Col	enine	Free Chlo			 		oitudintsiQ n	ii bənistnisM lsı			
Combined Chlorine (Chloramines)	Sone	D [əbixoi	Chlorine D		hlorine	Free C	:(: 			vitaent suniV go.		eidəA To	Means
									Ресешрет-04		ilo neo f d	or the Mont	Lena Cyl	igO JII
						ə	Kings Cov	Plant Name:		3330655		iədmuN noi	entificat	PI SMd

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



See page 4 for instructions

I. General Information f	or the Month Year of: January-05				
A. Public Water System	(PWS) Information				
	Kings Cove		PWS Identifi	cation Number:	3350655
	▼ Community	munity	Transient Non-Commu	nity 🔲	Consecutive
	nections at End of Month: 207		Total Population Served a	nt End of Month:	725
	Aqua Utilities Florida				
	Brian Heath		Contact Person's Title:	Area Manager - Flo	
Contact Person's Mailin			City: Leesburg	State: FL	Zip Code: 34749
Contact Person's Teleph			Contact Person Person's I	ax Number:	(352) 787-6333
Contact Person's E-Mai					
B. Water Treatment Pla					
	Kings Cove		Plant Teleph		(352) 787-0980
	Corner of Picciola Road & Twin Palms		City: Leesburg	State: FL	Zip Code: 34788
Type of Water Treated		rchased Finished Wa	ter		
	7 1 9 1 7 7 1 7	378,000			
	osection 62-699.310(4), F.A.C.): V	9	Plant Class (per subsection		
Licensed Operators	Name	License Class	License Number		y(s)/Shift(s) Worked 基础
Lead/Chief Operator:	Will Fontaine	С	6813		6 Days per week
Other Operators:	John Worrell	C	6597		6 Days per week
	Marty Neal	С	10027		6 Days per week
				<u> </u>	
			<u> </u>	<u> </u>	
II. Certification by Lead	Chief Operator				
	•	.1		dontified in Dort L	of this remark. I cortify that the
i, the undersigned water	treatment plant operator licensed in Florida, am the lead/	chief operator of th	ie water treatment plant	identified in Part I	of this report. I certify that the
information provided in	this report is true and accurate to the best of my knowled	ge. I certify that al	drinking water treatmen	nt chemicals used a	it thispiant conform to NSF
International Standard 60	0 or other applicable standards referenced in subsection 6	2-555.320(3), F.A.	C. I also certify that the	following addition	al operations records for this
plant were prepared each	a day that a licensed operator staffed or visited this plant of	during the month in	ndicated above: (1) recor	ds of amounts of cl	hemicals used and chemical feed
rates; and (2) if applicab	le, appropriate treatment process performance records. F	uthermore, I agree	to provide these addition	nal operations recor	rds to the PWS owner so the PWS
owner can retain them, to	ogether with copies of this report, at a convenient location	n for at least ten ye	ars.		
•	•	-			
	Will Fontaine			C6813	
Signature and Date	Printed or Typed Name			License Number	

PWS Id	entificat	tion Number	Τ.	3350655		Plant Name:	Kings Cov	ve							
III. Dai	III. Daily Data for the Month Year of: January-05														
			og Virus Inactiv	viation/Remo	oval: *		Free 0	Chlorin	e 📗	Chlorine I	Dioxide		Ozone	Combined Chlori	ine (Chloramines)
		et Radiation			Other (Describe	e):									
Type of	Disinfe	ctant Residu	ual Maintained i	n Distributio	n System:				Free Chl	orine	Co	mbined C	hlorine (Chlor	amines)	Chlorine Dioxide
						, or UV Dose, to			y Virus Inactiv	ation, if Appl			20 February 20	が数をなってす。	
-	Days					CT Calcu	lations					Dose 🖟		建筑场 线	
	Plant		11			广 路上,2007年	Lowest CT				r ren iet	100	Lowest Residual Disinfectant		
100000000000000000000000000000000000000	Staffed				Lowest Residual	Disinfectant ;	Provided				1 1 1 1 1 1 1	1 7 7	Residual (
	or ·		5 to 10 to 1		Disinfectant	Contact Time	Before or						Disinfectant		
	Visited		N-4 O		Concentration (C) Before or at	(T) at C Measurement	at First	1.24			Lowest	Minimum	Concentration	17 34 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
Day of	by Operator	Hours	Net Quanity of Finished		First Customer	Point During	Customer. During	Temp.	pH of Water	Minimum CT	Operating UV Dose,	UV Dose	at Remote		ormal Operating Conditions,
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow.	Water	if	Required,	mW-	mW -	Dietribution	EDerrair or Maintenan	ice Work that Involves Taking:
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	C	Applicable		sec/cm2	sec/cm2	System mg/L	Water System Co	emponents Out of Operation
1 3		24 hrs	82,950	,,,,,					1						
2	X	24 hrs	82,950		1.1			İ							
3	X	24 hrs	72,900		1.3								1		
21 ,- 🤾	X	24 hrs	53,700		1.4								1.2		
- 5	X	24 hrs	104,800		1.5					ļ			1.2		
6	X	24 hrs	68,400		1.5				<u> </u>	ļ		ļ	1.2		
7 /	X	24 hrs	60,100		1.4			<u> </u>	 	.	<u> </u>		1		
8	X	24 hrs	105,700		1.4			ļ	 		-				
10	X	24 hrs 24 hrs	66,600	 	1.5			 	 				1.3		
11	X	24 hrs	46,900		1.7	 		 	ļ		 		1.4		
12.	X	24 hrs	87,800	 	1.4								1.2		
13	X	24 hrs	57,500	ļ · · · · · · · · · · · · · · · · · · ·	1.3			1 -					1.0		· · · · · · · · · · · · · · · · · · ·
14	X	24 hrs	58,600		1.4		_						1,1		
15	X	24 hrs	56,100		1.5										
16 ≝		24 hrs	56,550												
17	X	24 hrs	56,550		1.6			ļ <u> </u>					1.3		· · · · · · · · · · · · · · · · · · ·
18	X	24 hrs	52,200	ļ	1.6			ļ	 		ļ	!	1.4		
19 20	X	24 hrs	74,900 58,900		1.3			ļ			 	 	1.1		
21	X	24 hrs 24 hrs	59,700	 	1.5			 					1.0		
22	^	24 hrs	69,700		1.2		<u> </u>	<u> </u>			 	 	1.0		
23	X	24 hrs	69,800		1.4			 	<u> </u>		<u> </u>				
24	X	24 hrs	71,500		1.6			 					1.3		
25	X	24 hrs	41,300	1	1.3			†					1.1		
26	X	24 hrs	72,100		1.2								0.9		
27 ÷	X	24 hrs	56,000		1.4								1.1		
28	X	24 hrs	59,800		1.2								1		
29	X	24 hrs	78,700		1.1						<u> </u>	L			
30		24 hrs	74,550							L	1		l		
31	X	24 hrs	74,550		11	<u>t</u>		Ь	<u>i</u>	L		L	0.8	L	
Total			2,098,400	4											
Average	3		67,690												

105,700

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



See page 4 for instructions February-05 I. General Information for the Month Year of: A. Public Water System (PWS) Information PWS Name: 3350655 Kings Cove PWS Identification Number: X Community PWS Type: Non-Transient Non-Community Transient Non-Community Consecutive Number of Service Connections at End of Month: 714 204 Total Population Served at End of Month: PWS Owner: Aqua Utilities Florida Brian Heath Contact Person: Contact Person's Title: Area Manager - Florida Contact Person's Mailing Address: PO Box 490310 Zip Code: 34749 City: Leesburg State: FL. Contact Person's Telephone Number: (352) 787-0980 Contact Person Person's Fax Number: (352) 787-6333 Contact Person's E-Mail Address: beheath@aguaamerica.com B. Water Treatment Plant Information Plant Name: Kings Cove (352) 787-0980 Plant Telephone Number: Zip Code: 34788 Plant Address: Corner of Picciola Road & Twin Palms City: Leesburg State: FL Type of Water Treated by Plant: X Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 378,000 Plant Category (per subsection 62-699.310(4), F.A.C.): Plant Class (per subsection 62-699.310(4), F.A.C.) Day(s)/Shift(s):Worked Licensed Operators Name License Class License Number 6 Days per week Lead/Chief Operator: Will Fontaine \mathbf{C} 6813 Other Operators: 6 Days per week John Worrell C 6597 6 Days per week Marty Neal C 10027 特额 医乳泡 计有效设置 II. Certification by Lead Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge. I certify that all drinking water treatment chemicals used at thisplant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Futhermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years. Will Fontaine C6813 License Number Printed or Typed Name Signature and Date

