

State of Florida



Public Service Commission

CAPITAL CIRCLE OFFICE CENTER • 2540 SHUMARD OAK BOULEVARD
TALLAHASSEE, FLORIDA 32399-0850

-M-E-M-O-R-A-N-D-U-M-

DATE: February 10, 2017
TO: Carlotta S. Stauffer, Commission Clerk, Office of Commission Clerk *OKL*
FROM: Clayton Lewis, Engineering Specialist, Division of Engineering
RE: Docket No.160195-WS - Application for staff-assisted rate case in Lake County by Lakeside Waterworks, Inc.

Please file the attached documents "DEP – Lakeside Waterworks – Permitting documents for Water Well #1" in the above mentioned docket file.

Thank you.



Florida Department of Environmental Protection

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

Rick Scott
Governor

Carlos Lopez-Cantera
Lt. Governor

Jonathan P. Steverson
Secretary

January 27, 2016

Ron Derossett, Facility Manager
Lakeside Waterworks, Inc.
4939 Cross Bayou Boulevard
New Port Richey, FL 34652
rderossett@uswatercorp.net

Re: First Request for Additional Information (RAI)
Lake County – Potable Water
Facility Name: Shurangi-la by Lake Utilities, Inc.
Facility ID: 3354028
DEP Application No.: 0080550-006-WC
Lakeside Waterworks Replacement Well

Dear Mr. Derossett:

Thank you for your application to equip and connect the Lakeside Waterworks replacement well for the above referenced Facility. The Department has assigned DEP Application No. 0080550-006-WC to the application. A Department staff review of the application and supporting documentation submitted on January 12, 2016 indicates the application is incomplete. Pursuant to the provisions of Rule 62-555.330, F.A.C, please provide the information listed below and refer to this correspondence in your response. The response to this correspondence must be signed, sealed, and dated by a registered Florida Professional Engineer.

1. Based on the Department's database there are two existing wells at Shangri-la by the Lake (PWS No. 3354028). These two wells are a) 6-inch Well No. 1 and b) 8-inch Well No. 2. Which of the two wells will be replaced, Well 1 or Well 2? If it is Well No. 2, the Department will designate the replacement well as Well 2R.
2. Will the capacity of the water treatment plant change after the replacement well has been placed in service?

Permittee:
Lakeside Waterworks, Inc.

DEP File No: 0080550-006-WC

Ron Derosssett, Facility Manager

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Provide calculations for the average daily water demand, maximum daily water demand, and peak hour flow;

- Average Daily Flow: _____ gpd
- Maximum Daily Flow: _____ gpd
- Peak Hour Flow: _____ gpd = _____ gph
- Max Day/Avg Daily Flow Peaking Factor: _____
- Max Hour/Average Daily Flow Peaking Factor: _____

3. Provide an aerial photo or scaled site plan showing the 50 & 100 -foot setback radii. Indicate the distances from the well to the following:

- a. septic tank/field;
- b. grease trap;
- c. storm water ponds, and
- d. any Sanitary Hazards located within these radii.

4. Provide a statement as to the location (and identify specifically as such) or absence of any sanitary hazards within 100 feet of the well.

5. Provide the latitude/longitude of the well:

Latitude: ° ‘ “ North:

Longitude: ° ‘ “ West

6. Provide one (1) copy of drilling permit issued by the Water Management District.

7. Provide one (1) copy of drilling permit issued by the Water Management District.

8. Provide one (1) copy of the chemical analysis from the production well performed by a Certified Laboratory with results submitted on the DEP Standard Format (see attached) for all water analysis per 62-550 F.A.C.

Water well sampling Requirement for a Community Water System include the following.

Community System Parameters:

- Primary Inorganics;
- Turbidity;
- Synthetic Organic Contaminants (SOCs);
- Volatile Organic Compounds (VOCs);
- Gross Alpha Radioactivity & Radium 228;
- Secondary contaminants;
- Total Sulfide, alkalinity, dissolved iron, pH, & dissolved oxygen

9. Provide one (1) copy pumping test results showing static & pumping water levels at the proposed pumping rate or greater.
10. As per information provided, the new well will be equipped with an existing pump. Provide the pump specifications and a copy of the pump curve showing/highlighting the pump rate in gallons per minute, total dynamic head (TDH), and well efficiency (EFF) on the curve.
11. Submit a revised drawing showing not only the well and above-ground installation elevation view but also showing the plan view.

The elevation view of the well and above ground installation must show:

- Top of casing is sealed and not subject to inundation;
 - Top of casing must be a minimum of 12" above the apron and 18" above surrounding grade;
 - On sites subject to flooding, an earthen mound must be provided to raise the pump house floor or apron at least two (2) feet above highest known flood elevation;
 - Concrete apron (minimum 6' x 6' x 4") must be centered around, and sloping away from, the well head;
 - Raw water sampling. The raw water sampling tap must be smooth-nosed type **with downward opening**, located between well head & check valve.
 - Above-grade check valve on well discharge piping (at well head);
 - **Well head must be protected from tampering/vandalism;**
 - Provisions on discharge piping for pumping well to waste – **Not shown in the submitted drawings.**
 - Provision for "venting" the casing. Well vents shall terminate in a down-turned outlet at a minimum of 18-inches above the apron with 20-mesh insect screen;
 - Air-release/vacuum relief valve is **not shown in the submitted drawings**
 - Above-grade discharge piping must be adequately supported
12. For security purposes the well-head should be provided with a **6 feet high security fence with an access gate**. Provide a drawing showing the fence around the well heads and that the access gate to the well-head is lockable.
 13. Specifications must indicate that disinfection of the modified well shall be done in accordance with AWWA C654.
 14. Provide the specifications for the raw water mains. These specifications must be included in the notes in the drawing or separate specifications must be submitted.

Ron Derosssett, Facility Manager

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- a. Please provide the color coding of the raw water main pipes, [62 555.320 (21) (b) 3, F.A.C.]. The blue color is reserved for finished water mains only.
- b. Specify the pipe material for the raw water mains and the corresponding AWWA specification. Piping material specifications covering pipes, jointing and packing materials, internal coating and linings, fittings, specials and appurtenances shall all be in accordance with the corresponding AWWA Standards and be conforming to NSF requirements.
 - i. PVC pipes less than 4" shall be in accordance with ASTM 1785 (schedule 40, 80, 120) or ASTM 2241 SDR 21 and shall have NSF markings throughout the installed length of pipe.
 - ii. PVC pipes 4" to 12" shall be in accordance with AWWA C900.
 - iii. PVC pipes 14" to 36" shall be AWWA C905
 - iv. NSF-PW logo required for all PVC pipe.
 - v. DIP 3" to 64" must conform to C150/C151.
- c. Include in the specifications the AWWA Standard for disinfecting raw water mains. Disinfecting the water main and conducting bacteriological surveys and evaluations must be done in accordance with AWWA C651.
- d. Include in the specifications the AWWA Standard for pressure and leakage testing of raw water mains. PVC water mains shall be installed, pressure and leak tested in accordance with AWWA Standard C605 and Ductile Iron water mains in accordance with AWWA C600, [62 555.320(21) (b) 1 and 62-555.330, F.A.C.]. All installation, testing and field procedures must be provided and must conform to the applicable AWWA Standards.
- e. Include the specifications for bedding, backfill and depth of cover in trenches for underground raw water main installation, [62-555.320(21) (b), F.A.C. and RSSW 8.5.2.].
- f. Change of direction fittings, terminal fittings and hydrants must be provided with thrust restraints, [62-555.320(21) (b), F.A.C., and RSSW 8.5.4]. Sizing of such restraints is the engineer's responsibility. The thrust restraint table must be included in the details of the drawings. This must be included in the specifications.
- g. Horizontal and vertical minimum separation distances required between raw water mains and all other utility lines shall be included in the specifications and used by the engineer so that the design complies with 62-555.314(1), (2), (3), and (4), F.A.C. Exceptions must be identified by the engineer, and the appropriate justifications and alternative construction features provided for case by case approval by the Department, [62-555.314(5), F.A.C.].
- h. Provide information on the approximate ground water elevation during different seasons in relation to the underground water main and utility line installation and subsurface structures as may be appropriate, [62-555.520(4)(a) 10.d, F.A.C.].
- i. If applicable, provide information on aggressive soils or soils contaminated by low-molecular-weight petroleum products or organic solvents where water mains will be installed, [62 555.520(4)(a) 10.f, F.A.C.].

Permittee:
Lakeside Waterworks, Inc.

DEP File No: 0080550-006-WC

Ron Derossett, Facility Manager

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In order for the Department to continue processing your application, please submit the requested information as soon as possible. The Department must receive a response within 14 days of the date of this letter, February 8, 2016, unless a written request for additional time to provide the requested information is submitted and approved. Pursuant to Rule 62-4.055(1), F.A.C. and Section 120.60, F.S., failure of an applicant to provide the timely requested information by the applicable deadline may result in denial of the application. You are encouraged to contact this office to discuss the items requested to assist you in developing a complete and adequate response.

Please submit the response in electronic format to **DEP_CD@dep.state.fl.us**, with a copy to daissan.a.villareal@dep.state.fl.us. If the file is very large, you may post it to a folder on the Central District's office's ftp site at: ftp://ftp.dep.state.fl.us/pub/incoming/Central_District/. After posting the document, send an e-mail to **DEP_CD@dep.state.fl.us**, with a copy to daissan.a.villareal@dep.state.fl.us, alerting us that it has been posted.

If you have any questions, please contact Daissan Villareal by telephone at 407-897-4129 or by e-mail at daissan.a.villareal@dep.state.fl.us.

Sincerely,

STATE OF FLORIDA DEPARTMENT
OF ENVIRONMENTAL PROTECTION



Caroline Shine, Environmental Administrator
Drinking Water/Environmental Resource Permitting
Permitting and Waste Cleanup Program
Florida Department of Environmental Protection
Central District
(407) 897-2927

v.1.2

Copies furnished to:

Gary Deremer, Lakeside Waterworks [rderossett@uswatercorp.net]

Mohammed Y. Kader, P.E., US Water Services Corporation [mkader@uswatercorp.net]

Jill Farris, Wanda Parker-Garvin, Daissan Villareal-FDEP

193331



APPLICATION FOR A SPECIFIC PERMIT TO CONSTRUCT PWS COMPONENTS

See page 4 for instructions.

R1
0080550-006-WC

I. General Project Information

A. Name of Project: Lakeside Waterworks - Well 2R Replacment

B. Description of Project and Its Purpose:

Replacement of existing 8" potable drinking well utilizing existing well pump.

RECEIVED
JAN 12 2016
180006 PD

C. Does project create a "new system" as described under subsection 62-555.525(1), F.A.C.? Yes, and a completed copy of Form 62-555.900(20), New Water System Capacity Development Financial and Managerial Operations Plan, is attached. No.

D. Location of Project

1. County Where Project Located: Lake

2. Description of Project Location:

100 Shagri-La Blvd., Leesburg, FL 34748. PID No. 0619260000300003300, adjacent to existing well.

3. Latitude and Longitude of Each New Treatment Plant and Each New Raw Water Source (attach additional sheets if necessary):

Name of New Treatment Plant or Raw Water Source	Latitude	Longitude
Lakeside Waterworks Well #1	28 ° 30 ' 51.74 "N	81 ° 27 ' 3.29 "W
	° ' "N	° ' "W
	° ' "N	° ' "W
	° ' "N	° ' "W
	° ' "N	° ' "W

E. Estimate of Cost to Construct Project: \$45,000

F. Estimate of Dates for Starting and Completing Construction of Project: 1/1/2016-4/15/2016

G. Applicant

PWS/Company Name: <u>Lakeside Waterworks, Inc.</u>		PWS Identification No.: <u>*3354028</u>
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Contact Person: <u>Ron Derossett</u>		Contact Person's Title: <u>Facility Manager</u>
Contact Person's Mailing Address: <u>4939 Cross Bayou Blvd.</u>		
City: <u>New Port Richey</u>	State: <u>FL</u>	Zip Code: <u>34652</u>
Contact Person's Telephone Number: <u>(727) 848-8292</u>		Contact Person's Fax Number: <u>(727) 848-7701</u>
Contact Person's E-Mail Address: <u>rderossett@uswatercorp.net</u>		

* This information is required only if the applicant is a public water system (PWS).

H. Public Water System (PWS) Supplying Water to Project

PWS Name: <u>Lakeside Waterworks, Inc.</u>		PWS Identification No.: <u>3354028</u>
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
PWS Owner: <u>Gary Deremer</u>		
Contact Person: <u>Ron Derossett</u>		Contact Person's Title: <u>Facility Manager</u>
Contact Person's Mailing Address: <u>4939 Cross Bayou Blvd.</u>		
City: <u>New Port Richey</u>	State: <u>FL</u>	Zip Code: <u>34652</u>
Contact Person's Telephone Number: <u>(727) 848-8292</u>		Contact Person's Fax Number: <u>(727) 848-7701</u>
Contact Person's E-Mail Address: <u>rderossett@uswatercorp.net</u>		

APPLICATION FOR A SPECIFIC PERMIT TO CONSTRUCT PWS COMPONENTS

Project Name: Lakeside Waterworks - Well 2R Replacement	Applicant: Lakeside Waterworks, Inc.
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I. Public Water System (PWS) that Will Own Project after It Is Placed into Permanent Operation

PWS Name: Lakeside Waterworks, Inc.		PWS Identification No.: *3354028
PWS Type: * <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
PWS Owner: Gary Deremer		
Contact Person: Ron Derossett		Contact Person's Title: Facility Manager
Contact Person's Mailing Address: 4939 Cross Bayou Blvd.		
City: New Port Richey		State: FL Zip Code: 34652
Contact Person's Telephone Number: (727) 848-8292		Contact Person's Fax Number: (727) 848-7701
Contact Person's E-Mail Address: rderossett@uswatercorp.net		

* This information is required only if the owner/operator is an existing PWS.

J. Professional Engineer(s) or Other Person(s) in Responsible Charge of Designing Project*

Company Name: U.S. Water Services Corporation		
Designer(s): Mohammed Y. Kader, P.E.		Title(s) of Designer(s): Engineering Director
Qualifications of Designer(s):		
<input checked="" type="checkbox"/> Professional Engineer(s) Licensed in Florida – License Number(s): FL 45129		
<input type="checkbox"/> Public Officer(s) Employed by State, County, Municipal, or Other Governmental Unit of State†		
<input type="checkbox"/> Plumbing Contractor(s) Licensed in Florida – License Number(s): ^		
Mailing Address of Designer(s): 4939 Cross Bayou Blvd.		
City: New Port Richey		State: FL Zip Code: 34652
Telephone Number of Designer(s): (727) 848-8292		Fax Number of Designer(s): (727) 848-7701
E-Mail Address(es) of Designer(s): mkader@uswatercorp.net		

* Except as noted in paragraphs 62-555.520(3)(a) and (b), F.A.C., projects shall be designed under the responsible charge of one or more professional engineers licensed in Florida.

† Attach a detailed construction cost estimate showing that the cost to construct this project is \$10,000 or less.

^ Attach documentation showing that this project will be installed by the plumbing contractor(s) designing this project, documentation showing that this project involves a public water system serving a single property and fewer than 250 fixture units, and a detailed construction cost estimate showing that the cost to construct this project is \$50,000 or less.

II Certifications

A. Certification by Applicant

I am duly authorized to sign this application on behalf of the applicant identified in Part I.G of this application. I certify that, to the best of my knowledge and belief, this project complies with Chapter 62-555, F.A.C., and provides assurance of compliance with Chapter 62-550, F.A.C. I also certify that construction of this project has not begun yet.

Signature and Date	01/11/16 Printed or Typed Name	Gary Deremer President Title
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B. Certification by PWS Supplying Water to Project

I am duly authorized to sign this application on behalf of the PWS identified in Part I.H of this application. I certify that said PWS will supply the water necessary to meet the design water demands for this project. I certify that, to the best of my knowledge and belief, said PWS's connection to this project will not cause said PWS to be, or contribute to said PWS being, in noncompliance with Chapter 62-550 or 62-555, F.A.C. I also certify that said PWS has reviewed the preliminary design report or drawings, specifications, and design data for this project and that said PWS considers the connection(s) between this project and said PWS acceptable as designed.

