

**CHARLIE CREEK UTILITIES, LLC**  
**January 25, 2017**

RE: Docket No. 160143-WU. Application for Staff Assisted Rate Case in Hardee County by Charlie Creek Utilities, LLC (CCU).

Below is CCU's response to Staff's Third Data Request in the above mentioned proceeding.

1. Pumped & Metered Water:

a. The following errors were identified in the submitted MOR's for the period indicated.

- Apr15 – The MOR beginning balance was 40,533 instead of the Mar15 MOR actual ending balance of 40,570. This created a 17,000 gallon difference that was indicated in CCU's previous response displayed below.
- Sep15 – The MOR beginning balance was 43,112 instead of the Aug15 MOR actual ending balance of 43,975. This created an 863,000 gallon difference. Additionally, the MOR daily average balance for the period Sep 5-9 was calculated incorrectly as 19,500 instead of an actual daily average of 23,400. This created a negative 19,500 gallon difference. The combined difference of 843,500 was indicated in CCU's previous response displayed below.
- Oct15 – The daily and average daily use in the MOR's were calculated incorrectly. This created a 2,942,000 gallon difference that was indicated in CCU's previous response displayed below.
- Nov15 - The MOR daily average balance for the period Nov 26-30 was calculated incorrectly as 21,667 instead of an actual daily average of 26,000. This created a negative 22,000 gallon difference that was indicated in CCU's previous response displayed below.
- Dec15 - The daily and average daily use in the MOR's was calculated incorrectly. This created a 2,653,000 gallon difference that was indicated in CCU's previous response displayed below.

Period	Meter Read		Pumped / Actual	Days	Avg/Day	Pumped / MOR	Over (Under)
	Beg	End					
Jan-15	38,929	39,460	531	31	17.1	531	(1)
Feb-15	39,460	39,956	496	28	17.7	497	1
Mar-15	39,956	40,570	614	31	19.8	615	1
Apr-15	40,570	41,225	655	30	21.8	672	17
May-15	41,225	41,819	594	31	19.2	594	0
Jun-15	41,819	42,458	639	30	21.3	639	0
Jul-15	42,458	43,112	654	31	21.1	654	0
Aug-15	43,112	43,975	863	31	27.8	863	0
Sep-15	43,975	44,773	798	30	26.6	1,642	844
Oct-15	44,773	45,637	864	31	27.9	3,806	2,942
Nov-15	45,637	46,270	633	30	21.1	611	(22)
Dec-15	46,270	47,028	758	31	24.5	3,411	2,653
			<b>8,099</b>	<b>365</b>	<b>22.2</b>	<b>14,534</b>	<b>6,435</b>

*In 000's of gallons*

- b. The corrected MOR calculations are attached.
- c. The highest average daily pumped water for the test year was 60,000 which occurred during the period August 8-11, 2015.
- d. We discovered similar calculation errors in the 2016 MOR's that were filed with DEP and have provided a schedule below that corrects the errors. The actual 2016 MOR's and our supporting calculations with corrections are attached.

Period	Pumped / Actual	Days	Avg/Day	Pumped / MOR	Over (Under)
Jan-16	635	31	20.5	2,857	2,222
Feb-16	891	29	30.7	4,010	3,119
Mar-16	776	31	25.0	776	0
Apr-16	743	30	24.8	738	(5)
May-16	773	31	24.9	738	(35)
Jun-16	769	30	25.6	693	(76)
Jul-16	832	31	26.8	832	0
Aug-16	751	31	24.2	751	0
Sep-16	637	30	21.2	614	(23)
Oct-16	606	31	19.5	606	0
Nov-16	666	30	22.2	746	80
Dec-16	<u>707</u>	<u>31</u>	<u>22.8</u>	<u>707</u>	<u>0</u>
	<b>8,786</b>	<b>366</b>	<b>24.0</b>	<b>14,068</b>	<b>5,282</b>

*In 000's of gallons*

2. Pro Forma

- A. Yes. The purpose of this is to try and eliminate the calcium that is naturally occurring from the ground water that clogs up the utility pumping equipment but also is the direct cause of low pressure complaints when the calcium clogs up the customers' meters and potentially customer piping in the homes.
- B. Yes.
- C. Charlie Creek Utilities is in a rural part of Hardee County. The closest city to try and get engineers was Sebring. I called and asked several firms in Sebring to give me bids. The either never responded or responded with some kind of requirement that the utility was unable to comply with. Given the location of the water plant and the fact that is not a very big job price wise, I was unable to get other bids.
- D. The improvements to the WTF have already begun on a small scale. I will be able to go forward fully upon approval of the project by the Commission.
- E. The improvements will require a permit issued by the Florida Department of Environmental Protection (DEP). I have no idea of how long it will take them to issue the permit. Once the permit is issued, the improvements at the water plant should take 30 days.

On behalf of the utility,



Mike Smallridge

**Corrected 2015 MOR Calculations**

<b>April</b>		
Day	Meter	Usage
Beg	40,571	
1	40,588	17,500
2		14,667
3		14,667
4	40,632	14,667
5		34,500
6	40,701	34,500
7		23,500
8	40,748	23,500
9		19,000
10		19,000
11	40,805	19,000
12		20,000
13	40,845	20,000
14		19,000
15	40,883	19,000
16		18,500
17	40,920	18,500
18		24,667
19		24,667
20	40,994	24,667
21		25,500
22	41,045	25,500
23		22,000
24	41,089	22,000
25		23,333
26		23,333
27	41,159	23,333
28		23,000
29	41,205	23,000
30	41,225	20,000
31		
End	41,225	
Total Flow		654,500
Avg Daily Flow		21,817
Max Flow		34,500
Min Flow		14,667

<b>September</b>		
Day	Meter	Usage
Beg	43,975	
1		18,000
2	44,011	18,000
3		20,000
4	44,051	20,000
5		23,400
6		23,400
7		23,400
8		23,400
9	44,168	23,400
10		21,500
11	44,211	21,500
12		23,600
13		23,600
14	44,282	23,600
15		27,500
16	44,337	27,500
17		10,500
18	44,358	10,500
19		26,300
20		26,300
21	44,437	26,300
22		26,500
23	44,439	26,500
24		26,500
25	44,543	26,500
26		54,000
27		54,000
28	44,705	54,000
29		34,000
30	44,773	34,000
31		
End	44,773	
Total Flow		797,700
Avg Daily Flow		26,590
Max Flow		54,000
Min Flow		10,500

<b>October</b>		
Day	Meter	Usage
Beg	44,773	
1		53,000
2	44,879	53,000
3		52,666
4		52,667
5	45,037	52,667
6		37,000
7	45,111	37,000
8		21,800
9		21,800
10		21,800
11		21,800
12	45,220	21,800
13		21,000
14	45,262	21,000
15		22,000
16	45,306	22,000
17		22,000
18		22,000
19	45,372	22,000
20		18,500
21	45,409	18,500
22		19,000
23	45,447	19,000
24		21,667
25		21,667
26	45,512	21,667
27		22,500
28	45,557	22,500
29		26,000
30	45,609	26,000
31	45,637	28,000
End	45,637	
Total Flow		864,000
Avg Daily Flow		27,871
Max Flow		53,000
Min Flow		18,500

<b>November</b>		
Day	Meter	Usage
Beg	45,637	
1		29,000
2	45,695	29,000
3		21,500
4	45,738	21,500
5		18,600
6	45,744	18,600
7		18,600
8		18,600
9	45,831	18,600
10		16,000
11	45,863	16,000
12		19,000
13	45,901	19,000
14		20,333
15		20,333
16	45,962	20,333
17		16,000
18	45,994	16,000
19		19,000
20	46,032	19,000
21		19,333
22		19,333
23	46,090	19,333
24		25,000
25	46,140	25,000
26		26,000
27		26,000
28		26,000
29		26,000
30	46,270	26,000
31		
End	46,270	
Total Flow		633,000
Avg Daily Flow		21,100
Max Flow		29,000
Min Flow		16,000

<b>December</b>		
Day	Meter	Usage
Beg	46,270	
1		21,000
2	46,312	21,000
3		31,000
4	46,374	31,000
5		33,333
6		33,333
7	46,474	33,334
8		39,500
9	46,553	39,500
10		26,000
11	46,605	26,000
12		28,666
13		28,667
14	46,691	28,667
15		17,500
16	46,726	17,500
17		19,000
18	46,764	19,000
19		21,333
20		21,333
21	46,828	21,334
22		17,000
23	46,862	17,000
24		21,000
25	46,904	21,000
26		21,333
27		21,333
28	46,968	21,334
29		20,000
30	47,008	20,000
31	47,028	20,000
End	47,008	
Total Flow		758,000
Avg Daily Flow		24,452
Max Flow		39,500
Min Flow		17,000



**Corrected 2016 MOR Calculations  
Monthly Summary**

Period	Total Pumped	Daily		
		Average	Maximum	Minimum
Jan-16	635,000	20,484	24,000	17,000
Feb-16	891,000	30,724	39,500	23,500
Mar-16	776,000	25,032	52,500	12,000
Apr-16	743,000	24,767	31,500	21,500
May-16	773,000	24,935	24,935	24,935
Jun-16	769,000	25,633	35,000	21,000
Jul-16	832,000	26,839	40,500	22,000
Aug-16	751,000	24,226	30,000	18,000
Sep-16	637,000	21,233	28,000	17,500
Oct-16	606,000	19,548	21,333	17,000
Nov-16	666,000	22,200	30,000	10,400
Dec-16	707,000	22,806	27,000	19,000
<b>Annual</b>	<b>8,786,000</b>	<b>24,036</b>	<b>52,500</b>	<b>10,400</b>

Total Sold	Difference
675,593	(40,593)
550,647	340,353
471,220	304,780
635,080	107,920
640,030	132,970
668,550	100,450
722,470	109,530
691,340	59,660
765,650	(128,650)
561,522	44,478
576,198	89,802
640,370	66,630
<b>7,598,670</b>	<b>1,187,330</b>

Total MOR	Difference
2,857,500	(2,222,500)
4,009,500	(3,118,500)
776,000	(0)
738,000	5,000
738,000	35,000
693,000	76,000
832,000	(0)
751,000	(0)
613,667	23,333
606,000	(0)
746,000	(80,000)
707,000	(0)
<b>14,067,667</b>	<b>(5,281,667)</b>

### Corrected 2016 MOR Calculations

Jan-16			
Day	Mtr# 1	Mtr# 2	Usage
Beg	47,028	28,404	
1			20,000
2			20,000
3			20,000
4	47,108	28,404	20,000
5			19,500
6	47,147	28,404	19,500
7			17,000
8	47,181	28,404	17,000
9			19,000
10			19,000
11	47,238	28,404	19,000
12			18,500
13	47,275	28,404	18,500
14			20,800
15	47,285	28,404	20,800
16			20,800
17			20,800
18	47,379	28,404	20,800
19			21,500
20	47,422	28,404	21,500
21			20,000
22	47,462	28,404	20,000
23			22,000
24			22,000
25	47,528	28,404	22,000
26			21,500
27	47,571	28,404	21,500
28			22,000
29	47,615	28,404	22,000
30			24,000
31	47,663	28,404	24,000
End	47,663	28,404	
<b>Total Flow</b>			<b>635,000</b>
<b>Avg Daily Flow</b>			<b>20,484</b>
<b>Max Flow</b>			<b>24,000</b>
<b>Min Flow</b>			<b>17,000</b>

Feb-16			
Day	Meter	Mtr# 2	Usage
Beg	47,663	28,404	
1	47,687	28,404	24,000
2			23,500
3	47,734	28,404	23,500
4			39,500
5	47,813	28,404	39,500
6			26,000
7			26,000
8	47,891	28,404	26,000
9			28,000
10	47,947	28,404	28,000
11			27,000
12	48,001	28,404	27,000
13			26,333
14			26,333
15	48,080	28,404	26,333
16			32,000
17	48,144	28,404	32,000
18			34,000
19	48,212	28,404	34,000
20			34,667
21			34,667
22	48,316	28,404	34,667
23			31,000
24	48,378	28,404	31,000
25			34,000
26	48,446	28,404	34,000
27			36,000
28			36,000
29	48,554	28,404	36,000
30			
31			
End	48,554	28,404	
<b>Total Flow</b>			<b>891,000</b>
<b>Avg Daily Flow</b>			<b>30,724</b>
<b>Max Flow</b>			<b>39,500</b>
<b>Min Flow</b>			<b>23,500</b>

Mar-16			
Day	Meter	Mtr# 2	Usage
Beg	48,554	28,404	
1			33,500
2	48,621	28,404	33,500
3			33,000
4	48,687	28,404	33,000
5			36,333
6			36,333
7	48,796	28,404	36,333
8			35,000
9	48,866	28,404	35,000
10			18,000
11	48,902	28,404	18,000
12			21,000
13			21,000
14	48,965	28,404	21,000
15			22,000
16	49,009	28,404	22,000
17			22,000
18	49,053	28,404	22,000
19			21,667
20			21,667
21	49,118	28,404	21,667
22			12,000
23	49,142	28,404	12,000
24			13,000
25	49,168	28,404	13,000
26			13,667
27			13,667
28	49,209	28,404	13,667
29			52,500
30	49,314	28,404	52,500
31	49,330	28,404	16,000
End	49,330	28,404	
<b>Total Flow</b>			<b>776,000</b>
<b>Avg Daily Flow</b>			<b>25,032</b>
<b>Max Flow</b>			<b>52,500</b>
<b>Min Flow</b>			<b>12,000</b>

Apr-16			
Day	Meter	Mtr# 2	Usage
Beg	49,330	28,404	
1	49,356		26,000
2			23,000
3			23,000
4	49,425	28,404	23,000
5			23,500
6	49,472	28,404	23,500
7			23,000
8	49,518	28,404	23,000
9			25,000
10			25,000
11	49,593	28,404	25,000
12			21,500
13	49,636	28,404	21,500
14			24,000
15	49,684	28,404	24,000
16			25,667
17			25,667
18	49,761	28,404	25,667
19			25,000
20	49,811	28,404	25,000
21			24,000
22	49,859	28,404	24,000
23			25,667
24			25,667
25	49,936	28,404	25,667
26			31,500
27	49,999	28,404	31,500
28			24,000
29	50,047	28,404	24,000
30	50,073	28,404	26,000
31			
End	50,073	28,404	
<b>Total Flow</b>			<b>743,000</b>
<b>Avg Daily Flow</b>			<b>24,767</b>
<b>Max Flow</b>			<b>31,500</b>
<b>Min Flow</b>			<b>21,500</b>



### Corrected 2016 MOR Calculations

May-16			
Day	Meter	Mtr# 2	Usage
Beg	50,073	28,404	
1			24,935
2			24,935
3			24,935
4			24,935
5			24,935
6			24,935
7			24,935
8			24,935
9			24,935
10			24,935
11			24,935
12			24,935
13			24,935
14			24,935
15			24,935
16			24,935
17			24,935
18			24,935
19			24,935
20			24,935
21			24,935
22			24,935
23			24,935
24			24,935
25			24,935
26			24,935
27			24,935
28			24,935
29			24,935
30			24,935
31	50,846		24,935
End	50,846	28,404	
<b>Total Flow</b>			<b>773,000</b>
<b>Avg Daily Flow</b>			<b>24,935</b>
<b>Max Flow</b>			<b>24,935</b>
<b>Min Flow</b>			<b>24,935</b>

Jun-16			
Day	Meter	Mtr# 2	Usage
Beg	50,846	28,404	
1	50,871	28,404	25,000
2			27,000
3	50,925	28,404	27,000
4			29,000
5			29,000
6	51,012	28,404	29,000
7			35,000
8	51,082	28,404	35,000
9			22,500
10	51,127	28,404	22,500
11			21,667
12			21,667
13	51,192	28,404	21,667
14			22,000
15	51,236	28,404	22,000
16			21,000
17	51,250	28,432	21,000
18			24,667
19			24,667
20	51,276	28,480	24,667
21			24,000
22	51,324	28,480	24,000
23			24,000
24	51,372	28,480	24,000
25			30,333
26			30,333
27	51,463	28,480	30,333
28			25,500
29	51,514	28,480	25,500
30	51,539	28,480	25,000
31			
End	51,539	28,480	
<b>Total Flow</b>			<b>769,000</b>
<b>Avg Daily Flow</b>			<b>25,633</b>
<b>Max Flow</b>			<b>35,000</b>
<b>Min Flow</b>			<b>21,000</b>