Page 1

DEP Form 62-555.900(3)Alternate

PWS Id	PWS Identification Number: 3350655 Plant Name: Kings Cove													
III. Dai	III. Daily Data for the Month Year of: February-05													
Means of Achieving Four-Log Virus Inactiviation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)														
		et Radiation	og i nus mueni		Other (Describe	٠)٠						لسبية	_	, i
			nal Maintained in	n Distributio		-7-			Free Chle	orine.	Co	mbined C	nlorine (Chlora	amines) Chlorine Dioxide
Type of	Distinc	Ctant reside	iai Maintairied i		CT Calculations	or HV Dose to I	Demonstrate F	OUT-L OO						
7 dese				100000000000000000000000000000000000000		CT Calcu	lations	our rop	, Thus Macutt		- ∜uvi	Dose #	ie i	
	Days Plant				Frencia Cons		Lowest CT	Angele :			·		Lowest 1	
1	Staffed				Lowest Residual	- Disinfectant	Provided						Residual	ALTERNATION OF THE PROPERTY OF
100	or				Disinfectant	Contact Time	Before or	7				- 1	Disinfectant	
- 3	Visited				Concentration (→ (T) at C	at First				Lowest	Minimum	Concentration	
	by	anggiik en A	Net Quanity		(C) Before or at	Measurement	Customer	Temp.		Minimum	Operating	UV Dose	at Remote	
Day of the	Operator (Place	Hours Plant in	of Finished Water	Peak Flow	First Customer During Peak	Point During Peak Flow,	During Peak Flow,	of Water,	pH of Water,	CT Required,	UV Dose,	Required, mW	Point in Distribution	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	C C	Applicable	mg-min/L	sec/cm2	sec/cm2	System mo/L	Water System Components Out of Operation
12.4	X	24 hrs	61,200	rano, gpa	1.5	IIIII IIII IIII IIII IIII IIII IIII IIII			Тфрисион			., and 4-1	1.2	
2	X	24 hrs	94,800		1.1						T		0.8	
3	X	24 hrs	60,800		1.1								0.8	
4	X	24 hrs	49,900		1.4								1.2	
5		24 hrs	75,900						ļ					
6	X	24 hrs	75,900		1.3									
7	X	24 hrs	75,700	_	1.2				ļ				0.9	
8	X	24 hrs	57,200		0.8								0.7	
10	X	24 hrs 24 hrs	95,600 75,200		1.2								0.7	
11	X	24 hrs	58,900		1.2								0.8	
12	X	24 hrs	77,500		1.8				 				1.5	
-13		24 hrs	85,900				· · · · · · · · · · · · · · · · · · ·							
14	X	24 hrs	86,000		2								1.8	
15	X	24 hrs	74,800		1.8								1.6	
16	X	24 hrs	113,600		1.5								1.1	
17	X	24 hrs	80,600		1.7				 -				1.1	
18	X	24 hrs	71,000		1.5	 		-	 	_	 		1.1	
19	X	24 hrs 24 hrs	141,100 92,450		1.5			 	 		 			
21	X	24 hrs	2,450		1.6			 	 			 	1.3	
22	X	24 hrs	86,500		1.6				†	 	<u> </u>	†	1.3	
23	X	24 hrs	114,100		1.6				T				1.2	
24	X	24 hrs	91,500		1.7				T .				1.4	
25	X	24 hrs	81,400		1.4								1.2	
26	X	24 hrs	86,400		1.5									
27		24 hrs	72,650				, , , , , , , , , , , , , , , , , , , ,		ļ		ļ			
28	X	24 hrs	72,650		1			<u> </u>	ļ	<u> </u>	 		0.8	
29		24 hrs						<u> </u>	<u> </u>			-		
30 31		24 hrs				1		 	 			 		
Total	\$ 50 Se	24 hrs	2,211,700		<u> </u>	L	1	Ц	1			1	L	<u></u>
Average			78,989	1										

141,100

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



See page 4 for instructions					
I. General Information f	for the Month Year of: March-05				
A. Public Water System	(PWS) Information				
PWS Name:	Kings Cove		PWS Identifie	cation Number:	3350655
	X Community Non-Transient Non-Com	munity	Transient Non-Commun	nity	Consecutive
	nnections at End of Month: 204		Total Population Served a	t End of Month:	714
PWS Owner:	Aqua Utilities Florida				
	Brian Heath		Contact Person's Title:	Area Manager - Flo	orida
Contact Person's Mailir	ng Address: PO Box 490310		City: Leesburg	State: FL	Zip Code: 34749
Contact Person's Teleph	hone Number: (352) 787-0980		Contact Person Person's F	ax Number:	(352) 787-6333
Contact Person's E-Mai	il Address: <u>beheath@aquaamerica.com</u>				
B. Water Treatment Pla	nt Information				
Plant Name:	Kings Cove		Plant Telepho	one Number:	(352) 787-0980
	Corner of Picciola Road & Twin Palms		1 2	State: FL	Zip Code: 34788
Type of Water Treated		rchased Finished Wa	ater		
	7 1 8 1 7 9 1 7	378,000			
	bsection 62-699.310(4), F.A.C.): V		Plant Class (per subsectio		
Licensed Operators	Name	License Class	License Number	· · · · · · · · · · · · · · · · · · ·	y(s)/Shift(s):Worked
Lead/Chief Operator:	Will Fontaine	C	6813		6 Days per week
Other Operators:	John Worrell	С	6597		6 Days per week
	Marty Neal	С	10027		6 Days per week
			<u></u>		
II. Certification by Lead	Chief Operator				
I, the undersigned water	treatment plant operator licensed in Florida, am the lead/	chief operator of the	he water treatment plant i	dentified in Part I	of this report. I certify that the
information provided in	this report is true and accurate to the best of my knowled	ge. I certify that a	ll drinking water treatmer	nt chemicals used a	at thisplant conform to NSF
	0 or other applicable standards referenced in subsection 6				
	h day that a licensed operator staffed or visited this plant of				
piant were prepared each	ple, appropriate treatment process performance records. F	Cuth ame and I acres	to provide these addition	us or amounts or c	rds to the DWS owner so the DWS
				iai operations reco	ius to the F w 5 owner so the F w 5
owner can retain them, to	ogether with copies of this report, at a convenient location	n for at least ten ye	ears.		
	Will Fontaine			C6813	
Signature and Date	Printed or Typed Name	e		License Number	

PWS Id	lentifica	tion Number	r:	3350655		Plant Name:	Kings Cov	⁄e							
III Dai	III. Daily Data for the Month Year of: March-05														
			og Virus Inactiv	viation/Remo			Free (Chlorin	e	Chlorine I	Dioxide		Ozone	Combined Chlorin	e (Chloramines)
		et Radiation			Other (Describe	e):							_		
Type o	Disinfe	ctant Residu	ual Maintained in	n Distributio	n System:				Free Chl	orine	Co	mbined C	hlorine (Chlora	amines)	Chlorine Dioxide
				State of the		, or UV Dose, to								14.76	
	Days		Justin.	and the grand	HOMESSAN STATE	CT Calcu				- WALLYN	UV)	Dose			7.12
1	Plant				Lowest Residual		Lowest CT				220		Lowest		10000
	Staffed		1	4%		Disinfectant	Provided				100		Residual	10 A	
	or Visited				Disinfectant Concentration	Contact Time (T) at C	Before or at First				Lowest	Minimum	Disinfectant Concentration		
	by		Net Quanity	1	(C) Before or at	Measurement	Customer	Temp.	100000000000000000000000000000000000000	Minimum	The second second second second	A Committee of the Comm	at Remote		
Day of	Operator		of Finished		First Customer	Point During	During		pH of Water,		UV Dose		Point in	Emergency or Abnor	mal Operating Conditions,
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,		Required,	mW-	mW	Distribution		e Work that Involves Taking
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	C	Applicable	mg-min/L	sec/cm2	sec/cm2	System, mg/L	Water System Com	ponents Out of Operation
1	X	24 hrs	58,300	ļ <u>.</u>	1		ļ	ļ	<u>_</u>			ļ	0.7		
3	X	24 hrs 24 hrs	89,400		1.3		 	ļ	<u> </u>			<u> </u>	0.7		
4	- X	24 hrs	72,600 57,200	<u> </u>	1.3		 		 	<u> </u>	ļ	 	0.9		
5	X	24 hrs	88,800		1.3		 		<u> </u>		 	 	0.8		
6		24 hrs	86,800		1		 		† — —		 	<u> </u>			
7.	X	24 hrs	86,800		1.1			ļ	<u> </u>				0.8		
8	X	24 hrs	68,200		1.1								0.8		
9	X	24 hrs	108,200		1.3								1.0		
10	X	24 hrs	59,500		1.2			ļ	ļ				1.0		
11	X	24 hrs	57,900 101,500		1.3				ļ	ļ	 	 	1.0	<u> </u>	
13	X	24 hrs 24 hrs	92,650		1.3						-	 			
14	X	24 hrs	92,650	 	1,1	<u> </u>	 		 				0.8		
15	X	24 hrs	60,300		1.1			1					0.8		,
16	Х	24 hrs	93,200		1								0.8		
17	X	24 hrs	66,300		1.2								0.9		
18	X	24 hrs	44,500		1.1			ļ <u> </u>	ļ				0.9		
19	X	24 hrs	68,400		1.1		ļ	<u> </u>			ļ				
20	X	24 hrs 24 hrs	78,950 78,950	ļ-—	1.1		ļ		 	<u></u>			0.9		
22	$\frac{\lambda}{X}$	24 hrs	53,600		1.1			 	 	 	 	 	0.8		
23	X	24 hrs	80,000		1.3		f	f			<u> </u>		1.1		
24	X	24 hrs	51,100		12				†		† · · · · · · ·		1.0		
25	Х	24 hrs	59,900		1.3								1.0		
26	X	24 hrs	68,300		1.2				<u></u>						
27		24 hrs	59,700				<u> </u>	<u> </u>	<u> </u>	ļ			<u> </u>		
28	X	24 hrs	59,700	ļ	1.4		ļ	ļ	_	<u> </u>	ļ	 	1.1		
29	X	24 hrs	58,300		1.3			 	 			 	1.1 0.9	ļ	
-30 31	X	24 hrs 24 hrs	77,200 68,100	 	1.2		 		 	 	 		0.9		
Total			2,247,000	 	1.2	l		Ц	1			1	1 0.0	1	· · · · · · · · · · · · · · · · · · ·
Average			72,484	1											