- Name(s) of Water Treatment Plant(s) to Which this Project Will Be Connected: Lakeside Waterworks, Inc.

- Total Permitted Maximum Day Operating Capacity of Plant(s), gpd: 180,000
- Total Maximum Day Flow at Plant(s) as Recorded on Monthly Operating Reports During Past 12 Months, gpd: 180,200

Signature and Date	01/11/16 Printed or Typed Name	Gary Deremer President Title
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APPLICATION FOR A SPECIFIC PERMIT TO CONSTRUCT PWS COMPONENTS

Project Name: Lakeside Waterworks - Well 2R Replacement	Applicant: Lakeside Waterworks, Inc.
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C. Certification by PWS that Will Own Project after It Is Placed into Permanent Operation

I am duly authorized to sign this application on behalf of the PWS identified in Part I.I of this application. I certify that said PWS will own this project after it is placed into permanent operation. I also certify that said PWS has reviewed the preliminary design report or drawings, specifications, and design data for this project and that said PWS considers this project acceptable as designed.

01/11/16 Signature and Date	Gary Deremer Printed or Typed Name	President Title
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D. Certification by Professional Engineer(s) in Responsible Charge of Designing Project*

I, the undersigned professional engineer licensed in Florida, am in responsible charge of preparing the preliminary design report or drawings, specifications, and design data for this project. I certify that, to the best of my knowledge and belief, the design of this project complies with Chapter 62-555, F.A.C., and provides assurance of compliance with Chapter 62-550, F.A.C.

Signature, Seal, and Date:
Affix Seal
Printed/Typed Name: Mohammed Y. Kader, P.E.
License Number: FL 45129
Portion of Engineering Document(s) for Which Responsible: Entire project.

Signature, Seal, and Date:
Affix Seal
Printed/Typed Name:
License Number:
Portion of Engineering Document(s) for Which Responsible:

Signature, Seal, and Date:
Affix Seal
Printed/Typed Name:
License Number:
Portion of Engineering Document(s) for Which Responsible:

Signature, Seal, and Date:
Affix Seal
Printed/Typed Name:
License Number:
Portion of Engineering Document(s) for Which Responsible:

* Except as noted in paragraphs 62-555.520(3) (a) and (b), F.A.C., projects shall be designed under the responsible charge of one or more professional engineers (PEs) licensed in Florida. If this project is being designed under the responsible charge of one or more PEs licensed in Florida, Part II.D of this application shall be completed by the PE(s) in responsible charge. If this project is not being designed under the responsible charge of one or more PEs licensed in Florida, Part II.D does not have to be completed.

APPLICATION FOR A SPECIFIC PERMIT TO CONSTRUCT PWS COMPONENTS

INSTRUCTIONS: This application shall be completed and submitted by persons proposing to construct or alter public water system components unless such proposed construction or alteration is permitted under the Department of Environmental Protection's (DEP's) "General Permit for Construction of Water Main Extensions for Public Water Systems," in which case Form 62-555.900(7) is to be completed and submitted, or under the DEP's "General Permit for Construction of Lead or Copper Corrosion Control, or Iron or Manganese Sequestration, Treatment Facilities for Small or Medium Public Water Systems," in which case Form 62-555.900(18) is to be completed and submitted. Complete and submit one copy of this application to the appropriate DEP District Office or Approved County Health Department (ACHD) along with payment of the proper application processing fee and one copy of the following information:

- either a preliminary design report or drawings, specifications, and design data (the preliminary design report or drawings, specifications, and design data shall contain all pertinent information required under subsection 62-555.520(4), F.A.C.); and
- the Florida Public Service Commission (FPSC) certificate of authorization to provide water service if the project involves construction of a new public water system subject to the jurisdiction of the FPSC.

All information provided on this application shall be typed or printed in ink. Application processing fees are listed in paragraph 62-4.050(4) (n), F.A.C. Checks for application processing fees shall be made payable to the Department of Environmental Protection or to the appropriate ACHD. Preliminary design reports, drawings, specifications, and design data prepared under the responsible charge of one or more professional engineers licensed in Florida shall be signed, sealed, and dated by the professional engineer(s) in responsible charge. **NOTE THAT A SEPARATE APPLICATION AND A SEPARATE APPLICATION PROCESSING FEE ARE REQUIRED FOR EACH NON-CONTIGUOUS PROJECT.***

** Non-contiguous projects are projects that are neither interconnected nor located nearby one another (i.e., on the same site, on adjacent streets, or in the same neighborhood).*

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

6881 Southpoint Pkwy. • Jacksonville, FL 32218 • 904.383.9350 • Fax 904.383.9354 • E82574
 4985 SW 41st Blvd • Gainesville, FL 32609 • 352.377.2349 • Fax 352.395.6639 • E82001
 10200 USA Today Way • Miramar, FL 33025 • 954.889.2288 • Fax 954.889.2281 • E82536
 8610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327 • E84589
 528 S. Northlake Blvd., Sta. 1016 • Altamonte Springs, FL 32701 • 407.837.1594 • E63076
 1288 Cedar Center Drive, Tallahassee, FL 32301 • 850.219.8274 • Fax 850.219.8275 • E811095

A1509154



Advanced Environmental Laboratories, Inc.

Lab Receipt Date & Time: 12/14/15 1510
 Analysis Date & Time: 12-14-15 1717
 Sample Acceptance Criteria:
 Sample Preservation: On Ice Not On Ice 4 °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 Coliphage HPC Other: _____

Public Water System (PWS) Name: Shenandoah (Lakeside) PWS I.D.: 335 40X

PWS Address: 100 Shagbark Blvd City: Leesburg

PWS or PWS Owner's Phone #: 727-845-8262 Fax #: 727-845-9275

Collector: Nathan Foster Collector's Phone #: 352-455-8577

Type of Supply: (check one)

Community Water System Non-Transient Non-community Water System Transient Non-community Water System
 Limited Use System Bottled Water Private Well Swimming Pool 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: 12-14-15

OCN#: AD-0045 Effective 01/05, Revised 08/19/2012

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type	Disinfectant Residual (mg/L)	pH	Analysis Method(s) <u>SM1922B</u>				
						Non-Coliform	Total Coliform	Focal, E. coli, Enterococci, or Coliphage ^a	Data Qualifier ^a	Lab Sample #
	<u>12-14-15</u>									
<u>S1</u>	<u>North Well (New)</u>	<u>6:30^{AM}</u>	<u>R</u>	<u>0</u>			<u>A</u>			<u>1</u>
<u>S2</u>	<u>North Well (New)</u>	<u>1230</u>	<u>R</u>	<u>0</u>			<u>A</u>			<u>2</u>
Average of disinfectant residuals for distribution routine & repeat samples. <u>Free chlorine or Total chlorine (circle one).</u>				<u>0</u>	Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.					
Disinfectant Residual Analysis Method: <input checked="" type="checkbox"/> DPD Colorimetric <input type="checkbox"/> Other: _____				Date and time PWS notified by lab of positive results: _____						
Person performing disinfectant analysis is (Check one of below): <input checked="" type="checkbox"/> A certified operator (# <u>CT162</u>) <input type="checkbox"/> Supervised by certified operator (# _____) <input type="checkbox"/> Employed by a certified lab <input type="checkbox"/> Employed by DEP or DOH <input type="checkbox"/> Authorized representative of supplier of water				Date and time DEP/DOH notified by lab of positive results: _____						
INSURANCE NAME AND MAILING ADDRESS OF PERSON TO RECEIVE REPORT: <u>US Water Services</u> <u>4534 Cross Bayou Blvd</u> <u>New Port News, TX 77652</u>				Date Report Issued: _____						
				Lab Signature: <u>Matt Walsh</u>						
				Title: <u>Analyst</u>						
				<input type="checkbox"/> Satisfactory DEP/DOH USE ONLY <input type="checkbox"/> Incomplete Collection Information <input type="checkbox"/> Repeat Samples Required <input type="checkbox"/> Replacement Samples Required Date Reviewed by DEP/DOH: _____ DEP/DOH Reviewing Official: _____						

1. Indicate the sample type for each sample collected. Sample type codes are: D = Distribution (routine compliance), C = Repeat/Check, R = Raw, N = Entry Point to Distribution, P = Plant Tap, S = Special (clearance, etc.).
 2. Lab certification number for the listed method is included at top with the laboratory address.
 3. Please circle appropriate selection.
 4. Defined in Florida Administrative Code Rule 62-160, Table 1.
 5. Complete for community & non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.
 Results Key: A = Coliforms are absent; P = Coliforms are present; C = confluent growth; TNTC = too numerous to count (62-590.730 Reporting Format).

Relinquish By: _____

Date: _____ Time: _____

Received By: Pearson

Date: 12/14/15 Time: 1335

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

6881 Southpoint Pkwy. • Jacksonville, FL 32216 • 804.383.9350 • Fax 904.383.9354 • E82574
 4965 SW 41st Blvd • Gainesville, FL 32608 • 352.377.2349 • Fax 352.395.6639 • E92001
 10200 USA Today Way • Miramar, FL 33025 • 954.889.2288 • Fax 954.889.2281 • E82536
 8610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327 • E84589
 628 S. Northlake Blvd., Ste. 1016 • Altamonte Springs, FL 32701 • 407.837.1594 • E53076
 1288 Cedar Center Drive, Tallahassee, FL 32301 • 850.219.6274 • Fax 850.219.6275 • E811085

A1509210



Advanced Environmental Laboratories, Inc.

Lab Receipt Date & Time: 12/15/15 1520
 Analysis Date & Time: 12-15-15 1713
 Sample Acceptance Criteria:
 Sample Preservation: On Ice Not On Ice 4 °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 Coliphage HPC Other: _____

Public Water System (PWS) Name: Shenandoah (Lehighville) PWS I.D.: 3354628

PWS Address: 100 Shenandoah Blvd City: Lehighville

PWS or PWS Owner's Phone #: 717-819-4219 Fax #: 717-819-4219

Collector: Nathan Foster Collector's Phone #: 610-465-9357

Type of Supply: (check only one)

Community Water System Non-Transient Non-community Water System Transient Non-community Water System
 Limited Use System Bottled Water Private Well Swimming Pool 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: 12/15/15

DCNF: AD-D045 Effective 01/85, Revised 09/19/2012

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type ¹	Disinfectant Residual (mg/L)	pH	Analysis Method(s) ² <u>SM922B</u>				
						Non-Coliform	Total Coliform	Fecal, E. coli, Enterococci, or Coliphage ³	Data Qualifier ⁴	Lab Sample #
<u>S3</u>	<u>Northwell (New)</u>	<u>6:45 AM</u>	<u>R</u>	<u>0</u>			<u>A</u>			<u>1</u>
<u>S4</u>	<u>Northwell (New)</u>	<u>1:30</u>	<u>R</u>	<u>0</u>			<u>A</u>			<u>2</u>

Average of disinfectant residuals for distribution routine & repeat samples. (Free chlorine or Total chlorine (circle one)). 0

Disinfectant Residual Analysis Method:

DPD Colorimetric Other: _____

Person performing disinfectant analysis is (Check one of below):

A certified operator (# C1728)
 Supervised by certified operator (# _____)
 Employed by a certified lab Employed by DEP or DOH
 Authorized representative of supplier of water

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Date and time PWS notified by lab of positive results: _____

Date and time DEP/DOH notified by lab of positive results: _____

Date Report Issued: _____

Lab Signature: Matt Kell

Title: Analyst

(INSERT NAME AND MAILING ADDRESS OF PERSON TO RECEIVE REPORT)

US Water Services
4535 Cross Bayou Blvd
New Port Richey, FL 34653

DEP/DOH USE ONLY

Satisfactory
 Incomplete Collection Information
 Repeat Samples Required
 Replacement Samples Required

Date Reviewed by DEP/DOH: _____

DEP/DOH Reviewing Official: _____

- Indicate the sample type for each sample collected. Sample type codes are: D = Distribution (routine compliance), C = Repeat/Check, R = Raw, N = Entry Point to Distribution, P = Plant Tap, S = Special (treatment, etc.).
 - Lab certification number for the fixed method is included at top with the laboratory address.
 - Please circle appropriate selection.
 - Defaced in Florida Administrative Code Rule 62-160, Table 1.
 - Complete for community & non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.
- Results Key: A = Coliforms are absent; P = Coliforms are present; C = confluent growth; TNTC = too numerous to count (62-350.73) Reporting Format.

Relinquish By: _____

Date: _____ Time: _____

Received By: [Signature]

Date: 12/15/15 Time: 1:30

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

6681 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.383.9350 • Fax 904.383.9354 • E82574
 4888 SW 41st Blvd • Gainesville, FL 32608 • 352.377.2349 • Fax 352.395.8639 • E82001
 10200 USA Today Way • Miramar, FL 33025 • 954.889.2288 • Fax 954.869.2281 • E82535
 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9816 • Fax 813.630.4327 • E84588
 380 Northlake Blvd., Suite 1048 • Altamonte Springs, FL 32701 • 407.937.1594 • E53076
 2639 N. Monroe St., Suite D, Tallahassee, FL 32303 • 850.219.6274 • Fax 850.219.6275 • E811086

A1509259



Advanced Environmental Laboratories, Inc.

Lab Receipt Date & Time: 12/16/15 1600
 Analysis Date & Time: 12-16-15 1742
 Sample Acceptance Criteria:
 Sample Preservation: On Ice Not On Ice 4 °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 Coliphage HPC Other: _____

Public Water System (PWS) Name: Shenandoah (Leebrook) PWS I.D.: 3354028

PWS Address: 196 Shenandoah Blvd City: Leebrook

PWS or PWS Owner's Phone #: 727-419-4242 Fax #: 727-419-4242

Collector: Nathan Foster Collector's Phone #: 52465-937

Type of Supply: (check only one)

Community Water System Non-Transient Non-community Water System Transient Non-community Water System
 Limited Use System Bottled Water Private Well Swimming Pool 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: 12/16/15

DCNF: AD-0045 Effective 01/95, Printable Revision 04/30/2015

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time (24 hr clock)	Sample Type	Disinfectant Residual (mg/L)	pH	Analysis Method(s) ^a			Data Qualifier ^d	Lab Sample #
						Non-Coliform	Total Coliform	Fecal, E. coli, Enterococci, or Coliphage ^c		
SS	North Well (New)	630	R	0			A			1
SL	North Well (New)	035	R	0			A			2

Average of disinfectant residuals for distribution routine & repeat samples. Free chlorine or Total chlorine (check one).

Disinfectant Residual Analysis Method:
 DPD Colorimetric Other: _____
 Person performing disinfectant analysis is (Check one of below):
 A certified operator (# 20128)
 Supervised by certified operator (# _____)
 Employed by a certified lab Employed by DEP or DOH
 Authorized representative of supplier of water

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Date and time PWS notified by lab of positive results: _____
 Date and time DEP/DOH notified by lab of positive results: _____
 Date Report Issued: _____
 Lab Signature: Matthew Walker
 Title: Analyst

(INSERT NAME AND MAILING ADDRESS OF PERSON TO RECEIVE REPORT)

US Water Services
4935 Cross Bayou Blvd
New Port Richey FL 34652

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

1. Indicate the sample type for each sample collected. Sample type codes are: D = Distribution (routine compliance), C = Repeat/Check, R = Raw, N = Entry Point to Distribution, P = Plant Tap, S = Special (clearance, etc.).
 2. Lab certification number for the listed method is included at top with the laboratory address.
 3. Please circle appropriate selection.
 4. Defined in Florida Administrative Code Rule 62-160, Table 1.
 5. Complete for community & non-transient non-community systems serving populations up to and including 4,500. Do not include raw or plant samples in the average.
 Result Key: A = Coliforms are absent; P = Coliforms are present; C = confluent growth; TNTC = too numerous to count (62-550.710 Reporting Format).

Relinquish By: _____
 Date: _____ Time: _____
 Received By: Matthew Walker
 Date: 12/16/15 Time: 1415

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

6661 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.383.9350 • Fax 904.383.9354 • E82574
 4965 SW 41st Blvd • Gainesville, FL 32608 • 352.377.2348 • Fax 352.395.8639 • E82001
 10200 USA Today Way • Miramar, FL 33025 • 954.889.2288 • Fax 954.889.2281 • E82935
 8810 Princess Palm Ave. • Tampa, FL 33619 • 813.630.6616 • Fax 813.630.4327 • E84589
 528 S. Northlake Blvd., Sta. 1018 • Altamonte Springs, FL 32701 • 407.837.1934 • E83078
 1288 Cedar Carter Drive, Tallahassee, FL 32301 • 850.219.8274 • Fax 850.219.8275 • E811095

A1509282



Advanced Environmental Laboratories, Inc.