Jul-16			
Day	Mtr# 1	Mtr# 2	Usage
Beg	51,539	28,480	
1	51,564	28,480	25,000
2			24,000
3			24,000
4	51,636	28,480	24,000
5			24,500
6	51,685	28,480	24,500
7			33,000
8	51,751	28,480	33,000
9			31,000
10			31,000
11	51,844	28,480	31,000
12			40,500
13	51,925	28,480	40,500
14			28,000
15	51,981	28,480	28,000
16			23,667
17			23,667
18	52,052	28,480	23,667
19			23,000
20	52,098	28,480	23,000
21			22,000
22	52,142	28,480	22,000
23			25,667
24			25,667
25	52,219	28,480	25,667
26			25,000
27	52,269	28,480	25,000
28			25,000
29	52,319	28,480	25,000
30			26,000
31	52,371	28,480	26,000
End	52,371	28,480	
<b>Total Flow</b>			<b>832,000</b>
<b>Avg Daily Flow</b>			<b>26,839</b>
<b>Max Flow</b>			<b>40,500</b>
<b>Min Flow</b>			<b>22,000</b>

Aug-16			
Day	Meter	Mtr# 2	Usage
Beg	52,371	28,480	
1	52,397	28,480	26,000
2			18,000
3	52,433	28,480	18,000
4			30,000
5	52,493	28,480	30,000
6			24,667
7			24,667
8	52,567	28,480	24,667
9			23,000
10	52,613	28,480	23,000
11			24,000
12	52,661	28,480	24,000
13			24,000
14			24,000
15	52,733	28,480	24,000
16			24,000
17	52,781	28,480	24,000
18			23,500
19	52,828	28,480	23,500
20			23,667
21			23,667
22	52,899	28,480	23,667
23			25,500
24	52,950	28,480	25,500
25			25,000
26	53,000	28,480	25,000
27			27,333
28			27,333
29	53,082	28,480	27,333
30			20,000
31	53,122	28,480	20,000
End	53,122	28,480	
<b>Total Flow</b>			<b>751,000</b>
<b>Avg Daily Flow</b>			<b>24,226</b>
<b>Max Flow</b>			<b>30,000</b>
<b>Min Flow</b>			<b>18,000</b>



### Corrected 2016 MOR Calculations

Sep-16			
Day	Meter	Mtr# 2	Usage
Beg	53,122	28,480	
1			20,500
2	53,163	28,480	20,500
3			28,000
4			28,000
5			28,000
6			28,000
7	53,303	28,480	28,000
8			20,000
9	53,343	28,480	20,000
10			19,333
11			19,333
12	53,401	28,480	19,333
13			17,500
14	53,436	28,480	17,500
15			19,000
16	53,474	28,480	19,000
17			20,667
18			20,667
19	53,536	28,480	20,667
20			21,000
21	53,578	28,480	21,000
22			19,000
23	53,616	28,480	19,000
24			21,000
25			21,000
26	53,679	28,480	21,000
27			20,500
28	53,720	28,480	20,500
29			19,500
30	53,759	28,480	19,500
31			
End	53,759	28,480	
<b>Total Flow</b>			<b>637,000</b>
<b>Avg Daily Flow</b>			<b>21,233</b>
<b>Max Flow</b>			<b>28,000</b>
<b>Min Flow</b>			<b>17,500</b>

Oct-16			
Day	Meter	Mtr# 2	Usage
Beg	53,759	28,480	
1			19,667
2			19,667
3	53,818	28,480	19,667
4			19,000
5	53,856	28,480	19,000
6			19,000
7	53,894	28,480	19,000
8			19,667
9			19,667
10	53,953	28,480	19,667
11			17,500
12	53,988	28,480	17,500
13			17,000
14	54,022	28,480	17,000
15			18,667
16			18,667
17	54,078	28,480	18,667
18			19,500
19	54,117	28,480	19,500
20			20,000
21	54,157	28,480	20,000
22			20,667
23			20,667
24	54,219	28,480	20,667
25			21,000
26	54,261	28,480	21,000
27			20,000
28	54,301	28,480	20,000
29			21,333
30			21,333
31	54,365	28,480	21,333
End	54,365	28,480	
<b>Total Flow</b>			<b>606,000</b>
<b>Avg Daily Flow</b>			<b>19,548</b>
<b>Max Flow</b>			<b>21,333</b>
<b>Min Flow</b>			<b>17,000</b>

Nov-16			
Day	Meter	Mtr# 2	Usage
Beg	54,365	28,480	
1			18,500
2	54,402	28,480	18,500
3			10,400
4	54,414	28,480	10,400
5			10,400
6			10,400
7	54,437	28,497	10,400
8			30,000
9	54,439	28,555	30,000
10			30,000
11	54,439	28,615	30,000
12			25,333
13			25,333
14	54,515	28,615	25,333
15			21,000
16	54,557	28,615	21,000
17			19,000
18	54,595	28,615	19,000
19			21,333
20			21,333
21	54,659	28,615	21,333
22			24,000
23	54,707	28,615	24,000
24			27,000
25	54,761	28,615	27,000
26			27,333
27			27,333
28	54,843	28,615	27,333
29			26,500
30	54,896	28,615	26,500
31			
End	54,896	28,615	
<b>Total Flow</b>			<b>666,000</b>
<b>Avg Daily Flow</b>			<b>22,200</b>
<b>Max Flow</b>			<b>30,000</b>
<b>Min Flow</b>			<b>10,400</b>

Dec-16			
Day	Meter	Mtr# 2	Usage
Beg	54,896	28,615	
1			24,000
2	54,944	28,615	24,000
3			25,333
4			25,333
5	55,020	28,615	25,333
6			20,000
7	55,060	28,615	20,000
8			19,000
9	55,098	28,615	19,000
10			24,667
11			24,667
12	55,172	28,615	24,667
13			27,000
14	55,226	28,615	27,000
15			22,000
16	55,270	28,615	22,000
17			21,333
18			21,333
19	55,334	28,615	21,333
20			21,000
21	55,376	28,615	21,000
22			19,500
23	55,415	28,615	19,500
24			24,333
25			24,333
26	55,488	28,615	24,333
27			24,000
28	55,536	28,615	24,000
29			23,500
30	55,583	28,615	23,500
31	55,603	28,615	20,000
End	55,603	28,615	
<b>Total Flow</b>			<b>707,000</b>
<b>Avg Daily Flow</b>			<b>22,806</b>
<b>Max Flow</b>			<b>27,000</b>
<b>Min Flow</b>			<b>19,000</b>

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

<b>I. General Information for the Month/Year of:</b>		Monitoring Period From: 1/01/16 To: 1/31/16	
<b>A. Public Water System (PWS) Information</b>			
PWS Name: VILLAGE OF CHARLIE CREEK		PWS Identification Number: 6250278	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community
Number of Service Connections at End of Month: 153		Total Population Served at End of Month: 168	
PWS Owner:			
Contact Person: MIKE SMALLRIDGE		Contact Person's Title: UTILITY MANAGER	
Contact Person's Mailing Address: 3336 GRAND BLVD		City: HOLIDAY	State: FL Zip Code: 33890
Contact Person's Telephone Number: 352-302-7406		Contact Person's Fax Number: 863-229-5991	
Contact Person's E-Mail Address: UTILITYCONSULTANT@YAHOO.COM			
<b>B. Water Treatment Plant Information</b>			
Plant Name: VILLAGE OF CHARLIE CREEK		Plant Telephone Number: 863-537-1971	
Plant Address: SR 64 EAST		City: ZOLFO SPRINGS	State: FL Zip Code: 33873
Type of Water Treated by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating capacity of Plant, gallons per day:		133,000	
Plant Category ( per subsection 62-699.310(4), F.A.C.): V		Plant Class: C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>
<b>Lead/Chief Operator:</b>	GAINES ALEXANDER	C	C-5472
<b>Other Operators:</b>	DANNY ALEXANDER	C	C-12379
	JENNIFER ALEXANDER	C	C-21471
<b>II. Certification by Lead/Chief Operator</b>			

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

 2016/02/10

DANNY ALEXANDER  
Printed or Typed Name

C-12379  
License Number





DRINKING WATER BACTERIOLOGICAL ANALYSIS

MID FLORIDA WATER LABORATORY

8 Oakwood Road - Winter Haven, FL 33880
Phone (863) 965-2540 • Fax (863) 967-8601
Lab I.D. #E84567 • Margaret Rajpaul - Director, Contact Person
NELAC CERTIFIED

Lab Receipt Date & Time: RECEIVED
Analysis Date & Time: 1/20/16 @ 2:50 pm
Sample Acceptance Criteria: 7.0
Sample Preservation: 9/2015 JAN 20 00 2:19
Disinfectant Check: [X] No: Detected [ ] mg/L
This sample does not meet the following NELAC requirements:

Report Number: Sub-Contract Lab ID:

Analysis Requested: (check all that apply)

- [X] Total Coliform/E-Coli [ ] Total Coliform/Fecal [ ] Enterococci [ ] Colilert [ ] HPC [ ] Other:

System Name: Village of Charlie Creek

PWS I.D. 6250278

System Address: SR 604E

County: HARDEE

System or Owner's Phone #:

Fax #:

Collector: Robert Best

Collector's Phone #: 965 2599

Type of Supply: (check only one)

- [X] Community Water System [ ] Noncommunity Water System [ ] Nontransient Noncommunity Water System [ ] Limited Use System
[ ] Private Well [ ] Swimming Pool [ ] Bottled Water [ ] Other

Reason for Sampling: (check all that apply)

- [X] Distribution Routine [ ] Distribution Repeat [ ] Raw (triggered or assessment) [ ] Raw (triggered or assessment) additional [ ] Well Survey
[ ] Clearance [ ] Replacement (also check type of sample being replaced) [ ] Boil Water Notice [ ] Other

Sample Collection Date: 1-20-16

To be completed by collector of sample

To be completed by lab

Table with columns: Sample Number, Sample Point (Location or Specific Address), Lab Sample Number, Collection Time, Sample Type, Disinfect Res'd (mg/L), pH, Total Coliform Analysis Method, Fecal or E. coli Analysis Method, Non Coliform, Total Coliform, Fecal or E. coli, Data Qualifier.

Average of disinfectant residuals for routine and repeat samples. (Complete for community and non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.)

2.20

Defined in Florida Administrative Code Rule 62-160, Table 1
All tests are performed in accordance with NELAC standards.
The test results in this report only relate to the analyses of the samples submitted.

Disinfectant Residual Analysis Method: [X] DPD Colorimetric [ ] Other:

Person performing analysis is (Please see instructions on reverse):

- [ ] A certified operator (# 2047) [ ] Employed by a certified lab
[ ] Supervised by a cert. operator (# 2047) [ ] Employed by DEP or DOH
[ ] Authorized representative of supplier of water

Date PWS notified by lab of positive results:

Date State notified by lab of positive results:

Lab Signature: Date 4/2/16

Title: Lab Manager

Name and Mailing Address of Person to Receive Report

Consta Flow, Inc
5674 Commercial Blvd
Winter Haven, FL 33890

DEP/DOH USE ONLY

- [ ] Satisfactory [ ] Incomplete Collection Information [ ] Repeat Samples Required [ ] Replacement Samples Required
Date Reviewed by DEP/DOH:
DEP/DOH Reviewing Official:

1/28 County

# Charlie Creek Utilities, LLC

Tuesday, January 24, 2017

## Billing Summary 1/1/2016 to 1/31/2016

### water

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			674573		\$137.50		\$0.00		\$0.00		\$260.00		\$102.75	
water			\$2,819.52	\$2,100.00		\$0.00		\$0.00		\$0.00		\$5,317.02		\$5,419.77
# of Customers Billed	147													

### General

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			390		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
General			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	15													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			630		\$0.00		\$0.00		\$0.00		\$0.00		(\$19.11)	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		(\$19.11)
# of Customers Billed	1													

<b>Report Totals</b>			<b>675593</b>		<b>\$137.50</b>		<b>\$0.00</b>		<b>\$0.00</b>		<b>\$260.00</b>		<b>\$83.64</b>	
# of Cust Billed	147		<b>\$2,819.52</b>	<b>\$2,100.00</b>		<b>\$0.00</b>		<b>\$0.00</b>		<b>\$0.00</b>		<b>\$5,317.02</b>		<b>\$5,400.66</b>
					46	0	0				52			



PLANT NAME: Village of Charlie Creek Monitoring Period From: 1/01/16 To: 1/31/16  
(WATER REPORT)

DAY	METER 1	METER 2	TRC	PH	TRC	PH	MULT.	1000	Bact.
PREV	47028						#REF!		
1							90000		
2							90000		
3							90000		
4	47108		3.3		2.8		90000		
5							87750		
6	47147		3.0		2.6		87750		
7							76500		
8	47181		2.5		2.2		76500		
9							85500		
10							85500		
11	47238		2.5		2.2		85500		
12							83250		
13	47275		1.8		1.4		83250		
14							22500		
15	47285		1.8		1.4		22500		
16							141000		
17							141000		
18	47379		1.8		1.4		141000		
19							96750		
20	47422		2.2		2.0		96750		
21							90000		
22	47462		2.2		2.0		90000		
23							99000		
24							99000		
25	47528		2.2		2.0		99000		
26							96750		
27	47571		2.2		2.0		96750		
28							99000		
29	47615		2.2		2.0		99000		
30							108000		
31	47663						108000		
Total Flow							2857500		
ADF							92177		
MAX			3.3		2.8		141000		
MIN			1.8		1.4		22500		

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

PWS Identification Number: 6250278 Plant Name: VILLAGE OF CHARLIE CREEK

Monitoring Period From: 1/01/16 To: 1/31/16  
 Means of Achieving Four-Log Virus Inactivation / Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine(Chloramines)  
 Ultraviolet Radiation  Other: (Describe)

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

Day of the month	Days Plant Staffed or Visited by Operator (Place X)	Hours Plant in Operation	Net Quality of Finished Water Produced, gal	CT Calculations or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose					
				Peak flow rate, gpd	Lowest Residual Disinfectant concentration Before or at First Customer, During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-Sec/cm2	Minimum UV Dose required, mW-Sec/cm2	Lowest Residual Disinfectant concentration at Remote Point in Distribution System, mg/L	
1		24	90000											
2		24	90000											
3		24	90000											
4	X	24	90000										2.9	
5		24	87750											
6	X	24	87750										2.6	
7		24	76500											
8	X	24	76500										2.2	
9		24	85500											
10		24	85500											
11	X	24	85500										2.2	
12		24	83250											
13	X	24	83250										1.4	
14		24	22500											
15	X	24	22500										1.4	
16		24	141000											
17		24	141000											
18	X	24	141000										1.4	
19		24	96750											
20	X	24	96750										2.0	
21		24	90000											
22	X	24	90000										2.0	
23		24	99000											
24		24	99000											
25	X	24	99000										2.0	
26		24	96750											
27	X	24	96750										2.0	
28		24	99000											
29	X	24	99000										2.0	
30		24	108000											
31		24	108000											
Total			2857500											
Average			92177											
Maximum			141000											

\*Refer to the instructions for this report to determine which plants must provide this information  
 EOP Form 60-605 9/00/02  
 Effective Rev. 3