Page 2

108,200

Maximum

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



See	nage 4	tor	ins	tructions

F0					
1. General Information f	For the Month Year of: April-05				
A. Public Water System	(PWS) Information				
PWS Name:	Kings Cove		PWS Ident	ification Number:	3350655
	Community Non-Transient Non-Comm	munity	Transient Non-Comm	unity	Consecutive
Number of Service Con	nections at End of Month: 204		Total Population Served	at End of Month:	714
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath		Contact Person's Title:	Area Manager - Fl	
Contact Person's Mailin	ng Address: PO Box 490310		City: Leesburg	State: FL	Zip Code: 34749
Contact Person's Teleph	none Number: (352) 787-0980		Contact Person Person's	Fax Number:	(352) 787-6333
Contact Person's E-Mai	l Address: <u>beheath@aquaamerica.com</u>				
B. Water Treatment Pla	nt Information				
Plant Name:	Kings Cove		Plant Telep	hone Number:	(352) 787-0980
Plant Address:	Corner of Picciola Road & Twin Palms		City: Leesburg	State: FL	Zip Code: 34788
Type of Water Treated	by Plant: X Raw Ground Water Pu	rchased Finished Wa	ter		
Permitted Maximum D	Day Operating Capacity of Plant, gallons per day:	378,000			
Plant Category (per sul	bsection 62-699.310(4), F.A.C.): V		Plant Class (per subsect		
Licensed Operators	Name	License Class	License Number	A, M. P. D	ay(s)/Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813		6 Days per week
Other Operators:	John Worrell	С	6597		6 Days per week
	Marty Neal	С	10027		6 Days per week
and a similar management of the same of th					
· 为解除的结合,有本法公司					
			<u> </u>	<u> </u>	
	rati so				
II. Certification by Lead					
I, the undersigned water	treatment plant operator licensed in Florida, am the lead/	chief operator of th	e water treatment plan	t identified in Part I	of this report. I certify that the
information provided in	this report is true and accurate to the best of my knowled	ge. I certify that all	l drinking water treatm	ent chemicals used	at thisplant conform to NSF
International Standard 6	0 or other applicable standards referenced in subsection 6	62-555.320(3), F.A.	C. I also certify that the	ne following additio	nal operations records for this
nlant were prepared each	h day that a licensed operator staffed or visited this plant of	during the month in	dicated above: (1) reco	ords of amounts of o	chemicals used and chemical feed
rates: and (2) if annlicab	ele, appropriate treatment process performance records. F	uthermore Lagree	to provide these additi	onal operations reco	ords to the PWS owner so the PWS
	ogether with copies of this report, at a convenient location			ona. op	
owner can retain them, t	ogenier with copies of this report, at a convenient location	ii ioi at icast ten ye	uis.		
	Will Fontaine			C6813	
Signature and Date	Printed or Typed Name	· · · · · · · · · · · · · · · · · · ·	 	License Number	
Signature and Date	Timed of Typed Ivanie	-			

PWS lo	lentificat	ion Number	r:	3350655		Plant Name:	Kings Cov	/e							
III. Dai	III. Daily Data for the Month Year of: April-05														
		ving Four-L et Radiation	og Virus Inacti	viation/Remo	oval: * Other (Describe		X Free (Chlorin	e 🗌	Chlorine I	Dioxide		Ozone	Combined Chlorine (Chloramines)	
			ual Maintained i			·/·		X	Free Chl	orine	Co	mbined C	hlorine (Chlora	amines) Chlorine Dio	xide
- 7 - 3	2.843.3			I		, or UV Dose, to I	Demonstrate 1					r ∰		amines) Chlorine Dio	GEO LA C
	Days				Taker Salar (19				A PORT OF STREET		UV	Dose #			
	Plant			2 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m	1900 5 486 %	Marketter	Lowest CT	die se	A PARTIE VI		700 14 - Wali Sillia 15 July 15 July 1	70.09	Lowest		
	Staffed			Para di Santa	Lowest Residual	Disinfectant	Provided		F FELLEY W				Residual'		
10. 20. 20. 20. 20. 20. 20. 20. 20. 20. 2	or				Disinfectant	Contact Time	Before or		\$1.72 mg				Disinfectant		国内公司
143 5	Visited				Concentration	(T) at C	at First				Lowest	Minimum	Concentration		
	by -		Net Quanity		(C) Before or at	Measurement.	Customer	I Temb.	132 E. S.	Minimum,	Operating		at Remote	TO THE RESIDENCE OF THE PARTY O	A dist
Day of	Operator	Hours	of Finished		First Customer	Point During	During.	of,	pH of Water,	CT	UV Dose,	Required,	Point in 🐬	Emergency of Abnormal Operating Cond	
the Month	(Place "X")	Plant in Operation	Water Produced, gal	Peak Flow Rate, gpd	During Peak Flow, mg/L	Peak Flow, -	Peak Flow, mg-min/L	Water,	Applicable	Required, mg-min/L	mW- sec/cm2	mW sec/cm2	Distribution System, mg/L	Repair or Maintenance Work that Involves Water System Components Out of Oper	
1	X	24 hrs	64,600	Raic, gpu	1.1	minucos	-mg-murc	38000	Applicable	ing-mut	SCOULIZ	SC/CIIZ	0.8	Water System Components Out of Oper	auon
2 -	X	24 hrs	76,900		1.3			†	 				0.0		
3-		24 hrs	66,400											· · · · · · · · · · · · · · · · · · ·	
- 4	Х	24 hrs	66,400		1							<u> </u>	0.7		
5	X	24 hrs	67,700		1								0.7		
- 6	X	24 hrs	117,800		1								0.8		
· 7	X	24 hrs	110,900		11			ļ					0.7		
-8	X	24 hrs	62,200	ļ	1								0.8		
9	X	24 hrs	65,500	-	1.1			ļ			 				
10	X	24 hrs 24 hrs	100,700		ļ		<u> </u>	1			 	 	0.7		
12	X	24 hrs	65,400		1			 				 	0.7		
13	X	24 hrs	135,200		1.1			1				 	0.8		
14	X	24 hrs	103,500		0.9			†					0.7		
15	Х	24 hrs	78,000		0.9	-							0.6		
16	X	24 hrs	118,700		1.1										
17		24 hrs	110,750												
18	X	24 hrs	110,750		0.8			ļ					0.6		
19	X	24 hrs	93,100		1.1			<u> </u>	<u>. </u>		<u> </u>	ļ	0.8		
20	X	24 hrs	159,400	ļ	1			 -				 	0.7		
21	X	24 hrs 24 hrs	122,400 126,400	 	1			1			<u> </u>		0.8	· · · · · · · · · · · · · · · · · · ·	
*23	^_	24 hrs	137,200		1			 					0.0		
24	X	24 hrs	137,300	 	1			†			 	1	-	***	
25	X	24 hrs	89,900	<u> </u>	1			1				1	0.7		
26	X	24 hrs	82,200		1				1				0.8		
27=	X	24 hrs	76,600		1								0.8		
28 -	Х	24 hrs	85,600		0.9								0.7		
29	X	24 hrs	87,100		1		ļ <u>.</u>				ļ	ļ	0.7		
30 ₹		24 hrs	111,700			ļ		—				ļ			
31		24 hrs		<u> </u>	L	l	L	<u> </u>	1	<u> </u>	1	L	<u> </u>		
	Y YAVEN		2,931,000	4											
Average			97,700	I											

159,400

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



See	page	4	for	instructions

 General Information f 	for the Month Year of:	May-05						
A. Public Water System	(PWS) Information							
PWS Name:	Kings Cove				PWS Identific	cation Number:	3350655	
	X Community	Non-Transient Non-Com	munity 🔲	Transie	nt Non-Commun	nity	Consecutive	
	nections at End of Month:	204		Total Popu	ulation Served a	t End of Month:	714	
	Aqua Utilities Florida							
	Brian Heath			Contact Po	erson's Title:	Area Manager -	- Florida	
Contact Person's Mailin				City:		State: FL	Zip Code:	34749
Contact Person's Teleph		787-0980		Contact Po	erson Person's F	ax Number:	(352) 787-63	333
Contact Person's E-Mai		th@aquaamerica.com						
B. Water Treatment Pla	nt Information							
	Kings Cove				Plant Telepho	ne Number:	(352) 787-09	
	Corner of Picciola Road & Twin			City:	Leesburg	State: FL	Zip Code:	34788
Type of Water Treated			rchased Finished Wa	ater				
	Day Operating Capacity of Plant,	gallons per day:	378,000					
	osection 62-699.310(4), F.A.C.):	V			s (per subsection	n 62-699.310(4)	, F.A.C.) <u>C</u>	
Licensed Operators	Nam	e	License Class	Licen	se Number	113	Day(s)/Shift(s):Work	ed
Lead/Chief Operator:	Will For	taine	С		6813		6 Days per week	
Other Operators:	John We	orrell	С		6597		6 Days per week	
	Marty 1	Veal	С		10027		6 Days per week	
· 公司等的 [1]								<u> </u>
							 _	
D C 15 1 1 1								
II. Certification by Lead	Chief Operator							
I, the undersigned water	treatment plant operator licen	sed in Florida, am the lead	chief operator of th	ne water tre	eatment plant is	dentified in Pa	rt I of this report. I	certify that the
information provided in	this report is true and accurate	to the best of my knowled	lge. I certify that al	l drinking	water treatmen	t chemicals us	ed at thisplant confo	rm to NSF
	0 or other applicable standards							
	day that a licensed operator s							
	le, appropriate treatment proce				these addition	ai operations re	ecords to the PWS o	wner so the PWS
owner can retain them, to	ogether with copies of this rep	ort, at a convenient locatio	n for at least ten ye	ars.				
		Will Fontaine				C6813		
Signature and Date		Printed or Typed Name	Δ		_	License Numbe		
orgnature and Date		Finited of Typed Name	C			Piccuse Mainoc	JI	

