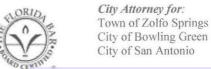


Direct Dial: 863.508.7055
Facsimile: 863.508.7066
Email: Gerald@geraldtbuhr.com
www.saxongilmore.com



GERALD T. BUHR, P.A., of Counsel 1015 Wyndham Lakes Drive, Odessa, Florida 33556

1015 Wyndham Lakes Drive, Odessa, Florida 33556 Certified City, County and Local Government Attorney



FILED 9/25/2017 DOCUMENT NO. 07887-2017 FPSC - COMMISSION CLERK

FILED ELECTRONICALLY WITH THE CLERK OF THE PSC

September 25, 2017

Wesley Taylor Florida Public Service Commission 2540 Shumard Oak Blvd. Tallahassee, FL 32399-0850

Re: Docket 20160248-WS: Applicant's Response to Staff's 2nd Data Request.

Dear Mr. Taylor:

Based on our phone conference this morning, with the understanding that we have no control over the receipt of some of the information, it was the staff's request that we provide whatever information we have as soon as possible, and follow up with additional information later as it is received. Therefore, the Applicant responds to the Staff's Second Data Request as follows:

1. Please refer to Deer Creek's response to staff's first data request, question 3. In the legal description for the "Less and Except" for the Mockingbird and Commercial North areas, Deer Creek provided Plat Book references only. Rule 25-30.029(2)(b), Legal Description of Service Area, Florida Administrative Code (F.A.C.), requires that the description shall not rely on references to government lots, recorded plats or lots, tracts, or other recorded instruments. Please provide the metes and bounds or appropriate section description (if a complete section or fraction thereof) for the Mockingbird and Commercial North areas, in accordance with Rule 25-30.029(2)(b), F.A.C.

Applicant's Response: The revised description was requested immediately, and is being done by Envisors engineering firm, and will be sent under a separate response.

2. In Staff's First Data Request dated August 9, 2017, the utility was asked to provide the billing records for Deer Creek's customers from July 1, 2016 through June 30, 2017. In its response, the utility provided June 2017 through August 2017. Please provide the billing records for Deer Creek's customers from July 1, 2016 through May 30, 2017.

Applicant's Response: The additional billing records are available only through NES, the applicant's submeter billing company, and the information has been requested. The

Wesley Taylor Florida Public Service Commission September 25, 2017 Page 2 of 3

Applicant has not been satisfied with responses to many previous requests for information of NES, and thus, are seeking to replace them. Unfortunately, their contract required notice of termination effective December 12th, be received by them by September 14th. Because of such notice, we do not expect that the Applicant's satisfaction with service will increase between now and the due date of our response. With apologies, we will provide such information when and if we receive it.

3. Please provide a list of all service complaints received over the last five years.

Applicant's Response: Applicant first notes that it has only operated the system since December 5, 2013, therefore, not all records of complaints for a five-year period may be in Applicant's possession. Applicant also notes that, while they may not be directly responsive to your inquiry, there are two (2) lawsuits filed against Applicant by two communities served utility services. The first is identified as Polk County Circuit Court Case No.: 53 2017 CA 000614, and the complaint mentions in allegation 23 ". . . and establishing a utility company". The second lawsuit is identified by the style of the case: Deer Creek Golf and Tennis RV Resort, Phase Two v. Deer Creek RV Golf & Country Club, Inc, and does not mention utilities, however, n an abundance of caution to fully responded, it is hereby disclosed. As for records directly related to utility complaints in Applicant's possession, Applicant is currently checking in its records storage facility for earlier records, and will submit Attachment 3 under a separate response when such information (or verification of the lack thereof) is received.

4. Please provide copies of your most recent Primary and Secondary Water Quality test results.

Applicant's Response: As an initial matter, we would note that Deer Creek is a consecutive system, and most primary and secondary analyses would be required of Polk County, not Deer Creek. A phone conference with HRS in Polk County verified that the attached (from *Oculus.com*) are the most recent required analyses. We also attached the 2016 and 2017 water quality analysis requirements from HRS. A copy of the most recent primary and secondary water quality test results is attached as Attachment 4.

5. Please provide a copy of all bills from Polk County for water and wastewater service for July 2016 through May 2016.

Applicant's Response: A copy of all bills from Polk County for water and wastewater service is attached as Attachment 5.

6. Please describe why 907 billing units were used to calculate the proposed base facility charges. In your description, please refer to the number of customer accounts shown on the last page of your original application.

Wesley Taylor Florida Public Service Commission September 25, 2017 Page 3 of 3

Applicant's Response: When Deer Creek's submeter billing contractor, NES, began billing, they had 907 billing units. They have used it consistently and not updated it. We do not know why.

7. Please provide the calculations used to convert the Polk County rates to your proposed rates.

Applicant's Response: See Attachment 7.

As always, we remain available for any additional questions you might have as to our response.

Sincerely,

GERALD T. BUHR, P.A.

Gerald T. Buhr, Counsel for the Applicant

653 5676 Conglesport

Lead and Copper Tap Sample Analysis and Result Ranking Reporting Format 62-550.730(5)(a)

RECEIVED

JUL 0 7 2015

System Name: Deer Creek RV

PWS-ID: 6535676

Laboratory Name: Flowers Chemical Laboratories, Inc.

Lab-ID: E83018

Contact Person: Dr. Jefferson S. Flowers

Phone: (407) 339-5984

Date Submitted to Lab: 06/18/15

Analysis Date: 06/30/15

Lab Analysis Method: EPA200.8 Lead or Copper (list one): Lead

Method Detection Limit: .001

90th Percentile Value: 0.00110

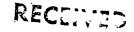
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A	Rank	Location Code Number	Lab Sample ID	Date Site	Lead
	(ascending)			Sampled	(mg/L)
	1	Sales Office Men's	269359DW1	06/15/15	0.00100 U
	2	Osprey Point Men's	269359DW3	06/15/15	0.00100 U
	3	Breezeway Men's	269359DW9	06/15/15	0.00100 U
	4	Sales Office Ladie's	269359DW2	06/15/15	0.00100 U
	5	Maintenance Men's	269359DW7	06/15/15	0.00100 U
	6	Eagle View Men's	269359DW5	06/15/15	0.00100 U
	7	Eagle View Ladie's	269359DW6	06/15/15	0.00100 U
	8	Osprey Point Ladie's	269359DW4	06/15/15	0.00100 U
	9	Deer Creek Men's	269359DW8	06/15/15	0.00110
	10	Breezeway Ladie's	269359DW10	06/15/15	0.00200

CERTIFICATION. The tap samples used for lead and copper analyses were submitted by the above PWS. Each sample container had one liter of solution (+/-100ml). All samples were taken properly by the above system and analyzed in accordance with the requirements in Chapter 10D-41, F.A.C. The sampling dates were reported for each sample received. I hereby certify that all data submitted are correct.

Signature of Authorized Laboratory Representative:

Name (Please Print): Jefferson S. Flowers Title and Date: Technical Director 07/01/15



Lead and Copper Tap Sample Analysis and Result Ranking Reporting Format 62-550.730(5)(a)

JUL 0 7 2015

System Name: Deer Creek RV

PWS-ID: 6535676

Laboratory Name: Flowers Chemical Laboratories, Inc.

Lab-ID: E83018

Contact Person: Dr. Jefferson S. Flowers

Phone: (407) 339-5984

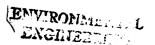
Date Submitted to Lab: 06/18/15

Analysis Date: 06/30/15

Lab Analysis Method: EPA200.8

Lead or Copper (list one): Copper Method Detection Limit: .001

90th Percentile Value: 0.269



A	Rank (ascending)	Location Code Number	Lab Sample ID	Date Site Sampled	Copper (mg/L)
	1	Sales Office Men's	269359DW1	06/15/15	0.0834
	2	Sales Office Ladie's	269359DW2	06/15/15	0.0903
	3	Maintenance Men's	269359DW7	06/15/15	0.0927
	4	Deer Creek Men's	269359DW8	06/15/15	0.106
	5	Breezeway Men's	269359DW9	06/15/15	0.196
	6	Osprey Point Ladie's	269359DW4	06/15/15	0.236
	7	Eagle View Men's	269359DW5	06/15/15	0.237
	8	Osprey Point Men's	269359DW3	06/15/15	0.255
	9	Eagle View Ladie's	269359DW6	06/15/15	0.269
	10	Breezeway Ladie's	269359DW10	06/15/15	0.277

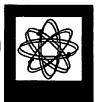
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Signature of Authorized Laboratory Representative:

Name (Please Print): Jefferson S. Flowers Title and Date: Technical Director 07/01/15

FLOWERS

CHEMICAL LABORATORIES



☐ Flowers Chemical Laboratories, Inc.