Lab Receipt Date & Time: 12/17/15 1505
 Analysis Date & Time: 12-17-15 1715
 Sample Acceptance Criteria:
 Sample Preservation: On Ice Not On Ice 4 °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 Coliphage HPC Other: _____

Public Water System (PWS) Name: Shenandoah (Lake Side) PWS I.D.: 3354028

PWS Address: 100 Shenandoah Blvd City: Leesburg

PWS or PWS Owner's Phone #: 772-464-4352 Fax #: 772-464-4214

Collector: Nathan Foster Collector's Phone #: 520-455-8577

Type of Supply: (check only one)

Community Water System Non-Transient Non-community Water System Transient Non-community Water System
 Limited Use System Bottled Water Private Well Swimming Pool 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: 12/17/15

DCN#: AD-0045

Effective 01/85, Revised 09/18/2012

Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type ¹	Disinfectant Residual (mg/L)	pH	Analysis Method(s) ² <u>SM922B</u>				
						Non-Coliform	Total Coliform	Fecal, E. coli, Enterococci, or Coliphage ³	Data Qualifier ⁴	Lab Sample #
57	North Well (New)	6:30	R	0		A				1
58	North Well (New)	1:30	R	0		A				2

Average of disinfectant residuals for distribution routine & repeat samples. Free chlorine or Total chlorine (circle one). 0

Disinfectant Residual Analysis Method:

DPD Colorimetric Other: _____

Person performing disinfectant analysis is (Check one of below):

A certified operator (# 07625)
 Supervised by certified operator (# _____)
 Employed by a certified lab Employed by DEP or DOH
 Authorized representative of supplier of water

Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.

Date and time PWS notified by lab of positive results: _____

Date and time DEP/DOH notified by lab of positive results: _____

Date Report Issued: _____

Lab Signature: Matt Kelly

Title: Analyst

INSERT NAME AND MAILING ADDRESS OF PERSON TO RECEIVE REPORT

US Water Services
4935 Cross Bayon Blvd
North Park Shores FL 32652

Satisfactory DEP/DOH USE ONLY

Incomplete Collection Information

Repeat Samples Required

Replacement Samples Required

Date Reviewed by DEP/DOH: _____

DEP/DOH Reviewing Official: _____

- Indicate the sample type for each sample collected. Sample type codes are: D = Distribution (routine compliance), C = Repeat/Check, R = Raw, N = Entry Point to Distribution, P = Plant Tap, S = Special (clearance, etc.).
 - Lab certification number for the listed method is included at top with the laboratory address.
 - Please circle appropriate selection.
 - Defined in Florida Administrative Code Rule 62-160, Table 1.
 - Complete for community & non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.
- Results Key: A = Coliforms are absent; P = Coliforms are present; C = confluent growth; TNTC = too numerous to count (62-350.730 Reporting Format).

Relinquish By: _____

Date: _____ Time: _____

Received By: [Signature]

Date: 12/17/15 Time: 1335

DRINKING WATER MICROBIAL SAMPLE COLLECTION & LABORATORY REPORTING FORMAT

6881 Southpoint Pkwy. • Jacksonville, FL 32218 • 904.363.9350 • Fax 904.363.9354 • E82574
 4965 SW 41st Blvd • Gainesville, FL 32608 • 352.377.2348 • Fax 352.395.6639 • E82001
 10200 USA Today Way • Miramar, FL 33025 • 954.889.2288 • Fax 954.889.2281 • E82535
 8610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9618 • Fax 813.630.4327 • E84589
 528 S. Northlake Blvd., Ste. 1016 • Altamonte Springs, FL 32701 • 407.937.1594 • E83076
 1288 Cedar Center Drive, Tallahassee, FL 32301 • 850.219.6274 • Fax 850.219.6275 • E811095

A1509296



Advanced Environmental Laboratories, Inc.

Lab Receipt Date & Time: 12/18/15 1400
 Analysis Date & Time: 12-18-15 1542
 Sample Acceptance Criteria:
 Sample Preservation: On Ice Not On Ice 4°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 Coliphage HPC Other: _____

Public Water System (PWS) Name: Shenandoah (Leesville) PWS I.D.: 335408

PWS Address: 100 Shenandoah Blvd City: Leesville

PWS or PWS Owner's Phone #: 727-444-4229 Fax #: 727-444-4229

Collector: William Foster Collector's Phone #: 352-455-4547

Type of Supply: (check one)

Community Water System Non-Transient Non-community Water System Transient Non-community Water System

Limited Use System Bottled Water Private Well Swimming Pool 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: 12-18-15

DCM: AD-0045

Effective 01/85, Revised 09/19/2012

To be completed by collector or sample						To be completed by lab				
Sample #	Sample Point (Location or Specific Address)	Sample Collection Time	Sample Type ¹	Disinfectant Residual (mg/L)	pH	Analysis Method(s) ² <u>SMA 222B</u>				
						Non-Coliform	Total Coliform	Focal, E. coli, Enterococci, or Coliphage ³	Data Qualifier ⁴	Lab Sample #
S9	North Well (New)	1235	R	0			A			1
S10	North Well (New)	1255	R	0			A			2
Average of disinfectant residuals for distribution routine & repeat samples. ⁵ (Free chlorine or Total chlorine (circle one).) <u>0</u>						Unless otherwise noted, all tests are performed in accordance with NELAC standards, and the results relate only to the samples.				
Disinfectant Residual Analysis Method: <input checked="" type="checkbox"/> DPD Colorimetric <input type="checkbox"/> Other: _____						Date and time PWS notified by lab of positive results: _____				
Person performing disinfectant analysis is (Check one of below): <input checked="" type="checkbox"/> A certified operator (# <u>C17625</u>) <input type="checkbox"/> Supervised by certified operator (# _____) <input type="checkbox"/> Employed by a certified lab <input type="checkbox"/> Employed by DEP or DOH <input type="checkbox"/> Authorized representative of supplier of water						Date and time DEP/DOH notified by lab of positive results: _____				
INSERT NAME AND MAILING ADDRESS OF PERSON TO RECEIVE REPORT: <u>US Water Services</u> <u>4975 Cross Bayou Blvd</u> <u>New Port Richey FL 34652</u>						Date Report Issued: _____				
						Lab Signature: <u>[Signature]</u> Title: _____				
						<input type="checkbox"/> Satisfactory DEP/DOH USE ONLY <input type="checkbox"/> Incomplete Collection Information <input type="checkbox"/> Repeat Samples Required <input type="checkbox"/> Replacement Samples Required Date Reviewed by DEP/DOH: _____ DEP/DOH Reviewing Official: _____				

1. Indicate the sample type for each sample collected. Sample type codes are: D = Distribution (routine compliance), C = Repeat/Check, R = Raw, N = Entry Point to Distribution, P = Plant Tap, S = Special (clearance, etc.).
 2. Lab certification number for the listed method is included at top with the laboratory address.
 3. Please circle appropriate selection.
 4. Defined in Florida Administrative Code Rule 62-160, Table 1.
 5. Complete for community & non-transient non-community systems serving populations of 15 and including 4,900. Do not include raw or plant samples in the average.
 Results Key: A = Coliforms are absent; P = Coliforms are present; C = confluent growth; TNTC = too numerous to count (62-350.730 Reporting Format).

Relinquish By: _____

Date: 12/18/15 Time: 1400

Received By: [Signature]

Date: 12/18/15 Time: 1400

PERMIT APPLICATION PACKAGE

ENGINEERING SERVICES

Prepared for:

LAKESIDE WATERWORKS, INC. WELL 2R REPLACEMENT

100 Shangri-La Blvd. Leesburg, FL 34748
Lake...

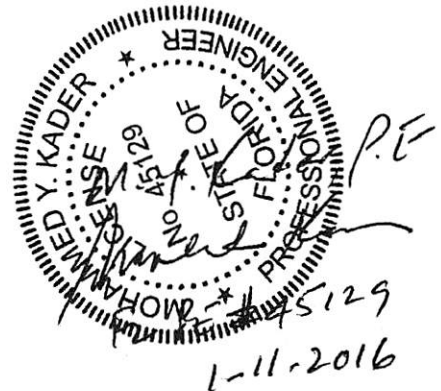
RECEIVED
JAN 12 2016



I Have What I Need.

N

January 2016



Lakeside Waterworks, Inc.
PWS No.: 3354028
Well #1 Replacement
Table of Contents

- I. FDEP Form 62-555.900(1)
- II. Well #1 Bacteriological Survey
- III. Permitting Plans Well #1 Replacement

I.

FDEP Form 62-555.900(1)

II.

Well #1 Bacteriological Survey

III.

Permitting Plans Well #1 Replacement

**Application Completeness Review: P.A. # 0080550-006
Lakeside Waterworks Replacement Well**

The Department received an application for a specific permit to equip and connect the replacement well at Shangri-la by the Lake (PWS No. 3354028) on January 12, 2016. This advance communication is based on a preliminary review of the submitted materials and is attempting to provide the applicant/engineer with an opportunity to complete the application in a timely manner so that the project review can resume without delay.

The preliminary review of the submitted materials indicates that the following items need to be satisfactorily addressed and revisions to be submitted as maybe necessary. Please provide the necessary information to complete the submittal to replace the incomplete documentation of the file by 12:00 PM on January 22, 2016. If this date cannot be met, please respond by e-mail indicating the reason and provide a date certain by which the required material should be anticipated to adjust the review schedule accordingly.

1. Based on the Department's database there are two existing wells at Shangri-la by the Lake (PWS No. 3354028). These two wells are a) 6-inch Well No. 1 and b) 8-inch Well No. 2. Which of the two wells will be replaced, Well 1 or Well 2? If it is Well No. 2, the Department will designate the replacement well as Well 2R.
2. Will the capacity of the water treatment plant change after the replacement well has been placed in service?
 - Provide calculations for the average daily water demand, maximum daily water demand, and peak hour flow;
 - Average Daily Flow: _____ gpd
 - Maximum Daily Flow: _____ gpd
 - Peak Hour Flow: _____ gpd = _____ gph
 - Max Day/Avg Daily Flow Peaking Factor: _____
 - Max Hour/Average Daily Flow Peaking Factor: _____
3. Provide an aerial photo or scaled site plan showing the 50 & 100 -foot setback radii. Indicate the distances from the well to the following:
 - (a) septic tank/field;
 - (b) grease trap;
 - (c) storm water ponds, and
 - (d) any Sanitary Hazards located within these radii.
4. Provide a statement as to the location (and identify specifically as such) or absence of any sanitary hazards within 100 feet of the well.
5. Provide the latitude/longitude of the well:

Latitude: ° ‘ “ North:

Longitude: ° ‘ “ West

6. Provide one (1) copy of drilling permit issued by the Water Management District.
7. Provide one (1) copy of drilling permit issued by the Water Management District.
8. Provide one (1) copy of the chemical analysis from the production well performed by a Certified Laboratory with results submitted on the **DEP Standard Format (see attached)** for all water analysis per 62-550 F.A.C.

Water Well sampling Requirement for a Community Water System include the following.

Community System Parameters:

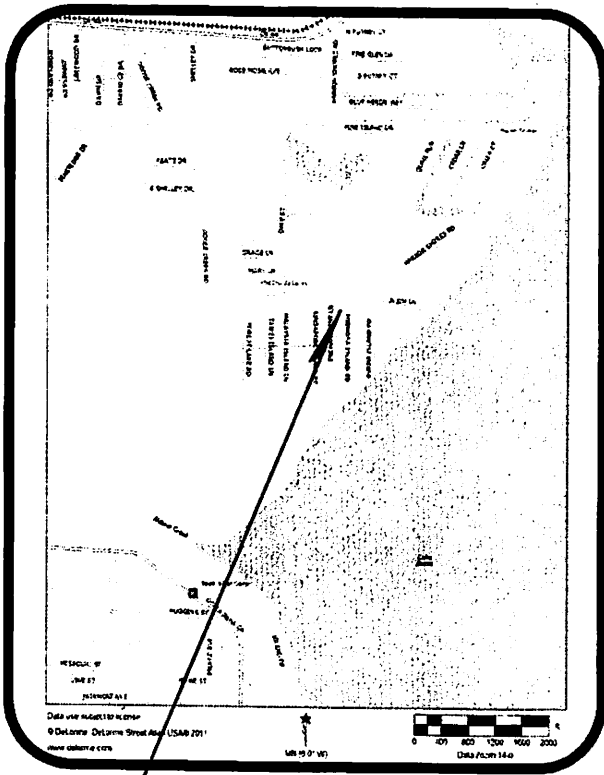
- Primary Inorganics;
 - Turbidity;
 - Synthetic Organic Contaminants (SOCs);
 - Volatile Organic Compounds (VOCs);
 - Gross Alpha Radioactivity & Radium 228;
 - Secondary contaminants;
 - Total Sulfide, alkalinity, dissolved iron, pH, & dissolved oxygen
9. Provide one (1) copy pumping test results showing static & pumping water levels at the proposed pumping rate or greater.
 10. As per information provided, the new well will be equipped with an existing pump. Provide the pump specifications and a copy of the pump curve showing/highlighting the pump rate in gallons per minute, total dynamic head (TDH), and well efficiency (EFF) on the curve.
 11. Submit a revised drawing showing not only the well and above-ground installation elevation view but also showing the plan view.
The elevation view of the well and above ground installation must show:
 - Top of casing is sealed and not subject to inundation;
 - Top of casing must be a minimum of 12” above the apron and 18” above surrounding grade;
 - On sites subject to flooding, an earthen mound must be provided to raise the pump house floor or apron at least two (2) feet above highest known flood elevation;
 - Concrete apron (minimum 6' x 6' x 4") must be centered around, and sloping away from, the well head;
 - Raw water sampling. The raw water sampling tap must be smooth-nosed type **with downward opening**, located between well head & check valve.
 - Above-grade check valve on well discharge piping (at well head);

- Well head must be protected from tampering/vandalism;
 - Provisions on discharge piping for pumping well to waste – **Not shown in the submitted drawings.**
 - Provision for “venting” the casing. Well vents shall terminate in a down-turned outlet at a minimum of 18-inches above the apron with 20-mesh insect screen;
 - Air-release/vacuum relief valve is **not shown in the submitted drawings**
 - Above-grade discharge piping must be adequately supported;
12. For security purposes the well-head should be provided with a **6 feet high security fence with an access gate**. Provide a drawing showing the fence around the well heads and that the access gate to the well-head is lockable.
13. Specifications must indicate that disinfection of the modified well shall be done in accordance with AWWA C654.
14. Provide the specifications for the raw water mains. These specifications must be included in the notes in the drawing or separate specifications must be submitted.
- a. Please provide the color coding of the raw water main pipes, [62 555.320 (21) (b) 3, F.A.C.]. The blue color is reserved for finished water mains only.
 - b. Specify the pipe material for the raw water mains and the corresponding AWWA specification. Piping material specifications covering pipes, jointing and packing materials, internal coating and linings, fittings, specials and appurtenances shall all be in accordance with the corresponding AWWA Standards and be conforming to NSF requirements.
 - i. PVC pipes less than 4“shall be in accordance with ASTM 1785 (schedule 40, 80, 120) or ASTM 2241 SDR 21 and shall have NSF markings throughout the installed length of pipe.
 - ii. PVC pipes 4” to 12” shall be in accordance with AWWA C900.
 - iii. PVC pipes 14” to 36” shall be AWWA C905
 - iv. NSF-PW logo required for all PVC pipe.
 - v. DIP 3” to 64” must conform to C150/C151.
 - c. Include in the specifications the AWWA Standard for disinfecting raw water mains. Disinfecting the water main and conducting bacteriological surveys and evaluations must be done in accordance with AWWA C651.
 - d. Include in the specifications the AWWA Standard for pressure and leakage testing of raw water mains. PVC water mains shall be installed, pressure and leak tested in accordance with AWWA Standard C605 and Ductile Iron water mains in accordance with AWWA C600, [62 555.320(21) (b) 1 and 62-555.330, F.A.C.]. All installation, testing and field procedures must be provided and must conform to the applicable AWWA Standards.
 - e. Include the specifications for bedding, backfill and depth of cover in trenches for underground raw water main installation, [62-555.320(21) (b), F.A.C. and RSSW 8.5.2.].
 - f. Change of direction fittings, terminal fittings and hydrants must be provided with thrust restraints, [62-555.320(21) (b), F.A.C., and RSSW 8.5.4]. Sizing of such

- restraints is the engineer's responsibility. The thrust restraint table must be included in the details of the drawings. This must be included in the specifications.
- g. Horizontal and vertical minimum separation distances required between raw water mains and all other utility lines shall be included in the specifications and used by the engineer so that the design complies with 62-555.314(1), (2), (3), and (4), F.A.C. Exceptions must be identified by the engineer, and the appropriate justifications and alternative construction features provided for case by case approval by the Department, [62-555.314(5), F.A.C.].
 - h. Provide information on the approximate ground water elevation during different seasons in relation to the underground water main and utility line installation and subsurface structures as may be appropriate, [62-555.520(4)(a) 10.d, F.A.C.].
 - i. If applicable, provide information on aggressive soils or soils contaminated by low-molecular-weight petroleum products or organic solvents where water mains will be installed, [62 555.520(4)(a) 10.f, F.A.C.].