Page 1

PWS Id	lentificat	ion Number	r;	3350655		Plant Name:	Kings Cov	e e							
	III. Daily Data for the Month Year of: May-05														
		ving Four-L et Radiation	og Virus Inactiv	viation/Remo	oval: * Other (Describe		X Free (Chlorin	e 🗌	Chlorine I	Dioxide		Ozone	Combined Chlorine	(Chloramines)
			ual Maintained in	n Distributio		,		X	Free Chl	orine	Co	mbined C	hlorine (Chlora	amines)	Chlorine Dioxide
	a-15/40	q ·		100	CT Calculations	, or UV Dose, to I	Demonstrate I					1.20 亚洲		STORES AND THE WAY	
11.0	Days			eranika, ka	F-41- #44	CT Calcu	lations	shkatrir s		1	UVI) Dose			
100 - 3 1 - 3 - 4	Plant	12 X Sec.		9 80 3	10 m		Lowest CT		Alexanda	医异性膜		公益成	Lowest		
	Staffed				Lowest Residual	Disinfectant	Provided	A STATE					Residual Disinfectants		
	or				Disinfectant	Contact Time	Before or						Disinfectants		
	Visited	Market Barrier			Concentration	(T) at C	at First					Minimum	Concentration	78 H.	nal Operating Conditions;
Doves	by	Hours	Net Quanity of Finished		(C) Before or at . First Customer	Measurement Point During	Customer	Temp.	_TY _E W/_A	Minimum	Operating		at Remote:	a liver in	1
Day of	Operator (Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	During Peak Flow,	of Water	pH of Water, if	CT Required,	UV Dose, mW-	Required, mW	Point in Distribution	Repair or Maintenance	Work that Involves Taking
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	C	Applicable	mg-min/L	sec/cm2	sec/cm2-	The state of the s		conents Out of Operation
1	X	24 hrs	111,700	1	0.5										······································
2	X	24 hrs	82,700		1.4								1.1		
-3	X	24 hrs	56,700		1.3								1.0		
4	X	24 hrs	123,000		1.2		ļ						1.0		
5	X	24 hrs	64,800		1.1			_					0.9		
6 *	X	24 hrs	57,200		1.1								0.8		
7	X	24 hrs	80,900		1.2			<u> </u>							
9	V	24 hrs	96,700		1.2						 		<u> </u>		
10	X	24 hrs 24 hrs	96,700 89,700		1.2			-	-				0.9		
-10	$\frac{\lambda}{X}$	24 hrs	127,300	 	1.5						1	<u> </u>	1.2		
12	X	24 hrs	73,700		1.1			 	 				0.8		
13	X	24 hrs	69,300		1.3								1.0		
14	X	24 hrs	134,100		1.3		· · · · · · · · · · · · · · · · · · ·								
15		24 hrs	117,450								,				
16	X	24 hrs	11,750		1								0.8		
17	X	24 hrs	106,400		1.1								0.8		
18	X	24 hrs	177,700		1						ļ		0.7		
19	X	24 hrs	134,700		1.2		ļ						1.0		
20	X	24 hrs	120,800	ļ	1.2						 	ļ	1.0		
21 22	X	24 hrs 24 hrs	161,500 136,150		1.1		 	 	 		-	 			
-23	х	24 hrs 24 hrs	136,150		1	 	-	 				ļ	0.7		
24	X	24 hrs	100,600	· · · · · · · · · · · · · · · · · · ·	i	-							0.8	· · · · · · · · · · · · · · · · · · ·	
25	X	24 hrs	192,000		1							 	0.8		
26	Х	24 hrs	140,200	<u> </u>	1.2								1.0		
27	X	24 hrs	148,400		1.2								0.9		
28	X	24 hrs	170,800		1.2										
29		24 hrs	174,750						ļ						
30	Х	24 hrs	174,750		1			ļ			ļ		0.8		
31	X	24 hrs	130,700		1.2	<u> </u>	L	L	I	l	1	L	1	L	
Total Average			3,599,300	1											
Average		urini 4 alii in	116,106	1											

192,000

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



See page 4 for instructions

DEP Form 62-555 900(3)Alternate

I. General Information f	For the Month Year of: June-05								
A. Public Water System	(PWS) Information								
PWS Name:	Kings Cove		PWS Identifie	cation Number:	3350655				
	X Community Non-Transient Non-Com	munity	Transient Non-Commun	nity 🔲 (Consecutive				
Number of Service Con	nections at End of Month: 204		Total Population Served a	t End of Month:	714				
	Aqua Utilities Florida								
	Brian Heath		Contact Person's Title:	Area Manager - Florid					
Contact Person's Mailin			City: Leesburg	State: FL	Zip Code: 34749				
Contact Person's Teleph			Contact Person Person's F	ax Number:	(352) 787-6333				
Contact Person's E-Mai									
B. Water Treatment Plan									
Plant Name:	Kings Cove		Plant Telepho	one Number:	(352) 787-0980				
	Corner of Picciola Road & Twin Palms		City: Leesburg	State: FL	Zip Code: 34788				
Type of Water Treated		rchased Finished Wa	ter						
		378,000							
	bsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection	n 62-699.310(4), F.A.C	C.) C				
Licensed Operators	Name	License Class	License Number	Day(s	s)/Shift(s) Worked				
Lead/Chief Operator:	Will Fontaine	С	6813		Days per week				
Other Operators:	John Worrell	С	6597	6 Days per week 6 Days per week					
un sentigo di dabiné bibe.	Marty Neal	C	10027						
II. Certification by Lead	Chief Operator								
I. the undersigned water	treatment plant operator licensed in Florida, am the lead/	chief operator of th	e water treatment plant i	dentified in Part I of	this report. I certify that the				
information provided in	this report is true and accurate to the best of my knowled	oe I certify that all	drinking water treatmer	nt chemicals used at t	hisplant conform to NSF				
	0 or other applicable standards referenced in subsection 6								
international Standard of	of other applicable standards referenced in subsection of	12-333.320(3), r.A.	C. Taiso certify that the	10110 wing additional	minute was d and shamical food				
plant were prepared each	n day that a licensed operator staffed or visited this plant of	during the month in	idicated above: (1) record	is of amounts of cher	meals used and chemical feed				
	le, appropriate treatment process performance records. F			al operations records	to the PWS owner so the PWS				
owner can retain them, to	ogether with copies of this report, at a convenient location	n for at least ten yea	ars.						
	Will Fontaine			C6813					
Signature and Date	Printed or Typed Name	e		License Number					

PWS Id	lentificat	ion Number	r:	3350655		Plant Name: Kings Cove										
III. Dai	ly Data I	or the Mont	th Venr of	t the	June-05					····						
			og Virus Inactiv	viation/Remo			X Free (Chlorin	e	Chlorine I	Dioxide		Dzone	Combined Chlor	ine (Chloramine	s)
[] t	Iltraviole	et Radiation	-		Other (Describe											
Type o	Disinfe	ctant Residu	ual Maintained in	n Distributio	n System:			X	Free Chl	orine	Co	mbined Cl	hlorine (Chlora	amines)	Chlorine D	ioxide
100					CT Calculations	, or UV Dose, to I	Demonstrate I	our-Log	Virus Inactiv	ation, if Appl		÷ 1 1 1 1 1		Emergency or Ab	ati vitili	EST.
	Days			150 (Sc)		CT Calcu					UV	Dose		tion in		
	Plant						Lowest CT	ě .					#Lowest		AL DAME	July:
	Staffed				Lowest Residual	Disinfectant	Provided	2.0	in the second				Residual			4.1
1	or Visited				Disinfectant Concentration	Contact Time (T) at C	Before or	Temp	F-7-31	4.,		200	Disinicuani			A A
	by		Net Quanity		(C) Before or at	Measurement	Customer	Temp	y. 610.	Minimum	Lowest Operating	Minimum UV Dose	Concentration at Remote			9 24
Day of	Operator	Hours	of Finished	3.5	First Customer	Point During	During	of	pH of Water,		UV Dose,	Required,	Point in	Emergency or Ab	ormal Operating Co	onditions:
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	if .	Required,	mW-	mW	Distribution	100 pain or aviaminena	INCOMPLIANT INDUIT	area raking
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	₹C.	Applicable	mg-min/L	sec/cm2	sec/cm2	System, mg/L	Water System C	omponents Out of O	peration
2	X	24 hrs	116,200	-	1.2			ļ					1			
3	X	24 hrs 24 hrs	76,400 74,600		1.2			-			 		0.9 1			
4	X	24 hrs	85,300		1.2			-			·		1			
5 =		24 hrs	82,200	-			<u> </u>								· · · · · · · · · · · · · · · · · · ·	
6	X	24 hrs	82,200	 	1			†		<u> </u>	 	 	0.8			
7	X	24 hrs	70,600		1								0.8			
8	X	24 hrs	111,300		1.1								0.8			
9	X	24 hrs	85,600		1.1				L				0.9		<u>.</u>	
10	X	24 hrs	61,800		1								0.8			
11	X	24 hrs	91,800	[1		 									
12 13	X	24 hrs 24 hrs	68,750 68,750	-	1		ļ						0.7			
14	X	24 hrs	61,700	<u> </u>	<u> </u>			-					0.8			
15	X	24 hrs	91,000		1.1			-	<u> </u>	l	 		0.9			
16	X	24 hrs	78,700		1.2								1.0			
17	X	24 hrs	69,500		1.2								1.0			
18	X	24 hrs	113,600		1.1			<u> </u>	<u> </u>							
19.*		24 hrs	93,650		1.2				ļ				1.0			
20 ±	X	24 hrs	93,650 81,300		1.2				 				0.8			
$\frac{21}{22}$	- <u>X</u>	24 hrs 24 hrs	100,100		1.1								0.8			
23:	X	24 hrs	46,800		1.2		 	 	 		<u> </u>		1.0			
24	X	24 hrs	67,600		1.1				<u> </u>		 		0.9			
25	X	24 hrs	98,700		1.1											
26		24 hrs	84,700													
27.	X	24 hrs	84,700		1.1							L	0.9			
28	X	24 hrs	61,600	ļ	1.1			ļ	ļ			 	0.8			
29	X	24 hrs	84,400		<u>l</u>		 	-			 		0.8			
30 - 31	X	24 hrs 24 hrs	69,500		1.1	ļ		-	 			-	0.9			
	tika a.	24 nrs	2,456,700		L		L	1	L							
			81 890	1												