481 Newburyport Ave. Altamonte Springs, FL 32701 Bus: 407-339-5984 Fax: 407-260-6110

☐ Flowers Chemical Labs-South

West Park Industrial Plaza 571 N.W. Mercantile Pl., Ste. 111 Port St. Lucie, FL 34986 Bus: 772-343-8006 Fax: 772-343-8089

☐ Flowers Chemical Labs-North

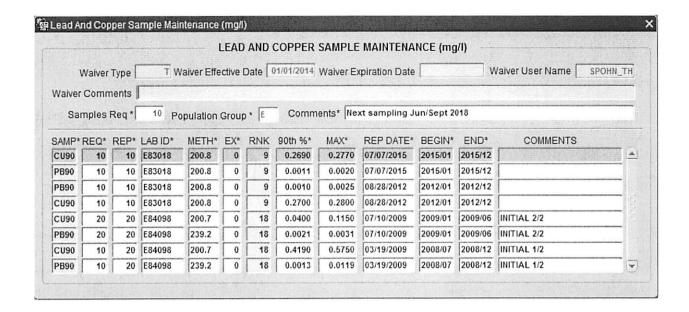
812 S.W. Harvey Greene Dr. Madison, FL 32340 Bus: 850-973-6878 Fax: 850-973-6878 ☐ Flowers Chemical Labs-Keys 3980 Overseas Highway

Ste. 103 Marathon, FL 33050 Bus: 305-743-8598

Fax: 305-743-8598

www.flowerslabs.com

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Selected homes are being tested to determine the contribution of faucet fixtures and household pipes and/or solder to the lead and copper levels in your drinking water. This sampling effort is required by the Florida Department of Environmental Protection, and is being accomplished through the cooperation of homeowners and residents.

ENVIRONMENTAL ENGINEERING

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- 3. Tightly cap the sample bottles and complete the portion of the form indicating what time and date the sample was taken and the person's name taking it.
- 4. IF ANY PLUMBING REPAIRS OR REPLACEMENT HAS BEEN DONE IN THE HOME SINCE THE PREVIOUS SAMPLING EVENT, NOTE THIS INFORMATION ON THE BOTTOM OF THIS FORM.
- 5. Store the sample in the refrigerator until it is collected.
- 6. Results will be provided to participating customers when reports are generated for the State unless excessive lead and /or copper levels are found. In those cases, immediate notification will be provided (Usually 10 working days from the time results are received.)

Customer/Sampler Name:	RAY	exers	
Customer Addresss Siles	Office	Mens	
Time/Date Sample Collected:	6(15	630	(a.m)√ p.m.

If you have any questions do not hesitate to contact our office business @863-965-2599.

CONSTA FLOW

5574 Commercial Blvd Winter Haven, FL 33880 Office: (863) 965-2599, Fax (863) 965-1733 www.constaflow.com

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JUL 0 7 2015

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Customer/Sampler Name:	KAU	le	بحرج)	
Customer Address: OSDC	a Cl	ublis	ale	Men	·2
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5574 Commercial Blvd Winter Haven, FL 33880 Office: (863) 965-2599, Fax (863) 965-1733 www.constaflov.com

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Customer/Sampler Name:	41 Texa	15	
Customer Address: (Seu)	Clubbun	e Queis	
Time/Date Sample Collected:	4/15	0645	(a.m.) p.m.

If you have any questions do not hesitate to contact our office business @863-965-2599.

Deer Creek

5574 Commercial Blvd Winter Haven, FL 33880 Office: (863) 965-2599, Fax (863) 965-1733

www.constaflow.com

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Customer/Sampler Name: Ay Texas

Customer Address: Eagle (see) Menso

Time/Date Sample Collected: 652

(a.m.)

If you have any questions do not hesitate to contactour office business

@863-965-2599.

Dear Clook

5574 Commercial Blvd Winter Haven, F1 33887 Office: (863) 965-2599, Fax (863) 965-1733 www.constaflov.com

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- 3. Tightly cap the sample bottles and complete the portion of the form indicating what time and date the sample was taken and the person's name taking it.
- 4. IF ANY PLUMBING REPAIRS OR REPLACEMENT HAS BEEN DONE IN THE HOME SINCE THE PREVIOUS SAMPLING EVENT, NOTE THIS INFORMATION ON THE BOTTOM OF THIS FORM.
- 5. Store the sample in the refrigerator until it is collected.
- 6. Results will be provided to participating customers when reports are generated for the State unless excessive lead and /or copper levels are found. In those cases, immediate notification will be provided (Usually 10 working days from the time results are received.)

Customer/Sampler Name:	RAU	6815	
Customer Address: Factor	vice	Ladies	
Time/Date Sample Collected: _	6/5	455	(a,m)/ p,m.

If you have any questions do not hesitate to contact our office business @863-965-2599.



Den Creek

5574 Commercial Blvd Winter Haven, FL 33880 Office: (863) 965-2599, Fax (863) 965-1733 www.constatlov.com

Selected homes are being tested to determine the contribution of faucet fixtures and household pipes and/or solder to the lead and copper levels in your drinking water. This sampling effort is required by the Florida Department of Environmental Protection, and is being accomplished through the cooperation of homeowners and residents.

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Customer/Sampler Name:	124cy	1445	
Customer Address: Main	Tenance.	Blde RR	
Time/Date Sample Collected:	615	700	a.m., p.m.

If you have any questions do not hesitate to contact our office business @863-965-2599.

CONSTA FLOW

Den Clerk

5574 Commercial Blvd Winter Haven, FL 33880 Office: (863) 965-2599, Fax (863) 965-1733 www.constallow.com

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Customer/Sampler Name:	Pay	1/2	V65		
Customer Address: Doct	Clerk	Click	bhawe	Mens	Riom
Time/Date Sample Collected:	(.1	15	710	(a)). / p.m.

If you have any questions do not hesitate to contact our office business @863-965-2599.

GONSTA FLOW INC.

5574 Commercial Blvd
Winter Haven, FL 33880
Office: (863) 965-2599, Fax (863) 965-1733
www.constatlow.com

Selected homes are being tested to determine the contribution of faucet fixtures and household pipes and/or solder to the lead and copper levels in your drinking water. This sampling effort is required by the Florida Department of Environmental Protection, and is being accomplished through the cooperation of homeowners and residents.

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Customer/Sampler Name:

Customer Address:

Lee ze culoy (Dolf Cacuse Mens) Knom

Time/Date Sample Collected:

3m./p.m.

If you have any questions do not hesitate to contact our office business @863-965-2599.

Dow Clerk

CONSTA FLOW

5574 Commercial Blvd Winter Haven, FL 33880 Office: (863) 965-2599, Fax (863) 965-1733 www.constaflow.com

Direction Procedures For Lead & Copper

Selected homes are being tested to determine the contribution of faucet fixtures and household pipes and/or solder to the lead and copper levels in your drinking water. This sampling effort is required by the Florida Department of Environmental Protection, and is being accomplished through the cooperation of homeowners and residents.

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Customer/Sampler Name:	Ray	Texa	45		
Customer Address: <u>Broozia</u>	ukul	Groff	Course	Luclies	Room
Time/Date Sample Collected:	/	715	6/15	(a.	m)/ p.m.

If you have any questions do not hesitate to contact our office business @863-965-2599.

CONSTA FLOW

Deir Creek

5574 Commercial Blvd Winter Haven, FL 33880 Office: (863) 965-2599, Fax (863) 965-1733 www.constaflow.com

SAMPLE LETTER

July 7. 2015

Subject: Lead and Copper Test Results

Dear Resident,

Deer Creek Golf and RV Resort is required by EPA regulations to periodically test for the presence of Lead and Copper at the customers tap. Recently the tap at Breezeway Ladies Restroom was tested for these two elements.

The action level for Lead is 0.015 mg/L and the action level for Copper is 1.3 mg/L. An "Action Level" is defined as the concentration of lead and copper in water that may trigger requirements for corrosion control, source water treatment or public education.

The sample results for Lead for your home was 0.00100 mg/L (Action Level 0.015 mg/L) The sample results for Copper for your home was 0.227 mg/L (Action Level 1.30 mg/L)

The results for your home were below any action level and are considered acceptable.

If you have any questions, please contact me at 863-424-2839.

Thank you for your assistance in this sampling effort.

Deer Creek Golf & RV Resort

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Rick Scott Governor

Celeste Philip, MD, MPH State Surgeon General

Vision: To be the Healthiest State in the Nation

January 6, 2017

Deer Creek RV Golf & Country Club, Inc. 42747 Hwy. 27 Davenport, FL 33837

RE:

Deer Creek Golf and RV Public Water System

PWS ID 6535676

2017 DRINKING WATER MONITORING REQUIREMENTS

Monitoring & Reports	Due	Comments
Microbiological ("Bacte")	Monthly	Disinfectant residuals must be reported invididually and averaged on bacte reports. Compliance for maximum disinfectant residual level is based on a running annual average.
Monthly Operation Reports (MORs)	Monthly	Include information about maintenance and/or abnormal occurances & CT calcs. If required.
Stage 2 Disinfection Byproducts (DBPs) (Total Trihalomethans/Haloacetic Acids (5)	July – September 2017	Sample at locational site(s) L1 (Lot #2085) & L2 (Clubhouse – Par Pines). ***.
Lead and Copper (Tap Sampling)	June – September 2018	Test in accordance with the most recently approved sampling plan. System required to follow SMF – Standard Monitoring Framework.
Consumer Confidence Report (CCR) & CCR Certification of Delivery	July 1, 2017 & August 10, 2017	Data for CCR can be obtained at http://www.dep.state.fl.us/water/drinkingwater/chemdata.htm

- * POE = Point of entry to the distribution system. Sample at each POE that is representative of each source of water.
- ** Ensure to report locations as L1, L2, L3 etc. This should be anotated on the lab sheet "Location Code".
- *** Ensure to anotate the location address/site identifier in the "Sample Location".
 - This is a good faith assessment of monitoring requirements for the above referenced public water system for calandar year 2017 and may not include additional sampling required during the year due to special circumstanses. This chart shall not relieve and person from any requirements of Florida Law. It is important for you to provide this information to your operator and/or sampler.
 - It is strongly recommended that testing be conducted early in the monitoring period to allow time for retest due to possible sampling or lab errors. Annual and triennial

Florida Department of Health in Polk County

ENVIRONMENTAL ENGINEERING • SWIMMING POOLS & BATHING PLACES
2090 East Clower Street • Bartow, FL 33830-6741 PHONE: (863) 519-8330 • FAX: (863) 534-0245 www.MyPolkHealth.org



www.FloridaHealth.gov

TWITTER:HealthyFLA FACEBOOK:FLDepartmentofHealth YOUTUBE: fldoh FLICKR: HealthyFla PINTEREST: HealthyFla

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Deer Creek Page 2 of 2

sampling should be completed by 9/30 or as directed to provide time for revisions, retest, and /or corrections.