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

<b>I. General Information for the Month/Year of:</b>		Monitoring Period From: 2/01/16 To: 2/29/16	
<b>A. Public Water System (PWS) Information</b>			
PWS Name:	VILLAGE OF CHARLIE CREEK	PWS Identification Number:	6250278
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive
Number of Service Connections at End of Month:	153	Total Population Served at End of Month:	138
PWS Owner:			
Contact Person :	MIKE SMALLRIDGE	Contact Person's Title:	UTILITY MANAGER
Contact Person's Mailing Address:	3336 GRAND BLVD	City: HOLIDAY	State: FL Zip Code: 33890
Contact Person's Telephone Number:	352-302-7406	Contact Person's Fax Number:	863-229-5991
Contact Person's E-Mail Address:	UTILITYCONSULTANT@YAHOO.COM		
<b>B. Water Treatment Plant Information</b>			
Plant Name:	VILLAGE OF CHARLIE CREEK	Plant Telephone Number:	863-537-1971
Plant Address:	SR 64 EAST	City: ZOLFO SPRINGS	State: FL Zip Code: 33873
Type of Water Treated by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating capacity of Plant, gallons per day:	133,000		
Plant Category ( per subsection 62-699.310(4), F.A.C.):	V	Plant Class:	C
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number (Day(s)/Shift(s) Worked</b>
<b>Lead/Chief Operator:</b>	GAINES ALEXANDER	C	C-5472
<b>Other Operators:</b>	DANNY ALEXANDER	C	C-12379 13
	JENNIFER ALEXANDER	C	C-21471
<b>II. Certification by Lead/Chief Operator</b>			

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

 2016/03/10

DANNY ALEXANDER  
Printed or Typed Name

C-12379  
License Number



DRINKING WATER BACTERIOLOGICAL ANALYSIS

MID FLORIDA WATER LABORATORY

8 Oakwood Road - Winter Haven, FL 33880
Phone (863) 965-2540 • Fax (863) 967-8601
Lab I.D. #E84567 • Margaret Rajpaul - Director, Contact Person
NELAC CERTIFIED

Lab Receipt Date & Time: RECEIVED
Analysis Date & Time: 2/25/16 @ 3:10 PM
Sample Acceptance Criteria: L.98
Sample Preservation: 7-38 °C
Disinfectant Check: Not Detected mg/L
This sample does not meet the following NELAC requirements:

Report Number: Sub-Contract Lab ID:

Analysis Requested: (check all that apply)

- Total Coliform/E-Coli Total Coliform/Fecal Enterocci Coliuret HPC Other

System Name: Village of Charlie Creek

PWS I.D. 6250278

System Address: SR 604E

County: Hardee

System or Owner's Phone #: Collector: Robert Best

Fax #: Collector's Phone #: 905 2899

Type of Supply: (check only one)

- Community Water System Noncommunity Water System Nontransient Noncommunity Water System Limited Use System
Private Well Swimming Pool Bottled Water Other

Reason for Sampling: (check all that apply)

- Distribution Routine Distribution Repeat Raw (triggered or assessment) Raw (triggered or assessment) additional Well Survey
Clearance Replacement (also check type of sample being replaced) Boil Water Notice Other

Sample Collection Date: 2-25-16

To be completed by collector of sample

To be completed by lab

Table with columns: Sample Number, Sample Point (Location or Specific Address), Lab Sample Number, Collection Time, Sample Type, Disinfect Res'd (mg/L), pH. Rows include Well 1, Well 2, 1011 Morgan Brice, 1154 Sparrow.

Table with columns: Total Coliform Analysis Method, Fecal or E. coli Analysis Method, Non Coliform, Total Coliform, Fecal or E. coli, Data Qualifier. Results show 'A' for all samples.

Average of disinfectant residuals for routine and repeat samples. (Complete for community and non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.)

2.18 All tests are performed in accordance with NELAC standards. The test results in this report only relate to the analyses of the samples submitted.

Disinfectant Residual Analysis Method: DPD Colorimetric
Person performing analysis is (Please see instructions on reverse):
A certified operator (#) Employed by a certified lab
Supervised by a cert. operator (#) Employed by DEP or DOH
Authorized representative of supplier of water

Date PWS notified by lab of positive results:
Date State notified by lab of positive results:
Lab Signature: Date: 2/26/16
Title: Lab Manager

Name and Mailing Address of Person to Receive Report
Consta Flow, Inc
5574 Commercial Blvd
Winter Haven, FL 33894

DEP/DOH USE ONLY
Satisfactory
Incomplete Collection Information
Repeat Samples Required Replacement Samples Required
Date Reviewed by DEP/DOH:
DEP/DOH Reviewing Official:



# Charlie Creek Utilities, LLC

Tuesday, January 24, 2017

## Billing Summary 2/1/2016 to 2/29/2016

### water

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			549967		\$199.00		\$0.00		\$0.00		\$250.00		\$127.79	
water			\$2,449.68	\$2,130.00		\$40.00		\$0.00		\$0.00		\$5,068.68		\$5,196.47
# of Customers Billed	154													

### General

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
General			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	13													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			680		\$0.00		\$0.00		\$0.00		\$0.00		(\$19.11)	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		(\$19.11)
# of Customers Billed	1													

<b>Report Totals</b>			<b>550647</b>		<b>\$199.00</b>		<b>\$0.00</b>		<b>\$0.00</b>		<b>\$250.00</b>		<b>\$108.68</b>	
# of Cust Billed	154		<b>\$2,449.68</b>	<b>\$2,130.00</b>		<b>\$40.00</b>		<b>\$0.00</b>		<b>\$0.00</b>		<b>\$5,068.68</b>		<b>\$5,177.36</b>
					51	2	0				50			

PLANT NAME: Village of Charlie Creek Monitoring Period From: 2/01/16 To: 2/29/16  
(WATER REPORT)

DAY	METER 1	METER 2	TRC	PH	TRC	PH	MULT.	1000	Bact.
PREV	47663						#REF!		
1	47687		2.2		2.0		108000		
2							105750		
3	47734		2.2		2.0		105750		
4							177750		
5	47813		2.2		2.0		177750		
6							117000		
7							117000		
8	47891		2.2		2.0		117000		
9							126000		
10	47947		2.2		2.0		126000		
11							121500		
12	48001		2.2		2.0		121500		
13							118500		
14							118500		
15	48080		2.2		2.0		118500		
16							144000		
17	48144		2.2		2.0		144000		
18							153000		
19	48212		3.8		2.9		153000		
20							156000		
21							156000		
22	48316		0.5		0.2		156000		
23							139500		
24	48378	28404	3.8		2.5		139500		
25							153000		
26	48446	28404	2.7		2.0		153000		
27							162000		
28							162000		
29	48554	28404	2.6		1.9		162000		
Total Flow							4009500		
ADF							138259		
MAX			3.8		2.9		177750		
MIN			0.5		0.2		105750		

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

PWS Identification Number: 6250278 Plant Name: VILLAGE OF CHARLIE CREEK

Monitoring Period From: 2/01/16 To: 2/29/16  
 Means of Achieving Four-Log Virus Inactivation / Removal: \*  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine(Chloramines)  
 Ultraviolet Radiation  Other (Describe):

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

Day of the month	Days Plant Staffed or Visited by Operator (Place X)	Hours Plant in Operation	Net Quality of Finished Water Produced, gal	CT Calculations or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose							
				Peak flow rate, gpd	Lowest Residual Disinfectant concentration Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum CT Required mg-min/L	Lowest Operating UV Dose, mW-Sec/cm2	Minimum UV Dose required, mW-Sec/cm2	Lowest Residual Disinfectant concentration at Remote Point in Distribution System, mg/L			
1	X	24	108000												2.0	
2		24	105750												2.0	
3	X	24	105750												2.0	
4		24	177750												2.0	
5	X	24	177750												2.0	
6		24	117000												2.0	
7		24	117000												2.0	
8	X	24	117000												2.0	
9		24	126000												2.0	
10	X	24	126000												2.0	
11		24	121500												2.0	
12	X	24	121500												2.0	
13		24	118500												2.0	
14		24	118500												2.0	
15	X	24	118500												2.0	
16		24	144000												2.0	
17	X	24	144000												2.0	
18		24	153000												2.0	
19	X	24	153000												2.9	
20		24	156000												0.2	
21		24	156000												0.2	
22	X	24	156000												0.2	
23		24	139500												2.5	
24	X	24	139500												2.5	
25		24	153000												2.0	
26	X	24	153000												2.0	
27		24	162000												1.9	
28		24	162000												1.9	
29	X	24	162000												1.9	
Total			4009500													
Average			138258													
Maximum			177750													

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

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

<b>I. General Information for the Month/Year of:</b>		Monitoring Period From: 3/01/16 To: 3/31/16	
<b>A. Public Water System (PWS) Information</b>			
PWS Name: VILLAGE OF CHARLIE CREEK		PWS Identification Number: 6250278	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive
Number of Service Connections at End of Month: 153		Total Population Served at End of Month: 138	
PWS Owner:			
Contact Person: MIKE SMALLRIDGE		Contact Person's Title: UTILITY MANAGER	
Contact Person's Mailing Address: 3336 GRAND BLVD		City: HOLIDAY	State: FL Zip Code: 33890
Contact Person's Telephone Number: 352-302-7406		Contact Person's Fax Number: 863-229-5991	
Contact Person's E-Mail Address: UTILITYCONSULTANT@YAHOO.COM			
<b>B. Water Treatment Plant Information</b>			
Plant Name: VILLAGE OF CHARLIE CREEK		Plant Telephone Number: 863-537-1971	
Plant Address: SR 64 EAST		City: ZOLFO SPRINGS	State: FL Zip Code: 33873
Type of Water Treated by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating capacity of Plant, gallons per day:		133,000	
Plant Category ( per subsection 62-699.310(4), F.A.C.): V		Plant Class: C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b> <b>Day(s)/Shift(s) Worked</b>
<b>Lead/Chief Operator:</b>	GAINES ALEXANDER	C	C-5472
<b>Other Operators:</b>	DANNY ALEXANDER	C	C-12379 12
	JENNIFER ALEXANDER	C	C-21471
<b>II. Certification by Lead/Chief Operator</b>			

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

 2016/04/08  
 Signature and Date

DANNY ALEXANDER  
 Printed or Typed Name

C-12379  
 License Number





**DRINKING WATER  
BACTERIOLOGICAL ANALYSIS**

**MID FLORIDA WATER LABORATORY**

8 Oakwood Road - Winter Haven, FL 33880  
Phone (863) 965-2540 - Fax (863) 967-8601  
Lab I.D. #E84567 • Margaret Rajpaul - Director, Contact Person  
**NELAC CERTIFIED**

Lab Receipt Date & Time: **RECEIVED 3/7/16 12:55pm**  
Analysis Date & Time: **3/7/16 12:20**  
Sample Acceptance Criteria: **6.0**  
Sample Preservation: **Not On Ice** **12:20** °C  
Disinfectant Check: **Not Detected** \_\_\_\_\_ mg/L  
This sample does not meet the following NELAC requirements:

Report Number: \_\_\_\_\_ Sub-Contract Lab ID: \_\_\_\_\_

**Analysis Requested:** (check all that apply)

- Total Coliform/E-Coli     Total Coliform/Fecal     Enterococci     Coliform     HPC     Other: \_\_\_\_\_

System Name: Village of Charlie Creek PWS I.D. 6250278

System Address: SR 640E Zolfo Springs County: Hardee

System or Owner's Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Collector: Robert Best Collector's Phone #: 965 2599

**Type of Supply:** (check only one)

- Community Water System     Noncommunity Water System     Nontransient Noncommunity Water System     Limited Use System  
 Private Well     Swimming Pool     Bottled Water     Other \_\_\_\_\_

**Reason for Sampling:** (check all that apply)

- Distribution Routine     Distribution Repeat     Raw (triggered or assessment)     Raw (triggered or assessment) additional     Well Survey  
 Clearance     Replacement (also check type of sample being replaced)     Boil Water Notice     Other \_\_\_\_\_

Sample Collection Date: 3-7-16

**To be completed by collector of sample**

**To be completed by lab**

Sample Number	Sample Point (Location or Specific Address)	Lab Sample Number	Collection Time	Sample Type <sup>1</sup>	Disinfect Res'd (mg/L)	pH	Total Coliform Analysis Method <sup>2</sup>			
							Non Coliform	Total Coliform	Fecal or E. coli	Data Qualifier <sup>2</sup>
<u>1/4</u>	<u>Well 1</u>	<u>003261</u>	<u>1030</u>	<u>R</u>	<u>7.4</u>		<u>A</u>			
<u>2/4</u>	<u>Well 2</u>	<u>003262</u>	<u>1025</u>	<u>R</u>	<u>7.6</u>		<u>A</u>			
<u>3/4</u>	<u>Church</u>	<u>003263</u>	<u>1020</u>	<u>D</u>	<u>1.62</u>	<u>7.6</u>		<u>A</u>		
<u>4/4</u>	<u>1062 Bluejay</u>	<u>003264</u>	<u>1015</u>	<u>D</u>	<u>1.56</u>	<u>7.6</u>		<u>A</u>		

**Average of disinfectant residuals for routine and repeat samples.** (Complete for community and non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.)

1.59 Defined in Florida Administrative Code Rule 62-160, Table 1  
All tests are performed in accordance with NELAC standards. The test results in this report only relate to the analyses of the samples submitted.

**Disinfectant Residual Analysis Method:**  DPD Colorimetric     Other: \_\_\_\_\_  
**Person performing analysis is** (Please see instructions on reverse):  
 A certified operator (# \_\_\_\_\_)     Employed by a certified lab  
 Supervised by a cert. operator (# 21471)     Employed by DEP or DOH  
 Authorized representative of supplier of water \_\_\_\_\_

Date PWS notified by lab of positive results: \_\_\_\_\_  
Date State notified by lab of positive results: \_\_\_\_\_  
Lab Signature: Margaret Rajpaul 3/8/16  
Title: Director

Name and Mailing Address of Person to Receive Report  
Consta Way Inc  
5574 Commercial Blvd  
Winter Haven, FL 33880

**DEP/DOH USE ONLY**

Satisfactory     Incomplete Collection Information  
 Repeat Samples Required     Replacement Samples Required

Date Reviewed by DEP/DOH: \_\_\_\_\_  
DEP/DOH Reviewing Official: \_\_\_\_\_

# Charlie Creek Utilities, LLC

Tuesday, January 24, 2017

## Billing Summary 3/1/2016 to 3/31/2016

### water

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			467650		\$153.00		\$0.00		\$0.00		\$250.00		(\$419.31)	
water			\$2,063.53	\$2,055.00		\$20.00		\$0.00		\$0.00		\$4,541.53		\$4,122.22
# of Customers Billed	144													

### General

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			3570		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
General			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	17													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total							\$0.00		\$0.00		\$0.00			
Unused				\$236.58				\$0.00		\$0.00		\$236.58		\$236.58
# of Customers Billed	4													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			0		\$0.00		\$0.00		\$0.00		\$0.00		(\$19.11)	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		(\$19.11)
# of Customers Billed	1													

<b>Report</b>			471220	\$153.00	\$0.00	\$0.00	\$250.00			
<b>Totals</b>	# of Cust Billed	148	\$2,300.11	\$2,055.00	\$20.00	\$0.00	\$0.00	\$4,778.11	(\$438.42)	\$4,339.69
				51	1	0	50			

PLANT NAME: Village of Charlie Creek Monitoring Period From: 3/01/16 To: 3/31/16  
(WATER REPORT)

DAY	METER 1	METER 2	TRC	PH	TRC	PH	MULT.	1000	Bact.
PREV	48554	28404					#REF!		
1							33500		
2	48621	28404	1.7		1.4		33500		
3							33000		
4	48687	28404	2.1		1.3		33000		
5							36333		
6							36333		
7	48796	28404	2.1		1.3		36333		
8							35000		
9	48866	28404	2.1		1.3		35000		
10							18000		
11	48902	28404	2.8		1.6		18000		
12							21000		
13							21000		
14	48965	28404	3.5		2.1		21000		
15							22000		
16	49009	28404	2.8		1.6		22000		
17							22000		
18	49053	28404	2.8		1.6		22000		
19							21667		
20							21667		
21	49118	28404	1.0		0.5		21667		
22							12000		
23	49142	28404					12000		
24							13000		
25	49168	28404	1.0		0.5		13000		
26							13667		
27							13667		
28	49209	28404	1.0		0.5		13667		
29							52500		
30	49314	28404	3.8		2.5		52500		
31	49330						16000		
Total Flow							776000		
ADF							25032		
MAX			3.8		2.5		52500		
MIN			1.0		0.5		12000		