LAKESIDE WATERWORKS, I LAKE COUNTY, FLORIDA

PERMITTING PLANS WELL #1 REPLACEMENT



LOCATION:

100 SHANGRI LA BLVD., LEESBURG, FL 34788
OUTSIDE FLOOD ZONE AE, ELEV. = 63.8
FEMA MAP: 12069C0332E

PROJECT DESCRIPTION:

REPLACEMENT OF EXISTING WELL #1 AND
INSTALLATION OF APPROXIMATELY 60 LINEAR
FEET OF 6" C900 PVC WITH ASSOCIATED
APPURTENANCES.

PRO.

OWNER
GARY D
4939 CR
NEW PO
TELEPH

PROFES
U.S. WA
4939 CR
NEW PO
TELEPH
FAX: (72

PROJECT
LOCATION

LOCATION MAP

AS SHOWN



NORTH



**INVESTIGATE
BEFORE YOU
EXCAVATE**

**'CALL SUNSHINE
STATE ONE'
1-800-432-4770
TOLL FREE**

FL. STATUTE 553.851 (1979) REQUIRES
MIN. OF 2 DAYS AND MAX. OF 5 DAYS
NOTICE BEFORE YOU EXCAVATE.

U.S. Water[®] Services Corporation

4939 Cross Bayou Blvd.
New Port Richey, Florida 34652-3434
Phone: (727) 848-8292 Fax: (727) 848-7701
FL. COA NO. 9754 & FL. REG. NO. 45129

INDEX OF DRAWINGS

SHEET NO.	TITLE
1	COVER SHEET
2	SITE PLAN
3	WELLHEAD DETAILS
4	NOTES AND DETAILS

PROJECT TEAM

BEREMER
CROSS BAYOU BLVD.
NEW PORT RICHEY, FL 34652
PHONE: (727) 848-8292

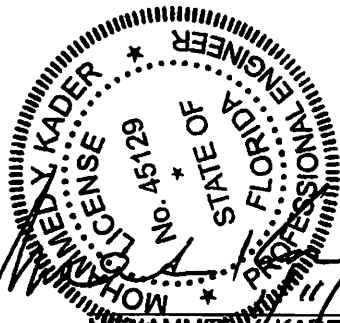
PROFESSIONAL ENGINEERING SERVICES:
WATER SERVICES CORPORATION
CROSS BAYOU BLVD.
NEW PORT RICHEY, FL 34652
PHONE: (727) 848-8292
(727) 848-7701

UTILITIES -

WATER - PRIVATE ONSITE
WASTEWATER - PRIVATE ONSITE
ELECTRICAL - UNKNOWN

RECEIVED
JAN 12 2016

ENGINEERING PLANS
PREPARED FOR:
LAKE MARIAN SHORES
HOA
OSCEOLA COUNTY
FLORIDA



MOHAMMED Y. KADER, P.E.
FL. REG. 45129

THIS DRAWING AND THE DESIGN SHOWN ARE THE PROPERTY OF U.S. WATER SERVICES CORP. AND ARE NOT TO BE REPRODUCED, COPIED, PUBLISHED, OR USED IN WHOLE OR PART WITHOUT WRITTEN CONSENT. THEY ARE TO BE USED ONLY FOR THE SITE AND PROJECT IDENTIFIED AND SHALL BE RETURNED UPON REQUEST.

Materials

- Polyvinyl Chloride (PVC)
 1. Less than 4" diameter: ASTM D2241 & Class 200 PSI Minimum SDR21, or Schedule 40 & 80 per ASTM D1785;
 2. Greater than or equal to 4" diameter: C900
 3. NSF-PW Logo is required for all PVC pipe.

Installation

1. Minimum Depth of Cover (Usually 18" – 36")
2. Minimum Horizontal & Vertical Separation from sewers, reuse lines, other sanitary hazards);

Testing

1. Hydrostatic/Leakage Testing (Reference AWWA C600 or M23 for PVC);

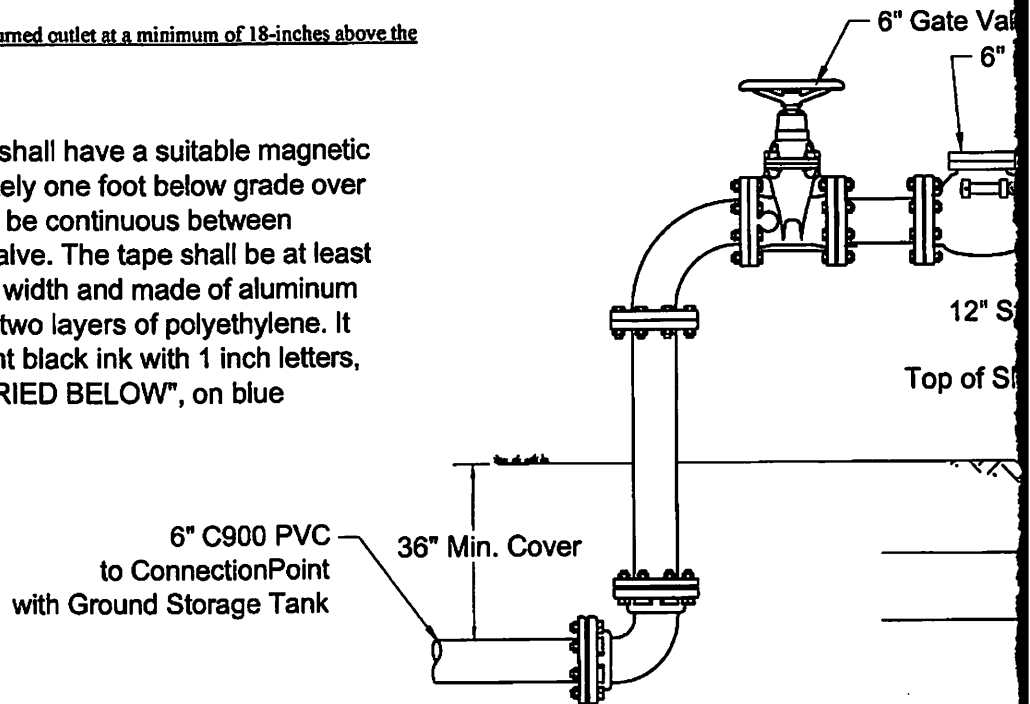
Disinfection

2. Disinfection (Reference AWWA C651-92);

Construction Sheets:

- Raw water sampling tap must be smooth-nosed and downward-opening.
- Well vents shall terminate in a down-turned outlet at a minimum of 18-inches above the apron with 20-mesh insect screen.

All PVC water mains installed shall have a suitable magnetic locator tape buried approximately one foot below grade over the water main. The tape shall be continuous between valves, and secured to each valve. The tape shall be at least 5 mils thick, 2 inches minimum width and made of aluminum material sandwiched between two layers of polyethylene. It shall be imprinted in permanent black ink with 1 inch letters, "CAUTION, WATER LINE BURIED BELOW", on blue background.



Flood Zone Notes:

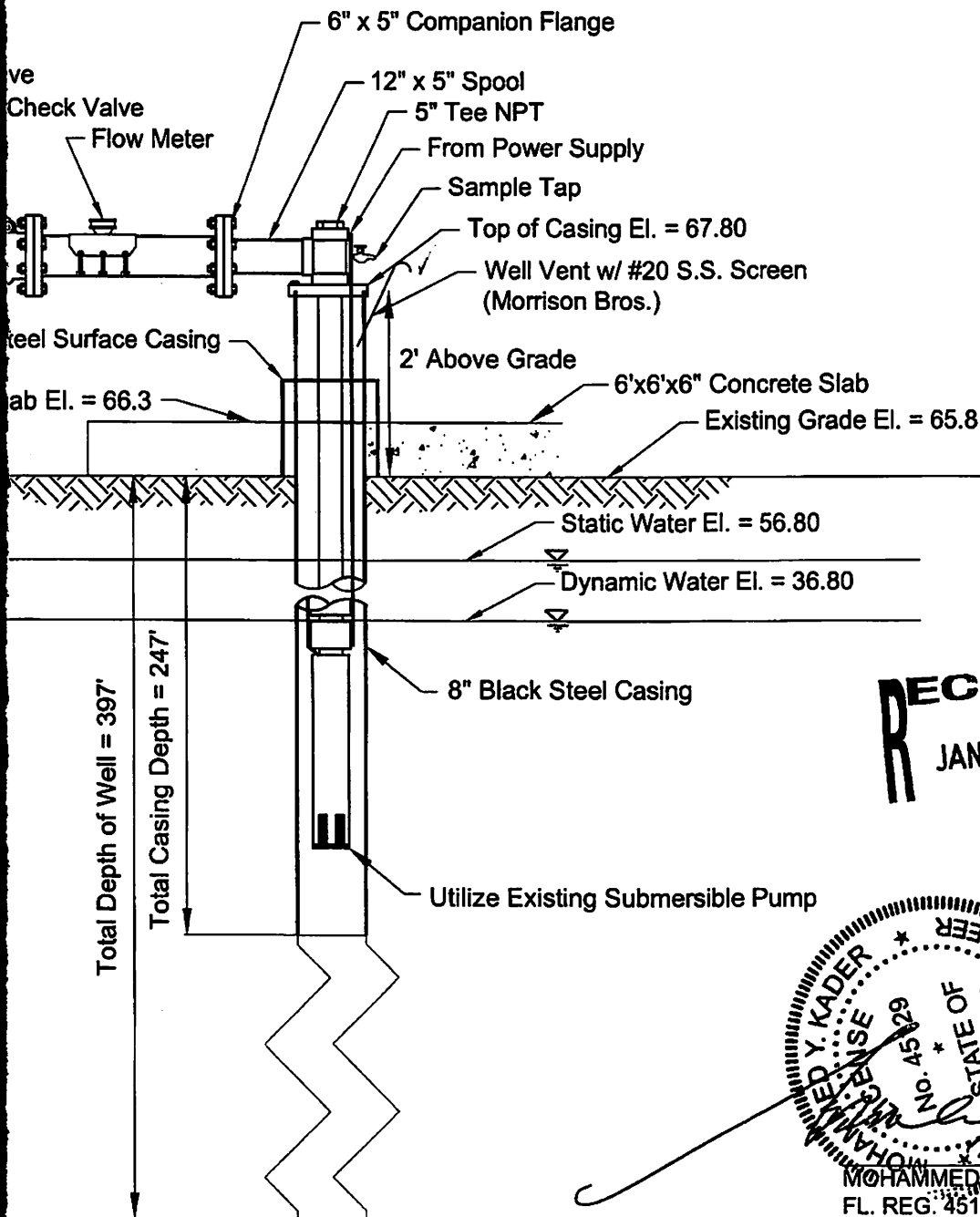
Site is outside of the Zone AE El. = 63.8

FEMA Map Number: 12069C033E

Panel 332 of 750

Revised 12/18/2012

All elevations shown are based on an assumed grade elevation of 65.8 at well.



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 JAN 12 2016

MOHAMMED Y. KADER, P.E.
 FL. REG. 45129

ENGINEERING			
Designer	Check	Date	1/9/16
Drawn By	Rev	Scale	As Shown
Checked By	Rev	Revision No.	

LAKESIDE WATERWORKS, INC.
 WELL #1 REPLACEMENT
 WELLHEAD DETAILS
 LAKE COUNTY, FLORIDA

4938 CROSS BAYOU BOULEVARD
 NEW PORT RICHEY, FL 34852
 (727) 848-9292 FAX (727) 848-701
 FL. COA NO. 9754 & FL. REG. NO. 45129

U.S. Water
 Services Corporation

3
 4

GENERAL CONSTRUCTION NOTES:

1. All elevations shown hereon are based on an assumed elevation.
2. All design and construction shall conform to the minimum standards set forth by Charlotte County.
3. Locations, elevations and dimensions of existing utilities, structures and other features are shown according to the best information available at time of preparation of these plans. The contractor shall verify the locations, elevations, and dimensions of all existing utilities, structures and other features affecting this work prior to construction.
4. The contractor shall check plans for conflicts and discrepancies prior to performing any work in the affected area.
5. The contractor is responsible for repairing any damage to existing facilities, above or below ground, that may occur as a result of the work performed by the contractor called for in this contract.
6. All underground utilities must be in place and tested or inspected prior to road base and subsurface construction.
7. It is the contractor's responsibility to become familiar with the permit and inspection requirements specified by the various governmental agencies and the engineer. The contractor shall obtain all necessary permits prior to construction and schedule inspection according to agency instructions.
8. All work performed shall comply with the regulations and ordinances of the various governmental agencies having jurisdiction over the work.
9. Contractor shall submit shop drawings on all precast and manufactured items to the engineer for approval. Failure to obtain approval before installation may result in removal and replacement at contractor's expense.
10. All water lines and sanitary lines are to be PVC unless otherwise noted.
11. It is the responsibility of the contractor to establish in the field right-of-way lines, benchmarks (ELEV.), coordinates, center lines and stationing as required to construct this project.
12. All pipes to be constructed with 3' minimum cover unless otherwise noted on the plans.
13. All rocks or stones larger than 6" in diameter shall be removed from the backfill material. Backfill material placed within 1-foot of piping and appurtenances shall not contain any stones larger than 2" in diameter.
14. All pipe lengths are approximate. Pipe measurements are to center of structures or fittings. Pipe measurements for straight endwall end sections are to end of pipe.
15. All concrete work shall have a minimum ultimate compressive strength of 3,000 psi (28 day strength), unless otherwise indicated.

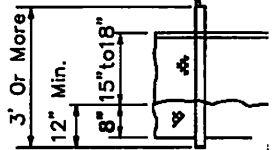
WATER SYSTEM NOTES

1. A vertical clearance of 18 inches shall be maintained between sanitary sewers and water mains. If clearances cannot be achieved by adjusting water mains the sanitary sewer shall be constructed of pressure class 350 ductile iron pipe for no less than 10 feet on each side of the conflict point. As an alternative the sanitary sewer may be placed in a sleeve or encased in concrete for the required 10 feet on each side of the conflict point.
2. A lateral separation of 10 feet shall be maintained between water mains and sanitary sewer.
3. All water mains shall have a minimum of 36 inches of cover.
4. All water system work shall conform with Lake County standards and specifications.
5. Conflicts between water and storm or sanitary sewer to be resolved by adjusting the water lines as necessary.
6. All onsite PVC potable water mains 4" and above shall be in accordance with AWWA C-900. Pipe shall be class 150 DR 18.
7. All PVC water mains 1 1/2" through 3" shall be class 200 and meet the requirements of SDR 21 in accordance with ASTM D-2241 or schedule 40.
8. All ductile iron pipe shall be pressure class 350 in accordance with ANSI A21.50 (AWWA C150), and ANSI A21.31 (AWWA C151), and pipe shall receive exterior bituminous sealed in accordance with ANSI A21.4 (AWWA C104-71). Interior of the ductile iron pipe shall be cement lined and bituminous coated.
9. All fittings larger than 2" shall be ductile iron pressure class 350 in accordance with AWWA C-110 with a pressure rating of 350 PSI. Joints shall be mechanical joints in accordance with AWWA C-111. Fittings shall be cement mortar lined and coated in accordance with fittings AWWA C-104. All fittings shall be restrained using MEGALUG or approved equal.
10. All fittings 2" and smaller shall be schedule 40 PVC with solvent welded sleeve type joints.
11. All PVC water mains shall have a suitable magnetic locator buried approximately one foot below grade over the main. The tape shall be continuous between valves, and secured to each valve. The tape shall be at least 5 1/4 mils thick, 2 inches minimum width and made of aluminum material sandwiched between 2 layers of polyethylene. It shall be imprinted in permanent black ink with 1 inch letters, "CAUTION, WATER LINE BURIED BELOW", on blue background.
12. All water valves to be located in grassy areas.
13. All ductile iron pipe and fittings to be poly wrapped.
14. Contractor shall verify location of water service at each building prior to construction of service line.
15. All water system components and materials that are to come into contact with the potable water shall meet or exceed all NSF requirements.