 Test results must be submitted to DEP within the first 10 days following the end of the required monitoring period, or the first 10 days following the month in which the sample results were received, whichever time is shortest.

If you have any questions, please contact (863) 578-2033.

Sincerely,

Owen

Devine

Digitally signed by Owen Devine
DN: cn=Owen Devine, o=Environmental Engineering
ou=Department of Health in Polk County,
email=Owen.Devine@filealth.gov, c=US
Date: 10.11 to 6.166.84.65579.

Owen Devine

Environmental Specialist II

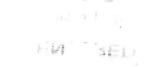
Email copy to:

[Melanie Stoia] Melanie.deercreekrv@hotmail.com

[Jennifer Alexander] jennifer@constaflow.com

PUBLIC WATER SYSTEM INFORMATION (to be co	mpleted by sampler - please type or print legibly)	
System Name: Deer Cheeke	KV	PWS I.D. # 6535676
System Type (check one): Community Address: 42749 Hury 27	☐ Nontransient Noncommunity	Transient Noncommunity
City: Havenout		ZIP Code:
Phone #: Fax	#: E-Ma	il Address:
	r) 7////7 ample Date: 2085	Sample Time: 13:02 AM PM (Circle One) Location Code: L-1 Lot 2085
Disinfectant Residual (required when reporting trihalor	nethanes and haloacetic acids): mg/l	L Field pH: <u>78</u>
Sample Type (Check Only One)	Reason(s) for Sample (C	Check all that apply)
Distribution	Routine Compliance (with 62-550)	Replacement (of Invalidated Sample)
Entry Point (to Distribution)	Confirmation of MCL Exceedance*	Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites **	Clearance (permitting)
Raw (at well or intake)	Other:	
Max Residence Time	Sampling Procedure Used or Other Comments:	
Avg Residence Time	ard A	
Near First Customer	0.90	
	* See 62-550.500(6) for requirements and restrictions And 62-550.512(3) for nitrate or nitrite exceedances	[1] - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 -
pnnifer Alexandor	SAMPLER CERTIFICATION	, do HEREBY CERTIFY
(Print Name) that the above public water system and collection infor	(Print Title)	
Signature:	Complete and correct.	Date:7/24/17
Certified Operator #: 21471 Pho	ne #: 9105 2599	Sampler's Fax:
Sampler's E-Mail:	-	





LABORATORY CERTIFIC	ATION INFORMATION (to	be completed by lab - pleas	e type or print legibly)		
Lab Name: Flowers Chemic	cal Laboratories, Inc.	Florida DOH Ce	rtification #: E83018	Certificat	ion Expiration Date: 6/30/2018
				ATTACH CURR	RENT DOH ANALYTE SHEET*
Address: P. O. Box 150597	, Altamonte Springs, FL 32	715-0597			Phone #: 407-339-5984
Were any analyses subcon-	tracted? 🔲 Yes 🔼 🕏 N	If yes, please provide I	DOH certification number(s):		
			ATTACH DOI	H ANALYTE SHEET FOR EA	CH SUBCONTRACTED LAB*
ANALYSIS INFORMATION		Date Sar	mple(s) Received: 07/12/17		
PWS ID (From Page 1):	6535676	Sample Number (From F	Page 1): 337485DW1	Lab Assign	ed Report # or Job ID: 337485
Group(s) analyzed and resu	ults attached for compliance	with Chapter 62-550, F.A.C.	(check all that apply)		
Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts	Radionuclides	Secondaries
All Except Asbestos	☐ All 30	☐ All 21	Trihalomethanes	☐ Single Sample	□ All 14
Partial	☐ All Except Dioxin	☐ Partial	Haloacetic Acids	☐ Qtrly Composite**	Partial
Nitrate	☐ Partial		Chlorite		
□ Nitrite	☐ Dioxin Only		Bromate		
Asbestos					
		LAB CER	RTIFICATION		
I, Jefferson S. Flowers, Tec	hnical Director, do HEREB	CERTIFY that all attached a	nalytical data are correct and	d unless noted meet all requir	rements of the
National Environmental La	boratory Accreditation Confe	erence (NELAC).			
Signature:		Date: 07/	/17/17		
* Failure to provide a valid and	aurrant Florida DOU partificati	on number and a current Analyte	Shoot for the ottophed anglisis	annulta will annult in animation of th	
		on number and a current Analyte em for failure to sample, and may	V=3,0		ie
** Please provide radiological s			result in notification of the DOA	Buleau of Laboratory Services.	
Flease provide radiological s	ample dates & locations for ear	cri quarter.			
	CONFIRMATION AND N	IOTIFICATION IS REQUIRED	WITHIN 24 HRS FOR NITE	RATE MCL EXCEEDANCES	
NON-DETECTS A	RE TO BE REPORTED AS	THE MDL WITH A "U" QUA	LIFIER. (Non-detects repor	rted as "BDL" or with a "<"	are not acceptable.)
		or DOH - attach notes as ne			
Sample Collection & Analys	is Satisfactory XYes	No	Replacement Sample	or Report Requested (circle	er highlight group(s) above)
Person Notified:	*				-7/27/17

Page 2 of 6

DISINFECTION BYPRODUCTS 62-550.310(3)

Report Number / Job ID: 337485DW1 Disinfectant Residual (mg/L): 0.9100000 PWS ID (From Page 1): 6535676

Contar	r			Analysis		Analytical	Lab	Regulatory	Analysis	Analysis	DOH Lab
ID	Contam Name	MCL	Units	Result	Qualifier*	Method	MDL	MRL**	Date	Time	Cert#
2450	Monochloroacetic Acid	N/A	ug/L	4.16	-	EPA552.3	2.00	2.0	07/13/17		E83018
2451	Dichloroacetic Acid	N/A	ug/L	3.72		EPA552.3	1.00	1.0	07/13/17		E83018
2452	Trichloroacetic Acid	N/A	ug/L	0.500	U	EPA552.3	0.500	1.0	07/13/17		E83018
2453	Monobromoacetic Acid	N/A	ug/L	1.00	U	EPA552.3	1.00	1.0	07/13/17		E83018
2454	Dibromoacetic Acid	N/A	ug/L	3.82		EPA552.3	0.500	1.0	07/13/17		E83018
2456	Total Haloacetic Acids (HAA5)	60	ug/L	11.7		EPA552.3	0.500		07/13/17		E83018
Contar	r			Analysis		Analytical	Lab	Regulatory	Analysis	Analysis	DOH Lab
ID	Contam Name	MCL	Units	Result	Qualifier*	Method	MDL	MRL**	Date	Time	Cert #
2941	Chloroform	N/A	ug/L	0.500	Ū	EPA524.2	0.500	1.0	07/14/17		E83018
2942	Bromoform	N/A	ug/L	0.500	U	EPA524.2	0.500	1.0	07/14/17		E83018
2943	Bromodichloromethane	N/A	ug/L	0.500	U	EPA524.2	0.500	1.0	07/14/17		E83018
2944	Dibromochloromethane	N/A	ug/L	0.540		EPA524.2	0.500	1.0	07/14/17		E83018
2950	Total Trihalomethanes (TTHM)	80	ug/L	0.540		EPA524.2	0.500	-	07/14/17		E83018

^{**} Laboratories are required to adhere to the minimum reporting level (MRL) requirements of 40 CFR 141.131(b)(2)(iv)

NOTE: Do not round values. Report results to the accuracy, precision, and sensitivity of the analytical method used.

^{***} Applicable to monitoring as prescribed in 40 CFR 141.132(b)(2)(i)(B) and (b)(2)(ii)

^{****} Laboratories that use EPA methods 317.0 Revision 2.0, 326.0 or 321.8 must meet a 1.0 ug/L MRL for bromate.