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

PWS Identification Number: 6250278 Plant Name: VILLAGE OF CHARLIE CREEK

Monitoring Period From: 3/01/16 To: 3/31/16

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

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

Day of the month	Days Plant Started or Visited by Operator (Place X)	Hours Plant in Operation	Net Quality of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak flow rate, gpd	Lowest Residual Disinfectant concentration Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose required, mW-sec/cm2	Lowest Residual Disinfectant concentration at Remote Point in Distribution System, mg/L		
1		24	33500												
2	X	24	33500												1.4
3		24	33000												
4	X	24	33000												1.3
5		24	36333												
6		24	36333												
7	X	24	36333												1.3
8		24	35000												
9	X	24	35000												1.3
10		24	18000												
11	X	24	18000												1.6
12		24	21000												
13		24	21000												
14	X	24	21000												2.1
15		24	22000												
16	X	24	22000												1.6
17		24	22000												
18	X	24	22000												1.6
19		24	21667												
20		24	21667												
21	X	24	21667												0.5
22		24	12000												
23		24	12000												
24		24	13000												
25	X	24	13000												0.5
26		24	13667												
27		24	13667												
28	X	24	13667												0.5
29		24	52500												
30	X	24	52500												2.5
31		24	16000												
<b>Total</b>			776000												
<b>Average</b>			25032												
<b>Maximum</b>			52500												

\*Refer to the instructions for this report to determine which plants must provide this information  
 DEP Form 62-581-900(3)  
 Effective Aug. 01





DRINKING WATER BACTERIOLOGICAL ANALYSIS

MID FLORIDA WATER LABORATORY

8 Oakwood Road - Winter Haven, FL 33880
Phone (863) 965-2540 • Fax (863) 967-8601
Lab I.D. #E84967 - Margaret Rajpaul - Director, Contact Person
NELAC CERTIFIED

16
Lab Receipt Date & Time:
Analysis Date & Time:
Sample Acceptance Criteria:
Sample Preservation: Office, Not Office
Disinfectant Check: Not Detected
This sample does not meet the following NELAC requirements:
Analysis 4/21/16 @ 9:30am

Report Number: Sub-Contract Lab ID:

Analysis Requested: (check all that apply)
Total Coliform/E-Coli Total Coliform/Fecal Enterococci Coliform HPC Other

System Name: Village of Charlie Creek

PWS I.D. 6250278

System Address: SR 164 E

County: Hardee

System or Owner's Phone #:

Fax #:

Collector:

Collector's Phone #: 965 2599

Type of Supply: (check only one)

- Community Water System Noncommunity Water System Nontransient Noncommunity Water System Limited Use System
Private Well Swimming Pool Bottled Water Other

Reason for Sampling: (check all that apply)

- Distribution Routine Distribution Repeat Raw (triggered or assessment) Raw (triggered or assessment) additional Well Survey
Clearance Replacement (also check type of sample being replaced) Boil Water Notice Other

Sample Collection Date: 4/21/16

Table with columns: Sample Number, Sample Point (Location or Specific Address), Lab Sample Number, Collection Time, Sample Type, Disinfect Res'd (mg/L), pH, Total Coliform Analysis Method, Non Coliform, Total Coliform, Fecal or E. coli, Data Qualifier. Rows include Well 1, Well 2, and 1154.

Average of disinfectant residuals for routine and repeat samples. (Complete for community and non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.)

0.97
All tests are performed in accordance with NELAC standards.
The test results in this report only relate to the analyses of the samples submitted.

Disinfectant Residual Analysis Method: DPD Colorimetric Other
Person performing analysis is (Please see instructions on reverse):
A certified operator (#) Employed by a certified lab
Supervised by a cert. operator (#) 1476 Employed by DEP or DOH
Authorized representative of supplier of water

Date PWS notified by lab of positive results:
Date State notified by lab of positive results:
Lab Signatory: Title:
DEP/DOH USE ONLY

Name and Mailing Address of Person to Receive Report

Consta Flow, Inc
5574 Commercial Blvd
Winter Haven, FL 33880

Satisfactory Incomplete Collection Information Repeat Samples Required Replacement Samples Required
Date Reviewed by DEP/DOH:
DEP/DOH Reviewing Official:

# Charlie Creek Utilities, LLC

Tuesday, January 24, 2017

## Billing Summary 4/1/2016 to 4/30/2016

<u>water</u>														
	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			633700		\$154.00		\$0.00		\$0.00		\$175.00		(\$896.87)	
water			\$2,517.73	\$1,980.00		\$0.00		\$0.00		\$0.00		\$4,826.73		\$3,929.86
# of Customers Billed	133													
<u>General</u>														
	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			280		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	\$0.00
General			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	24													
<u>Unused</u>														
	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			1100		\$0.00		\$0.00		\$0.00		\$0.00		(\$19.11)	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		(\$19.11)
# of Customers Billed	1													
<b>Report Totals</b>	<b># of Cust Billed</b>		<b>635080</b>	<b>\$1,980.00</b>	<b>\$154.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$175.00</b>	<b>\$4,826.73</b>	<b>(\$915.98)</b>	<b>\$3,910.75</b>
		133	\$2,517.73	\$1,980.00	52	0	0	\$0.00		\$0.00				



PLANT NAME: Village of Charlie Creek Monitoring Period From: 4/01/16 To: 4/30/16  
(WATER REPORT)

DAY	METER 1	METER 2	TRC	PH	TRC	PH	MULT.	1000	Bact.
PREV	49335	28404					#REF!		
1	49356	28404	2.9		1.5		21000		
2							23000		
3							23000		
4	49425	28404	2.4		1.2		23000		
5							23500		
6	49472	28404	1.4		1.1		23500		
7							23000		
8	49518	28404	1.5		1.2		23000		
9							25000		
10							25000		
11	49593	28404	2.0		1.8		25000		
12							21500		
13	49636	28404	2.0		1.8		21500		
14							24000		
15	49684	28404	2.0		1.8		24000		
16							25667		
17							25667		
18	49761	28404	2.0		1.8		25667		
19							25000		
20	49811	28406	2.3		1.9		25000		
21							24000		
22	49859	28406	2.3		1.9		24000		
23							25667		
24							25667		
25	49936	28406	2.3		1.9		25667		
26							31500		
27	49999	28406	2.3		1.9		31500		
28							24000		
29	50047	28406	2.0		1.8		24000		
30	50073	28406					26000		
Total Flow							738000		
ADF							24600		
MAX			2.9		1.9		31500		
MIN			1.4		1.1		21000		

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

PWS: Identification Number: **6250278** Plant Name: **VILLAGE OF CHARLIE CREEK**

Monitoring Period From: **4/01/16** To: **4/30/16**

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

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

Day of the month	Days Plant Staffed or Visited by Operator (Place X)	Hours Plant in Operation	Net Quality of Finished Water Produced, gal	CT Calculations, or UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak flow rate gpd	Lowest Residual Disinfectant concentration Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum CT, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>			Minimum UV Dose required, mW-sec/cm <sup>2</sup>
1	X	24	21000										1.5	
2		24	23000											
3		24	23000											
4	X	24	23000										1.2	
5		24	23500											
6	X	24	23500										1.1	
7		24	23000											
8	X	24	23000										1.2	
9		24	25000											
10		24	25000											
11	X	24	25000										1.8	
12		24	21500											
13	X	24	21500										1.8	
14		24	24000											
15	X	24	24000										1.8	
16		24	25667											
17		24	25667											
18	X	24	25667										1.8	
19		24	25000											
20	X	24	25000										1.9	
21		24	24000											
22	X	24	24000										1.9	
23		24	25667											
24		24	26667											
25	X	24	25667										1.9	
26		24	31500											
27	X	24	31500										1.9	
28		24	24000											
29	X	24	24000										1.8	
30		24	26000											
<b>Total</b>			<b>738000</b>											
<b>Average</b>			<b>24500</b>											
<b>Maximum</b>			<b>31500</b>											

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

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

**I. General Information for the Month/Year of:** \_\_\_\_\_ **Monitoring Period From:** 5/01/16 **To:** 5/31/16

**A. Public Water System (PWS) Information**

PWS Name: VILLAGE OF CHARLIE CREEK		PWS Identification Number: 6250278	
PWS Type: <input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive
Number of Service Connections at End of Month: 153		Total Population Served at End of Month: 138	
PWS Owner:			
Contact Person: MIKE SMALLRIDGE		Contact Person's Title: UTILITY MANAGER	
Contact Person's Mailing Address: 3336 GRAND BLVD		City: HOLIDAY	State: FL Zip Code: 33890
Contact Person's Telephone Number: 352-302-7406		Contact Person's Fax Number: 863-229-5991	
Contact Person's E-Mail Address: UTILITYCONSULTANT@YAHOO.COM			


**Water Treatment Plant Information**

Plant Name: VILLAGE OF CHARLIE CREEK		Plant Telephone Number: 863-537-1971	
Plant Address: SR 64 EAST		City: ZOLFO SPRINGS	State: FL Zip Code: 33873
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating capacity of Plant, gallons per day: 133,000			
Plant Category ( per subsection 62-699.310(4), F.A.C.): V		Plant Class: C	

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	GAINES ALEXANDER	C	C-5472	
Other Operators:	DANNY ALEXANDER	C	C-12379	13
	JENNIFER ALEXANDER	C	C-21471	

**II. Certification by Lead/Chief Operator**

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

 \_\_\_\_\_  
 Signature and Date                      2016/06/10

DANNY ALEXANDER  
 Printed or Typed Name

C-12379  
 License Number



DRINKING WATER BACTERIOLOGICAL ANALYSIS

MID FLORIDA WATER LABORATORY

8 Oakwood Road - Winter Haven, FL 33880
Phone (863) 965-2540 • Fax (863) 967-8601
Lab I.D. #E84567 • Margaret Rajpaul - Director, Contact Person
NELAC CERTIFIED

Report Number: Sub-Contract Lab ID:

Analysis Requested: (check all that apply)

- Total Coliform/E-Coli Total Coliform/Fecal Enterocci Colilert HPC Other

System Name: Village of Charlie Creek

PWS I.D. 6530278

System Address: SR 64 E

County: Hardee

System or Owner's Phone #: Collector: Danny Alex Amoler

Fax #: Collector's Phone #: 965 2599

Type of Supply: (check only one)

- Community Water System Noncommunity Water System Nontransient Noncommunity Water System Limited Use System
Private Well Swimming Pool Bottled Water Other

Reason for Sampling: (check all that apply)

- Distribution Routine Distribution Repeat Raw (triggered or assessment) Raw (triggered or assessment) additional Well Survey
Clearance Replacement (also check type of sample being replaced) Boil Water Notice Other

Sample Collection Date: 5-06-2016

To be completed by collector of sample

Table with columns: Sample Number, Sample Point (Location or Specific Address), Lab Sample Number, Collection Time, Sample Type, Disinfect Res'd (mg/L), pH. Rows include Well 1, Well 2, and 1062 Blue jay.

To be completed by lab

Table for lab results with columns: Total Coliform Analysis Method, Non Coliform, Total Coliform, Fecal or E. coli, Data Qualifier. Results show 'A' for all categories.

Average of disinfectant residuals for routine and repeat samples. (Complete for community and non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.)

1187 All tests are performed in accordance with NELAC standards. The test results in this report only relate to the analyses of the samples submitted.

Disinfectant Residual Analysis Method: DPD Colorimetric
Person performing analysis is: A certified operator (# 21471)
Supervised by a cert. operator (# 21471)
Authorized representative of supplier of water

Date PWS notified by lab of positive results:
Date State notified by lab of positive results:
Lab Signature: [Signature] Date: 5/7/16
Title: Lab Manager

Name and Mailing Address of Person to Receive Report

Consta Flow, Inc
5574 Commercial Blvd
Winter Haven, FL 33880

DEP/DOH USE ONLY
Satisfactory
Incomplete Collection Information
Repeat Samples Required Replacement Samples Required
Date Reviewed by DEP/DOH:
DEP/DOH Reviewing Official:

DEP Sample Type Codes: D - Distribution (Routine Compliance); C = Repeat or Check; R = Raw; N = Entry to Distribution; P = Plant Tap; S = Special (clearance, etc.)
Analysis Methods: MF = SM9222B & D; MTF = 9221B & EC/MUG; MMO/MUG = SM9223B; HPC = SM9215B
Results: A = coliforms are absent; P = coliforms are present; C = confluent growth; TNTC = too numerous to count

# Charlie Creek Utilities, LLC

Tuesday, January 24, 2017

## Billing Summary 5/1/2016 to 5/31/2016

### water

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			638120		\$158.00		\$0.00		\$0.00		\$170.00		(\$678.87)	
water			\$2,628.39	\$2,055.00		\$195.00		\$0.00		\$0.00		\$5,206.39		\$4,527.52
# of Customers Billed	141													

### General

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			1910		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
General			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	22													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total							\$0.00		\$0.00		\$0.00			
Unused				\$21.87				\$0.00		\$0.00		\$21.87		\$21.87
# of Customers Billed	1													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total							\$0.00		\$0.00		\$0.00			
Unused				\$31.94				\$0.00		\$0.00		\$31.94		\$31.94
# of Customers Billed	1													



<b>Report</b>			640030		\$158.00	\$0.00		\$0.00	\$170.00		(\$678.87)	
<b>Totals</b>	# of Cust Billed	142	\$2,682.20	\$2,055.00	\$195.00	0	\$0.00	\$0.00	\$5,260.20	34		\$4,581.33

PLANT NAME: Village of Charlie Creek Monitoring Period From: 5/01/16 To: 5/31/16  
(WATER REPORT)

DAY	METER 1	METER 2	TRC	PH	TRC	PH	MULT.	1000	Bact.
PREV	49335	28404					#REF!		
1	49356	28404	2.9		1.5		21000		
2							23000		
3							23000		
4	49425	28404	2.4		1.2		23000		
5							23500		
6	49472	28404	1.4		1.1		23500		
7							23000		
8	49518	28404	1.5		1.2		23000		
9							25000		
10							25000		
11	49593	28404	2.0		1.8		25000		
12							21500		
13	49636	28404	2.0		1.8		21500		
14							24000		
15	49684	28404	2.0		1.8		24000		
16							25667		
17							25667		
18	49761	28404	2.0		1.8		25667		
19							25000		
20	49811	28406	2.3		1.9		25000		
21							24000		
22	49859	28406	2.3		1.9		24000		
23							25667		
24							25667		
25	49936	28406	2.3		1.9		25667		
26							31500		
27	49999	28406	2.3		1.9		31500		
28							24000		
29	50047	28406	2.0		1.8		24000		
30	50073	28406					26000		
31	50846	28406					24500		
Total Flow							738000		
ADF							24600		
MAX			2.9		1.9		31500		
MIN			1.4		1.1		21000		

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

PWS: Identification Number: 6250278 Plant Name: VILLAGE OF CHARLIE CREEK

Monitoring Period From: 5/01/16 To: 5/31/16  
 Means of Achieving Four-Log Virus Inactivation / Removal: \*  **Free Chlorine**  Chlorine Dioxide  Ozone  Combined Chlorine(Chloramines)  
 Ultraviolet Radiation  Other: (Describe): \_\_\_\_\_

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

Day of the month	Days Plant Staffed or Visited by Operator (Place X)	Hours Plant in Operation	Net Quality of Finished Water Produced: gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak flow rate: gpd	Lowest Residual Disinfectant concentration before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum CT, Required mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>			Minimum UV Dose required, mW-sec/cm <sup>2</sup>
1	X	24	21000										1.5	
2		24	23000											
3		24	23000											
4	X	24	23000										1.2	
5		24	23500											
6	X	24	23500										1.1	
7		24	23000											
8	X	24	23000										1.2	
9		24	25000											
10		24	25000											
11	X	24	25000										1.8	
12		24	21500											
13	X	24	21500										1.8	
14		24	24000											
15	X	24	24000										1.8	
16		24	25667											
17		24	25667											
18	X	24	25667										1.8	
19		24	25000											
20	X	24	25000										1.9	
21		24	24000											
22	X	24	24000										1.9	
23		24	25667											
24		24	25667											
25	X	24	25667										1.9	
26		24	31500											
27	X	24	31500										1.9	
28		24	24000											
29	X	24	24000										1.8	
30		24	26000											
31		24	24500											
<b>Total</b>			738000											
<b>Average</b>			24600											
<b>Maximum</b>			31500											