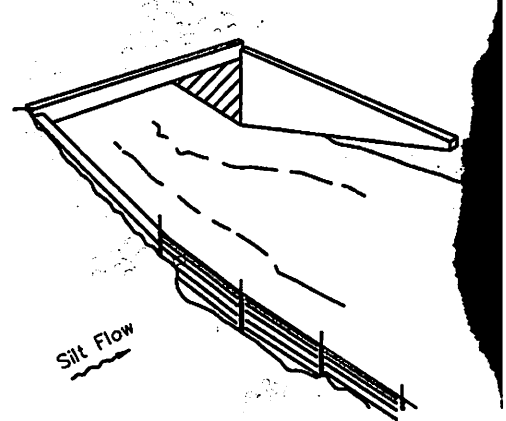
TESTING AND INSPECTION REQUIREMENTS

1. All components of the water system, including fittings, connections, and valves shall be properly pressure tested and accepted by the engineer. Pressure tests to be done in accordance with Charlotte County and AWWA standards. Contractor to notify the engineer 48 hours in advance of performing tests.
2. Contractor to perform chlorination and bacteriological sampling. Copies of all bacteriological test to be submitted to the engineer. Locations of chlorination and sampling points to be submitted with test results along with as-built drawings.
3. Minimum pressure for the hydrostatic and leakage tests shall be 150 psi for potable water main. In accordance with AWWA C600 for a minimum of 2 hours.

Post (Options: 2" x 4" or 2 1/2" Min. Dia. Wood; Steel 1.33 Lbs/Ft. Min.)

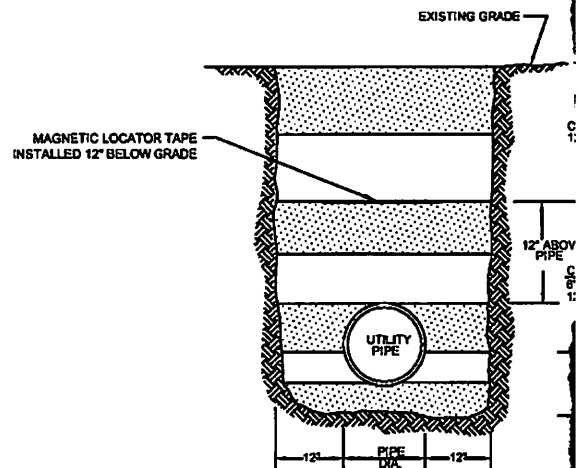


Note: Silt F



Type III Silt Fen

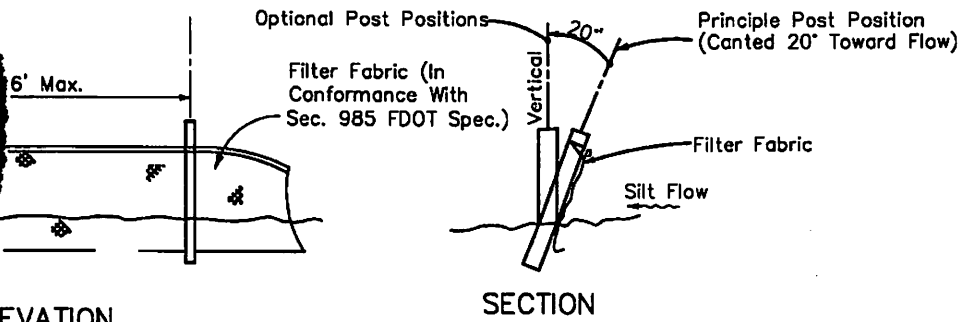
Do not de watercour; used at p



NOTES:

1. TRENCHES LOCATED UNDER PAVEMENT SHALL BE COMPACTED TO 98% OF MAXIMUM DRY DENSITY PER A.A.S.H.T.O. T-119.
2. TRENCHES NOT LOCATED UNDER PAVEMENT SHALL BE COMPACTED TO A FIRMNESS EQUAL TO THAT OF THE SOIL ADJACENT TO THE TRENCH.
3. BASE AND TRENCH BACKFILL SHALL BE COMPACTED IN 6" LIFT COMPACTED TO 98% OF THE MAXIMUM DRY DENSITY PER A.A.S.H.T.O. T-119. FLOWABLE FILL MAY BE SUBSTITUTED FOR COMPACTED FILL ON A CASE BY CASE BASIS. FLOWABLE FILL SHALL MEET THE SPECIFICATIONS, AS APPROVED BY THE ENGINEER.

TRENCH BACKFILL DETAIL

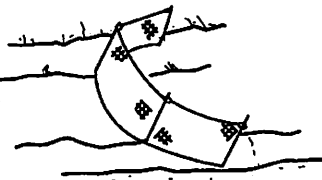


ELEVATION

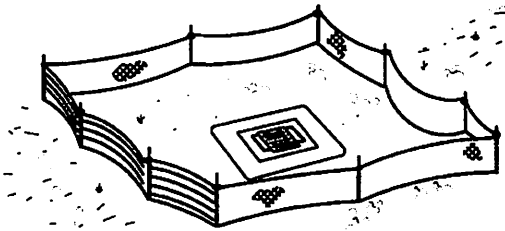
SECTION

ence to be paid for under the contract unit price for Staked Silt Fence (LF).

TYPE III SILT FENCE



Type III Silt Fence



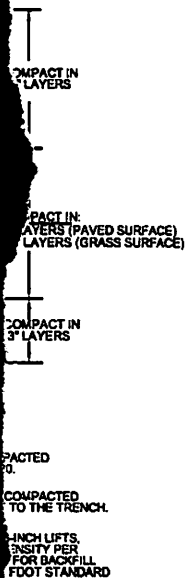
Type III Silt Fence Protection Around Ditch Bottom Inlets.

Silt Flow

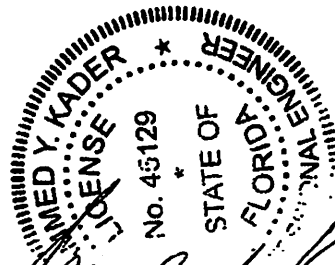
Note: Spacing for Type III Fence to be in accordance with FDOT Design Index No. 102, Chart I, Sheet 1 of 3 and ditch installations at drainage structures Sheet 2 of 3.

ce
 employ in a manner that silt fences will act as a dam across permanent flowing
 ges. Silt fences are to be used at upland locations and turbidity barriers
 permanent bodies of water.

SILT FENCE APPLICATIONS



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 FL. REG. 45129

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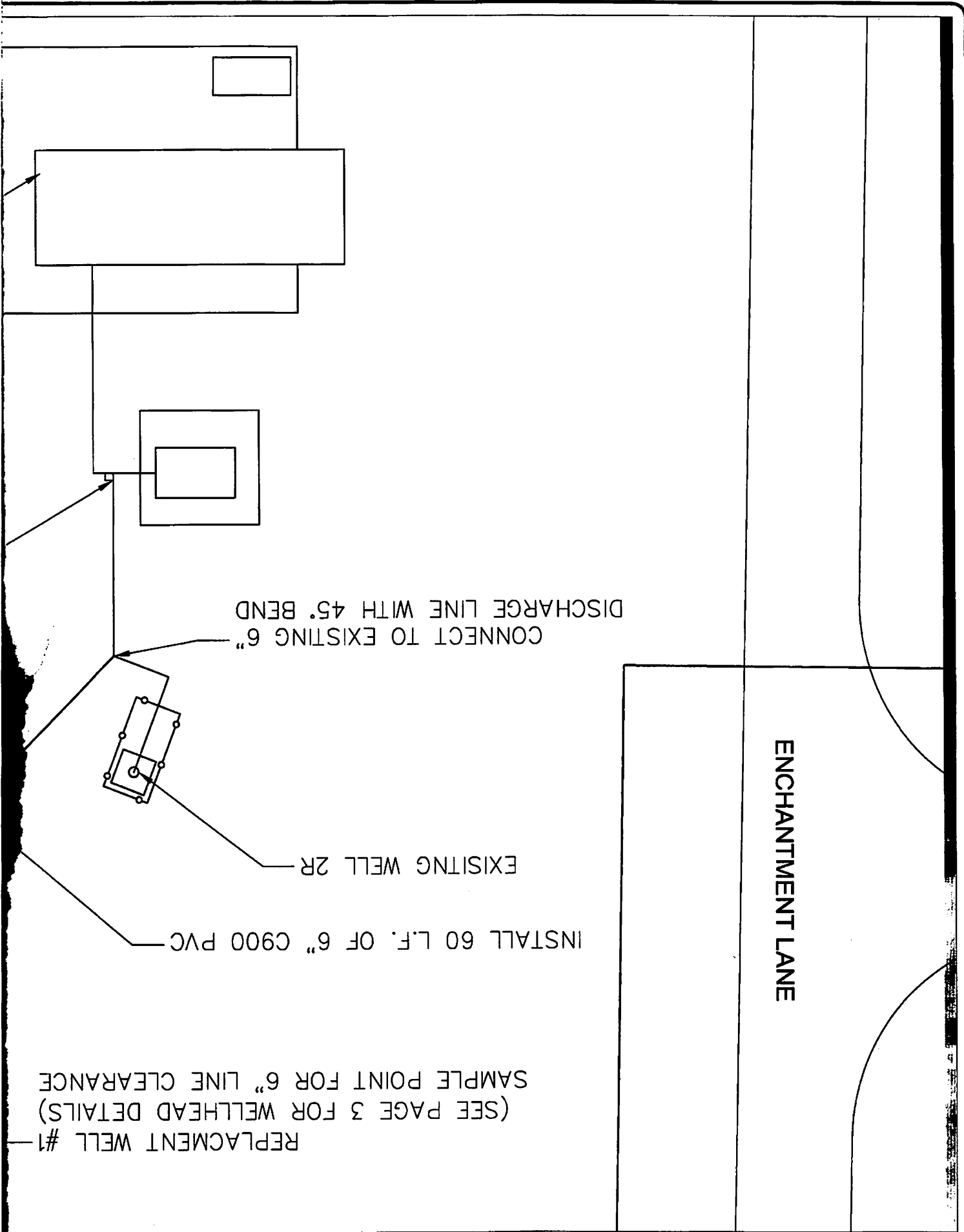
ENGINEERING			

LAKESIDE WATERWORKS, INC.
 WELL #1 REPLACEMENT
 NOTES AND DETAILS
 LAKE COUNTY, FLORIDA

4839 GROSS BAYOU BOULEVARD
 NEW PORT RICHEY, FL 34652
 (727) 848-8282 FAX: (727) 848-7701
 FL. COA NO. 9754 & FL. REG. NO. 45128

U.S. Water
 Services Corporation

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DISCHARGE LINE WITH 45° BEND

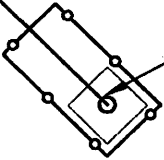
CONNECT TO EXISTING 6"

EXISTING WELL 2R

INSTALL 60 L.F. OF 6" C900 PVC

REPLACEMENT WELL #1
(SEE PAGE 3 FOR WELHEAD DETAILS)
SAMPLE POINT FOR 6" LINE CLEARANCE

ENCHANTMENT LANE

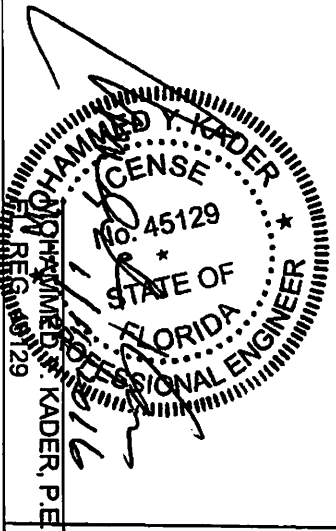


INSTALL TEMPORARY SAMPLE TAP FOR
CHLORINE INJECTION (CLEARANCE)

EXISTING LAKESIDE WATERWORKS
WATER TREATMENT PLANT

ALT KEY: 3794280

RECEIVED
JAN 12 2016



ENGINEERING			
Designed By	MR	Date	1/11/16
Checked By	MR	Scale	AS SHOWN
Checked By	MR	Revision No.	

LAKESIDE WATERWORKS, INC.
WELL #1 REPLACEMENT
SITE PLAN
LAKE COUNTY, FLORIDA

4939 CROSS BAYOU BOULEVARD
NEW PORT RICHEY, FL 34852
(727) 848-8292 FAX. (727) 848-7701
FL. COA NO. 9754 & FL. REG. NO. 45129

U.S. Water
Services Corporation

NO. 2
4



Florida Department of Environmental Protection

Rick Scott
Governor

Carlos Lopez-Cantera
Lt. Governor

Jonathan P. Steverson
Secretary

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

April 15, 2016
Sent by Email

Ron Derossett, Facility Manager
Lakeside Waterworks, Inc
4939 Cross Bayou Boulevard
New Port Richey, FL 34652
rderossett@uswatercorp.net

DEP File No. 0080550-006-WC
County: Lake
Lakeside Waterworks, Inc
PWS ID 3354028
Total clearance for: Lakeside Waterworks
Replacement Well WR-1-Equip and Connect

Dear Mr. Derossett:

This letter acknowledges receipt of your engineer's March 21, 2016 certification that the subject water treatment plant modification is completed in accordance with the FDEP Permit Number 0080550-006-WC dated February 4, 2016, and the related plans and materials. The engineer submitted information to demonstrate that satisfactory pressure and bacteriological tests were conducted for the system in accordance with the AWWA Standards. The utility and/or the owner/operator of the system is entirely responsible for the water's microbiological quality at the point and time it reaches the consumer's meter, and must ensure the water quality is representative of these certified bacteriological test results. The project is located at 100 Shangri-La Boulevard in Leesburg, Florida.

This clearance is to equip and connect replacement Well WR1 to the Shangri-La by the Lake Utilities, Inc. Water Treatment Plant (WTP). This new well replace existing Well No. 1.

The rated design capacity of the water treatment plant will not change. The plant is Category V Class D WTP with a rated design capacity of 180,000 GPD. Accordingly, staffing is by Class D or higher operator: 3 visits per week on nonconsecutive days for a total of 0.3 hour/week. [F.A.C. Rule 62-699.310].

- An 8-inch Well No. WR1 completed on September 24, 2015 under Permit Number 142708 from SJRWMD by the rotary method to a depth of 397 feet, with 12-inch black steel surface casing to from 0 feet to 222 feet, 8-inch primary black steel casing from 0 feet to 247 feet and open hole from 247 feet to 397 feet. Static water level was reported at 11 pumping water level was reported at 31 feet after one hour at 450 gallons per minute (GPM)

As per the well completion report the well location coordinates are: Latitude 28°51'43.71" N., Longitude 81°45'09.15" W.

Components Included in this Clearance:

- An existing 10 horsepower (HP) submersible pump with a rated design capacity of 280 GPM at 130 feet Total Dynamic Head (TDH)
- The above-ground installation piping and piping to the first isolation valve.
- Associated six-inch raw water main from Well WR1 with valves, fittings, controls and appurtenances to the existing 6-inch raw water main connected to the water treatment plant.
- A six-foot security fence.