PUBLIC WATER STSTEM INFORMATIO	(to be completed by sampler - please type o	or print legibly)	
System Name:	el	PWS	SI.D.# 65 3 5676
System Type (check one): System Type (check on	Nontransient Noncommunity	Transient Noncommun	nity
City: Agrenport			ZIP Code:
Phone #:	Fax #:	E-Mail Address:	
SAMPLE INFORMATION (to be completed Sample Number: 337485DW2 Sample Location (be specific):	Sample Date: 7/11/17	Sample Time:	3:18 AM PM Circle One
Disinfectant Residual (required when report	rting trihalomethanes and haloacetic acids):		
Sample Type (Check Only One)	Reason(s)	for Sample (Check all that apply)	
Distribution	Routine Compliance (with 62-550)	Replacement (of	Invalidated Sample)
Entry Point (to Distribution)	Confirmation of MCL Exceedance*	* Special (not for c	compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites **	Clearance (perm	itting)
Raw (at well or intake)	Other:		
Max Residence Time	Sampling Procedure Used or Othe	er Comments:	
Avg Residence Time	2 ml 1	7. 1 1. E	4
Near First Customer	34 6 2011	Lisintection De	1products
	* See 62-550.500(6) for requirements And 62-550.512(3) for nitrate or nitri	**************************************	for requirements and age for each site.
Jennifer Alexander	SAMPLER CERTI	101	do HEREBY CERTIFY
(Print Name)		(Print Title)	
Signature:	election information is complete and correct.	Date:	7/26/17
Certified Operator #:	Phone #: 863765	Sampler's Fax:	
Sampler's E-Mail:			

LABORATORY CERTIFICATION INFORMATION (to be completed by lab - please type or print legibly) Lab Name: Flowers Chemical Laboratories, Inc. Florida DOH Certification #: E83018 Certification Expiration Date: 6/30/2018 ATTACH CURRENT DOH ANALYTE SHEET* Address: P. O. Box 150597, Altamonte Springs, FL 32715-0597 Phone #: 407-339-5984 Were any analyses subcontracted? ☐ Yes If ves. please provide DOH certification number(s): ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB* ANALYSIS INFORMATION(to be completed by lab) Date Sample(s) Received: 07/12/17 PWS ID (From Page 1): Sample Number (From Page 1): 337485DW2 Lab Assigned Report # or Job ID: 337485 Group(s) analyzed and results attached for compliance with Chapter 62-550, F.A.C. (check all that apply) Inorganics Synthetic Organics Volatile Organics Disinfection Byproducts Radionuclides Secondaries Trihalomethanes ☐ All Except Asbestos □ All 30 □ All 21 ☐ Single Sample □ All 14 ☐ Partial All Except Dioxin Partial Haloacetic Acids ☐ Qtrly Composite** Partial ☐ Nitrate ☐ Partial Chlorite Nitrite ☐ Dioxin Only Bromate ☐ Asbestos LAB CERTIFICATION I, Jefferson S. Flowers, Technical Director, do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC). Signature: Date: 07/17/17 * Failure to provide a valid and current Florida DOH certification number and a current Analyte Sheet for the attached analysis results will result in rejection of the report and possible enforcement against the public water system for failure to sample, and may result in notification of the DOH Bureau of Laboratory Services. ** Please provide radiological sample dates & locations for each quarter. CONFIRMATION AND NOTIFICATION IS REQUIRED WITHIN 24 HRS FOR NITRATE MCL EXCEEDANCES NON-DETECTS ARE TO BE REPORTED AS THE MDL WITH A "U" QUALIFIER, (Non-detects reported as "BDL" or with a "<" are not acceptable.) Compliance Determination (to be completed by DEP or DOH - attach notes as necessary) Sample Collection & Analysis Satisfactory

☐ No Replacement Sample or Report Requested (circle or highlight group(s) above) DEP/DOH Reviewing Official: Person Notified: _ Date Notified:

Page 5 of 6

DISINFECTION BYPRODUCTS 62-550.310(3)

Report Number / Job ID: 337485DW2 Disinfectant Residual (mg/L): 0.8800000 PWS ID (From Page 1): 6535676

Contan	•			Analysis		Analytical	Lab	Regulatory	Analysis	Analysis	DOH Lab
ID	Contam Name	MCL	Units	Result	Qualifier*	Method	MDL	MRL**	Date	Time	Cert#
2450	Monochloroacetic Acid	N/A	ug/L	4.11		EPA552.3	2.00	2.0	07/13/17	-	E83018
2451	Dichloroacetic Acid	N/A	ug/L	26.7		EPA552.3	1.00	1.0	07/13/17		E83018
2452	Trichloroacetic Acid	N/A	ug/L	5.59		EPA552.3	0.500	1.0	07/13/17		E83018
2453	Monobromoacetic Acid	N/A	ug/L	1.00	U	EPA552.3	1.00	1.0	07/13/17		E83018
2454	Dibromoacetic Acid	N/A	ug/L	1.26		EPA552.3	0.500	1.0	07/13/17		E83018
2456	Total Haloacetic Acids (HAA5)	60	ug/L	37.7		EPA552.3	0.500		07/13/17		E83018
Contarr				Analysis		Analytical	Lab	Regulatory	Analysis	Analysis	DOH Lab
ID	Contam Name	MCL	Units	Result	Qualifier*	Method	MDL	MRL**	Date	Time	Cert #
2941	Chloroform	N/A	ug/L	33.5		EPA524.2	0.500	1.0	07/14/17	-	E83018
2942	Bromoform	N/A	ug/L	0.550		EPA524.2	0.500	1.0	07/14/17		E83018
2943	Bromodichloromethane	N/A	ug/L	12.9		EPA524.2	0.500	1.0	07/14/17		E83018
2944	Dibromochloromethane	N/A	ug/L	5.51		EPA524.2	0.500	1.0	07/14/17		E83018
2950	Total Trihalomethanes (TTHM)	80	ug/L	52.5		EPA524.2	0.500		07/14/17		E83018

^{**} Laboratories are required to adhere to the minimum reporting level (MRL) requirements of 40 CFR 141.131(b)(2)(iv)

NOTE: Do not round values. Report results to the accuracy, precision, and sensitivity of the analytical method used.

^{***} Applicable to monitoring as prescribed in 40 CFR 141.132(b)(2)(i)(B) and (b)(2)(ii)

^{****} Laboratories that use EPA methods 317.0 Revision 2.0, 326.0 or 321.8 must meet a 1.0 ug/L MRL for bromate.

FLOWERS	SAR I
CHEMICAL	7

☐ Flowers Chemical Laboratories, Inc.

481 Newburyport Ave. Altamonte Springs, FL 32701 Bus: 407-339-5984

Bus: 407-339-5984 Port Fax: 407-260-6110 Bus:

☐ Flowers Chemical Labs-South

West Park Industrial Plaza 571 N.W. Mercantile Pl., Ste. 111 Port St. Lucie, FL 34986

Bus: 772-343-8006 Fax: 772-343-8089 ☐ Flowers Chemical Labs-North

812 S.W. Harvey Greene Dr. Madison, FL 32340 Bus: 850-973-6878 Fax: 850-973-6878 ☐ Flowers Chemical Labs-Keys

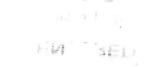
3980 Overseas Highway Ste. 103 Marathon, FL 33050 Bus: 305-743-8598 Fax: 305-743-8598

www.flowerslabs.com

Client								Public	Wate	r pyste	m Name	4	011				
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	Winter	Haven, F	r 33880)				FCL L	ab Co	ordinat	tor			Kh#			
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PUBLIC WATER SYSTEM INFORMATION (to be co	mpleted by sampler - please type or print legibly)	
System Name: Deer Cheeke	KV	PWS I.D. # 6535676
System Type (check one): Community Address: 42749 Hury 27	☐ Nontransient Noncommunity	Transient Noncommunity
City: Havenout		ZIP Code:
Phone #: Fax	#: E-Ma	il Address:
	r) 7////7 ample Date: 2085	Sample Time: 13:02 AM PM (Circle One) Location Code: L-1 Lot 2085
Disinfectant Residual (required when reporting trihalor	nethanes and haloacetic acids): mg/l	L Field pH: <u>78</u>
Sample Type (Check Only One)	Reason(s) for Sample (C	Check all that apply)
Distribution	Routine Compliance (with 62-550)	Replacement (of Invalidated Sample)
Entry Point (to Distribution)	Confirmation of MCL Exceedance*	Special (not for compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites **	Clearance (permitting)
Raw (at well or intake)	Other:	
Max Residence Time	Sampling Procedure Used or Other Comments:	
Avg Residence Time	ard A	
Near First Customer	0.90	
	* See 62-550.500(6) for requirements and restrictions And 62-550.512(3) for nitrate or nitrite exceedances	[1] - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 - [1] 1 -
pnnifer Alexandor	SAMPLER CERTIFICATION	, do HEREBY CERTIFY
(Print Name) that the above public water system and collection infor	(Print Title)	
Signature:	Complete and correct.	Date:7/24/17
Certified Operator #: 21471 Pho	ne #: 9105 2599	Sampler's Fax:
Sampler's E-Mail:	-	