\*Refer to the instructions for this report to determine which plants must provide this information.  
 DEP Form 02-655 900(3)  
 Effective Aug X

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

**I. General Information for the Month/Year of:** Monitoring Period From: 6/01/16 To: 6/30/16

**A. Public Water System (PWS) Information**

PWS Name:	VILLAGE OF CHARLIE CREEK			PWS Identification Number:	6250278
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	153		Total Population Served at End of Month:	138	
PWS Owner:					
Contact Person :	MIKE SMALLRIDGE		Contact Person's Title:	UTILITY MANAGER	
Contact Person's Mailing Address:	3336 GRAND BLVD	City:	HOLIDAY	State:	FL Zip Code: 33890
Contact Person's Telephone Number:	352-302-7406		Contact Person's Fax Number:	863-229-5991	
Contact Person's E-Mail Address:	UTILITYCONSULTANT@YAHOO.COM				


**B. Water Treatment Plant Information**

Plant Name:	VILLAGE OF CHARLIE CREEK		Plant Telephone Number:	863-537-1971	
Plant Address:	SR 64 EAST	City:	ZOLFO SPRINGS	State:	FL Zip Code: 33873
Type of Water Treated by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating capacity of Plant, gallons per day:	133,000				
Plant Category ( per subsection 62-699.310(4), F.A.C.):	V		Plant Class:	C	

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	GAINES ALEXANDER	C	C-5472	
Other Operators:	DANNY ALEXANDER	C	C-12379	13
	JENNIFER ALEXANDER	C	C-21471	

**II. Certification by Lead/Chief Operator**

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

	2016/07/07	DANNY ALEXANDER	C-12379
Signature and Date		Printed or Typed Name	License Number



DRINKING WATER  
BACTERIOLOGICAL ANALYSIS

MID FLORIDA WATER LABORATORY

8 Oakwood Road - Winter Haven, FL 33880  
Phone (863) 965-2540 • Fax (863) 967-8601  
Lab I.D. #E84567 • Margaret Rajpaul - Director, Contact Person  
NELAC CERTIFIED

Lab Receipt Date & Time: \_\_\_\_\_  
Analysis Date & Time: **RECEIVED**  
Sample Acceptance Criteria:  
Sample Preservation:  On Ice  Not On Ice **6.4 °C**  
Disinfectant Check:  Not Detected **6/17/19 8:49** mg/L  
This sample does not meet the following NELAC requirements:  
**Analysis 6/17/19 @ 9:20am**

Report Number: \_\_\_\_\_ Sub-Contract Lab ID: \_\_\_\_\_

Analysis Requested: (check all that apply)

- Total Coliform/E-Coli  Total Coliform/Fecal  Enterococci  Coliform  HPC  Other: \_\_\_\_\_

System Name: **Village @ Charlie Creek**

PWS I.D. **6250278**

System Address: **SR 169E**

County: **Hardee**

System or Owner's Phone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Collector: **Justin Alexander**

Collector's Phone #: **9652599**

Type of Supply: (check only one)

- Community Water System  Noncommunity Water System  Nontransient Noncommunity Water System  Limited Use System  
 Private Well  Swimming Pool  Bottled Water  Other \_\_\_\_\_

Reason for Sampling: (check all that apply)

- Distribution Routine  Distribution Repeat  Raw (triggered or assessment)  Raw (triggered or assessment) additional  Well Survey  
 Clearance  Replacement (also check type of sample being replaced)  Boil Water Notice  Other \_\_\_\_\_

Sample Collection Date: **6-16-19**

To be completed by collector of sample

To be completed by lab

Sample Number	Sample Point (Location or Specific Address)	Lab Sample Number	Collection Time	Sample Type <sup>1</sup>	Disinfect Res'd (mg/L)	pH
<b>1/3</b>	<b>Well 1</b>	<b>007764</b>	<b>11:30</b>	<b>R</b>	<b>✓</b>	<b>7.8</b>
<b>2/3</b>	<b>Well 2</b>	<b>007765</b>	<b>11:35</b>	<b>R</b>	<b>✓</b>	<b>7.8</b>
<b>3/3</b>	<b>1243 Mockingbird</b>	<b>007766</b>	<b>11:45</b>	<b>D</b>	<b>1.9</b>	<b>7.6</b>

Total Coliform Analysis Method <b>SM9222B</b>			
Fecal or E. coli Analysis Method <b>SM9222C</b>			
Non Coliform	Total Coliform	Fecal or E. coli	Data Qualifier <sup>2</sup>
	<b>A</b>	<b>A</b>	
	<b>A</b>	<b>A</b>	
	<b>A</b>	<b>A</b>	

Average of disinfectant residuals for routine and repeat samples. (Complete for community and non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.)

**1.9** All tests are performed in accordance with NELAC standards. The test results in this report only relate to the analyses of the samples submitted.

Disinfectant Residual Analysis Method:  DPD Colorimetric  Other: \_\_\_\_\_  
Person performing analysis is (Please see instructions on reverse):  
 A certified operator (# \_\_\_\_\_)  Employed by a certified lab  
 Supervised by a cert. operator (# **2147**)  Employed by DEP or DOH  
 Authorized representative of supplier of water \_\_\_\_\_

Date PWS notified by lab of positive results: \_\_\_\_\_  
Date State notified by lab of positive results: \_\_\_\_\_  
Lab Signature: **Justin Alexander** Date: **6/18/19**  
Title: **Lab Manager**

Name and Mailing Address of Person to Receive Report  
**Consta Flow, Inc**  
5574 Commercial Blvd  
Winter Haven, FL 33880

DEP/DOH USE ONLY  
 Satisfactory  
 Incomplete Collection Information  
 Repeat Samples Required  Replacement Samples Required  
Date Reviewed by DEP/DOH: \_\_\_\_\_  
DEP/DOH Reviewing Official: \_\_\_\_\_



# Charlie Creek Utilities, LLC

Tuesday, January 24, 2017

## Billing Summary 6/1/2016 to 6/30/2016

### water

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			668550		\$107.00		\$0.00		\$0.00		\$205.00		(\$55.48)	
water			\$2,705.78	\$2,145.00		\$105.00		\$0.00		\$0.00		\$5,267.78		\$5,212.30
# of Customers Billed	145													

### General

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
General			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	19													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total							\$0.00		\$0.00		\$0.00		(\$22.25)	
Unused				\$68.64				\$0.00		\$0.00		\$68.64		\$46.39
# of Customers Billed	2													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			0		\$3.00		\$0.00		\$0.00		\$0.00		(\$33.00)	
Unused			\$0.00	\$0.00		\$30.00		\$0.00		\$0.00		\$33.00		\$0.00
# of Customers Billed	1													

<b>Report</b>			668550		\$110.00		\$0.00		\$0.00	\$205.00		(\$110.73)	
<b>Totals</b>	<b># of Cust Billed</b>	147	\$2,774.42	\$2,145.00	31	\$135.00	0	\$0.00	\$0.00	41	\$5,369.42		\$5,258.69

PLANT NAME: Village of Charlie Creek Monitoring Period From: 6/01/16 To: 6/30/16  
(WATER REPORT)

DAY	METER 1	METER 2	TRC	PH	TRC	PH	MULT.	1000	Bact.
PREV	50846	28404					#REF!		
1	50871	28404	3.5		2.1		25000		
2							27000		
3	50925	28404	2.3		1.9		27000		
4							29000		
5							29000		
6	51012	28404	2.3		1.9		29000		
7							35000		
8	51082	28404	1.6		1.2		35000		
9							22500		
10	51127	28404	3.8		2.9		22500		
11							21667		
12							21667		
13	51192	28404	3.8		2.9		21667		
14							22000		
15	51236	28404	3.8		2.9		22000		
16							7000		
17	51250	28432	1.6		1.2		7000		
18							8667		
19							8667		
20	51276	28480	0.8		0.2		8667		
21							24000		
22	51324	28480	3.9		3.0		24000		
23							24000		
24	51372	28480	1.5		1.1		24000		
25							30333		
26							30333		
27	51463	28480	3.4		2.4		30333		
28							25500		
29	51514	28480	3.5		2.5		25500		
30	51539	28480					25000		
Total Flow							693000		
ADF							23100		
MAX			3.9		3.0		35000		
MIN			0.8		0.2		7000		

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

PWS: Identification Number: 6250278 Plant Name: VILLAGE OF CHARLIE CREEK

Monitoring Period From: 6/9/16 To: 6/30/16

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

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

Day of the month	Days Plant Staffed or Visited by Operator (Place X)	Hours Plant in Operation	Net Quality of Finished Water Produced, gal	CT Calculators or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculators					UV Dose							
				Peak flow rate, gpd	Lowest Residual Disinfectant concentration Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-Sec/cm2	Minimum UV Dose required, mW-Sec/cm2				
1	X	24	25000												2.1	
2		24	27000												1.9	
3	X	24	27000													
4		24	29000													
5		24	29000													
6	X	24	29000												1.9	
7		24	35000													
8	X	24	35000												1.2	
9		24	22500													
10	X	24	22500												2.9	
11		24	21667													
12		24	21667													
13	X	24	21667												2.9	
14		24	22000													
15	X	24	22000												2.9	
16		24	7000													
17	X	24	7000												1.2	
18		24	8667													
19		24	8667													
20	X	24	8667												0.2	
21		24	24000													
22	X	24	24000												3.0	
23		24	24000													
24	X	24	24000												1.1	
25		24	30333													
26		24	30333													
27	X	24	30333												2.4	
28	X	24	25500												2.5	
29		24	25000													
30		24	25000													
<b>Total</b>			693000													
<b>Average</b>			23100													
<b>Maximum</b>			35000													


\*Refer to the instructions for this report to determine which plants must provide this information  
 DEF Form G2-555 (06/03)  
 Effective Aug 08

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

<b>I. General Information for the Month/Year of:</b>		Monitoring Period From: 7/01/16 To: 7/31/16	
<b>A. Public Water System (PWS) Information</b>			
PWS Name: VILLAGE OF CHARLIE CREEK		PWS Identification Number: 6250278	
PWS Type: <input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive
Number of Service Connections at End of Month: 153		Total Population Served at End of Month: 138	
PWS Owner:			
Contact Person: MIKE SMALLRIDGE		Contact Person's Title: UTILITY MANAGER	
Contact Person's Mailing Address: 3336 GRAND BLVD		City: HOLIDAY	State: FL Zip Code: 33890
Contact Person's Telephone Number: 352-302-7406		Contact Person's Fax Number: 863-229-5991	
Contact Person's E-Mail Address: UTILITYCONSULTANT@YAHOO.COM			
<b>B. Water Treatment Plant Information</b>			
Plant Name: VILLAGE OF CHARLIE CREEK		Plant Telephone Number: 863-537-1971	
Plant Address: SR 64 EAST		City: ZOLFO SPRINGS	State: FL Zip Code: 33873
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating capacity of Plant, gallons per day: 133,000			
Plant Category ( per subsection 62-699.310(4), F.A.C.): V		Plant Class: C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b> <b>Day(s)/Shift(s) Worked</b>
<b>Lead/Chief Operator:</b>	GAINES ALEXANDER	C	C-5472
<b>Other Operators:</b>	DANNY ALEXANDER	C	C-12379 12
	JENNIFER ALEXANDER	C	C-21471

**II. Certification by Lead/Chief Operator**

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

 2016/08/07      DANNY ALEXANDER      C-12379  
 Signature and Date      Printed or Typed Name      License Number





DRINKING WATER  
BACTERIOLOGICAL ANALYSIS

MID FLORIDA WATER LABORATORY

8 Oakwood Road - Winter Haven, FL 33880  
Phone (863) 965-2540 • Fax (863) 967-8601  
Lab I.D. #E84567 • Margaret Rajpaul - Director, Contact Person  
NELAC CERTIFIED

Lab Receipt Date & Time: **RECEIVED**

Analysis Date & Time: **7/26/16 @ 9:35**

Sample Acceptance Criteria: **2015 MUG 26 A 9:00**

Sample Presentation:  On Ice  Not On Ice **63** °C

Disinfectant Check:  Not Detected  \_\_\_\_\_ mg/L

This sample does not meet the following NELAC requirements:

Report Number: \_\_\_\_\_ Sub-Contract Lab ID: \_\_\_\_\_

Analysis Requested: (check all that apply)

- Total Coliform/E-Coli
- Total Coliform/Fecal
- Enterococci
- Colilert
- HPC
- Other: \_\_\_\_\_

System Name: **Village @ Chautau Creek**

PWS I.D. **6250278**

System Address: **SR 64 E**

County: **Hardee**

System or Owners Phone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Collector: **Jennifer Alexander**

Collector's Phone #: **965 2599**

Type of Supply: (check only one)

- Community Water System
- Noncommunity Water System
- Nontransient Noncommunity Water System
- Limited Use System
- Private Well
- Swimming Pool
- Bottled Water
- Other \_\_\_\_\_

Reason for Sampling: (check all that apply)

- Distribution Routine
- Distribution Repeat
- Raw (triggered or assessment)
- Raw (triggered or assessment) additional
- Well Survey
- Clearance
- Replacement (also check type of sample being replaced)
- Boil Water Notice
- Other \_\_\_\_\_

Sample Collection Date: **7/25/16**

To be completed by collector of sample

To be completed by lab

Sample Number	Sample Point (Location or Specific Address)	Lab Sample Number	Collection Time	Sample Type <sup>1</sup>	Disinfect Res'd (mg/L)	pH
<b>1/3</b>	<b>Well 1</b>	<b>009434</b>	<b>1720</b>	<b>R</b>	<b>✓</b>	
<b>2/3</b>	<b>Well 2</b>	<b>009435</b>	<b>1723</b>	<b>R</b>	<b>✓</b>	
<b>3/3</b>	<b>1011 Morgan Brice</b>	<b>009436</b>	<b>1734</b>	<b>D</b>	<b>0.62</b>	

Total Coliform Analysis Method <b>SM9000 B</b>			
Non Coliform	Total Coliform	Fecal or E. coli	Data Qualifier <sup>2</sup>
	<b>A</b>	<b>A</b>	
	<b>A</b>	<b>A</b>	
	<b>A</b>	<b>A</b>	

Average of disinfectant residuals for routine and repeat samples. (Complete for community and non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average)

**62** All tests are performed in accordance with NELAC standards. The test results in this report only relate to the analyses of the samples submitted.