116,200

Maximum

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



See page 4 for instructions							
I. General Information f	or the Month Year of: July-05						
A. Public Water System							
	Kings Cove	4.	PW	S Identification	Number:	3350655	
	X Community	ımıınity [7]	Transient Non		T T T	Consecutive	
	nections at End of Month: 204		Total Population		l of Month:	714	······································
	Aqua Utilities Florida		1				
	Brian Heath		Contact Person's	Title: Area	Manager - Flo	orida	
Contact Person's Mailin	ng Address: PO Box 490310			sburg State		Zip Code:	34749
Contact Person's Teleph	none Number: (352) 787-0980		Contact Person I		umber:	(352) 787-63	33
Contact Person's E-Mai	I Address: beheath@aquaamerica.com						
B. Water Treatment Pla	nt Information						
Plant Name:	Kings Cove		Plar	it Telephone N	lumber:	(352) 787-09	80
	Corner of Picciola Road & Twin Palms			sburg State		Zip Code:	34788
Type of Water Treated	by Plant: X Raw Ground Water Pu	urchased Finished W	ater				
Permitted Maximum D	ay Operating Capacity of Plant, gallons per day:	378,000					
	osection 62-699.310(4), F.A.C.): V		Plant Class (per				
Licensed Operators	Name	License Class	License Nu	nber 🧢 🗀	Da Da	ıy(s)/Shift(s) Work	ed
Lead/Chief Operator:	Will Fontaine	С	6813			6 Days per week	
Other Operators:	John Worrell	С	6597			6 Days per week	
	Marty Neal	C	10027			6 Days per week	·
			<u> </u>				
			ļ				
							
		<u> </u>	ļ				
II. Certification by Lead	Chiat Omanatan						
I, the undersigned water	treatment plant operator licensed in Florida, am the lead	/chief operator of t	he water treatme	nt plant identi	ified in Part I	of this report. I c	ertify that the
information provided in	this report is true and accurate to the best of my knowled	dge. I certify that a	II drinking water	treatment che	emicals used a	at thisplant confo	rm to NSF
International Standard 60	0 or other applicable standards referenced in subsection	62-555.320(3), F.A	C. I also certify	that the follo	owing addition	nal operations rec	ords for this
plant were prepared each	n day that a licensed operator staffed or visited this plant	during the month i	ndicated above:	(1) records of	amounts of c	hemicals used an	d chemical feed
rates; and (2) if applicab	le, appropriate treatment process performance records. I	Futhermore, I agree	to provide these	additional or	perations reco	rds to the PWS o	wner so the PWS
	ogether with copies of this report, at a convenient location						
van i van i trivilli, t	-O						
	Will Fontaine			C68	13		
Signature and Date	Printed or Typed Nam	ie .		Lice	ense Number		

PWS Identification Nu	umber:	3350655	-	Plant Name:	Kings Cov	e								
III. Daily Data for the	Month Year of:	July-	05							•				
Means of Achieving F					X Free C	Chlorine	e T	Chlorine L	Dioxide		Ozone	Combined Ch	lorine (C	hloramines)
Ultraviolet Radi			r (Describe	e):			_			_				
Type of Disinfectant R	Residual Maintained in	n Distribution Syste	em:			Х	Free Chlo	orine	Co	mbined Cl	hlorine (Chlora	amines)		Chlorine Dioxide
		CT	Calculations	, or UV Dose, to I	emonstrate F	our-Log	Virus Inactiva	tion, if Appl	icable*		35 T. 172	201		The Control of the Co
Days			digital viets	CT Calcul	ations			. OPPASK	- IIVI	hose to be	Lowest: Residual		· 英文。	100
Plant		17.73	st Residual	3744	Lowest CT	#**X		10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1	Lowest			
Staffed		Lowe	st Residual	Disinfectant 6	Provided				1		Residual	100		
or			infectant	Contact Time	Before or			Minimum			Disinfectant 1			
Visited	Net Quanity		centration	(T) at C Measurement	at First	<u>.</u>		100	Lowest 4	Minimum	Concentration			
Day of Operator Hou			Sefore or at Customer	Point During	Customer During	Temp.	pH of Water	CT	Operating UV Dose	Decrined.	at Remote	Emergency or	A bnormal	Operating Conditions
the (Place Plan	As follows: I have been a first to be the following		ring Peak	Peak Flow,	Peak Flow,	Water,	if	Required,	mW.	mW ^A	Distribution	Repair or Maint	enance Wo	Operating Conditions; ork that Involves Takin
Month "X") Opera	ation Produced, gal		w, mg/L	minutes	mg-min/L	· c	Applicable	mg-min/L	sec/cm2		System, mg/L	Water System	Compone	ents Out of Operation
1 X 241			1								0.8			
24 1														
3 X 241		ļ	1.1											
4 X 241			1			_					0.8			
5 X 241			1					·			0.8			
7 X 241			1								0.7	 		
8 X 241		 	0.9								0.7	<u> </u>		
9. 241							f				-			
10 X 241			1.3											
11 X 241			1								7.0_			
12 X 241			1.2			ļ					1.0	ļ		
13 X 241			1.3						<u> </u>		0.9			
14 X 241			1.2	 		ļ					0.9	<u> </u>		
15 X 241			1.1							<u> </u>	0.9	···		
10 A 241			1.2	<u> </u>										
18 X 24			1.1								0.8			
19 X 241			1								0.7			
20 X 24			l								0.7		·	
21 X 24			1.1								0.9	ļ		
22 X 241			0.9			<u> </u>	<u> </u>			ļ	0.7	 		
23 241			0.0				 							
24 X 24 Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z			0.9								0.6			
	hrs 46,700	 	0.9							 	0.7			
27 X 241		 	1				†				0.7		*	
28 X 24			1.1	1							0.7			
29 X 24	hrs 64,700		1								0.7			
30 X 24			1.2						ļ	ļ		ļ		
31 24		<u> </u>		1		L	L	L	l	<u> </u>	L	<u> </u>		
Total	2,410,400	1												
Average Maximum	77,755 156,000	4												
IVIANIIIUIII		J												

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



See page 4 for instructions August-05 I. General Information for the Month Year of: A. Public Water System (PWS) Information PWS Identification Number: 3350655 PWS Name: Kings Cove PWS Type: X Community Non-Transient Non-Community Transient Non-Community Consecutive Total Population Served at End of Month: 714 Number of Service Connections at End of Month: 204 PWS Owner: Aqua Utilities Florida Contact Person: Brian Heath Contact Person's Title: Area Manager Zip Code: 34749 Contact Person's Mailing Address: PO Box 490310 City: Leesburg State: FL (352) 787-6333 Contact Person's Telephone Number: (352) 787-0980 Contact Person Person's Fax Number: Contact Person's E-Mail Address: beheath@aquaamerica.com B. Water Treatment Plant Information (352) 787-0980 Plant Name: Kings Cove Plant Telephone Number: Corner of Picciola Road & Twin Palms Zip Code: 34788 Plant Address: City: Leesburg State: FL Type of Water Treated by Plant: X Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 378,000 Plant Category (per subsection 62-699.310(4), F.A.C.): Plant Class (per subsection 62-699.310(4), F.A.C.) Day(s)/Shift(s) Worked License Number Licensed Operators Name License Class Lead/Chief Operator: 6813 6 Days per week Will Fontaine C Other Operators: John Worrell C 6597 6 Days per week 或**的复数**的现在分词 10027 6 Days per week Marty Neal С er still aftit **动动来解放数数** \$1500 **金髓**(1305) 的第三人称形式 计多数图像 大小 医线导流 经工厂 II. Certification by Lead Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge. I certify that all drinking water treatment chemicals used at this plant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Futhermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years. C6813 Will Fontaine License Number Printed or Typed Name Signature and Date