LABORATORY CERTIFIC	ATION INFORMATION (to	be completed by lab - pleas	e type or print legibly)		
Lab Name: Flowers Chemic	cal Laboratories, Inc.	Florida DOH Ce	rtification #: E83018	Certificat	ion Expiration Date: 6/30/2018
				ATTACH CURR	RENT DOH ANALYTE SHEET*
Address: P. O. Box 150597	, Altamonte Springs, FL 32	715-0597			Phone #: 407-339-5984
Were any analyses subcon-	tracted? 🔲 Yes 🔼 🕏 N	If yes, please provide I	DOH certification number(s):		
			ATTACH DOI	H ANALYTE SHEET FOR EA	CH SUBCONTRACTED LAB*
ANALYSIS INFORMATION		Date Sar	mple(s) Received: 07/12/17		
PWS ID (From Page 1):	6535676	Sample Number (From F	Page 1): 337485DW1	Lab Assign	ed Report # or Job ID: 337485
Group(s) analyzed and resu	ults attached for compliance	with Chapter 62-550, F.A.C.	(check all that apply)		
Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts	Radionuclides	Secondaries
All Except Asbestos	☐ All 30	☐ All 21	Trihalomethanes	☐ Single Sample	□ All 14
Partial	☐ All Except Dioxin	☐ Partial	Haloacetic Acids	☐ Qtrly Composite**	Partial
Nitrate	☐ Partial		Chlorite		
□ Nitrite	☐ Dioxin Only		Bromate		
Asbestos					
		LAB CER	RTIFICATION		
I, Jefferson S. Flowers, Tec	hnical Director, do HEREB	CERTIFY that all attached a	nalytical data are correct and	d unless noted meet all requir	rements of the
National Environmental La	boratory Accreditation Confe	erence (NELAC).			
Signature:		Date: 07/	/17/17		
* Failure to provide a valid and	aurrant Florida DOU partificati	on number and a current Analyte	Shoot for the ottophed anglisis	annulta will annult in animation of th	
		on number and a current Analyte em for failure to sample, and may	V=3,0		ie
** Please provide radiological s			result in notification of the DOA	Buleau of Laboratory Services.	
Flease provide radiological s	ample dates & locations for ear	cri quarter.			
	CONFIRMATION AND N	IOTIFICATION IS REQUIRED	WITHIN 24 HRS FOR NITE	RATE MCL EXCEEDANCES	
NON-DETECTS A	RE TO BE REPORTED AS	THE MDL WITH A "U" QUA	LIFIER. (Non-detects repor	rted as "BDL" or with a "<"	are not acceptable.)
		or DOH - attach notes as ne			
Sample Collection & Analys	is Satisfactory XYes	No	Replacement Sample	or Report Requested (circle	er highlight group(s) above)
Person Notified:	*				-7/27/17

Page 2 of 6

DISINFECTION BYPRODUCTS 62-550.310(3)

Report Number / Job ID: 337485DW1 Disinfectant Residual (mg/L): 0.9100000 PWS ID (From Page 1): 6535676

Contar	r			Analysis		Analytical	Lab	Regulatory	Analysis	Analysis	DOH Lab
ID	Contam Name	MCL	Units	Result	Qualifier*	Method	MDL	MRL**	Date	Time	Cert#
2450	Monochloroacetic Acid	N/A	ug/L	4.16	-	EPA552.3	2.00	2.0	07/13/17		E83018
2451	Dichloroacetic Acid	N/A	ug/L	3.72		EPA552.3	1.00	1.0	07/13/17		E83018
2452	Trichloroacetic Acid	N/A	ug/L	0.500	U	EPA552.3	0.500	1.0	07/13/17		E83018
2453	Monobromoacetic Acid	N/A	ug/L	1.00	U	EPA552.3	1.00	1.0	07/13/17		E83018
2454	Dibromoacetic Acid	N/A	ug/L	3.82		EPA552.3	0.500	1.0	07/13/17		E83018
2456	Total Haloacetic Acids (HAA5)	60	ug/L	11.7		EPA552.3	0.500		07/13/17		E83018
Contar	r			Analysis		Analytical	Lab	Regulatory	Analysis	Analysis	DOH Lab
ID	Contam Name	MCL	Units	Result	Qualifier*	Method	MDL	MRL**	Date	Time	Cert #
2941	Chloroform	N/A	ug/L	0.500	Ū	EPA524.2	0.500	1.0	07/14/17		E83018
2942	Bromoform	N/A	ug/L	0.500	U	EPA524.2	0.500	1.0	07/14/17		E83018
2943	Bromodichloromethane	N/A	ug/L	0.500	U	EPA524.2	0.500	1.0	07/14/17		E83018
2944	Dibromochloromethane	N/A	ug/L	0.540		EPA524.2	0.500	1.0	07/14/17		E83018
2950	Total Trihalomethanes (TTHM)	80	ug/L	0.540		EPA524.2	0.500	-	07/14/17		E83018

^{**} Laboratories are required to adhere to the minimum reporting level (MRL) requirements of 40 CFR 141.131(b)(2)(iv)

NOTE: Do not round values. Report results to the accuracy, precision, and sensitivity of the analytical method used.

^{***} Applicable to monitoring as prescribed in 40 CFR 141.132(b)(2)(i)(B) and (b)(2)(ii)

^{****} Laboratories that use EPA methods 317.0 Revision 2.0, 326.0 or 321.8 must meet a 1.0 ug/L MRL for bromate.

PUBLIC WATER STSTEM INFORMATIO	(to be completed by sampler - please type o	or print legibly)	
System Name:	el	PWS	SI.D.# 65 3 5676
System Type (check one): System Type (check on	Nontransient Noncommunity	Transient Noncommun	nity
City: Agrenport			ZIP Code:
Phone #:	Fax #:	E-Mail Address:	
SAMPLE INFORMATION (to be completed Sample Number: 337485DW2 Sample Location (be specific):	Sample Date: 7/11/17	Sample Time:	3:18 AM PM Circle One
Disinfectant Residual (required when report	rting trihalomethanes and haloacetic acids):		
Sample Type (Check Only One)	Reason(s)	for Sample (Check all that apply)	
Distribution	Routine Compliance (with 62-550)	Replacement (of	Invalidated Sample)
Entry Point (to Distribution)	Confirmation of MCL Exceedance*	* Special (not for c	compliance with 62-550)
Plant Tap (not for compliance with 62-550)	Composite of Multiple Sites **	Clearance (perm	itting)
Raw (at well or intake)	Other:		
Max Residence Time	Sampling Procedure Used or Othe	er Comments:	
Avg Residence Time	2 ml 1	7. 1 1. E	4
Near First Customer	34 6 2011	Lisintection De	1products
	* See 62-550.500(6) for requirements And 62-550.512(3) for nitrate or nitri	**************************************	for requirements and age for each site.
Jennifer Alexander	SAMPLER CERTI	101	do HEREBY CERTIFY
(Print Name)		(Print Title)	
Signature:	election information is complete and correct.	Date:	7/26/17
Certified Operator #:	Phone #: 863765	Sampler's Fax:	
Sampler's E-Mail:			

LABORATORY CERTIFICATION INFORMATION (to be completed by lab - please type or print legibly) Lab Name: Flowers Chemical Laboratories, Inc. Florida DOH Certification #: E83018 Certification Expiration Date: 6/30/2018 ATTACH CURRENT DOH ANALYTE SHEET* Address: P. O. Box 150597, Altamonte Springs, FL 32715-0597 Phone #: 407-339-5984 Were any analyses subcontracted? ☐ Yes If ves. please provide DOH certification number(s): ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB* ANALYSIS INFORMATION(to be completed by lab) Date Sample(s) Received: 07/12/17 PWS ID (From Page 1): Sample Number (From Page 1): 337485DW2 Lab Assigned Report # or Job ID: 337485 Group(s) analyzed and results attached for compliance with Chapter 62-550, F.A.C. (check all that apply) Inorganics Synthetic Organics Volatile Organics Disinfection Byproducts Radionuclides Secondaries Trihalomethanes ☐ All Except Asbestos □ All 30 □ All 21 ☐ Single Sample □ All 14 ☐ Partial All Except Dioxin Partial Haloacetic Acids ☐ Qtrly Composite** Partial ☐ Nitrate ☐ Partial Chlorite Nitrite ☐ Dioxin Only Bromate ☐ Asbestos LAB CERTIFICATION I, Jefferson S. Flowers, Technical Director, do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC). Signature: Date: 07/17/17 * Failure to provide a valid and current Florida DOH certification number and a current Analyte Sheet for the attached analysis results will result in rejection of the report and possible enforcement against the public water system for failure to sample, and may result in notification of the DOH Bureau of Laboratory Services. ** Please provide radiological sample dates & locations for each quarter. CONFIRMATION AND NOTIFICATION IS REQUIRED WITHIN 24 HRS FOR NITRATE MCL EXCEEDANCES NON-DETECTS ARE TO BE REPORTED AS THE MDL WITH A "U" QUALIFIER, (Non-detects reported as "BDL" or with a "<" are not acceptable.) Compliance Determination (to be completed by DEP or DOH - attach notes as necessary) Sample Collection & Analysis Satisfactory

☐ No Replacement Sample or Report Requested (circle or highlight group(s) above) DEP/DOH Reviewing Official: Person Notified: _ Date Notified:

Page 5 of 6

DISINFECTION BYPRODUCTS 62-550.310(3)

Report Number / Job ID: 337485DW2 Disinfectant Residual (mg/L): 0.8800000 PWS ID (From Page 1): 6535676