Disinfectant Residual Analysis Method:  DPD Colorimetric  Other: \_\_\_\_\_

Person performing analysis is (Please see instructions on reverse):

- A certified operator (# \_\_\_\_\_)
- Supervised by a cert. operator (# **21471**)
- Authorized representative of supplier of water
- Employed by a certified lab
- Employed by DEP or DOH

Date PWS notified by lab of positive results: \_\_\_\_\_

Date State notified by lab of positive results: \_\_\_\_\_

Lab Signature: **[Signature]** Date: **7/27/16**

Title: **Lab Manager**

Name and Mailing Address of Person to Receive Report

**Consta Flow, Inc**  
**5574 Commercial Blvd**  
**Winter Haven, FL 33890**

DEP/DOH USE ONLY

- Satisfactory
- Incomplete Collection Information
- Repeat Samples Required
- Replacement Samples Required

Date Reviewed by DEP/DOH: \_\_\_\_\_

DEP/DOH Reviewing Official: \_\_\_\_\_

# Charlie Creek Utilities, LLC

Tuesday, January 24, 2017

## Billing Summary 7/1/2016 to 7/31/2016

### water

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			722470		\$132.00		\$0.00		\$0.00		\$220.00		(\$95.39)	
water			\$3,185.85	\$2,115.00		\$40.00		\$0.00		\$0.00		\$5,692.85		\$5,597.46
# of Customers Billed	149													

### General

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
General			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	17													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total							\$0.00		\$0.00		\$0.00			
Unused				\$15.54				\$0.00		\$0.00		\$15.54		\$15.54
# of Customers Billed	1													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total							\$0.00		\$0.00		\$0.00			
Unused				\$46.39				\$0.00		\$0.00		\$46.39		\$46.39
# of Customers Billed	1													

<b>Report</b>			722470		\$132.00		\$0.00		\$0.00	\$220.00		(\$95.39)	
<b>Totals</b>	<b># of Cust Billed</b>	151	\$3,247.78	\$2,115.00	\$40.00		\$0.00		\$0.00	\$5,754.78		\$5,659.39	
					44	2	0			44			

PLANT NAME: Village of Charlie Creek Monitoring Period From: 7/01/16 To: 7/31/16  
(WATER REPORT)

DAY	METER 1	METER 2	TRC	PH	TRC	PH	MULT.	1000	Bact.
PREV	51539	28400					#REF!		
1	51564	28400	2.7		2.4		25000		
2							24000		
3							24000		
4	51636						24000		
5							24500		
6	51685	28400	3.9		3.4		24500		
7							33000		
8	51751	28400	3.9		3.4		33000		
9							31000		
10							31000		
11	51844	28400	3.9		3.0		31000		
12							40500		
13	51925	28400	2.8		2.5		40500		
14							28000		
15	51981	28400	0.8		0.3		28000		
16							23667		
17							23667		
18	52052	28400	3.1		2.0		23667		
19							23000		
20	52098	28400	2.6		2.2		23000		
21							22000		
22	52142	28400	2.6		2.2		22000		
23							25667		
24							25667		
25	52219	28400	2.6		2.2		25667		
26							25000		
27	52269	28400	3.2		2.1		25000		
28							25000		
29	52319	28400	2.9		1.8		25000		
30							26000		
31	52371	28400					26000		
Total Flow							832000		
ADF							26839		
MAX			3.9		3.4		40500		
MIN			0.8		0.3		22000		

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

PWS Identification Number: 6250278 Plant Name: VILLAGE OF CHARLIE CREEK

Monitoring Period From: 7/01/16 To: 7/31/16  
 Means of Achieving Four-Log Virus Inactivation / Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine/Chloramines  
 Ultraviolet Radiation  Other: (Describe):

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

Day of the month	Days Plant Started or Visited by Operator (Place X)	Hours Plant in Operation	Net Quality of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*							Lowest Residual Disinfectant concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations				UV Dose						
				Peak flow rate gpd.	Lowest Residual Disinfectant concentration Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum CT Required mg-min/L			Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>	Minimum UV Dose required, mW-sec/cm <sup>2</sup>
1	X	24	25000										2.4	
2		24	24000											
3		24	24000											
4		24	24000											
5		24	24500											
6	X	24	24500										3.4	
7		24	33000											
8	X	24	33000										3.4	
9		24	31000											
10		24	31000											
11	X	24	31000										3.0	
12		24	40500											
13	X	24	40500										2.5	
14		24	28000											
15	X	24	28000										0.3	
16		24	23667											
17	X	24	23667										2.0	
18		24	23667											
19		24	23000											
20	X	24	23000										2.2	
21		24	22000											
22	X	24	22000										2.2	
23		24	25667											
24		24	25667											
25	X	24	25667										2.2	
26		24	25000											
27	X	24	25000										2.1	
28		24	25000											
29	X	24	25000										1.9	
30		24	26000											
31		24	26000											
<b>Total</b>			832000											
<b>Average</b>			26839											
<b>Maximum</b>			40500											

\*Refer to the instructions for this report to determine which plants must provide this information  
 DEP Form 40-535-00010  
 Effective Aug. 2

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

<b>I. General Information for the Month/Year of:</b>		Monitoring Period From: 8/01/16 To: 8/31/16	
<b>A. Public Water System (PWS) Information</b>			
PWS Name: VILLAGE OF CHARLIE CREEK		PWS Identification Number: 6250278	
PWS Type: <input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive
Number of Service Connections at End of Month: 153		Total Population Served at End of Month: 138	
PWS Owner:			
Contact Person: MIKE SMALLRIDGE		Contact Person's Title: UTILITY MANAGER	
Contact Person's Mailing Address: 3336 GRAND BLVD		City: HOLIDAY	State: FL Zip Code: 33890
Contact Person's Telephone Number: 352-302-7406		Contact Person's Fax Number: 863-229-5991	
Contact Person's E-Mail Address: UTILITYCONSULTANT@YAHOO.COM			
<b>B. Water Treatment Plant Information</b>			
Plant Name: VILLAGE OF CHARLIE CREEK		Plant Telephone Number: 863-537-1971	
Plant Address: SR 64 EAST		City: ZOLFO SPRINGS	State: FL Zip Code: 33873
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating capacity of Plant, gallons per day: 133,000			
Plant Category ( per subsection 62-699.310(4), F.A.C.): V		Plant Class: C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number/Day(s)/Shift(s) Worked</b>
Lead/Chief Operator:	GAINES ALEXANDER	C	C-5472
Other Operators:	DANNY ALEXANDER	C	C-12379 14
	JENNIFER ALEXANDER	C	C-21471
<b>III. Certification by Lead/Chief Operator</b>			

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

	2016/09/08	DANNY ALEXANDER	C-12379
Signature and Date		Printed or Typed Name	License Number



**DRINKING WATER  
BACTERIOLOGICAL ANALYSIS**



**MID FLORIDA WATER LABORATORY**

8 Oakwood Road - Winter Haven, FL 33880  
Phone (863) 965-2540 • Fax (863) 967-8601  
Lab I.D. #E84567 • Margaret Rajpaul - Director, Contact Person  
NELAC CERTIFIED

Report Number: \_\_\_\_\_ Sub-Contract Lab ID: \_\_\_\_\_

Analysis Requested: (check all that apply)

- Total Coliform/E-Coli    Total Coliform/Fecal    Enterocci    Colilert    HPC    Other: \_\_\_\_\_

System Name: Village @ Charlie Creek

PWS I.D. 6250278

System Address: SR 64 E

County: Hardee

System or Owner's Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Collector: Jusaa Alexander

Collector's Phone #: 965 2599

Type of Supply: (check only one)

- Community Water System    Noncommunity Water System    Nontransient Noncommunity Water System    Limited Use System  
 Private Well    Swimming Pool    Bottled Water    Other \_\_\_\_\_

Reason for Sampling: (check all that apply)

- Distribution Routine    Distribution Repeat    Raw (triggered or assessment)    Raw (triggered or assessment) additional    Well Survey  
 Clearance    Replacement (also check type of sample being replaced)    Boil Water Notice    Other \_\_\_\_\_

Sample Collection Date: 8-8-15

**To be completed by collector of sample**

Sample Number	Sample Point (Location or Specific Address)	Lab Sample Number	Collection Time	Sample Type <sup>1</sup>	Disinfect Res'd (mg/L)	pH
1/3	Well 1	009820	11:25	R	/	7.7
2/3	Well 2	009921	11:30	R	/	7.6
3/3	Chuck	009922	11:45	D	1.8	7.8

**To be completed by lab**

Total Coliform Analysis Method: <u>SM9222B</u>			
E. coli Analysis Method: <u>SM9222B EC</u>			
Non Coliform	Total Coliform	E. coli	Data Qualifier <sup>2</sup>
	A	A	
	A	A	
M	A	A	

**Average of disinfectant residuals for routine and repeat samples.** (Complete for community and non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.)

1.8

<sup>1</sup>Defined in Florida Administrative Code Rule 62-160, Table 1  
All tests are performed in accordance with NELAC standards.  
The test results in this report only relate to the analyses of the samples submitted.

Disinfectant Residual Analysis Method:  DPD Colorimetric    Other: \_\_\_\_\_

Person performing analysis is (Please see instructions on reverse):

- A certified operator (# \_\_\_\_\_)    Employed by a certified lab  
 Supervised by a cert. operator (# \_\_\_\_\_)    Employed by DEP or DOH  
 Authorized representative of supplier of water \_\_\_\_\_

Date PWS notified by lab of positive results: \_\_\_\_\_

Date State notified by lab of positive results: \_\_\_\_\_

Lab Signature: \_\_\_\_\_ Date: 8/10/16

Title: Lab Manager

**Name and Mailing Address of Person to Receive Report**

Consta Flow, Inc  
5574 Commercial Blvd  
Winter Haven, FL 33880

**DEP/DOH USE ONLY**

- Satisfactory    Incomplete Collection Information  
 Repeat Samples Required    Replacement Samples Required

Date Reviewed by DEP/DOH: \_\_\_\_\_

DEP/DOH Reviewing Official: \_\_\_\_\_

<sup>1</sup>DEP Sample Type Codes: D - Distribution (Routine Compliance); C = Repeat or Check; R = Raw; N = Entry to Distribution; P = Plant Tap; S = Special (clearance, etc.)  
Analysis Methods: MF = SM9222B & D; MTF = 9221B & EC/MUG; MMO/MUG = SM9223B; HPC = SM9215B  
Results: A = coliforms are absent; P = coliforms are present; C = confluent growth; TNTC = too numerous to count

# Charlie Creek Utilities, LLC

Tuesday, January 24, 2017

## Billing Summary 8/1/2016 to 8/31/2016

### water

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			691010		\$147.00		\$0.00		\$0.00		\$260.00		(\$434.97)	
water			\$2,826.02	\$2,085.00		\$150.00		\$0.00		\$0.00		\$5,468.02		\$5,033.05
# of Customers Billed	146													

### General

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			330		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
General			\$1.16	\$45.00		\$0.00		\$0.00		\$0.00		\$46.16		\$46.16
# of Customers Billed	3													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	2													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	5													

**Unused**

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	3													

**Unused**

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	1													

**Unused**

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	2													

			691340		\$147.00		\$0.00		\$0.00		\$260.00		(\$434.97)	
<b>Report Totals</b>	# of Cust Billed	149	\$2,827.18	\$2,130.00	49	\$150.00	6	0	\$0.00		\$0.00	52	\$5,514.18	\$5,079.21

PLANT NAME: Village of Charlie Creek Monitoring Period From: 8/01/16 To: 8/31/16  
(WATER REPORT)

DAY	METER 1	METER 2	TRC	PH	TRC	PH	MULT.	1000	Bact.
PREV	52371	28400					#REF!		
1	52397	28400	0.7		0.5		26000		
2							23000		
3	52443	28400	1.8		1.5		23000		
4							25000		
5	52493	28400	1.4		1.1		25000		
6							24667		
7							24667		
8	52567	28400	1.6		1.3		24667		
9							23000		
10	52613	28400	1.1		0.6		23000		
11							24000		
12	52661	28400	3.2		2.1		24000		
13							24000		
14							24000		
15	52733	28400	2.9		1.8		24000		
16							24000		
17	52781	28400	2.0		1.5		24000		
18							22000		
19	52825	28400	2.0		1.5		22000		
20							24667		
21							24667		
22	52899	28400	1.5		1.2		24667		
23							25500		
24	52950	28400	1.5		1.2		25500		
25							25000		
26	53000	28400	1.6		1.3		25000		
27							27333		
28							27333		
29	53082	28400	3.9		2.6		27333		
30							20000		
31	53122	28400	2.0		1.5		20000		
Total Flow							751000		
ADF							24226		
MAX			3.9		2.6		27333		
MIN			0.7		0.5		20000		

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

PWS: Identification Number **6250278** Plant Name: **VILLAGE OF CHARLIE CREEK**

Monitoring Period From: **8/01/16** To: **8/31/16**  
 Means of Achieving Four-Log Virus Inactivation / Removal: \*  **Free Chlorine**  Chlorine Dioxide  Ozone  Combined Chlorine(Chloramines)  
 Ultraviolet Radiation  Other (Describe):

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

Day of the month	Days Plant Started or Operator (Place X)	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	*CT Calculations or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak flow rate, gpd	Lowest Residual Disinfectant concentration Before or at First Customer During Peak Flow, mg/L	Distribution Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Required Based on a Free Chlorine During Peak Flow, mg-min/L	UV Dose, mJ/cm <sup>2</sup>	Minimum UV Dose required, mJ/cm <sup>2</sup>	Lowest Residual Disinfectant concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
1	X	24	26000									0.5	
2		24	23000										
3	X	24	23000									1.5	
4		24	25000										
5	X	24	25000									1.1	
6		24	24667										
7		24	24667										
8	X	24	24667									1.3	
9		24	23000										
10	X	24	23000									0.6	
11		24	24000										
12	X	24	24000									2.1	
13		24	24000										
14		24	24000										
15	X	24	24000									1.8	
16		24	24000										
17	X	24	24000									1.5	
18		24	22000										
19	X	24	22000									1.5	
20		24	24667										
21		24	24667										
22	X	24	24667									1.2	
23		24	25500										
24	X	24	25500									1.3	
25		24	25000										
26	X	24	26000									1.3	
27		24	27333										
28		24	27333										
29	X	24	27333									2.5	
30		24	20000										
31	X	24	20000									1.5	
<b>Total</b>			<b>751000</b>										
<b>Average</b>			<b>24226</b>										
<b>Minimum</b>			<b>27333</b>										

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

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

<b>I. General Information for the Month/Year of:</b>		Monitoring Period From: 9/01/16 To: 9/30/16	
<b>A. Public Water System (PWS) Information</b>			
PWS Name: VILLAGE OF CHARLIE CREEK		PWS Identification Number: 6250278	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive
Number of Service Connections at End of Month: 153		Total Population Served at End of Month: 138	
PWS Owner:			
Contact Person: MIKE SMALLRIDGE		Contact Person's Title: UTILITY MANAGER	
Contact Person's Mailing Address: 3336 GRAND BLVD		City: HOLIDAY	State: FL Zip Code: 33890
Contact Person's Telephone Number: 352-302-7406		Contact Person's Fax Number: 863-229-5991	
Contact Person's E-Mail Address: UTILITYCONSULTANT@YAHOO.COM			
<b>B. Water Treatment Plant Information</b>			
Plant Name: VILLAGE OF CHARLIE CREEK		Plant Telephone Number: 863-537-1971	
Plant Address: SR 64 EAST		City: ZOLFO SPRINGS	State: FL Zip Code: 33873
Type of Water Treated by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating capacity of Plant, gallons per day:		133,000	
Plant Category ( per subsection 62-699.310(4), F.A.C.): V		Plant Class: C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number/Day(s)/Shift(s) Worked</b>
<b>Lead/Chief Operator:</b>	GAINES ALEXANDER	C	C-5472
<b>Other Operators:</b>	DANNY ALEXANDER	C	C-12379 11
	JENNIFER ALEXANDER	C	C-21471
<b>II. Certification by Lead/Chief Operator</b>			

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

 \_\_\_\_\_  
Signature and Date                      2016/10/04

DANNY ALEXANDER  
Printed or Typed Name

C-12379  
License Number





DRINKING WATER BACTERIOLOGICAL ANALYSIS

MID FLORIDA WATER LABORATORY

8 Oakwood Road - Winter Haven, FL 33880
Phone (863) 965-2540 • Fax (863) 967-8601
Lab I.D. #E84567 • Margaret Rajpaul - Director, Contact Person
NELAC CERTIFIED

Report Number: Sub-Contract Lab ID:

Analysis Requested: (check all that apply)

- Total Coliform/E-Coli, Total Coliform/Fecal, Enterocci, Colilert, HPC, Other

System Name: Village of Charlie Creek

PWS I.D. 10250278

System Address: SK646

County: Hardee

System or Owner's Phone #:

Collector: Jennifer Alexander

Collector's Phone #: 965 2599

Type of Supply: (check only one)

- Community Water System, Noncommunity Water System, Nontransient Noncommunity Water System, Limited Use System, Private Well, Swimming Pool, Bottled Water, Other

Reason for Sampling: (check all that apply)

- Distribution Routine, Distribution Repeat, Raw (triggered or assessment), Raw (triggered or assessment) additional, Well Survey, Clearance, Replacement (also check type of sample being replaced), Boil Water Notice, Other

Sample Collection Date: 9/8/16

To be completed by collector of sample

To be completed by lab

Table with columns: Sample Number, Sample Point (Location or Specific Address), Lab Sample Number, Collection Time, Sample Type, Disinfect Res'd (mg/L), pH, Total Coliform Analysis Method, E. coli Analysis Method, Non Coliform, Total Coliform, E. coli, Data Qualifier?