This constitutes the total clearance for Permit No. 0080550-006-WC. No additional clearances or construction activities are allowed under this permit. This letter of clearance does not preclude your need to obtain approvals as required by other entities.

FLORIDA DEPARTMENT OF
ENVIRONMENTAL PROTECTION



Caroline Shine, Environmental Administrator
Drinking Water/Environmental Resource Permitting
Permitting and Waste Cleanup Program
FDEP, Central District
(407) 897-2927

CDS/jym

cc: Mohammed Y Kader., P. E., U.S. Water Services Corporation [mkader@uswatercorp.net]
Wanda Parker-Garvin, FDEP [Wanda.Parker@dep.state.fl.us]
Jill Farris, FDEP, [jill.farris@dep.state.fl.us]
Shabbir Rizvi, FDEP [shabbir.rizvi@dep.state.fl.us]
Javed Mayet, FDEP [javed.mayet@dep.state.fl.us]
Mala Choksi, FDEP [Mala.Choksi@dep.state.fl.us]



Florida Department of Environmental Protection

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

Rick Scott
Governor

Carlos Lopez-Cantera
Lt. Governor

Jonathan P. Steverson
Secretary

February 8, 2016

ELECTRONIC CORRESPONDENCE

In the matter of an Application for Permit by:

Ron Derossett
Facility Manager
Lakeside Waterworks, Inc.
4939 Cross Bayou Blvd.
New Port Richey, FL 34652
rderossett@uswatercorp.net

DEP File No. 0080550-006-WC
County: Lake

NOTICE OF PERMIT ISSUANCE

Enclosed is Permit Number 0080550-006-WC for Lakeside Waterworks, to equip and connect replacement well WR1 to Shangri-La by the Lake Utilities, Inc. Water Treatment Plant, issued pursuant to Section 403.861(9), Florida Statutes.

This permit is final and effective on the date filed with the clerk of the Department unless a petition is filed in accordance with the paragraphs below or unless a request for extension of time in which to file a petition is filed within the required timeframe and conforms to Rule 62-110.106(4), F.A.C. Upon timely filing of a petition or a request for an extension, this permit will not be effective until further Order of the Department.

A person whose substantial interests are affected by this permit may petition for an administrative proceeding (hearing) in accordance with sections 120.569 and 120.57 of the Florida Statutes. The petition must contain the information set forth below and must be filed (received) with the Agency Clerk for the Department of Environmental Protection, Office of General Counsel, Mail Station 35, 3900 Commonwealth Boulevard, Tallahassee, Florida 32399-3000, within 14 days of receipt of this Notice. Petitioner shall mail a copy of the petition to the applicant at the address indicated above at the time of filing. Failure to file a petition within this time period shall constitute a waiver of any right such person may have to request an administrative determination (hearing) under sections 120.569 and 120.57 of the Florida Statutes. Any subsequent intervention will only be at the approval of the presiding officer upon motion filed pursuant to Rule 28-106.205, F.A.C.

A petition must contain the following information:

- (a) The name and address of each agency affected and each agency's file or identification number, if known;

Permittee:
Lakeside Waterworks, Inc
Ron Derossett, Facility Manager
Page 2

DEP File No.:
0080550-006-WC

- (b) The name, address, and telephone number of the petitioner; the name, address, and telephone number of the petitioner's representative, if any, which shall be the address for service purposes during the course of the proceeding; and an explanation of how the petitioner's substantial interests will be affected by the agency determination;
- (c) A statement of how and when the petitioner received notice of the agency decision;
- (d) A statement of all disputed issues of material fact. If there are none, the petition must so indicate;
- (e) A concise statement of the ultimate facts alleged, including the specific facts which petitioner contends warrant reversal or modification of the Department's action;
- (f) A statement of the specific rules or statutes the petitioner contends requires reversal or modification of the Department's action, including an explanation of how the alleged facts relate to the specific rules or statutes; and
- (g) A statement of the relief sought by petitioner, stating precisely the action that the petitioner wants the Department to take.

A petition that does not dispute the materials facts on which the Department's action is based shall state that no such facts are in dispute and otherwise contain the same information as set forth above, as required by Rule 28-106.301, F.A.C.

Because the administrative hearing process is designed to formulate final agency action, the filing of a petition means that, the Department's final action may be different from the position taken by it in this Notice. Persons whose substantial interests will be affected by any such final decision of the Department on the petition have the right to petition to become a party to the proceeding, in accordance with the requirements set forth above.

When the Order (Permit) is final, any party to the Order has the right to seek judicial review of the Order pursuant to section 120.68 of the Florida Statutes, by filing a Notice of Appeal pursuant to Rule 9.110 of the Florida Rules of Appellate Procedure, with the Clerk of the Department in the Office of General Counsel, Mail Station 35, 3900 Commonwealth Boulevard, Tallahassee, Florida 32399-3000; and by filing a copy of the notice of appeal accompanied by the applicable filing fees with the appropriate district court of appeal. The notice of appeal must be filed within 30 days from the date when the final order is filed with the Clerk of the Department.

Executed in Orlando, Florida.

STATE OF FLORIDA DEPARTMENT
OF ENVIRONMENTAL PROTECTION



Caroline Shine, Environmental Administrator
Drinking Water/UIC/Groundwater Permitting
FDEP Central District
(407) 897-2927

Enclosures: Permit No. 0080550-006-WC

Permittee:
Lakeside Waterworks, Inc
Ron Derossett, Facility Manager
Page 3

DEP File No.:
0080550-006-WC

FILING AND ACKNOWLEDGEMENT

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

Mandakini Patel
Clerk

February 8, 2016
Date

CERTIFICATION OF SERVICE

The undersigned hereby acknowledges that this **Notice of Permit Issuance** and all copies were electronically transmitted before the close of business on February 8, 2016 to those persons listed.

Mandakini Patel
Clerk

February 8, 2016
Date

Copies Furnished to:

Mohammed Y. Kader, P.E., U.S. Water Services Corporation [mkader@uswatercorp.net]
Gary Dremer, Lakeside Waterworks, Inc. [gderemer@uswatercorp.net]
FDEP: Wanda Parker-Garvin, Jill Farris, Shabbir Rizvi, Daissan A. Villareal



Florida Department of Environmental Protection

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

Rick Scott
Governor

Carlos Lopez-Cantera
Lt. Governor

Jonathan P. Steverson
Secretary

February 8, 2016

ELECTRONIC CORRESPONDENCE

PERMITTEE

Lakeside Waterworks, Inc.
4939 Cross Bayou Blvd.
New Port Richey, FL 34652

PWS ID NUMBER: 3354028

PERMIT NUMBER: 0080550-006-WC

DATE OF ISSUANCE: February 4, 2016

EXPIRATION DATE: February 3, 2021

COUNTY: Lake

PROJECT: Lakeside Waterworks Replacement
Well WR1- Equip and Connect

This permit is issued under the provisions of Chapter 403, Florida Statutes (F.S.), and Florida Administrative Code (F.A.C.) Chapters 62-4, 62-550, 62-555 and 62-560. The above named permittee is hereby authorized to perform the work or operate the facility shown on the application and approved drawings, plans, and other documents attached hereto or on file with the Department and made a part hereof and specifically described as follows:

TO CONSTRUCT: Equip and connect Replacement Well WR1 to the Shangri-La by the Lake Utilities, Inc. Water Treatment Plant (WTP) The new well will replace existing Well No. 1.

PROPOSED CONSTRUCTION INCLUDES THE FOLLOWING COMPONENTS:

- An 8-inch Well No. WR1 completed on September 24, 2015 under Permit Number 142708 from SJRWMD by the rotary method to a depth of 397 feet, with 12-inch black steel surface casing to from 0 feet to 222 feet, 8-inch primary black steel casing from 0 feet to 247 feet and open hole from 247 feet to 397 feet. Static water level was reported at 11 pumping water level was reported at 31 feet after One hour at 450 gallons per minute (GPM)

As per the well completion report the well location coordinates are: Latitude 28°51'43.71" N., Longitude 81°45'09.15" W. The well was sampled on December 29, 2015 and chemically tested for primary and secondary drinking water parameters. Results were below the maximum contaminant levels for all parameters tested. The chemical testing results are missing the Total Sulfide, Alkalinity and Dissolved Oxygen results. The missing results of the three water quality testing parameters- Total Sulfide, Alkalinity and Dissolved Oxygen, are required to be submitted at the time of clearance. If

the results of the water quality testing show that additional treatment is required to address exceedances in the water quality parameters, the engineer will be responsible for the design and construction of such additional treatment, if necessary and no clearance shall be issued until the additional treatment (if required) has been constructed in the plant.

The well will be equipped with an existing 10 horsepower (HP) submersible pump with a rated design capacity of 280 GPM at 130 feet Total Dynamic Head (TDH).

- The above-ground installation piping and piping to the first isolation valve.
- Associated six inch raw water main from Well WR1 with valves, fittings, controls and appurtenances to the existing 6-inch raw water main connected to the water treatment plant.
- The well site will be protected by a lockable six feet high security fence.

The rated design capacity of the water treatment plant will not change. The plant is Category V Class D WTP with a rated design capacity of 180,000 GPD. Accordingly, staffing is by Class D or higher operator: 3visits per week on nonconsecutive days for a total of 0.3 hour/week.

IN ACCORDANCE WITH: Construction plans, engineering report and specifications received on January 12, 2016 and response to the request for additional information received on January 28, 2016.

LOCATION: 100 Shangri-La Boulevard in Leesburg, FL.

This permit does not pertain to any wastewater, storm water or dredge and fill aspects of the project. Work must be conducted in accordance with the General and Specific Conditions, attached hereto.

The permittee shall be aware of and operate under the Permit Conditions below. These applicable conditions are binding upon the permittee and enforceable pursuant to Chapter 403, Florida Statutes. [F.A.C. Rule 62-555.533(1)].

A. GENERAL CONDITIONS

1. The terms, conditions, requirements, limitations and restrictions set forth in this permit, are "permit conditions" and are binding and enforceable pursuant to Sections 403.141, 403.727, or 403.859 through 403.861, F.S. The permittee is placed on notice that the Department will review this permit periodically and may initiate enforcement action for any violation of these conditions.

2. This permit is valid only for the specific processes and operations applied for and indicated in the approved drawings or exhibits. Any unauthorized deviation from the approved drawings, exhibits, specifications, or conditions of this permit may constitute grounds for revocation and enforcement action by the Department.
3. As provided in Subsections 403.087(6) and 403.722(5), F.S., the issuance of this permit does not convey any vested rights or any exclusive privileges. Neither does it authorize any injury to public or private property or any invasion of personal rights, nor any infringement of federal, state, or local laws or regulations. This permit is not a waiver of or approval of any other department permit that may be required for other aspects of the total project which are not addressed in this permit.
4. This permit conveys no title to land or water, does not constitute State recognition or acknowledgment of title, and does not constitute authority for the use of submerged lands unless herein provided and the necessary title or leasehold interests have been obtained from the State. Only the Trustees of the Internal Improvement Trust Fund may express State opinion as to title.
5. This permit does not relieve the permittee from liability for harm or injury to human health or welfare, animal, or plant life, or property caused by the construction or operation of this permitted source, or from penalties therefore; nor does it allow the permittee to cause pollution in contravention of Florida Statutes and Department rules, unless specifically authorized by an order from the Department.
6. The permittee shall properly operate and maintain the facility and systems of treatment and control (and related appurtenances) that are installed and used by the permittee to achieve compliance with the conditions of this permit, as required by Department rules. This provision includes the operation of backup or auxiliary facilities or similar systems when necessary to achieve compliance with the conditions of the permit and when required by Department rules.
7. The permittee, by accepting this permit, specifically agrees to allow authorized Department personnel, upon presentation of credentials or other documents as may be required by law and at reasonable times (reasonable time may depend on the nature of the concern being investigated), access to the premises where the permitted activity is located or conducted to:
 - a. Have access to and copy any records that must be kept under conditions of the permit;
 - b. Inspect the facility, equipment, practices, or operations regulated or required under this permit; and
 - c. Sample or monitor any substances or parameters at any location reasonably necessary to assure compliance with this permit or Department rules.

8. If, for any reason, the permittee does not comply with or will be unable to comply with any condition or limitation specified in this permit, the permittee shall immediately provide the Department with the following information:
 - a. A description of and cause of noncompliance; and
 - b. The period of noncompliance, including dates and times; or, if not corrected, the anticipated time the noncompliance is expected to continue, and steps being taken to reduce, eliminate, and prevent recurrence of the noncompliance. The permittee shall be responsible for any and all damages which may result and may be subject to enforcement action by the Department for penalties or for revocation of this permit.
9. In accepting this permit, the permittee understands and agrees that all records, notes, monitoring data and other information relating to the construction or operation of this permitted source which are submitted to the Department may be used by the Department as evidence in any enforcement case involving the permitted source arising under the Florida Statutes or Department rules, except where such use is prescribed by Sections 403.111 and 403.73, F.S. Such evidence shall only be used to the extent it is consistent with the Florida Rules of Civil Procedure and appropriate evidentiary rules.
10. The permittee agrees to comply with changes in Department rules and Florida Statutes after a reasonable time for compliance; provided, however, the permittee does not waive any other rights granted by Florida Statutes or Department rules. A reasonable time for compliance with a new or amended surface water quality standard, other than those standards addressed in Rule 62-302.500, shall include a reasonable time to obtain or be denied a mixing zone for the new or amended standard.
11. This permit is transferable only upon Department approval in accordance with Rule 62-4.120 and 62-730.300, F.A.C., as applicable. The permittee shall be liable for any non-compliance of the permitted activity until the transfer is approved by the Department.
12. This permit or a copy thereof shall be kept at the work site of the permitted activity.
13. This permit also constitutes:
 - a. Determination of Best Available Control Technology (BACT)
 - b. Determination of Prevention of Significant Deterioration (PSD)
 - c. Certification of compliance with State Water Quality Standards (Section 401, PL 92-500)
 - d. Compliance with New Source Performance Standards

14. The permittee shall comply with the following:
- a. Upon request, the permittee shall furnish all records and plans required under Department rules. During enforcement actions, the retention period for all records will be extended automatically unless otherwise stipulated by the Department.
 - b. The permittee shall hold at the facility or other location designated by this permit records of all monitoring information (including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation) required by the permit, copies of all reports required by this permit, and records of all data used to complete the application for this permit. These materials shall be retained at least three years from the date of the sample, measurement, report, or application unless otherwise specified by Department rule.
 - c. Records of monitoring information shall include:
 - i. the date, exact place, and time of sampling or measurements;
 - ii. the person responsible for performing the sampling or measurements;
 - iii. the dates analyses were performed;
 - iv. the person responsible for performing the analyses;
 - v. the analytical techniques or methods used;
 - vi. the results of such analyses.
15. When requested by the Department, the permittee shall within a reasonable time furnish any information required by law which is needed to determine compliance with the permit. If the permittee becomes aware the relevant facts were not submitted or were incorrect in the permit application or in any report to the Department, such facts or information shall be corrected promptly.

SPECIFIC CONDITIONS

B. Construction Activities

1. Permit Modification

All construction must be in accordance with this permit. Before commencing work on project changes for which a construction permit modification is required per 62-555.536(1), the permittee shall submit to the Department a written request for a permit modification. Each such request shall be accompanied by one copy of a revised construction permit application, the proper processing fee and one copy of either a revised preliminary design report or revised drawings, specifications and design data. [F.A.C. Rule 62-555.536].

2. Professional Engineer Supervision

Permitted construction or alteration of public water supply systems must be supervised during construction by a professional engineer registered in the State of Florida if the project was designed under the responsible charge of a professional engineer licensed in the State of Florida. The permittee must retain the service of a professional engineer registered in the State of Florida to observe that construction of the project is in accordance with the engineering plans and specifications as submitted in support of the application for this permit. [F.A.C. Rule 62-555.520(3)].

3. Artifacts

If prehistoric or historic artifacts, such as pottery or ceramics, stone tools or metal implements, dugout canoe remains, or any other physical remains that could be associated with Native American cultures, or early colonial or American settlement are encountered at any time within the project site area, the permitted project should cease all activities involving subsurface disturbance in the immediate vicinity of such discoveries. The permittee, or other designee, should contact the Florida Department of State, Division of Historical Resources, Compliance and Review Section at 850.245.6333 or 800.847.7278, as well as the appropriate permitting agency office. Project activities should not resume without verbal and/or written authorization from the Division of Historical Resources and the permitting agency. In the event that unmarked human remains are encountered during permitted activities, all work shall stop immediately and the proper authorities notified in accordance with Section 872.05, *Florida Statutes*.