Contan	•			Analysis		Analytical	Lab	Regulatory	Analysis	Analysis	DOH Lab
ID	Contam Name	MCL	Units	Result	Qualifier*	Method	MDL	MRL**	Date	Time	Cert#
2450	Monochloroacetic Acid	N/A	ug/L	4.11		EPA552.3	2.00	2.0	07/13/17	-	E83018
2451	Dichloroacetic Acid	N/A	ug/L	26.7		EPA552.3	1.00	1.0	07/13/17		E83018
2452	Trichloroacetic Acid	N/A	ug/L	5.59		EPA552.3	0.500	1.0	07/13/17		E83018
2453	Monobromoacetic Acid	N/A	ug/L	1.00	U	EPA552.3	1.00	1.0	07/13/17		E83018
2454	Dibromoacetic Acid	N/A	ug/L	1.26		EPA552.3	0.500	1.0	07/13/17		E83018
2456	Total Haloacetic Acids (HAA5)	60	ug/L	37.7		EPA552.3	0.500		07/13/17		E83018
Contarr				Analysis		Analytical	Lab	Regulatory	Analysis	Analysis	DOH Lab
ID	Contam Name	MCL	Units	Result	Qualifier*	Method	MDL	MRL**	Date	Time	Cert #
2941	Chloroform	N/A	ug/L	33.5		EPA524.2	0.500	1.0	07/14/17	-	E83018
2942	Bromoform	N/A	ug/L	0.550		EPA524.2	0.500	1.0	07/14/17		E83018
2943	Bromodichloromethane	N/A	ug/L	12.9		EPA524.2	0.500	1.0	07/14/17		E83018
2944	Dibromochloromethane	N/A	ug/L	5.51		EPA524.2	0.500	1.0	07/14/17		E83018
2950	Total Trihalomethanes (TTHM)	80	ug/L	52.5		EPA524.2	0.500		07/14/17		E83018

^{**} Laboratories are required to adhere to the minimum reporting level (MRL) requirements of 40 CFR 141.131(b)(2)(iv)

NOTE: Do not round values. Report results to the accuracy, precision, and sensitivity of the analytical method used.

^{***} Applicable to monitoring as prescribed in 40 CFR 141.132(b)(2)(i)(B) and (b)(2)(ii)

^{****} Laboratories that use EPA methods 317.0 Revision 2.0, 326.0 or 321.8 must meet a 1.0 ug/L MRL for bromate.

FLOWERS	SAR I
CHEMICAL	7

☐ Flowers Chemical Laboratories, Inc.

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Bus: 407-339-5984 Port Fax: 407-260-6110 Bus:

☐ Flowers Chemical Labs-South

West Park Industrial Plaza 571 N.W. Mercantile Pl., Ste. 111 Port St. Lucie, FL 34986

Bus: 772-343-8006 Fax: 772-343-8089 ☐ Flowers Chemical Labs-North

812 S.W. Harvey Greene Dr. Madison, FL 32340 Bus: 850-973-6878 Fax: 850-973-6878 ☐ Flowers Chemical Labs-Keys

3980 Overseas Highway Ste. 103 Marathon, FL 33050 Bus: 305-743-8598 Fax: 305-743-8598

www.flowerslabs.com

Client				- Constitution of the Cons			1	Public	Wate	r pyste	m Name	4	011				
Address Consta Flow, Inc							-	PWS ID# P.O.#									
		ommercia									5356	76					
	Winter	Haven, F	r 33880)				FCL L	ab Co	ordinat	or			Kit#			
Phone							-	Public	c Wat	ter Sys	tern Type:	☐ Limited	d Use Con	nmercial / Public	соммента	n 2	5/7
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Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Rick Scott Governor

John H. Armstrong, MD, FACS State Surgeon General & Secretary

Vision: To be the Healthiest State in the Nation

January 25, 2016

Deer Creek RV Golf & Country Club, Inc. 42747 Hwy. 27
Davenport, FL 33837

RE:

Deer Creek Golf and RV Public Water System

PWS ID 6535676

2016 DRINKING WATER MONITORING REQUIREMENTS

Monitoring & Reports	Due	Comments
Microbiological ("Bacte")	Monthly	Disinfectant residuals must be reported invididually and averaged on bacte reports. Compliance for maximum disinfectant residual level is based on a running annual average.
Monthly Operation Reports (MORs)	Monthly	Include information about maintenance and/or abnormal occurances & CT calcs. If required.
Stage 2 Disinfection Byproducts (DBPs) (Total Trihalomethans/Haloacetic Acids (5)	July – September 2016	Sample at locational site(s) L1 (Lot #2085) & L2 (Clubhouse – Par Pines). ***. Report disinfectant residual.
Lead and Copper (Tap Sampling)	June – September 2018	Test in accordance with the most recently approved sampling plan.
Consumer Confidence Report (CCR) & CCR Certification of Delivery	July 1, 2016 & August 10, 2016	Data for CCR can be obtained at http://www.dep.state.fl.us/water/drinkingwater/chemdata.htm

- * POE = Point of entry to the distribution system. Sample at each POE that is representative of each source of water.
- ** Ensure to report locations as L1, L2, L3 etc. This should be anotated on the lab sheet "Location Code".
- *** Ensure to anotate the location address/site identifier in the "Sample Location".
 - This is a good faith assessment of monitoring requirements for the above referenced public
 water system for calandar year 2016 and may not include additional sampling required during
 the year due to special circumstanses. This chart shall not relieve and person from any
 requirements of Florida Law. It is important for you to provide this information to your operator
 and/or sampler.

Page 2 Deer Creek Golf and RV Public Water System

- It is strongly recommended that testing be conducted early in the monitoring period to allow time for retest due to possible sampling or lab errors. Annual and triennial sampling should be completed by 9/30 or as directed to provide time for revisions, re-test, and /or corrections.
- Test results must be submitted to DEP within the first 10 days following the end of the required monitoring period, or the first 10 days following the month in which the sample results were received, whichever time is shortest.

If you have any questions, please contact (863) 519-8330, ext. 12151.

Sincerely,

Owen

Devine

Digitally signed by Owen Devine DN: cn=Owen Devine, o=Environmental Engineering, ou=Department of Health in Polk County, email=Owen.Devine@filhealth.gov, c=US Date: 2016.01.25 09:18:47 -05'00'

Owen Devine

Environmental Specialist II

Email copy to:

[Melanie Stoia] Melanie.deercreekrv@hotmail.com

[Jennifer Alexander] jennifer@constaflow.com

ACCOUNT NUMBER	283457-111204
SERVICE ADDRESS	42749 HWY 27 PH II
CYCLE-ROUTE	04-16
TOTAL CURRENT CHARGES	\$35,724.57
PAST DUE CHARGES	\$0.00
TOTAL AMOUNT DUE	\$35,724.57
BILL DATE	05/24/17
CURRENT CHARGES DUE	06/13/17



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www.polk-county.net



SERVICE PERIOD	DAYS	METER NUMBER	PREVIOUS READ	CURRENT READ	USAGE (X1,000 gallons)
04/07/17-05/09/17	32	46502965	32421	35592	3171

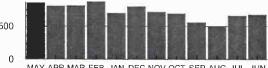
SERVICE	CONSUMPTION (GALLONS)	CHARGE AMOUNT
2 Inch Base Water		\$2,084.41
Vater Usage	2,580,000	\$7,357.30
WRI/AWS Surcharge	2,580,000	\$774.00
2 Inch Base Wastewater		\$7,768.89
V <mark>astewater Usage</mark>	2,580,000	\$16,718.40
ublic Service Tax		\$1,021.57

AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	PAST DUE BALANCE	CURRENT CHARGES
\$33,828.24	\$-33,828.24	\$0.00	\$0.00	\$35,724.57

TOTAL AMOUNT DUE \$35,724.57

Polk County Utilities has partnered with Paymentus, a leader in secure payment solutions. Paymentus can process credit/debit card and eCheck payments in increments of \$500 for a convenience fee of \$2.75 each.

MONTHLY WATER USAGE



Payments that are received after 4:30 p.m., or paid at Amscot after 4 p.m., will be processed the next business day.



Polk County Utilities P.O. Box 2019 Bartow, FL 33831-2019

☐ Check here and fill out change of address on reverse.

ACCOUNT NUMBER 283457-111204 **BALANCE FORWARD** \$0.00 **CURRENT CHARGES** \$35,724.57 **TOTAL AMOUNT DUE** \$35,724.57 **CURRENT CHARGES DUE** 06/13/17

Please Enter Payment Amount \$



REMIT PAYMENT TO:

POLK COUNTY UTILITIES PO Box 2019 BARTOW, FL 33831 - 2019



ACCOUNT NUMBER	283457-111204		
SERVICE ADDRESS	42749 HWY 27 PH II		
CYCLE-ROUTE	04-16		
TOTAL CURRENT CHARGES	\$36,210.81		
CREDIT BALANCE	\$-1,807.48		
TOTAL AMOUNT DUE	\$34,403.33		
BILL DATE	02/23/17		
CURRENT CHARGES DUE	03/15/17		



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Fax 863-298-4111 Lobby Hours: 8:00 A.M. - 4:30 P.M. www.polk-county.net

SERVICE PERIOD D	AYS METER NUMBER	PREVIOUS READ	CURRENT READ	USAGE (K1,000 gallons)
	33 46502965	22921	26250	3329

12 Inch Base Water			\$2,084.41
Water Usage	2,620,000		\$7,551.70
PWRI/AWS Surcharge	2,620,000		\$786.00
12 Inch Base Wastewater		The second secon	\$7,768.89
Vastewater Usage	2,620,000	RECEIVED	\$16,977.60
Public Service Tax		OLIVED	\$1,042.21
		FEB 2 7 2017	
		Per	

AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	CREDIT BALANCE	CURRENT CHARGES	TOTAL AMOUNT DUE
\$30,060.26	\$-30,060.26	\$-1,807.48	\$-1,807.48	\$36,210.81	\$34,403.33

Cost Distribution

Mockingbird #1____ Regal Point Regal Ridge

__Golf

Osprey Point #35160.18 Social Activities#8

#44 231. Miscellaneous #9

MONTHLY WATER



Payments that are received after 4:30 p.m., or paid at Amscot after 4 p.m., will be processed the next business day.