Average of disinfectant residuals for routine and repeat samples. (Complete for community and non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.)

Defined in Florida Administrative Code Rule 62-160, Table 1. All tests are performed in accordance with NELAC standards. The test results in this report only relate to the analyses of the samples submitted.

Disinfectant Residual Analysis Method: DPD Colorimetric
Person performing analysis is: A certified operator (# 21471), Supervised by a cert. operator (# 21471), Authorized representative of supplier of water

Date PWS notified by lab of positive results, Date State notified by lab of positive results, Lab Signature: Julie M. ... Date 9/10/16, Title: Lab Manager

Name and Mailing Address of Person to Receive Report: Consta Flow, Inc, 5574 Commercial Blvd, Winter Haven, FL 33880

DEP/DOH USE ONLY: Satisfactory, Incomplete Collection Information, Repeat Samples Required, Replacement Samples Required, Date Reviewed by DEP/DOH, DEP/DOH Reviewing Official

# Charlie Creek Utilities, LLC

Tuesday, January 24, 2017

## Billing Summary 9/1/2016 to 9/30/2016

### water

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			764870		\$148.00		\$0.00		\$0.00		\$230.00		(\$942.21)	
water			\$3,316.41	\$2,100.00		\$40.00		\$0.00		\$0.00		\$5,834.41		\$4,892.20
# of Customers Billed	147													

### General

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			780		\$0.00		\$0.00		\$0.00		\$0.00		\$15.00	
General			\$2.73	\$30.00		\$0.00		\$0.00		\$0.00		\$32.73		\$47.73
# of Customers Billed	2													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total							\$0.00		\$0.00		\$0.00			
Unused				(\$30.00)				\$0.00		\$0.00		(\$30.00)		(\$30.00)
# of Customers Billed	1													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	2													

**Unused**

Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
		0		\$0.00		\$0.00		\$0.00		\$0.00		\$15.00	
		\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$15.00
# of Customers Billed	7												

**Unused**

Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
		0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
		\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	4												

**Unused**

Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
		0		\$0.00		\$0.00		\$0.00		\$0.00		\$12.00	
		\$30.00	\$30.00		\$0.00		\$0.00		\$0.00		\$30.00		\$42.00
# of Customers Billed	2												

**Unused**

Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
		0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
		\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	2												

<b>Report Totals</b>		765650		\$148.00		\$0.00		\$0.00		\$230.00		(\$900.21)	
# of Cust Billed	151	\$3,319.14	\$2,130.00	50	2	0	\$0.00		\$0.00		\$5,867.14		\$4,966.93
										46			

PLANT NAME: Village of Charlie Creek Monitoring Period From: 9/01/16 To: 9/30/16  
(WATER REPORT)

DAY	METER 1	METER 2	TRC	PH	TRC	PH	MULT.	1000	Bact.
PREV	53122	28400					#REF!		
1							20500		
2	53163	28400	2.0		1.5		20500		
3							23333		
4							23333		
5							23333		
6							23333		
7	53303	28400	1.1		0.5		23333		
8							20000		
9	53343	28400	2.0		1.5		20000		
10							19333		
11							19333		
12	53401	28400	2.8		1.7		19333		
13							17500		
14	53436	28400	2.6		1.6		17500		
15							19000		
16	53474	28400	2.5		1.5		19000		
17							20667		
18							20667		
19	53536	28400	2.4		1.4		20667		
20							21000		
21	53578	28400	1.8		1.5		21000		
22							19000		
23	53616	28400	2.4		1.3		19000		
24							21000		
25							21000		
26	53679	28400	2.4		1.3		21000		
27							20500		
28	53720	28400	2.4		1.3		20500		
29							19500		
30	53759	28400					19500		
Total Flow							613667		
ADF							20456		
MAX			2.8		1.7		23333		
MIN			1.1		0.5		17500		

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

PWS: Identification Number: 6250278 Plant Name: VILLAGE OF CHARLIE CREEK

Monitoring Period From: 9/01/16 To: 9/30/16

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

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

**CT Calculations or UV Dose, to Demonstrate Four-Log Virus Inactivation, If Applicable\***

Day of the month	Days Plant Staffed or Visited by Operator (Place X)	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations				UV Dose				Lowest Residual Disinfectant concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				Peak flow rate, gpd	Lowest Residual Disinfectant concentration Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm <sup>2</sup>		
1		24	20500										
2	X	24	20500										1.5
3		24	23333										
4		24	23333										
5	X	24	23333										
6		24	23333										
7	X	24	23333										0.5
8		24	20000										
9	X	24	20000										1.5
10		24	19333										
11		24	19333										
12	X	24	19333										1.7
13		24	17500										
14	X	24	17500										1.6
15		24	19000										
16	X	24	19000										1.5
17		24	20667										
18		24	20667										
19	X	24	20667										1.4
20		24	21000										
21	X	24	21000										1.5
22		24	19000										
23	X	24	19000										1.3
24		24	21000										
25		24	21000										
26	X	24	21000										1.3
27		24	20500										
28	X	24	20500										1.3
29		24	19500										
30		24	19500										
<b>Total</b>			613667										
<b>Average</b>			20466										
<b>Maximum</b>			23333										

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

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

<b>I. General Information for the Month/Year of:</b>		Monitoring Period From: 10/01/16 To: 10/31/16	
<b>A. Public Water System (PWS) Information</b>			
PWS Name: VILLAGE OF CHARLIE CREEK		PWS Identification Number: 6250278	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive
Number of Service Connections at End of Month: 153		Total Population Served at End of Month: 138	
PWS Owner:			
Contact Person: MIKE SMALLRIDGE		Contact Person's Title: UTILITY MANAGER	
Contact Person's Mailing Address: 3336 GRAND BLVD		City: HOLIDAY	State: FL Zip Code: 33890
Contact Person's Telephone Number: 352-302-7406		Contact Person's Fax Number: 863-229-5991	
Contact Person's E-Mail Address: UTILITYCONSULTANT@YAHOO.COM			
<b>B. Water Treatment Plant Information</b>			
Plant Name: VILLAGE OF CHARLIE CREEK		Plant Telephone Number: 863-537-1971	
Plant Address: SR 64 EAST		City: ZOLFO SPRINGS	State: FL Zip Code: 33873
Type of Water Treated by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating capacity of Plant, gallons per day:		133,000	
Plant Category ( per subsection 62-699.310(4), F.A.C.): V		Plant Class: C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b> <b>Day(s)/Shift(s) Worked</b>
<b>Lead/Chief Operator:</b>	GAINES ALEXANDER	C	C-5472
<b>Other Operators:</b>	DANNY ALEXANDER	C	C-12379 13
	JENNIFER ALEXANDER	C	C-21471
<b>II. Certification by Lead/Chief Operator</b>			

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

*Danny Alexander* 2016/11/10  
 Signature and Date

DANNY ALEXANDER  
 Printed or Typed Name

C-12379  
 License Number





DRINKING WATER BACTERIOLOGICAL ANALYSIS

MID FLORIDA WATER LABORATORY

8 Oakwood Road - Winter Haven, FL 33880
Phone (863) 965-2540 • Fax (863) 967-8601
Lab I.D. #E84567 • Margaret Rajpaul - Director, Contact Person
NELAC CERTIFIED

RECEIVED
Lab Receipt Date & Time: 10/13/16 @ 9:30am
Analysis Date & Time: 10/13/16 @ 8:49:20c
Sample Acceptance Criteria:
Sample Preservation: 20°C
Disinfectant Check: Not Detected
This sample does not meet the following NELAC requirements.

Report Number: Sub-Contract Lab ID:

Analysis Requested: (check all that apply)

- Total Coliform/E-Coli, Total Coliform/Fecal, Enterococci, Coliform, HPC, Other

System Name: Village @ Charlie Creek

System Address: SR 64 E

System or Owner's Phone #:

Collector: [Signature]

PWS I.D. 6250278

County: Hardee

Fax #:

Collector's Phone #: 905 2599

Type of Supply: (check only one)

- Community Water System, Noncommunity Water System, Nontransient Noncommunity Water System, Limited Use System, Private Well, Swimming Pool, Bottled Water, Other

Reason for Sampling: (check all that apply)

- Distribution Routine, Distribution Repeat, Raw (triggered or assessment), Clearance, Replacement (also check type of sample being replaced), Boil Water Notice, Other

Sample Collection Date: 10-12-16

To be completed by collector of sample

Table with columns: Sample Number, Sample Point (Location or Specific Address), Lab Sample Number, Collection Time, Sample Type, Disinfect Res'd (mg/L), pH. Rows include Well 1, Well 2, and 1154 Sparrow.

To be completed by lab

Table for Total Coliform Analysis Method and E. coli Analysis Method. Columns: Non Coliform, Total Coliform, E. coli, Data Qualifier.

Average of disinfectant residuals for routine and repeat samples. (Complete for community and non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.)

2.1

Defined in Florida Administrative Code Rule 62-160, Table 1. All tests are performed in accordance with NELAC standards. The test results in this report only relate to the analyses of the samples submitted.

Disinfectant Residual Analysis Method: DPD Colorimetric

- Person performing analysis is: A certified operator, Supervised by a cert. operator, Authorized representative of supplier of water, Employed by a certified lab, Employed by DEP or DOH

Date PWS notified by lab of positive results:
Date State notified by lab of positive results:
Lab Signature: [Signature] Date: 10/14/16
Title: Lab Manager

Name and Mailing Address of Person to Receive Report

Consta Flow, Inc
5574 Commercial Blvd
Winter Haven, FL 33880

- Satisfactory, Incomplete Collection Information, Repeat Samples Required, Replacement Samples Required
Date Reviewed by DEP/DOH:
DEP/DOH Reviewing Official:

**Charlie Creek Utilities, LLC**

Tuesday, January 24, 2017

**Billing Summary**  
10/1/2016 to 10/31/2016

**water**

Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total		560852		\$9.00		\$0.00		\$0.00		\$160.00		(\$679.38)	
water		\$2,388.51	\$2,145.00		\$126.50		\$0.00		\$0.00		\$4,829.01		\$4,149.63
# of Customers Billed	149												

**General**

Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total		670		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
General		\$2.35	\$15.00		\$0.00		\$0.00		\$0.00		\$17.35		\$17.35
# of Customers Billed	1												

**Unused**

Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total		0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
Unused		\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	1												

**Unused**

Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total		0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
Unused		\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	2												

**Unused**

Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
		0		\$0.00		\$0.00		\$0.00		\$0.00		\$15.00	
		\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$15.00
# of Customers Billed	6												

**Unused**

Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
		0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
		\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	4												

**Unused**

Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
		0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
		\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	1												

**Unused**

Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
		0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
		\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	2												

<b>Report Totals</b>		561522		\$9.00		\$0.00		\$0.00		\$160.00		(\$664.38)	
# of Cust Billed	150	\$2,390.86	\$2,160.00	3	\$126.50	0	\$0.00		\$0.00		\$4,846.36		\$4,181.98
				43						32			

PLANT NAME: Village of Charlie Creek Monitoring Period From: 10/01/16 To: 10/31/16  
(WATER REPORT)

DAY	METER 1	METER 2	TRC	PH	TRC	PH	MULT.	1000	Bact.
PREV	53759	28400					#REF!		
1							19667		
2							19667		
3	53818	28400	1.5		1.2		19667		
4							19000		
5	53856	28400	2.1		1.1		19000		
6							19000		
7	53894	28400	2.1		1.1		19000		
8							19667		
9							19667		
10	53953	28400	1.8		1.5		19667		
11							17500		
12	53988	28400	2.9		1.9		17500		
13							17000		
14	54022	28400	1.8		1.5		17000		
15							18667		
16							18667		
17	54078	28400	1.0		0.4		18667		
18							19500		
19	54117	28400	3.9		2.7		19500		
20							20000		
21	54157	28400	3.2		2.1		20000		
22							20667		
23							20667		
24	54219	28400	3.2		2.1		20667		
25							21000		
26	54261	28400	3.6		2.4		21000		
27							20000		
28	54301	28400	3.2		2.1		20000		
29							21333		
30							21333		
31	54365	28400	3.2		2.1		21333		
Total Flow							606000		
ADF							19548		
MAX			3.9		2.7		21333		
MIN			1.0		0.4		17000		



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

Monitoring Period From: 11/01/16 To: 11/30/16

**A. Public Water System (PWS) Information**

PWS Name: VILLAGE OF CHARLIE CREEK		PWS Identification Number: 6250278	
PWS Type: <input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive
Number of Service Connections at End of Month: 153		Total Population Served at End of Month: 138	
PWS Owner:			
Contact Person: MIKE SMALLRIDGE		Contact Person's Title: UTILITY MANAGER	
Contact Person's Mailing Address: 3336 GRAND BLVD		City: HOLIDAY	State: FL Zip Code: 33890
Contact Person's Telephone Number: 352-302-7406		Contact Person's Fax Number: 863-229-5991	
Contact Person's E-Mail Address: UTILITYCONSULTANT@YAHOO.COM			

**B. Water Treatment Plant Information**

Plant Name: VILLAGE OF CHARLIE CREEK		Plant Telephone Number: 863-537-1971	
Plant Address: SR 64 EAST		City: ZOLFO SPRINGS	State: FL Zip Code: 33873
Type of Water Treated by Plant: <input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating capacity of Plant, gallons per day: 133,000			
Plant Category ( per subsection 62-699.310(4), F.A.C.): V		Plant Class: C	
Lead/Chief Operator	GAINES ALEXANDER	C	C-5472
Chief Operator	DANNY ALEXANDER	C	C-12379
	JENNIFER ALEXANDER	C	C-21471

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

Danny Alexander 2016/12/10  
Signature and Date

DANNY ALEXANDER  
Printed or Typed Name

C-12379  
License Number





DRINKING WATER  
BACTERIOLOGICAL ANALYSIS

**MID FLORIDA WATER LABORATORY**

8 Oakwood Road - Winter Haven, FL 33880  
Phone (863) 965-2540 • Fax (863) 967-8601  
Lab I.D. #E84567 • Margaret Rajpaul - Director, Contact Person  
NELAC CERTIFIED

Lab Receipt Date & Time: **RECEIVED**  
Analysis Date & Time: 11/4/16 @ 3:00  
Sample Acceptance Criteria: 700-100 - 5 P 2:42 .65  
Sample Preservation:  On Ice  Not On Ice  
Disinfectant Check:  Not Detected  mg/L  
This sample does not meet the following NELAC requirements:  
**TEMP GUN ICH 2**

Report Number: \_\_\_\_\_ Sub-Contract Lab ID: \_\_\_\_\_

Analysis Requested: (check all that apply)  
 Total Coliform/E-Coli  Total Coliform/Fecal  Enterococci  Coliform  HPC  Other: \_\_\_\_\_

System Name: Village @ Charlie Creek  
System Address: SR 84 E

System or Owner's Phone #: \_\_\_\_\_  
Collector: [Signature] County: Polk

PWS I.D. 6250278  
Collector's Phone #: 965 2599

Type of Supply: (check only one)  
 Community Water System  Noncommunity Water System  
 Private Well  Swimming Pool

Reason for Sampling: (check all that apply)  
 Distribution Routine  Distribution Repeat  Raw (triggered or assessment)  Nontransient Noncommunity Water System  Limited Use System  
 Clearance  Replacement (also check type of sample being replaced)  Boil Water Notice  Bottled Water  Other \_\_\_\_\_

Sample Collection Date: 11-4-16

To be completed by collector of sample							To be completed by lab					
Sample Number	Sample Point (Location or Specific Address)	Lab Sample Number	Collection Time	Sample Type <sup>1</sup>	Disinfect Res'd (mg/L)	pH	Total Coliform Analysis Method	E. coli Analysis Method	Non Coliform	Total Coliform	E. coli	Data Qualifier <sup>2</sup>
1/3	Well 1	013993	11:00	R	/	7.7				A	A	
2/3	Well 2	013994	11:05	R	/	7.7				A	A	
3/3	1062 Blue jay	013995	11:15	D	1.2	7.8				A	A	

**RECEIVED**  
NOV 10 2016  
ENVIRONMENTAL ENGINEERING

Average of disinfectant residuals for routine and repeat samples. (Complete for community and non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.)