DWS IA	entificat	ion Number:		3350655		Plant Name:	Kings Cov	e								
F W S IU	citti icat.	ion rumber.														
III. Dail	y Data f	or the Month	n Year of:		August-05								· · · · · · · · · · · · · · · · · · ·	Combined Ch	lorine (Chi	oramines)
Means o	of Achie	ving Four-L	og Virus Inactiv	iation/Remo	val: *		X Free C	Chlorine	e	Chlorine D	loxide		Dzone	Comomea Ch	iornic (Cir	orannos)
ΠU	Itraviole	t Radiation	Ü		Other (Describe)):										hlorine Dioxide
Type of	Disinfe	ctant Residu	al Maintained ir	n Distribution	n System:			X					ilorine (Chlora	mines)		mornie Dioxide
1 y pc 01	127 (144)		2004, E. C.	1	CT Calculations,	or UV Dose, to I	Demonstrate F	our-Log	Virus Inactive	ition, if Appli		15 150 155				
		36 70 3 4 5 1				CT Calcu	lations	rif Vale	PRESENTED TO THE	t)	UVI				1.5	
	Days Plant	Large Bi					Lowest CT	-			·数元是		Lowest			
	Staffed	A 1 4 4 4	连马数三字	5 7	Lowest Residual	Disinfectant	Provided				14.		Residual	0 3 4 4 7 7 Grand Co.		
	or		1986 - 1984 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986		Disinfectant	Contact Time	Before or	ide in		Service Control	4.53E	Minimum	Disinfectant Concentration	- 44215.444		perating Conditions;
	Visited				Concentration	(T) at C	at First	Тетр.			Lowest Operating	UV Dose	at Remote			
	by 👱		Net Quanity		(C) Before or at	Measurement	Customer	lemp.		Minimum CT	UV Dose,	Required,	Point in	Emergency or	Abnormal O	perating Conditions;
Day of	Operator	Hours	of Finished		First Customer	Point During	During . Peak Flow,	oi Water,	pH of Water, if	Required,	mW-	mW	Distribution	Repair or Maint	enance Worl	that Involves Taking
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow, minutes	mg-min/L	Walei,	Applicable		sec/cm2	sec/cm2	System; mg/L	Water System	n Componen	ts Out of Operation V
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	numues	mg mant.					1	0.8			
1	X	24 hrs 24 hrs	73,300 50,200		1.1		<u> </u>		T				0.8			
2			74,200		i								0.7			
3	X	24 hrs 24 hrs	66,400	 	1.1								0.8			
5	X	24 hrs	55,500	<u> </u>	1.1								0.8			
6	$\frac{\lambda}{X}$	24 hrs	78,800		1.1		†	<u> </u>								
7		24 hrs	80,400									<u> </u>				
8	X	24 hrs	80,400		1.1							<u> </u>	0.9			
9	X	24 hrs	42,200		1.1							ļ	0.9			
10	X	24 hrs	91,700		1.3							 	1.1	 		
11	X	24 hrs	67,800		1.4			<u> </u>				 	1.2	ļ — · — -		
12	X	24 hrs	85,600		1.4			L			<u> </u>		1.2			
13	Х	24 hrs	89,900		1.4			ļ	i	 	<u> </u>					
14 3		24 hrs	104,450				ļ	-		ļ	<u> </u>	 	1.2			
15	X	24 hrs	104,450		1.5			ļ					1.0	 		
16	Х	24 hrs	89,400		1.3			 	ļ			 	1.0			
17	X	24 hrs	144,300		1.2		<u> </u>	<u> </u>	 	 	-	+	1.0	 		
18	X	24 hrs	130,300	ļ	1.3		 	┼	 	 	 	-	1.0	T		
19	X	24 hrs	91,200		1.3		<u> </u>	+		 		1				
20	X	24 hrs	149,500	<u> </u>	1.4	 	<u> </u>	+	1	 		1				
21		24 hrs	83,150		 		+	+	+	 	+ -	1	1.0			
22-	X	24 hrs	83,150		1.3	+	+	+	+	+	† - · · · -		1.1			
23:11	X	24 hrs	53,600	 	1.3	 	+	+	+	 			1.1			
24	X	24 hrs	97,300	 	1.3		 	+	1			1	1.1			
25	X	24 hrs	76,800 54,900		1.3	 	1	1	1				1.1			
26	X	24 hrs	81,300		1.3		+	1-		T						
27	X	24 hrs	95,600	+	1.5	 	+	_	1							
28	1 v	24 hrs	95,600	 	1.2			1					11	 		
29-	X	24 hrs 24 hrs	53,900	 	1.1	T							0.9	 		
30 31	X	24 hrs	82,100	 	1.1	1							0.9	<u> </u>		
		24 nrs	2,607,400	+												
			84,110	1												
Tracial	ورائي المالين المراس	service and	· · · · · · · · · · · · · · · · · · ·													

Maximum 149,500

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



DEP Form 62-555 900(3)Alternate

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

See page 4 for instructions

I. General Information	for the Month Year of:	September-05				
A. Public Water System	(PWS) Information					
PWS Name:	Kings Cove			PWS Identi	fication Number:	3350655
	X Community	Non-Transient Non-Com	munity	Transient Non-Comm	unity	Consecutive
Number of Service Cor	nections at End of Month:	204		Total Population Served	at End of Month:	714
PWS Owner:	Aqua Utilities Florida					
	Brian Heath			Contact Person's Title:	Area Manager	
Contact Person's Mailir				City: Leesburg	State: FL	Zip Code: 34749
Contact Person's Telepl				Contact Person Person's	Fax Number:	(352) 787-6333
Contact Person's E-Mai		@aquaamerica.com				
B. Water Treatment Pla	nt Information					
	Kings Cove			Plant Telep	hone Number:	(352) 787-0980
	Corner of Picciola Road & Twin Pa			City: Leesburg	State: FL	Zip Code: 34788
Type of Water Treated			rchased Finished Wa	ater		
	Day Operating Capacity of Plant, gal	ons per day:	378,000			
	bsection 62-699.310(4), F.A.C.):	V		Plant Class (per subsecti	ion 62-699.310(4), F.A	A.C.) <u>C</u>
Licensed Operators	Name		License Class	License Number		y(s)/Shift(s)/Worked
Lead/Chief Operator:	Will Fontai	ne	C	6813		6 Days per week
Other Operators:	John Worre	ell	С	6597		6 Days per week
	Marty Nea	d	C	10027		6 Days per week
一门节 说 的一个主题						
						·
II. Certification by Lead	Chief Operator					
I, the undersigned water	treatment plant operator licensed	in Florida, am the lead	chief operator of th	ne water treatment plant	identified in Part I	of this report. I certify that the
information provided in	this report is true and accurate to	the best of my knowled	lge. I certify that al	II drinking water treatme	ent chemicals used a	at thisplant conform to NSF
	0 or other applicable standards re					
						hemicals used and chemical feed
	, , , ,	1		•	mai operations recoi	rds to the PWS owner so the PWS
owner can retain them, t	ogether with copies of this report	, at a convenient locatio	on for at least ten ye	ars.		
		Will Fame !			C(012	
6:		Will Fontaine			C6813	
Signature and Date		Printed or Typed Name	e		License Number	

Page 1

PWS I	dentificat	ion Numbe	r:	3350655		Plant Name:	Kings Cov	e						
III. Da	ly Data f	or the Mon	th Year of:		September-05									
			og Virus Inacti	viation/Remo			X Free (Chlorin	e 🗔	Chlorine I	Dioxide		Ozone	Combined Chlorine (Chloramines)
		t Radiation			Other (Describe		<u> </u>	J11101111	` [_]	Cinorine I	JIONIGE	<u>. </u>	ozone	Combined Chlorine (Chlorannies)
			ual Maintained i					X	Free Chl	orina	Co	mbinad C	hlorine (Chlor	amines) Chlorine Dioxide
-4572 Heading	121313110	can resid	dai iviaintained i	Distributio		, or UV Dose, to	Namonafrata I					San San San San San	and the second second	
	,				CI Calculations	CT Calcu	lations 3	out-Log	VII US IIIACUV	шоп, п Аррі	UV	Dora 200	Lowest Residual Disinfectant Concentration	
i și	Days Plant	Will English		1 1 1 1 1 1 1	75		Lowest CT.			7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		1423	13. 14.	The Control of the Co
	Staffed		Maria de la compa	[전기 역 설립	Lowest Residual	Disinfectant	Provided	44			1.46		Lowesi .	
	or			l terr et為	Disinfectant	Contact Time	Before or	764	*		THE REAL PROPERTY.	100	Nesidual -	62 J. H.
	Visited				Concentration	(T) at C11	at First	25	G.		Lowest	Minimum	Concentration	
	⊸ by _		Net Quanity		(C) Before or at:	Measurement	Customer	Temp.		Minimum	Operating	UV Dose	at Remote	
Day of	Operator	Hours	of Finished		First Customer	Point During	During		pH of Water,	СТ	UV Dose,	Required,	Point in Distribution	Emergency or Abnormal Operating Conditions;
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	if	Required,	mW-	mW .	Distribution	Repair or Maintenance Work that Involves Taking
Month 1	े"X") Χ	Operation 24 hrs	Produced, gai 75,800	Rate, gpd	Flow, mg/L	minutes	mg-min/L	С	Applicable	mg-min/L	sec/cm2	sec/cm2		Water System Components Out of Operation
2	X	24 hrs	54,000		1.1			 					0.9	
3	X	24 hrs	78,300	ļ	1.2		ļ	├					0.8	
4		24 hrs	67,900		1.2			 			 			
5	X	24 hrs	67,900		1.2							 	 	
- ∙ 6 ·	X	24 hrs	71,800		1.2						 		i	
7	X	24 hrs	58,700		1.4			<u> </u>					1.1	
8	X	24 hrs	64,600		1.2								1	
9	X	24 hrs	66,300		1.2								1	
10	X	24 hrs	65,400		1.3									
11		24 hrs	89,300											
12	X	24 hrs	89,300		1.1								0.8	
14	X	24 hrs 24 hrs	83,500 116,000	ļ	1.2							ļ <u> </u>	0.8	
15	$\frac{\lambda}{X}$	24 hrs	157,200		1.3			-					1.0	
16	X	24 hrs	95,800		1.4								1.0	
17	X	24 hrs	140,900		1.1						-		1.2	
18		24 hrs	148,300								 			
19	X	24 hrs	148,300		1.8								1.6	
20	X	24 hrs	91,900		1.3								1.1	
21	X	24 hrs	113,100		1.4								1.1	
22	X	24 hrs	89,700		1.5								1.2	
÷23	X	24 hrs	76,800		1.4								1.2	
24 25	<u>X</u>	24 hrs	92,200		1.5						ļ			
26	X	24 hrs	118,950											
27	$\frac{\hat{x}}{x}$	24 hrs 24 hrs	118,950 81,700		1.2							<u></u>	0.9	
28	$\frac{\lambda}{X}$	24 hrs	133,700		1.1								0.9	
29	X	24 hrs	85,600		1.1	1							0.9	
30	X	24 hrs	104,300		1.1						<u> </u>		0.8	
31		24 hrs												
Total	gen - J	\$1.10 A.70	2,846,200								·			
Average	41		94,873											

[|] Maximum | 157,200 | * Refer to the instructions for this report to determine which plants must provide this information.