4. Delays and Extension of Permit

If delays will cause project completion to extend beyond the expiration date of this permit, the permittee shall submit to the Department a request to extend the expiration date of this permit including the appropriate processing fee. This request shall specify the reasons for the delay and shall be submitted to the Department for approval prior to the expiration date of this permit. Note that no specific construction permit shall be extended so as to remain in effect longer than five years. [F.A.C. Rule 62-555.536(4)].

5. Permit Transfer

In accordance with General Condition #11 of this permit, this permit is transferable only upon Department approval. Persons proposing to transfer this permit must apply jointly for a transfer of the permit within 30 days after the sale or legal transfer of ownership of the permitted project that has not been cleared for service by the Department using form, 62-555.900(8), Application for Transfer of a PWS Construction Permit along with the appropriate fee. [F.A.C. Rule 62-555.536(5)]

6. Obligation to Obtain Other Permits

This permit satisfies Drinking Water permitting requirements only and does not authorize construction or operation of this facility prior to obtaining all other necessary permits from other program areas within the Department, or required permits from other state, federal, or local agencies.

7. Limits on Authorizing Connections

This permit is for CONSTRUCTION ONLY of the components found on page 1 of this permit. This permit shall not infer that the clearance necessary for connection will be granted. Partial clearance may be granted, if required.

8. Gasoline Contamination

If gasoline contamination is found at the construction site, work shall be stopped and the proper authorities notified. With the approval of the Department, ductile iron pipe and fittings, and solvent resistant gaskets materials shall be used in the contaminated area. The ductile pipe shall be used in the contaminated area. The ductile iron pipe shall extend 100 feet beyond any solvent noted. Any contaminated soil that is excavated shall be placed on an impermeable mat, covered with waterproof covering, and held for disposal. If the site cannot be properly cleaned, then consultation with the Department is necessary prior to continuing with the project construction.

9. Wetlands Jurisdiction

This permit does not constitute approval of construction on jurisdictional wetland areas; therefore such approval must be obtained separately from the Water Management District or from DEP Environmental Resource Permitting (ERP) Section, as applicable, Permittee shall provide a copy of the permit approval to the Department when water main installation involves activities on wetlands.

10. Security

Permittee shall ensure that the well and drinking water treatment facilities will be protected to prevent tampering, vandalism, and sabotage as required by Rule 62-555.315(1) & 62-555.320(5), F.A.C.

C. Construction Standards

1. National Sanitation Foundation (NSF)

All products, including paints, which shall come into contact with potable water, either directly or indirectly, shall conform to National Sanitation Foundation (NSF) International, Water Chemicals Codex, Food Chemicals Codex, American Water Works Association (AWWA) Standards and the Food and Drug Administration, as provided in Rule 62-555.320(3), F.A.C.

2. American Water Works Association (AWWA)

Water supply facilities, including mains, pipe, fittings, valves, fire hydrants and other materials shall be installed in accordance with the latest applicable AWWA Standards and Department rules and regulations. The system shall be pressure and leak tested in accordance with AWWA Standard C600 C603, or C605, as applicable, and disinfected in accordance with AWWA Standard C651-653, as well as in accordance with Rule 62-555.340, F.A.C.

3. Lead Free

The installation or repairs of any public water system, or any plumbing in residential or nonresidential facilities providing water for human consumption, which is connected to a public water system shall be lead free in accordance with Rule 62-555.322, F.A.C.

4. Asbestos

If any existing asbestos cement (AC) pipes are replaced under this permit, the permittee shall do so in accordance with the applicable rules of Federal Asbestos Regulation and Florida DEP requirements. For specific requirements applicable to AC pipes, **the permittee should contact the Central District Office prior to commencing any such activities at (407) 897-4100.** Please be aware that a notification is required to be submitted to the Department at least 10 days prior to the start of a regulated project.

5. Hazard and Reuse Setbacks

Setback distances between potable water wells and sanitary hazards shall be in accordance with 62-555.312, F.A.C. Reclaimed water land application areas, if applicable, must not be located within the setback distance from potable water supply wells established in Chapter 62-610, F.A.C.

6. Line Separation

Permittee shall maintain vertical clearance and horizontal separation between water mains and sanitary sewers, storm sewers, etc. unless approved otherwise by the Department, as provided in Rule 62-555.314, F.A.C., and Section 8.6 of *Recommended Standards for Water Works*, a manual adopted by reference in Rule 62-555.330(3), F.A.C.

7. Color Coding of Pipes

The new or altered aboveground piping at the drinking water treatment plant shall be color coded and labeled as recommended in Section 2.14 of "Recommended Standards for Water Works, 1997 Edition". [F.A.C. Rule 62-555.320(10)]

8. Cross Connections

Permittee shall ensure that there shall be no cross-connection with any non-potable water source in accordance with Rule 62-555.360, F.A.C.

D. Operational Requirements

1. Staffing

The plant is a Category V Class D WTP with a rated design capacity of 180,000 GPD. Accordingly, staffing is by Class D or higher operator: 3 visits per week on nonconsecutive days for a total of 0.3 hour/week. The lead chief operator must be Class D or higher. [F.A.C. Rule 62-699.310]

2. Operation and Maintenance to comply with Water Quality Standards

The supplier of water shall operate and maintain the public water system so as to comply with applicable standards in F.A.C. Rule 62-550 and 62-555.350.

3. Operation and Maintenance Manual

The permittee shall provide an operation and maintenance manual for the new or altered treatment facilities to fulfill the requirements under subsection 62-555.350(13), F.A.C. The manual shall contain operation and control procedures, and preventative maintenance and repair procedures, for all plant equipment and shall be made available for reference at the plant or at a convenient location near the plant. Bound and indexed equipment manufacturer manuals shall be considered sufficient to meet the requirements of the subsection.

4. Monthly Operating Reports (MORs)

The permittee shall submit monthly operation reports (MORs) DEP Form 62-555.900(3) for the groundwater treatment, to the Department, no later than the tenth of each succeeding month. Systems with multiple treatment plants must also submit DEP Form 62-555.900(11) entitled "Monthly Operation Report for Summation of Finished-Water Production by CWSs That Have Multiple Treatment Plants."

5. Record Drawings

The permittee shall have complete record drawings produced for the project in accordance with Rule 62-555.530(4), F.A.C.

6. State Watch Office

The permittee or suppliers of water shall telephone the State Watch Office (SWO), at 1-800-320-0519 immediately (i.e., within two hours) after discovery of any actual or suspected sabotage or security breach, or any suspicious incident, involving a public water system in accordance with the F.A.C. Rule 62-555.350(10).

7. Capacity Development

For a new system, as a condition of clearance, the permittee must provide for the specific Public Water System a list of positions with employee names, titles and responsibilities. For the required licensed operator(s) provide a copy of the license specific to the water system for each operator. If a position is vacant, indicate the projected hiring date. Indicate the positions/employees who are responsible for acting on behalf of the water system in case of emergency, those authorized to spend money, or to make other decisions. Provide telephone numbers and email contact addresses for these responsible positions/employees. Show only positions/employee information pertaining to the water system. [F.A.C. Rule 62-555.525]

E. Monitoring Provisions

1. Compliance Monitoring by System Type

Permittee shall follow the guidelines of Chapters 62-550, 62-555, and 62-560, F.A.C., regarding public drinking water system standards, monitoring, reporting, permitting, construction, and operation.

This facility is a Community Water System as defined in F.A.C. Rule 62-550.200(12) and shall comply with the applicable chemical, radiological, lead and copper, and bacteriological monitoring requirements of F.A.C. Rule 62-550. Such requirements shall be initiated within the quarter that the water treatment facility is placed into service (i.e. January—March or April—June, the preceding are examples of quarters) and the results submitted to the Department.

2. Chlorine Residual

The Water Treatment Plant shall maintain throughout the distribution system, a minimum continuous and effective free chlorine residual of 0.2 mg/L (or its equivalent) or a minimum combined chlorine residual of 0.6 mg/L (or its equivalent), whichever is appropriate for the water treatment plant providing water to the project. A minimum system pressure of 20 psi must be maintained throughout the system. Also, safety equipment shall be provided and located outside of chlorine room.

F. Clearance Requirements

1. Clearance Letter

The permittee must instruct the engineer of record to request system clearance from the Department within sixty (60) days of completion of construction, testing and disinfecting the system. Bacteriological test results shall be considered unacceptable if the test were completed more than 60 days before the Department received the results. [F.A.C. Rule 62-555.340(2)(c)]

Permitted construction or alteration of a public water system may not be placed into service until a letter of clearance has been issued by this Department. [F.A.C. Rule 62-555.345]

2. Requirements to Obtain Clearance

After submitting the permit clearance package, the permittee will contact Javed Mayet at 407.897.4128 or Javed.Mayet@dep.state.fl.us to establish a date/time for an inspection of the components contained in this permit.

- a. The engineer's *Certification of Construction Completion and Request for Clearance to Place Permitted PWS Components Into Operation* {DEP Form 62-555.900(9)};

- b. Certified record drawings, if there are any changes noted for the permitted project.
- c. Copy of a satisfactory pressure test of the process piping performed in accordance with AWWA Standards. [F.A.C. Rule 62-555.320(21)(a)(1)]
- d. Analytical results from two consecutive days of satisfactory bacteriological samples from locations found in paragraph 3 below.
- e. A satisfactory 10-sample bacteriological well survey following the installation of the submersible pump.
- f. Results of the three water quality testing parameters- Total Sulfide, Alkalinity and Dissolved Oxygen, are required to be submitted at the time of clearance. If the results of the water quality testing show that additional treatment is required to address exceedances in the water quality parameters, the engineer will be responsible for the design and construction of such additional treatment, if necessary and no clearance shall be issued until the additional treatment (if required) has been constructed in the plant.

3. Cleaning, Disinfecting, and Bacteriological Samples

The new facilities shall be cleaned, disinfected, and bacteriologically cleared in accordance with Chapter 62-555, F.A.C. The bacteriological clearance data shall be submitted to the Department with the engineer's certification of construction completion. [Section 62-555.340 and 62-555.315(6)(b), F.A.C.]

Bacteriological Sampling Locations: Copies of results from satisfactory bacteriological samples shall be submitted with the clearance package. Samples shall be taken from locations listed below, in accordance with Rules 62-555.315 (6), 62-555.340 and 62-555.330, F.A.C. and American Water Works Association (AWWA) Standard C 651-92.

This location includes the 6 inch raw water main from Well WR1 before it connects to the existing 6-inch raw water main.

Each location shall be sampled on two separate days (at least 6 hours apart) with sample point locations and chlorine residual readings **clearly indicated** on the report and/or drawings.

Bacteriological sample results will be considered unacceptable if the tests were completed more than 60 days before the Department receives the results.

In order to facilitate the issuance of a letter of clearance, the Department requests that all of the above information be submitted as one package.

DEP forms can be found at the Department [website](#) .

Permittee:
Lakeside Waterworks, Inc
Ron Derossett, Facility Manager
Page 12

DEP File No.:
0080550-006-WC

The entire clearance document package can be submitted in Portable Document Format (pdf) to DEP_CD@dep.state.fl.us, with a copy to daissan.a.villareal@dep.state.fl.us for faster processing. Any submitted drawings (must be sized 11" x 17"**), the engineer of record's signed seal and dates on the required document, plus a separate engineer's seal sheet must be legible for acceptance.**

STATE OF FLORIDA DEPARTMENT
OF ENVIRONMENTAL PROTECTION



Caroline Shine, Environmental Administrator
Drinking Water/UIC/Groundwater Permitting
FDEP Central District
(407) 897-2927



Water and Wastewater Utility Operations, Maintenance, Engineering, Management, Construction

February 22, 2016

Ms. Daissan A. Villareal, P.E.
Drinking Water/Environmental Resource Permitting
Florida Department of Environmental Protection Central District
3319 Maguire Boulevard, Suite 232
Orlando, FL 32803-3767

RE: FDEP Form 62-555.900(9), Certification of Construction Completion.
Project: Lakeside Waterworks Well Replacement
DEP File No. 0080550-006-WC PWS No. 335-4028
US Water P.N. 2535-01

Dear Ms. Villareal:

This correspondence is to request for clearance to place the replacement well WR1 into service.

In addition to the FDEP Form 62-555.900(9), we have attached the additional water quality sampling requested. The raw water dissolved oxygen level was manually recorded as 0.75 mg/L.

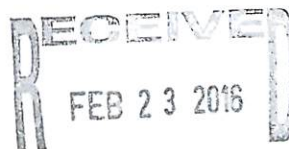
Please do not hesitate to contact me directly should you have any questions. I can be reached at (727) 848-8292 extension 230.

Sincerely,

A handwritten signature in black ink, appearing to read "Keith Keegan".

Keith Keegan, P.E.
Project Manager
U.S. Water Service Corporation

KK/kk
Attachment





CERTIFICATION OF CONSTRUCTION COMPLETION AND REQUEST FOR CLEARANCE TO PLACE PERMITTED PWS COMPONENTS INTO OPERATION

See page 5 for instructions.

I. General Project Information

A. Name of Project: Lakeside Waterworks - Well WR1 Replacement

B. Department of Environmental Protection (DEP) Construction Permit

Permit Number: 0080550-006-WC

Date Permit Was Issued: February 8, 2016

C. Portion of Project for Which Construction Is Substantially Complete and for Which Clearance Is Requested

Entire Project

Following Portion of Project: _____

D. Permittee

PWS/Company Name: Lakeside Waterworks, Inc.

PWS Identification Number: * 3354028

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

Contact Person: Ron Derosssett

Contact Person's Title: Facility Manager

Contact Person's Mailing Address: 4939 Cross Bayou Blvd.

City: New Port Richey

State: Florida

Zip Code: 34652

Contact Person's Telephone Number: 727-848-8292

Contact Person's Fax Number: 727-848-7701

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

* This information is required only if the permittee is a public water system (PWS).

E. Public Water System (PWS) Supplying Water to Project

PWS Name: Lakeside Waterworks, Inc.

PWS Identification Number: 3354028

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

PWS Owner: Gary Deremer

Contact Person: Ron Derosssett

Contact Person's Title: Facility Manager

Contact Person's Mailing Address: 4939 Cross Bayou Blvd.

City: New Port Richey

State: Florida

Zip Code: 34652

Contact Person's Telephone Number: 727-848-8292

Contact Person's Fax Number: 727-848-7701

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

F. Public Water System (PWS) that Will Own Project After It Is Placed into Permanent Operation

PWS Name: Lakeside Waterworks, Inc.

PWS Identification Number: * 3354028

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

PWS Owner: Gary Deremer

Contact Person: Ron Derosssett

Contact Person's Title: Facility Manager

Contact Person's Mailing Address: 4939 Cross Bayou Blvd.

City: New Port Richey

State: Florida

Zip Code: 34652

Contact Person's Telephone Number: 727-828-8292

Contact Person's Fax Number: 727-848-7701

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

* This information is required only if the owner/operator is an existing PWS.

G. Professional Engineer in Responsible Charge of Inspecting Construction of Project*

Company Name: U.S. Water Services Corporation

Engineer: Mohammed Y. Kader, P.E.

Engineer's Florida License Number: 45129

Engineer's Title: Vice President

Engineer's Mailing Address: 4939 Cross Bayou Blvd.

City: New Port Richey

State: Florida

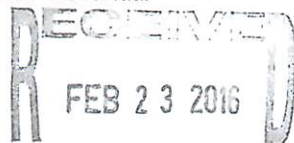
Zip Code: 34652

Engineer's Telephone Number: 727-848-8292

Engineer's Fax Number: 727-848-7701

Engineer's E-Mail Address: mkader@uswatercorp.net

* This information is required if construction of this project is inspected under the responsible charge of a professional engineer licensed in Florida. Whenever a project is designed under the responsible charge of a professional engineer licensed in Florida and is permitted by the Department, construction of the project shall be inspected under the responsible charge of a professional engineer licensed in Florida.