Disinfectant Residual Analysis Method:  DPD Colorimetric  Other: \_\_\_\_\_  
A certified operator is performing analysis (Please see instructions on reverse):  
Supervised by a cert. operator (# 21471)  Employed by a certified lab  Employed by DEP or DOH  
Authorized representative of supplier of water \_\_\_\_\_

All tests are performed in accordance with NELAC standards. The test results in this report only relate to the analyses of the samples submitted.  
Date PWS notified by lab of positive results: \_\_\_\_\_  
Date State notified by lab of positive results: \_\_\_\_\_  
Lab Signature: [Signature] Date: 11/5/16  
Title: Lab Manager

Name and Mailing Address of Person to Receive Report  
Consta Flow, Inc  
5574 Commercial Blvd  
Winter Haven, FL 33880

Satisfactory  
 Incomplete Collection Information  
 Repeat Samples Required  Replacement Samples Required  
Date Reviewed by DEP/DOH: \_\_\_\_\_  
DEP/DOH Reviewing Official: \_\_\_\_\_

<sup>1</sup>DEP Sample Type Codes: D - Distribution (Routine Compliance); C = Repeat or Check; R = Raw; N = Entry to Distribution; P = Plant Tap; S = Special (clearance, etc.)  
Analysis Methods: MF = SM9222B & D; MTF = 8221B & EG/MUG; MMO/MUG = SM9223B; HPC = SM9215B  
Results: A = coliforms are absent; P = coliforms are present; C = confluent growth; TNTC = too numerous to count

# Charlie Creek Utilities, LLC

Tuesday, January 24, 2017

## Billing Summary 11/1/2016 to 11/30/2016

### water

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			575138		\$53.00		\$0.00		\$0.00		\$180.00		(\$463.34)	
water			\$2,309.94	\$2,100.00		\$120.00		\$0.00		\$0.00		\$4,762.94		\$4,299.60
# of Customers Billed	141													

### General

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			300		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
General			\$1.05	\$15.00		\$0.00		\$0.00		\$0.00		\$16.05		\$16.05
# of Customers Billed	1													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	1													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	4													

**Unused**

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			760		\$0.00		\$0.00		\$0.00		\$0.00		\$15.00	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$15.00
# of Customers Billed	7													

**Unused**

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	4													

**Unused**

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	1													

**Unused**

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	3													

<b>Report Totals</b>			576198		\$53.00		\$0.00		\$0.00		\$180.00		(\$448.34)	
			\$2,310.99	\$2,115.00		\$120.00		\$0.00		\$0.00		\$4,778.99		\$4,330.65
# of Cust Billed	142				3	40	0				36			

PLANT NAME: Village of Charlie Creek Monitoring Period From: 11/01/16 To: 11/30/16  
(WATER REPORT)

DAY	METER 1	METER 2	TRC	PH	TRC	PH	MULT.	1000	Bact.
PREV	54365	28400							
1							18500		
2	54402	28400	3.5		2.2		18500		
3							6000		
4	54414	28400	3.2		1.9		6000		
5							7667	32333	
6							7667	32333	
7	54437	28497	3.2		1.9		7667	32333	
8							1000	29000	
9	54439	28555	1.5		1.2		1000	29000	
10								30000	
11	54439	28615	0.8		0.2			30000	
12							25333		
13							25333		
14	54515	28615	3.8		2.6		25333		
15							21000		
16	54557	28615	3.8		2.6		21000		
17							19000		
18	54595	28615	3.8		2.6		19000		
19							21333		
20							21333		
21	54659	28615	3.9		2.7		21333		
22							24000		
23	54707	28615	3.9		2.7		24000		
24							27000		
25	54761	28615					27000		
26							27333		
27							27333		
28	54843	28615	1.5		1.2		27333		
29							26500		
30	54896	28615	1.0		0.4		26500		
Total Flow							531000	215000	
ADF							17700	7167	
MAX			3.9		2.7		27333	32333	
MIN			0.8		0.2				

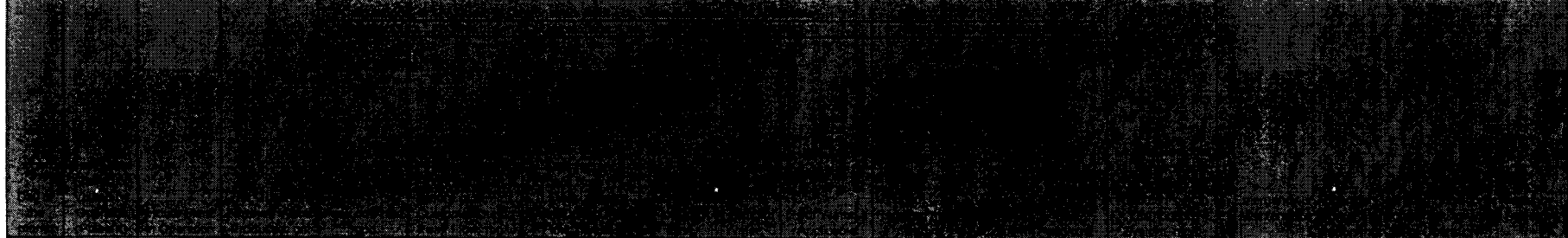
**MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER**

PWS: Identification Number: 6250278 Plant Name: VILLAGE OF CHARLIE CREEK

Monitoring Period From: 11/01/16 To: 11/30/16

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

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



Date	Free Chlorine	Combined Chlorine(Chloramines)	Chlorine Dioxide
	24	18500	
X	24	18500	2.2
	24	6000	
X	24	6000	1.9
	24	40000	
	24	40000	
X	24	40000	1.9
	24	30000	
X	24	30000	1.2
	24	30000	
X	24	30000	0.2
	24	25333	
	24	25333	
X	24	25333	2.6
	24	21000	
X	24	21000	2.6
	24	19000	
X	24	19000	2.6
	24	21333	
	24	21333	
X	24	21333	2.7
	24	24000	
X	24	24000	2.7
	24	27000	
	24	27000	
	24	27333	
	24	27333	
X	24	27333	1.2
	24	26500	
X	24	26500	0.4
		745000	
		24867	
		40000	

\*Refer to DEP Form 62-595 (600-3) for this report to determine which plants must provide this information.

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

**I. General Information for the Month/Year of:** \_\_\_\_\_ **Monitoring Period From:** 12/01/16 **To:** 12/31/16

**A. Public Water System (PWS) Information**

PWS Name:	VILLAGE OF CHARLIE CREEK		PWS Identification Number:	6250278	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	153		Total Population Served at End of Month:	138	
PWS Owner:					
Contact Person :	MIKE SMALLRIDGE		Contact Person's Title:	UTILITY MANAGER	
Contact Person's Mailing Address:	3336 GRAND BLVD	City: HOLIDAY	State: FL	Zip Code: 33890	
Contact Person's Telephone Number:	352-302-7406		Contact Person's Fax Number:	863-229-5991	
Contact Person's E-Mail Address:	UTILITYCONSULTANT@YAHOO.COM				

**B. Water Treatment Plant Information**

Plant Name:	VILLAGE OF CHARLIE CREEK		Plant Telephone Number:	863-537-1971	
Plant Address:	SR 64 EAST	City: ZOLFO SPRINGS	State: FL	Zip Code: 33873	
Type of Water Treated by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating capacity of Plant, gallons per day:	133,000				
Plant Category ( per subsection 62-699.310(4), F.A.C.):	V		Plant Class:	C	
<b>Licensed Operators</b>	<b>Name</b>	<b>License Class</b>	<b>License Number</b>	<b>Day(s)/Shift(s) Worked</b>	
Lead/Chief Operator:	GAINES ALEXANDER	C	C-5472		
Other Operators:	DANNY ALEXANDER	C	C-12379	11	
	JENNIFER ALEXANDER	C	C-21471		

**II. Certification by Lead/Chief Operator**

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

*Danny Alexander* 2017/01/09  
Signature and Date

DANNY ALEXANDER  
Printed or Typed Name

C-12379  
License Number



DRINKING WATER BACTERIOLOGICAL ANALYSIS

MID FLORIDA WATER LABORATORY

8 Oakwood Road - Winter Haven, FL 33880
Phone (863) 965-2540 • Fax (863) 967-8601
Lab I.D. #E84567 • Margaret Rajpaul - Director, Contact Person
NELAC CERTIFIED

RECEIVED stamp
Lab Receipt Date & Time:
Analysis Date & Time: 12/6/16 @ 3:40 PM
Sample Acceptance Criteria:
Sample Preservation: On Ice, Not On Ice
Disinfectant Check: Not Detected
This sample does not meet the following NELAC requirements: Temp Gun JK #2

Report Number: Sub-Contract Lab ID:

Analysis Requested: (check all that apply)

- Total Coliform/E-Coli, Total Coliform/Fecal, Enterocci, Coliart, HPC, Other

System Name: Village of Charlie Creek

PWS I.D. 6250278

System Address: SR 64 #

County: Polk

System or Owner's Phone #: Collector:

Fax #: Collector's Phone #: 905 2599

Type of Supply: (check only one)

- Community Water System, Noncommunity Water System, Nontransient Noncommunity Water System, Limited Use System, Private Well, Swimming Pool, Bottled Water, Other

Reason for Sampling: (check all that apply)

- Distribution Routine, Distribution Repeat, Raw (triggered or assessment), Raw (triggered or assessment) additional, Well Survey, Clearance, Replacement (also check type of sample being replaced), Boil Water Notice, Other

Sample Collection Date: 12-6-16

To be completed by collector of sample

To be completed by lab

Table with columns: Sample Number, Sample Point (Location or Specific Address), Lab Sample Number, Collection Time, Sample Type, Disinfect Res'd (mg/L), pH, Total Coliform Analysis Method, E. coli Analysis Method, Non Coliform, Total Coliform, E. coli, Data Qualifier. Rows include Well 1, Well 2, and 1243 Mockingbird.

Average of disinfectant residuals for routine and repeat samples. (Complete for community and non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.)

8
All tests are performed in accordance with NELAC standards. The test results in this report only relate to the analyses of the samples submitted.

Disinfectant Residual Analysis Method: DPD Colorimetric
Person performing analysis is: A certified operator (# 21476) Employed by a certified lab

Date PWS notified by lab of positive results:
Date State notified by lab of positive results:
Lab Signature: Date: 12/7/16
Title: Lab Manager

Name and Mailing Address of Person to Receive Report
Consta Flow, Inc
5574 Commercial Blvd
Winter Haven, FL 33880

DEP/DOH USE ONLY
Satisfactory, Incomplete Collection Information, Repeat Samples Required, Replacement Samples Required
Date Reviewed by DEP/DOH:
DEP/DOH Reviewing Official:

1DEP Sample Type Codes: D - Distribution (Routine Compliance); C = Repeat or Check; R = Raw; N = Entry to Distribution; P = Plant Tap; S = Special (clearance, etc)
Analysis Methods: MF = SM9222B & D; MTF = 9221B & EC/MUG; MMO/MUG = SM9223B; HPC = SM9215B
Results: A = coliforms are absent; P = coliforms are present; C = confluent growth; TNTC = too numerous to count



# Charlie Creek Utilities, LLC

Tuesday, January 24, 2017

## Billing Summary 12/1/2016 to 12/31/2016

### water

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			639670		\$63.00		\$0.00		\$0.00		\$260.00		(\$164.04)	
water			\$2,577.80	\$2,100.00		\$110.50		\$0.00		\$0.00		\$5,111.30		\$4,947.26
# of Customers Billed	145													

### General

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			210		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
General			\$0.74	\$15.00		\$0.00		\$0.00		\$0.00		\$15.74		\$15.74
# of Customers Billed	1													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	1													

### Unused

	Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
Total			320		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
Unused			\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	4													

**Unused**

Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
		10		\$0.00		\$0.00		\$0.00		\$0.00		\$15.00	
		\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$15.00
# of Customers Billed	7												

**Unused**

Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
		0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
		\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	4												

**Unused**

Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
		0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
		\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	1												

**Unused**

Date	Beginning Ending	Usage	Water	Other Amount	Other Amount	Sewer Amount	Local Tax	County Tax	State Tax	Late Fee	Period Total	Previous Balance	Total Amount
		160		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00	
		\$0.00	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
# of Customers Billed	4												

		<b>640370</b>		<b>\$63.00</b>		<b>\$0.00</b>		<b>\$0.00</b>		<b>\$260.00</b>		<b>(\$149.04)</b>	
<b>Report Totals</b>	<b># of Cust Billed</b>		<b>\$2,578.54</b>	<b>\$2,115.00</b>		<b>\$110.50</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$5,127.04</b>		<b>\$4,978.00</b>
		146		4	36	0				52			

PLANT NAME: Village of Charlie Creek Monitoring Period From: 12/01/16 To: 12/31/16  
(WATER REPORT)

DAY	METER 1	METER 2	TRC	PH	TRC	PH	MULT.	1000	Bact.
PREV	54896	28615							
1							24000		24000
2	54944	28615	1.1		0.5		24000		24000
3							25333		25333
4							25333		25333
5	55020	28615	1.1		0.5		25333		25333
6							20000		20000
7	55060	28615	1.1		0.5		20000		20000
8							19000		19000
9	55098	28615	3.5		2.4		19000		19000
10							24667		24667
11							24667		24667
12	55172	28615	0.8		0.5		24667		24667
13							27000		27000
14	55226	28615	0.8		0.5		27000		27000
15							22000		22000
16	55270	28615	2.4		1.3		22000		22000
17							21333		21333
18							21333		21333
19	55334	28615	3.8		2.6		21333		21333
20							21000		21000
21	55376	28615	3.1		2.1		21000		21000
22							19500		19500
23	55415	28615	3.5		2.2		19500		19500
24							24333		24333
25							24333		24333
26	55488	28615					24333		24333
27							24000		24000
28	55536	28615	2.6		1.4		24000		24000
29							23500		23500
30	55583	28615					23500		23500
31	55603	28615					20000		20000
Total Flow							707000		707000
ADF							22806		22806
MAX			3.8		2.6		27000		27000
MIN			0.8		0.5		19000		19000

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

PWS Identification Number: 6250278 Plant Name: VILLAGE OF CHARLIE CREEK

Monitoring Period From 12/01/16 To: 12/31/16  
 Means of Achieving Four-Log Virus Inactivation / Removal:  Free Chlorine  Chlorine Dioxide  Ozone  Combined Chlorine(Chloramines)  
 Ultraviolet Radiation  Other: (Describe):

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

Day of the month	Days Plant Staffed or Visited by Operator (Place X)	Hours Plant in Operation	Net Quality of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak flow rate, gpd	Lowest Residual Disinfectant concentration Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, C	pH of Water, if Applicable	Minimum CT, Required mg-min/L	Lowest Operating UV Dose, mW-Sec/cm2	Minimum UV Dose required, mW-Sec/cm2	Lowest Residual Disinfectant concentration at Remote Point in Distribution System, mg/L		
1		24	24000												
2	X	24	24000												0.5
3		24	25333												
4		24	25333												
5	X	24	25333												0.5
6		24	20000												0.5
7	X	24	20000												0.5
8		24	19000												
9	X	24	19000												2.4
10		24	24667												
11		24	24667												
12	X	24	24667												0.5
13		24	27000												
14	X	24	27000												0.5
15		24	22000												
16	X	24	22000												1.3
17		24	21333												
18		24	21333												
19	X	24	21333												2.6
20		24	21000												
21	X	24	21000												2.1
22		24	19500												
23	X	24	19500												2.2
24		24	24333												
25		24	24333												
26		24	24333												
27		24	24000												
28	X	24	24000												1.4
29		24	23500												
30		24	23500												
31		24	20000												
Total			707000												
Average			22606												
Maximum			27000												

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