See page 4 for instructions October-05 I. General Information for the Month Year of: A. Public Water System (PWS) Information 3350655 PWS Identification Number: PWS Name: Kings Cove X Community Consecutive PWS Type: Non-Transient Non-Community Transient Non-Community 714 204 Total Population Served at End of Month: Number of Service Connections at End of Month: Agua Utilities Florida PWS Owner: Contact Person: Contact Person's Title: Brian Heath Area Manager Contact Person's Mailing Address: PO Box 490310 City: Leesburg State: FL Zip Code: 34749 (352) 787-6333 (352) 787-0980 Contact Person's Telephone Number: Contact Person Person's Fax Number: Contact Person's E-Mail Address: beheath@aguaamerica.com B. Water Treatment Plant Information (352) 787-0980 Plant Name: Kings Cove Plant Telephone Number: Corner of Picciola Road & Twin Palms State: FL Zip Code: 34788 Plant Address: City: Leesburg Type of Water Treated by Plant: X Raw Ground Water Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 378,000 Plant Class (per subsection 62-699.310(4), F.A.C.) Plant Category (per subsection 62-699.310(4), F.A.C.): License Number Day(s)/Shift(s) Worked Licensed Operators License Class Name 6 Days per week Lead/Chief Operator; 6813 Will Fontaine C \overline{c} 6597 6 Days per week John Worrell Other Operators: Tan Militar 10027 6 Days per week Marty Neal \mathbf{C} HAVE C. THE AND THE RESERVE 一个工作的一个现在分件。 计特殊分字符计数 STATES THE II. Certification by Lead Chief Operator I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part I of this report. I certify that the information provided in this report is true and accurate to the best of my knowledge. I certify that all drinking water treatment chemicals used at thisplant conform to NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rates; and (2) if applicable, appropriate treatment process performance records. Futhermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years. C6813 Will Fontaine

Page 1

Printed or Typed Name

Signature and Date

License Number

PWS Ic	S Identification Number: 3350655 Plant Name: Kings Cove														
III. Dai	v Data f	or the Mont	th Year of:		October-05										
Means	of Achie		.og Virus Inactiv	viation/Remo	oval: * Other (Describe		X Free (Chlorin	e	Chlorine I	Dioxide		Ozone	Combined Chlorine (C	hloramines)
			ual Maintained in	مند السا		·).		V	Free Chl		I Co	mhinad C	hlorine (Chlora	aminas)	Chlorine Dioxide
Type of	Disinie	ctant Residi	iai Maintained ii			** **** * * * * * * * * * * * * * * * *	N						morme (Cmor	ariffics) [[C	The same ploying
	-				CT Calculations	CT Calcu	Demonstrate I	our-Log	VIRUS INACUV	auon, it Appi	icaole :	ni se			
	Days	1		7		C I Calcu									
	Plant				1 200 Ex 200 Apr 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	HE	Lowest CT			4.44	7.75	1 . 1887	Lowest Residual		1901100
# 445 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Staffed or		Server Agen	AT.	Lowest Residual Disinfectant	Disinfectant Contact Time	Provided Before or					4.54	Residual Disinfectant		
	Visited				Concentration	(T) at C	at First				Lowest	Minimum	Goncentration		
	by		Net Quanity	Termina de la composición della (C) Before or at	Measurement	Customer	Temp.		Minimum	Operating	UV Dose	at Remote			
Day of	Operator	Hours	of Finished		First Customer	Point During	During	of	pH of Water,	ĊT	UV Dose	Required,	Point in	Emergency or Abnormal	Operating Conditions.
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	√ if	Required,	mW-	mW	Distribution	Repair or Maintenance Wo	
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	C	Applicable	mg-min/L	sec/cm2	sec/cm2	System, mg/L	Water System Compone	nts Out of Operation :::
4.4	X	24 hrs	102,400		1.3	ļ		<u></u>					ļ	<u> </u>	
2 ~~	7.5	24 hrs	107,300	-	 		ļ	<u> </u>	<u> </u>	ļ		ļ			
3. 4.	X	24 hrs	107,300 68,900		1.1					ļ		 	0.9		
-5	X	24 hrs 24 hrs	89,800	-	1.4			 				 	1.2		
6	X	24 hrs	99,800	 	1.3		ļ				 	 	1.1		· · · · · · · · · · · · · · · · · · ·
7	X	24 hrs	70,900		1.3	 						<u> </u>	1		
8	X	24 hrs	72,800		1.3	†	† 					<u> </u>			
9		24 hrs	81,500										-		
10	X	24 hrs	81,500		1.2								0.7		
11:	X	24 hrs	77,300		1.2								0.7		
12	X	24 hrs	120,100		1.2							<u> </u>	0.7_		
13-	X	24 hrs	76,200		1.3		ļ						0.7		
14	X	24 hrs	80,000		1.1	 	 	-	<u> </u>			 	0.8		
15≘ ∗	X	24 hrs	130,300		1.1				<u> </u>			ļ	ļ		
16.2 17	X	24 hrs	119,300 119,300		1							 -	0.7		
18	<u>x</u>	24 hrs 24 hrs	84,200		1 1		 			 	 		0.7		
19	X	24 hrs	162,900	1	0.9					-	 	 	0.7		
20	X	24 hrs	128,700	 	0.9				†	<u> </u>		1	0.7		
21	X	24 hrs	95,100		1	<u> </u>	<u> </u>						0.8		
22		24 hrs	105,950												
23 ⊲	X	24 hrs	105,950		1										
24	X	24 hrs	108,000		1.1							ļ	0.8		
25	X	24 hrs	106,100		0.9	ļ			<u> </u>		ļ		0.7		
26	X	24 hrs	84,400		0.9			1			ļ	<u> </u>	0.6		
27	X	24 hrs	87,700		0.9	ļ	ļ		 		ļ	 	0.7		
28	X	24 hrs	66,200	 	0.9		<u> </u>	-	<u> </u>	 	 	┼	0.7		
29 30	X	24 hrs	96,500 100,400	 	0.7		 	 	 		 	+	 	 	
31	X	24 hrs 24 hrs	100,400		 	 	<u> </u>	-	 	 	 	 	0.7		
		1 24 nrs	3,037,200	 	l	1		1		L	L	1			
Average			97.974	†											

162,900

Maximum

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



See page 4 for instructions

I. General Information f	or the Month Year of: November-05			
A. Public Water System	(PWS) Information			
PWS Name:	Kings Cove		PWS Identifie	cation Number: 3350655
	X Community Non-Transient Non-Com	munity	Transient Non-Commun	nity Consecutive
	nections at End of Month: 204		Total Population Served a	t End of Month: 714
	Aqua Utilities Florida			
	Brian Heath		Contact Person's Title:	Area Manager
Contact Person's Mailin			City: Leesburg	State: FL Zip Code: 34749
Contact Person's Teleph			Contact Person Person's F	ax Number: (352) 787-6333
Contact Person's E-Mai				
B. Water Treatment Plan	nt Information			
Plant Name:	Kings Cove		Plant Telepho	
Plant Address:	Corner of Picciola Road & Twin Palms		City: Leesburg	State: FL Zip Code: 34788
Type of Water Treated		rchased Finished Wa	ater	
	7 1 2 1 7 2 1 7	378,000		
	section 62-699.310(4), F.A.C.): V		Plant Class (per subsection	
Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	C	6813	6 Days per week
Other Operators:	John Worrell	C	6597	6 Days per week
	Marty Neal	C	10027	6 Days per week
<u> </u>				
II. Certification by Lead	Chief Operator			
information provided in International Standard 60 plant were prepared each rates; and (2) if applicable	treatment plant operator licensed in Florida, am the lead/this report is true and accurate to the best of my knowled or other applicable standards referenced in subsection 6 day that a licensed operator staffed or visited this plant of the appropriate treatment process performance records. For operator with copies of this report, at a convenient location	ge. I certify that a 2-555.320(3), F.A during the month is uthermore, I agree	Il drinking water treatmen .C. I also certify that the ndicated above: (1) record to provide these addition	at chemicals used at thisplant conform to NSF following additional operations records for this ds of amounts of chemicals used and chemical feed
	Will Fontaine			C6813
Signature and Date	Printed or Typed Name	2		License Number