Polk County Utilities P.O. Box 2019 Bartow, FL 33831-2019

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283457-111204 ACCOUNT NUMBER BALANCE FORWARD \$-1,807.48 **CURRENT CHARGES** \$36,210.81 TOTAL AMOUNT DUE \$34,403.33 **CURRENT CHARGES DUE** 03/15/17

Please Enter Payment Amount \$

REMIT PAYMENT TO:

POLK COUNTY UTILITIES PO Box 2019 BARTOW, FL 33831 - 2019



* <u> </u>	
ACCOUNT NUMBER	283457-111204
SERVICE ADDRESS	42749 HWY 27 PH II
CYCLE-ROUTE	04-16
TOTAL CURRENT CHARGES	\$36,233.16
PAST DUE CHARGES	\$1,703.45
TOTAL AMOUNT DUE	\$37,936.61
BILL DATE	02/23/16
CURRENT CHARGES DUE	03/14/16





Utilities Customer Service Mail Bills / Account Information

FEB 2 6 201611 Jim Keene Boulevard, SR 540 • Winter Haven, FL 33880 863-298-4100 / 800-301-6039

Fax 863-298-4111 Lobby Hours: 8:00 A.M. - 4:30 P.M. www.polk-county.net

SERVICE PERIOD	DAYS	METER NUMBER	PREVIOUS READ	CURRENT READ	USAGE (X1,000 gallons)
01/08/16-02/09/16	32	7177578H	10823	10823	0
01/08/16-02/09/16	32	7177578L	89211	92584	3373

SERVICE	CONSUMPTION (GALLONS)	CHARGE AMOUNT
2 Inch Base Water		\$2,084.41
Vater Usage	2,695,000	\$7,916.20
2 Inch Base Wastewater		\$7,768.89
Wastewater Usage	2,695,000	\$17,463.60
Public Service Tax	-119) to -2, x - 1190-2-2-2	\$1,000.06
AMOUNT FROM	OTHER PAST DUE	TOTAL AMOU

AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	PAST DUE BALANGE	CURRENT CHARGES
\$34,069.00	\$-34,069.00	\$1,703.45	\$1,703.45	\$36,233.16

TOTAL AMOUNT DUE \$37,936.61

Présidents day-monday. Polk was open but no mail Delivery

MONTHLY WATER 1500 USAGE



FEB JAN DEC NOV OCT SEP AUG JUL JUN MAY APR MAR

ACCOUNT NUMBER	283457-111204
SERVICE ADDRESS	42749 HWY 27 PH II
CYCLE-ROUTE	04-16
TOTAL CURRENT CHARGES	\$34,022.73
PAST DUE CHARGES	\$0.00
TOTAL AMOUNT DUE	\$34,022.73
BILL DATE	03/24/17
CURRENT CHARGES DUE	04/13/17



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Lobby Hours: 8:00 A.M. - 4:30 P.M. www.polk-county.net

SERVICE PERIOD	DAYS	METER NUMBER	PREVIOUS READ	CURRENT HEAD	USAGE (X1,000 gallons)
02/08/17-03/09/17	29	46502965	26250	29343	3093

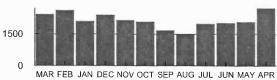
ш	OBMODE	GONGOWILLIAM (WWEEDING)	GRANGE AMOUNT
	12 Inch Base Water		\$2,084.41
	Water Usage	2,440,000	\$6,676.90
	PWRI/AWS Surcharge	2,440,000	\$732.00
	12 Inch Base Wastewater		\$7,768.89
	Wastewater Usage	2,440,000	CEIVE \$15,811.20
	Public Service Tax		Ψ0-10.00
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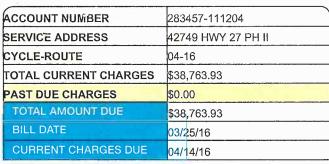
AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	PAST DUE BALANCE	CURRENT CHARGES
\$34,403.33	\$-34,403.33	\$0.00	\$0.00	\$34,022.73

TOTAL AMOUNT DUE \$34,022.73

Polk County Utilities has partnered with Paymentus, a leader in secure payment solutions. Paymentus can process credit/debit card and eCheck payments in increments of \$500 for a convenience fee of \$2.75 each.

MONTHLY WATER USAGE







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MAR 3 1 2016

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SERVICE PERIOD	DAYS	METER NUMBER	PREVIOUS READ	CURRENT READ	USAGE (X1,000 gallons)
02/09/16-03/11/16	31	7177578H	10823	10825	3568
02/09/16-03/11/16	31	7177578L	92584	96152	3570

SERVICE	CONSUMPTION (GALLONS)	CHARGE AMOUNT
12 Inch Base Water		\$2,084.41
Water Usage	2,909,000	\$8,956.24
12 Inch Base Wastewater		\$7,768.89
Wastewater Usage	2,909,000	\$18,850.32
Public Service Tax		\$1,104.07

AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	PAST DUE BALANCE	CURRENT CHARGES
\$37,936.61	\$-37,936.61	\$0.00	\$0.00	\$38,763.93

TOTAL AMOUNT DUE \$38,763.93

Cost Distribution

Mockingbird #1____ Regal Point #6___

Regal Ridge #2____ Golf #7___

Osprey Point #3____ Social Activities#8_

Eagles View #4 Miscellaneous #9

Partridge Pines#5_____ Deer Creek



AR FEB JAN DEC NOV OCT SEP AUG JUL JUN MAY AP

ACCOUNT NUMBER	283457-111204
SERVICE ADDRESS	42749 HWY 27 PH II
CYCLE-ROUTE	04-16
TOTAL CURRENT CHARGES	\$33,828.24
PAST DUE CHARGES	\$0.00
TOTAL AMOUNT DUE	\$33,828.24
BILL DATE	04/24/17
CURRENT CHARGES DUE	05/15/17



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Lobby Hours: 8:00 A.M. - 4:30 P.M. www.polk-county.net

LANCE OF AN ASSESSMENT	1.	yet bas belonger	applicate Graff		of the product of the graduates.
03/09/17-04/07/17	29	46502965	29343	32421	3078
'					
SERVICE		CONSUMPTIO	ON (GALLONS)	CHAR	GE AMOUNT
12 Inch Base Water		1		q	32 084 41

12 Inch Base Water		\$2,084.41
Water Usage	2,424,000	\$6,599.14
PWRI/AWS Surcharge	2,424,000	\$727.20
12 Inch Base Wastewater		\$7,768.89
Wastewater Usage	2,424,000	\$15,707.52
Public Service Tax		\$941.08

AMOUNT FROM PREVIOUS BILL	PAYMENTS		PAST DUE BALANCE	CURRENT CHARGES	TOTAL AMOUN
\$34,022.73	\$-34,022.73	\$0.00	\$0.00	\$33,828.24	\$33,828.24

Polk County Utilities has partnered with Paymentus, a leader in secure payment solutions. Paymentus can process credit/debit card and eCheck payments in increments of \$500 for a convenience fee of \$2.75 each.

Cost Distribution

Mockingbird #1____ Regal Point

#26 STAGOLF Regal Ridge

Osprey Point #3 504.59 Social Activities#8

Eagles Wie wat are #4 evil as Wisce Harace Long will be processed the next business day. #10 9,2783

Partridge Pines#5_3444_TDeer Creek

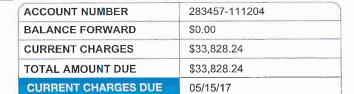
Polk County Utilities P.O. Box 2019

Bartow, FL 33831-2019

EMAILED 4/27/17

Check here and fill out change of address on reverse 28/1





APR MAR FEB JAN DEC NOV OCT SEP AUG JUL JUN MAY

Please Enter Payment Amount \$

MONTHLY WATER

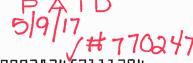
UŞAGE #6 813907

42749 HIGHWAY 27 DAVENPORT, FL 33837-6821

CREEK RV G & C CLUB INC DEER

REMIT PAYMENT TO:

POLK COUNTY UTILITIES PO Box 2019 BARTOW, FL 33831 - 2019



000000000 0003382824 0000283457111204

N. 10 NO 12 15			
ACCOUNT NUMBER	283457-111204		
SERVICE ADDRESS	42749 HWY 27 PH II		
CYCLE-ROUTE	04-16		
TOTAL CURRENT CHARGES	\$31,674.37		
PAST DUE CHARGES	\$0.00		
TOTAL AMOUNT DUE	\$31,674.37		
BILL DATE	04/25/16		
CURRENT CHARGES DUE	05/16/16		