ORIGINAL

CERTIFICATION OF CONSTRUCTION COMPLETION AND REQUEST FOR CLEARANCE TO PLACE PERMITTED PWS COMPONENTS INTO OPERATION

DEP Construction Permit Number: 0080550-006-WC
Substantially Complete Portion of Project if Other than Entire Project:

II. Deviations from Department of Environmental Protection (DEP) Construction Permit for Project*

Description and explanation of all deviations from the DEP construction permit, including the approved preliminary design report or drawings and specifications, for the substantially complete portion of this project:

None.

I completed Part II of this form, and the information provided in Part II is true and accurate to the best of my knowledge and belief.

Signature, Seal, and Date of Professional Engineer or
Signature and Date of Authorized Representative of
Permittee*

Printed or Typed Name

FL Reg. No. 45129

License Number of Professional
Engineer or Title of Authorized
Representative of Permittee*

** Whenever a project is designed under the responsible charge of a professional engineer licensed in Florida and is permitted by the Department, construction of the project shall be inspected under the responsible charge of a professional engineer licensed in Florida. If construction of this project is inspected under the responsible charge of a professional engineer licensed in Florida, Part II of this form shall be completed, signed, sealed, and dated by the professional engineer in responsible charge. If this project is not inspected under the responsible charge of a professional engineer licensed in Florida, Part II shall be completed, signed, and dated by an authorized representative of the permittee.*

III. Certifications

A. Certification by Permittee

I am duly authorized to sign this form on behalf of the permittee identified in Part I.D of this form. I certify the following:

- to the best of my knowledge and belief, the substantially complete portion of this project is sufficiently complete to be utilized for the purposes for which it is intended;
- to the best of my knowledge and belief, the substantially complete portion of this project has been completed in accordance with the Department of Environmental Protection construction permit, including the approved preliminary design report or drawings and specifications, for this project; or to the best of my knowledge and belief, the deviations described and explained in Part II of this form will not prevent the substantially complete portion of this project from functioning in compliance with Chapters 62-550 and 62-555, F.A.C.;

CERTIFICATION OF CONSTRUCTION COMPLETION AND REQUEST FOR CLEARANCE TO PLACE PERMITTED PWS COMPONENTS INTO OPERATION

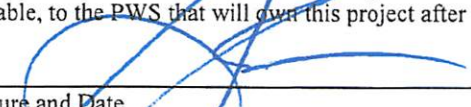
DEP Construction Permit Number: 0080550-006-WC

Substantially Complete Portion of Project if Other than Entire Project:

- to the best of my knowledge and belief, all new or altered public water system components that are included in the substantially complete portion of this project and that must be disinfected and bacteriologically surveyed or evaluated per subsection 62-555.315(6), F.A.C., or Rule 62-555.340, F.A.C., have been disinfected and bacteriologically surveyed or evaluated in accordance with said subsection or said rule;
- the permittee has had complete record drawings produced for the substantially complete portion of this project; to the best of my knowledge and belief, said record drawings adequately depict the substantially complete portion of this project as constructed and identify the deviations described and explained in Part II of this form; and said record drawings are available for review at the following location: water treatment plant

- if the substantially complete portion of this project includes any new or altered drinking water treatment facilities, an operation and maintenance manual for said treatment facilities is available for reference at the site of said treatment facilities or at a convenient location near the site of said treatment facilities.


I also certify that, if the permittee will not own this project after it is placed into permanent operation, the permittee has provided a copy of the above mentioned record drawings and a copy of the above mentioned operation and maintenance manual, if applicable, to the PWS that will own this project after it is placed into permanent operation.

 Signature and Date	Gary Deremer Printed or Typed Name	President Title
---	---------------------------------------	--------------------

B. Certification by PWS Supplying Water to Project

I am duly authorized to sign this form on behalf of the PWS identified in Part I.E of this form. I certify that said PWS will supply the water necessary to meet the water demands for the substantially complete portion of this project, and I certify the following:

- to the best of my knowledge and belief, said PWS's connection to the substantially complete portion of this project will not cause said PWS to be, or contribute to said PWS being, in noncompliance with Chapter 62-550 or 62-555, F.A.C.;
- said PWS considers the connection(s) between the substantially complete portion of this project and said PWS acceptable as constructed.

 Signature and Date	Gary Deremer Printed or Typed Name	President Title
---	---------------------------------------	--------------------


C. Certification by PWS that Will Own Project After It Is Placed into Permanent Operation

I am duly authorized to sign this form on behalf of the PWS identified in Part I.F of this form. I certify that said PWS will own the substantially complete portion of this project after it is placed into permanent operation, and I certify the following:

- said PWS considers the substantially complete portion of this project acceptable as constructed;
- said PWS has received complete record drawings for the substantially complete portion of this project and the record drawings are available for review at the following location: water treatment plant.

- if the substantially complete portion of this project includes any new or altered drinking water treatment facilities, said PWS has received an operation and maintenance manual for the new or altered treatment facilities, and the operation and maintenance manual is available for reference at the site of the new or altered treatment facilities or at a convenient location near the site of the new or altered treatment facilities.

I understand that said PWS must operate and maintain this project in a such a manner as to comply with Chapters 62-550, 62-555, 62-560, and 62-699, F.A.C.

 Signature and Date	Gary Deremer Printed or Typed Name	President Title
---	---------------------------------------	--------------------

CERTIFICATION OF CONSTRUCTION COMPLETION AND REQUEST FOR CLEARANCE TO PLACE PERMITTED PWS COMPONENTS INTO OPERATION

DEP Construction Permit Number: 0080550-006-WC

Substantially Complete Portion of Project if Other than Entire Project:

D. Certification by Professional Engineer in Responsible Charge of Inspecting Construction of Project*

I, the undersigned professional engineer licensed in Florida, am in responsible charge of inspecting construction of this project for the purpose of determining in general if the construction proceeds in compliance with the Department of Environmental Protection (DEP) construction permit, including the approved preliminary design report or drawings and specifications, for this project. I, or a person acting under my responsible charge, observed construction of the substantially complete portion of this project and reviewed shop drawings, test results, and record drawings for the substantially complete portion of this project, and based upon said observation and reviews, I certify the following:

- the substantially complete portion of this project is sufficiently complete to be utilized for the purposes for which it is intended;
- the substantially complete portion of this project has been completed in accordance with the DEP construction permit, including the approved preliminary design report or drawings and specifications, for this project; or to the best of my knowledge and belief, the deviations described and explained in Part II of this form will not prevent the substantially complete portion of this project from functioning in compliance with Chapters 62-550 and 62-555, F.A.C.;
- all new or altered public water system components that are included in the substantially complete portion of this project and that must be disinfected and bacteriologically surveyed or evaluated per subsection 62-555.315(6), F.A.C., or Rule 62-555.340, F.A.C., have been disinfected and bacteriologically surveyed or evaluated in accordance with said subsection or said rule; and
- the record drawings for the substantially complete portion of this project adequately depict the substantially complete portion of this project as constructed and identify the deviations described and explained in Part II of this form.

Mohammed Y. Kader
 06/22/2016

Mohammed Y. Kader, P.E.

FL Reg. No. 45129

Signature, Seal, and Date

Printed or Typed Name

License Number

* Whenever a project is designed under the responsible charge of a professional engineer licensed in Florida and is permitted by the Department, construction of the project shall be inspected under the responsible charge of a professional engineer licensed in Florida. If construction of this project is inspected under the responsible charge of a professional engineer licensed in Florida, Part III.D of this form shall be completed, signed, sealed, and dated by the professional engineer in responsible charge. If this project is not inspected under the responsible charge of a professional engineer licensed in Florida, Part III.D does not have to be completed.

CERTIFICATION OF CONSTRUCTION COMPLETION AND REQUEST FOR CLEARANCE TO PLACE PERMITTED PWS COMPONENTS INTO OPERATION

INSTRUCTIONS: This form shall be completed and submitted for projects permitted and constructed under specific Department of Environmental Protection (DEP) construction permits for public water system components, under the DEP's "General Permit for Construction of Water Main Extensions for Public Water Systems," or under the DEP's "General Permit for Construction of Lead or Copper Corrosion Control, or Iron or Manganese Sequestration, Treatment Facilities for Small or Medium Public Water Systems."

AFTER COMPLETING, OR SUBSTANTIALLY COMPLETING, CONSTRUCTION OF A PROJECT, OR A PORTION THEREOF, AND BEFORE PLACING THE SUBSTANTIALLY COMPLETE PROJECT, OR PORTION THEREOF, INTO OPERATION FOR ANY PURPOSE OTHER THAN DISINFECTION, TESTING FOR LEAKS, OR TESTING EQUIPMENT OPERATION, complete and submit one copy of this form to the appropriate DEP District Office or Approved County Health Department along with one copy of the following information:

- the portion of record drawings showing deviations from the DEP construction permit, including the approved preliminary design report or drawings and specifications, if there are any deviations from said permit (note that it is necessary to submit a copy of only the portion of record drawings showing deviations and not a complete set of record drawings);
- bacteriological test results, including a sketch or description of all bacteriological sampling locations, demonstrating compliance with subsection 62-555.315(6), F.A.C., or Rule 62-555.340, F.A.C., if the substantially complete portion of the project includes any new or altered public water system (PWS) components that must be disinfected and bacteriologically surveyed or evaluated per said subsection or said rule;
- analytical test results demonstrating compliance with Part III of Chapter 62-550, F.A.C., or subsection 62-524.650(2), F.A.C., if the substantially complete portion of the project includes any new or altered PWS components that are necessary to achieve, or affect, compliance with said part or said subsection;
- a completed Form 62-555.900(20), New Water System Capacity Development Financial and Managerial Operations Plan, if the DEP construction permit was issued before the effective date of Rule 62-555.525, F.A.C., (9-22-99) and the substantially complete portion of the project creates a "new system" as described under subsection 62-555.525(1), F.A.C.; and
- any other information required by conditions in the DEP construction permit.

All information provided on this form shall be typed or printed in ink. **NOTE THAT A SEPARATE CERTIFICATION OF CONSTRUCTION COMPLETION AND REQUEST FOR CLEARANCE IS REQUIRED FOR EACH PERMITTED PROJECT. DO NOT PLACE ANY NEW OR ALTERED PWS COMPONENTS INTO PERMANENT OPERATION UNTIL THE DEPARTMENT ISSUES WRITTEN APPROVAL, OR CLEARANCE, TO PLACE THE COMPONENTS INTO PERMANENT OPERATION.**



Advanced
Environmental Laboratories, Inc.

Advanced Environmental Laboratories, Inc
380 Northlake Blvd., Suite 1048 Altamonte Springs, FL 32701
Payments: P.O. Box 551580 Jacksonville, FL 32255-1580
Phone: (407)937-1594
Fax: (407)937-1597

February 17, 2016

Melisa Rotteveel
US Water Services
4939 Cross Bayou Blvd.
New Port Richey, FL 34652

RE: Workorder: A1601062 Shangri La

Dear Melisa Rotteveel:

Enclosed are the analytical results for sample(s) received by the laboratory on Monday, February 08, 2016. Results reported herein conform to the most current NELAC standards, where applicable, unless otherwise narrated in the body of the report. The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody and results pertain only to these samples.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Brandon O'Hara

Brandon O'Hara
BOHara@AELLab.com

Enclosures

Report ID: 410039 - 6557709

Page 1 of 7

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SAMPLE SUMMARY

Workorder: A1601062 Shangri La

Lab ID	Sample ID	Matrix	Date Collected	Date Received
A1601062001	North Well	Drinking Water	2/8/2016 11:45	2/8/2016 15:20

Report ID: 410039 - 6557709

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ANALYTICAL RESULTS

Workorder: A1601062 Shangri La

Lab ID: A1601062001 Date Received: 02/08/16 15:20 Matrix: Drinking Water
 Sample ID: North Well Date Collected: 02/08/16 11:45

Sample Description: Location: 2535

Parameters	Results	Qual	Units	DF	Adjusted PQL	Adjusted MDL	Analyzed	Lab
WET CHEMISTRY								
Analysis Desc: Alkalinity,SM2320B,Water		Analytical Method: SM 2320B						
Alkalinity, Total	130		mg/L	1	20	5.0	2/15/2016 16:12	T
Analysis Desc: Sulfide,SM4500S-D,Aqueous		Analytical Method: SM 4500-S D						
Sulfide	1.6		mg/L	2	0.10	0.012	2/12/2016 14:46	T

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ANALYTICAL RESULTS QUALIFIERS

Workorder: A1601062 Shangri La

PARAMETER QUALIFIERS

- U The compound was analyzed for but not detected.
- I The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.

LAB QUALIFIERS

- T DOH Certification #E84589(AEL-T)(FL NELAC Certification)

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QUALITY CONTROL DATA

Workorder: A1601062 Shangri La

QC Batch: WCA/1557 Analysis Method: SM 4500-S D
QC Batch Method: SM 4500-S D Prepared:
Associated Lab Samples: A1601062001

METHOD BLANK: 1971094

Parameter	Units	Blank Result	Reporting Limit Qualifiers
WET CHEMISTRY			
Sulfide	mg/L	0.0062	0.0062 U

QC Batch: WCA/1586 Analysis Method: SM 2320B
QC Batch Method: SM 2320B Prepared:
Associated Lab Samples: A1601062001

METHOD BLANK: 1972174

Parameter	Units	Blank Result	Reporting Limit Qualifiers
WET CHEMISTRY			
Alkalinity, Total	mg/L	5.0	5.0 U

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QUALITY CONTROL DATA CROSS REFERENCE TABLE

Workorder: A1601062 Shangri La

Lab ID	Sample ID	Prep Method	Prep Batch	Analysis Method	Analysis Batch
A1601062001	North Well			SM 4500-S D	WCAV1557
A1601062001	North Well			SM 2320B	WCAV1586

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 Miramar: 10200 USA Today Way • Miramar, FL 33025 • 954.889.2288 • Fax 954.889.2281
 Tallahassee: 2639 North Monroe Street, Suite D • Tallahassee, FL 32303 • 850.219.6274 • Fax 850.219.6275
 Tampa: 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327

Client Name: <i>US Water</i>		Project Name: <i>Shanshi La</i>		BOTTLE SIZE & TYPE	ANALYSIS REQUIRED	LABORATORY I.D. NUMBER	
Address:		P.O. Number or Project Number: <i>3354028</i>					A1601062
Phone:		FDEP Facility No.:					
FAX:		Project Address:					
Contact:		Special Instructions: <i>D.O 0.75 PH 8.13</i>					
Sampled By:							
Turn Around Time: <input type="checkbox"/> STANDARD <input type="checkbox"/> RUSH							
Page: <u> </u> of <u> </u>		<input type="checkbox"/> ADaPT <input type="checkbox"/> EQUIS <input type="checkbox"/> Other					

SAMPLE ID	SAMPLE DESCRIPTION	Grab Comp	SAMPLING		MATRIX	NO. COUNT	PRESER-VATION												
			DATE	TIME															
<i>1</i>	<i>North well</i>	<i>G</i>	<i>2-8-16</i>	<i>1145</i>			<i>X</i>	<i>X</i>											<i>1</i>

Matrix Code: WW = wastewater SW = surface water GW = ground water DW = drinking water O = oil A = air SO = soil SL = sludge Preservation Code: I = Ice H = (HCl) S = (H2SO4) N = (HNO3) T = (Sodium Thiosulfate)

Received on Ice Yes No Temp taken from sample Temp from blank Where required, pH checked Temperature when received *4* (in degrees Celsius)

DCN: AD-051 Form last revised 04/30/2015 Device used for measuring Temp by unique identifier (circle IR temp gun used) J: 9A G: LT-1 LT-2 T: 10A **A: 3A** N: 3A S: 1V

Relinquished by:	Date	Time	Received by:	Date	Time
<i>[Signature]</i>	<i>2-8-16</i>	<i>1300</i>	<i>[Signature]</i>	<i>2/8/16</i>	<i>1340</i>
<i>[Signature]</i>	<i>2/8/16</i>	<i>1520</i>	<i>[Signature]</i>	<i>2/8/16</i>	<i>1520</i>

FOR DRINKING WATER USE:
PWS ID: _____
Contact Person: _____ Phone: _____
Supplier of Water: _____
Site Address: _____

Lab No: 17-0001-001-A