Page 1

PWS Id	lentificat	ion Numbe	r:	3350655		Plant Name:	Kings Cov	/e							
III. Dai	III. Daily Data for the Month Year of: November-05														
			og Virus Inactiv				X Free C	Chlorin	e	Chlorine I	Dioxide		Ozone	Combined Chlorin	ne (Chloramines)
		et Radiation			Other (Describe										
			ual Maintained in	n Distributio		-2:		X	Free Chl	orine	Co	mbined C	hlorine (Chlor	amines)	Chlorine Dioxide
17700		1 1 1 1 1 1 1 1 1	1 12 - 2 4 3 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		, or UV Dose, to l	Demonstrate I						Teamle sections		E Translate British Andrew
1 .;	Days			.44. X80.		CT Calcu	lations	N. Carlotte March	APPORTUNE A NO	22.5	P. TIV	Dose		**************************************	
	Plant				Social Park S		Lowest CT	1.50				37	Lowest	1	
1	Staffed			100 mg	Lowest Residual	Disinfectant	Provided		基	基本 等		Marian.	Residual	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	or				Disinfectant	Contact Time	Before or			Profes	Notes in	13 × 1	Disinfectant	***	
	Visited	time f		N. 19-4-	Concentration	(T) at C	at First				Lowest	Minimum	Concentration	TO SHARE	
1	by		Net Quanity		(C) Before or at	Measurement	Customer-	Temp.		Minimum	Operating	UV Dose	at Remote	F 5 4 4	rmal Operating Conditions;
Day of	Operator	Hours	of Finished		First Customer	Point During	During	of	pH of Water		UV Dose,		Point in	Emergency or Appo	rmai Operating Conditions,
Month	(Place	Plant in Operation	Water Produced, gal	Peak Flow Rate, gpd	During Peak Flow, mg/L	Peak Flow, minutes	Peak Flow, mg-min/L	Water,	if.	Required, mg-min/L	mW sec/cm2	mW *sec/cm2	Distribution System, mg/L	Repair or Maintenan	e Work that Involves Taking inponents Out of Operation
I	X	24 hrs	64,300	Rate, gpu	1.3	minutes	ing-muz.	1 C	Applicable	1 mg-mm/L	SCOULIE	*SCC/CIIIZ	l system, mg/L	water system Con	inponents you or operation (s)
2	X	24 hrs	75,400		1.5		 	†	 	ļ		 	0.8	1	· · · · · · · · · · · · · · · · · · ·
3	X	24 hrs	78,900		1.2			 					1		
4	X	24 hrs	70,800		1.3		 	1				<u> </u>	1.0		
5	X	24 hrs	76,300		1.3		 	ļ	T						
6		24 hrs	115,550				1	1		T		j			
7.	Х	24 hrs	115,550		1.2					1			0.9		
8	Х	24 hrs	71,700		1.1								0.9		
9	X	24 hrs	132,400		1.1								0.8		
10	X	24 hrs	96,200		1.1					<u> </u>			0.9		.,
11	X	24 hrs	104,300	<u> </u>	1.1							ļ	0.9		
12	X	24 hrs	121,900		1.2				ļ			ļ	ļ		
13		24 hrs	138,500					1				<u> </u>			
14	X	24 hrs	138,500	ļ <u>-</u>	1.2		ļ	<u> </u>	 	ļ	ļ		0.9	 	
15	X	24 hrs	83,700		1.1		ļ	 -		ļ		<u> </u>	0.9	<u> </u>	
16	X	24 hrs	152,300		1.3		<u> </u>		 	 		 	1.1	ļ <u> </u>	
17 18	X	24 hrs	136,800	 	1.3		 	 	 	<u> </u>	 	 	1.0	 	
19	X	24 hrs 24 hrs	97,000	 	1.3		 	 	 	 		 	1.0		
20		24 hrs	125,450	 	1.3		 	<u> </u>	 	 	 	l			
21	X	24 hrs	125,450	 	1.2		 	†	 	 	 	 	1.0		
22	X	24 hrs	56,500		1.2	t			†				1.0		
23-	X	24 hrs	109,200		1.2	<u> </u>		1					1.0		
24	Х	24 hrs	82,300		1.3								1.1		
25	Х	24 hrs	90,400		1.3								1.1	ļ	
26	X	24 hrs	132,800		1.4										
27		24 hrs	109,950							<u> </u>		<u> </u>		ļ	.
28	X	24 hrs	109,950		1.3			ļ	ļ		ļ		1.1	ļ	
29	X	24 hrs	54,500		1.3		<u> </u>			<u> </u>		ļ <u></u>	1.1	 	
30	X	24 hrs	94,300		1.2			 		 	ļ	 	0.9		
31		24 hrs				1	L	1	1	L			L	<u> </u>	
Total		, <u>-</u>	3,066,900	-											
Average			102,230	-											
Maximi	m .		152,300	1											

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



DEP Form 62-555.900(3)Alternate

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

See page 4 for instructions

I. General Information f	For the Month Year of: December-05				
A. Public Water System	(PWS) Information	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
PWS Name:	Kings Cove		PWS Ident	ification Number:	3350655
		munity	Transient Non-Comm		Consecutive
Number of Service Con	nections at End of Month: 204		Total Population Served	at End of Month:	714
PWS Owner:	Aqua Utilities Florida		•		
Contact Person:	Brian Heath		Contact Person's Title:	Area Manager	
Contact Person's Mailin			City: Leesburg	State: FL	Zip Code: 34749
Contact Person's Teleph			Contact Person Person's	Fax Number:	(352) 787-6333
Contact Person's E-Mai					
B. Water Treatment Plan	nt Information				
	Kings Cove		Plant Telep	hone Number:	(352) 787-0980
	Corner of Picciola Road & Twin Palms		City: Leesburg	State: FL	Zip Code: 34788
Type of Water Treated		rchased Finished Wa	ater		
Permitted Maximum D		378,000			
	osection 62-699.310(4), F.A.C.): V		Plant Class (per subsect		
Licensed Operators	Name	License Class	License Number	Date of the Date o	ay(s)/Shift(s) Worked
Lead/Chief Operator:	Will Fontaine	С	6813		6 Days per week
Other Operators:	John Worrell	С	6597		6 Days per week
	Marty Neal	С	10027		6 Days per week
The state of the s					
			.1		
II. Cardifferston by Land					
II. Certification by Lead	Cine Operator				
I, the undersigned water	treatment plant operator licensed in Florida, am the lead/o	chief operator of the	he water treatment plan	t identified in Part I	of this report. I certify that the
information provided in	this report is true and accurate to the best of my knowledge	ge. I certify that a	ll drinking water treatm	ent chemicals used	at thisplant conform to NSF
	or other applicable standards referenced in subsection 6				
	day that a licensed operator staffed or visited this plant of	, , , ,	•	_	•
	le, appropriate treatment process performance records. Fi				
	ogether with copies of this report, at a convenient location		•	onar operations reco	rus to the I was owner so the I was
o mai can ream mem, t	ogether with copies of this report, at a convenient location	i ioi at icast tell ye	/UI J.		
	Will Fontaine			C6813	
Signature and Date	Printed or Typed Name			License Number	
G	Times of Types Name			E. Johnson T. Gilliott	

PWS Ic	entificat	ion Number	r:	3350655		Plant Name:	Kings Cov	re									
III. Dai	y Data f	or the Mont	h Year of:		December-05												
			og Virus Inactiv	viation/Remo	oval: *		X Free C	Chlorin	e T	Chlorine I	Dioxide		Ozone	Combined Chl	orine (O	Chloramines)	
		t Radiation			Other (Describe	e):											
Type of	Disinfe	ctant Residu	ual Maintained in	n Distributio				X	Free Chle	orine	Co	mbined C	hlorine (Chlora	amines)	\Box	Chlorine Diox	ide
	- 1	1 1		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		, or UV Dose, to	Demonstrate I					C-Library	de alle estatue e	\$20 AN 30 TA			. Printer
	Days	4		75 1. P. 1	2. 1. 2000 T\$20 (B)	CT Calcu	ilations				: UVI	Dose 🗼 🏗	34 3				
	Plant		2.14		frem t		Lowest CT	1.554%		136-14			Lowest				
	Staffed		177	100	Lowest Residual	Disinfectant	Provided						Residual				
	or				Disinfectant 4	Contact Time	Before or				Lowest	Minimum	Disinfectant		*		
	Visited				Concentration	(T) at C	at First			是"6000",从	Lowest	Minimum	Concentration				
Day of	by Operator	Hours	Net Quanity of Finished		(C) Before or at First Customer	Measurement Point During	Customer During	Temp.	pH of Water,	Minimum	UV Dosc.	(UV Dose Required	at Remote	T.		l Operating Condit	ione i
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water	if	Required	mW-	mW.	Distribution			ork that Involves	
Month	"X")	Operation	Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	C	Applicable		sec/cm2	sec/cm2±	System, mg/L	Water System	Compon	ents Out of Opera	tion "
1 = 1	X	24 hrs	81,200		1.3								1				
2	X	24 hrs	78,700		1.3								1.1				
3	X	24 hrs	72,900		1.4												
4		24 hrs	102,150					 									
5	X	24 hrs	102,150	ļ. ———	1.2			ļ				ļ	1				
6	X	24 hrs	60,400		1.2	ļ	ļ	}			ļ]	0.9				
7	X	24 hrs	94,100	 	1.2		 	-			ļ		0.9			······································	
8	X	24 hrs	71,600 60,300	 	1.2		 	 					0.9				
10	X	24 hrs 24 hrs	51,600		1.3		 	├				 	0.7				
11		24 hrs	79,900	 	1			 			 		-				
12	Х	24 hrs	79,900		1.4		 	 					1.1				
13	Х	24 hrs	56,800		1.3								1.1				
14	Х	24 hrs	108,800		1.5								1.3				
15	_X	24 hrs	74,000		1.6								1.3				
16	X	24 hrs	63,700		1.6								1.4				
17	X	24 hrs	68,000	ļ	1.5		<u> </u>	ļ									
18		24 hrs	75,350	ļ			 					 -	1.0				
19	X	24 hrs	75,350 68,100	 	1.2		 	├──	 		 	-	1.0				
21	X	24 hrs 24 hrs	79,500		1.3		 	 		 	 	 	1.1				
22	x	24 hrs	66,300	 	1.3			 		<u> </u>	 	 	1.1				
23	X	24 hrs	60,000	-	1.3	<u> </u>		1					1.1				
24	X	24 hrs	83,900		1.3		ļ	 									
25		24 hrs	71,200														
26	X	24 hrs	71,200		1.3								1.0	1			
27	X	24 hrs	63,800		1.4			<u> </u>			<u> </u>		1.2				
28	X	24 hrs	78,700	ļ	1.3		<u> </u>	 		 		 	1.1				
29	X	24 hrs	82,300	ļ	1.2	ļ	 	<u> </u>	 	<u> </u>	<u> </u>	ļ	1	 			
30	X	24 hrs	55,500	ļ	1.3			-		 		 	1				
31	X	24 hrs	85,900	ļ	1.3	L	<u> </u>	Ц	L	L	<u> </u>	L	I	L			
Total :	inde de la la la la la la la la la la la la la		2,323,300	-{													

108,800

Maximum

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