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f	SERVICE PERIOD	DAYS	METER NUMBER	PREVIOUS READ	CURRENT READ	USAGE (X1,000 gallons)
	03/30/16-04/13/16 03/11/16-03/30/16 03/30/16-04/13/16	14 19 14	46502965 7177578H 7177578L	10825	1321 10830	1321 5 0
	03/11/16-03/30/16	19	7177578L	96152	98224	2072

		Deer Creek	_#10		
11.10	#4	Miscellaneous	s #9		
	21.0	Social Action	res#8		
		11011	.=		*
	#1	The second secon	п/3		
V(-1:-1:1				\$1,013.18	
	4	2,722,000		\$17,638.56	
				\$2,890.80	
		2,722,000		\$2,084.41 \$8,047.42	Market Control
ICE		CONSUMPTION (GA	LLONS)		JNT
		CONCUMENTAL IOA	LLONO	OULDOT AND	63.140f
	Mockingbird	Mockinghird #1	2,722,000 2,722,000 Cost Distribution Mockingbird #1 Regal Point Foll Point #2 Social Action View #4 Miscellaneous	2,722,000 2,722,000 Cost Distribution Mockingbird #1 Regal Point #6 Coll y Point #2 Social Actiones#8 Miscellaneous #9	\$2,084.41 \$2,722,000 \$2,890.80 \$2,890.80 \$1,7638.56 Cost Distribution \$1,013.18 Mockingbird #1 Regal Point #6 Coll V Point #2 Social Actiones#8 Miscellaneous #9

AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	PAST DUE BALANCE	CURRENT CHARGES	TOTAL AMO
\$38,763.93	\$-38,763.93	\$0.00	\$0.00	\$31,674.37	\$31,674.37

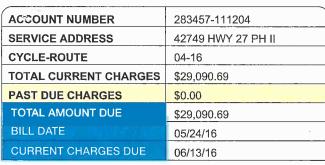
01#	Deer Creek	S#8	Partridge Pine
6#	Miscellaneous	† #	Eagles View
 8#S	Social Activitie	E#	Osprey Point
 	floĐ	7#	Regal Ridge
 9#	Regal Point	[#	Mockingbird
	uomnqimsi	COSCD	

MONTHLY WATER 1500 USAGE 0



APR MAR FEB JAN DEC NOV OCT SEP AUG JUL JUN MAY

31,674.37





1500

MONTHLY WATER

USAGE

MAY 2 6 2016 Florida's Crossroads of Opportunity **Utilities Customer Service**

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SERVICE PERIOD	DAYS	METER NUMBER	PREVIOUS READ	CURRENT READ	USAGE (X1,000 gallons)
04/13/16-05/13/16 04/13/16-04/14/16	30 1	46502965 7177578L	1321	3834	2513 0

SERVICE		CONSUMPTION (GALLONS		CHARGE AMOUN	The same of
2 Inch Base Water				\$2,084.41	
/ater Usage		2,074,000		\$5,081.30	
2 Inch Base Wastewater				\$7,768.89	
/astewater Usage		2,074,000		\$13,439.52	
ublic Service Tax				\$716.57	
	- 1 , 11				
	and the second s				
		Martin control of the control		The same of the sa	
AMOUNT FROM		OTHER	PAST DUE		

AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	PAST DUE BALANCE	CURRENT CHARGES
\$31,674.37	\$-31,674.37	\$0.00	\$0.00	\$29,090.69

DUE \$29,090.69

Cost Distribution

Mockingbird #1____ Regal Point #6 Regal Ridge #2 Golf #7 Osprey Point #3 _ Social Activities#8 Pagles View #4 Miscellaneous #9 Partridge Pines#5 Deer Creek

#10_29.090.69

MAY APR MAR FEB JAN DEC NOV OCT SEP AUG JUL JUN

ACCOUNT NUMBER	283457-111204
SERVICE ADDRESS	42749 HWY 27 PH II
CYCLE-ROUTE	04-16
TOTAL CURRENT CHARGES	\$27,237.28
PAST DUE CHARGES	\$1,786.23
TOTAL AMOUNT DUE	\$29,023.51
BILL DATE	06/26/17
CURRENT CHARGES DUE	07/17/17



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Fax 863-298-4111

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1	SERVICE PERIOD	DAY8	METER NUMBER	PREVIOUS READ	CURRENT READ	USAGE (X1,000 gallons)
	05/09/17-06/09/17	31	46502965	35592	37847	2255
1						
1]		

SERVICE	CONSUMPTION (GALLONS)	CHARGE AMOUNT
2 Inch Base Water	N	\$2,084.41
/ater Usage	1,807,000	\$4,427,15
WRI/AWS Surcharge	1,807,000	\$542.10
2 Inch Base Wastewater		\$7,768.89
/astewater Usage	1,807,000	\$11,709,36
ublic Service Tax	Transverse in the Independent	\$705.37
A AND TO SHAPE A SKIP		

AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	PAST DUE BALANCE	CURRENT CHARGES
\$35,724.57	\$-35,724.57	\$1,786.23	\$1,786.23	\$27,237.28

TOTAL AMOUNT DUE \$29,023.51

www.polk-county.net/NortheastWQ

As required, your annual WATER QUALITY REPORT is available to you on the internet. Please follow the direct link above to your online report.

Check here and return with your payment or call (863) 298-4100 to have a copy of your report mailed to your home. Thank You.

MONTHLY WATER USAGE



Payments that are received after 4:30 p.m., or paid at Amscot after 4 p.m., will be processed the next business day.



Polk County Utilities P.O. Box 2019 Bartow, FL 33831-2019

Check here and fill out change of address on reverse.

ACCOUNT NUMBER 283457-111204 **BALANCE FORWARD** \$1,786.23 **CURRENT CHARGES** \$27,237.28 TOTAL AMOUNT DUE \$29,023.51 **CURRENT CHARGES DUE** 07/17/17

Please Enter Payment Amount \$

REMIT PAYMENT TO:

POLK COUNTY UTILITIES PO Box 2019 BARTOW, FL 33831 - 2019



ACCOUNT NUMBER 283457-111204 42749 HWY 27 PH II SERVICE ADDRESS CYCLE-ROUTE 04-16 TOTAL CURRENT CHARGES \$28,742.04 DEER CREEK RV GOLF & COUNTRY PAST DUE CHARGES \$0.00 **TOTAL AMOUNT DUE** \$28,742.04 **BILL DATE** 06/24/16

07/14/16



Utilities Customer Service Mail Bills / Account Information

1011 Jim Keene Boulevard, SR 540 • Winter Haven, FL 33880 863-298-4100 / 800-301-6039 Fax 863-298-4111

Lobby Hours: 8:00 A.M. - 4:30 P.M. www.polk-county.net

SERVICE PERIOD	DAYS	METER NUMBER	PREVIOUS READ	CURRENT READ	USAGE (X1,000 gallons)
05/13/16-06/13/16	31	46502965	3834	6188	2354

CLUB INC.

7433779043

SERVICI		CONSUMPTION (GA	LLONS)	CHARGE AMOU	TML
12 Inch Base Water				\$2,084.41	
Water Usage		2,036,000		\$4,988.20	
12 Inch Base Wastewater		2.026.000		\$7,768.89 \$13,193.28	
Wastewater Usage Public Service Tax		2,036,000		\$707.26	
C C	ost Distributio	n		#1,21,000	
Mockingbird #1	fregal I	nt #6			
Fegal Ridge #2	Golf	#7	\tilde{I}		
Osprey Point #3	Social A	ctivities#8	28,742,04		
Eagles View #4	Miscella	neous #9	281		
Partridge Pines#5	Deer Cre	ek #10	PAST DUE		TOTAL AMOUN
PREVIOUS BILL	PAYMENTS	DEBITS/CREDITS	BALANCE	CURRENT CHARGES	DUE
\$29,090.69	\$-29,090.69	\$0.00	\$0.00	\$28,742.04	\$28,742.04

www.polk-county.net/NortheastWQ

CURRENT CHARGES DUE

As required, your annual WATER QUALITY REPORT is available to you on the internet. Please follow the direct link above to your online report.

Check here and return with your payment or call (863) 298-4100 to have a copy of your report mailed to your home. Thank You.

MONTHLY WATER **USAGE**



JUN MAY APR MAR FEB JAN DEC NOV OCT SEP AUG JUL

ACCOUNT NUMBER	283457-111204
SERVICE ADDRESS	42749 HWY 27 PH II
CYCLE-ROUTE	04-16
TOTAL CURRENT CHARGES	\$24,053.10
PAST DUE CHARGES	\$886.86
TOTAL AMOUNT DUE	\$24,939.96
BILL DATE	07/25/17
CURRENT CHARGES DUE	08/14/17



Florida's Crossroads of Opportu **Utilities Customer Service**

Mail Bills / Account Information

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Fax 863-298-4111

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			CARTILIBRATO	700.00	
ERVICE PERIOD	DAYS	METER NUMBER	PREVIOUS READ	CURRENT READ	USAGE (X1,000 gallons)
06/09/17-07/10/17	31	46502965	37847	39645	1798

SERVICE	CONSUMPTION (GALLONS)	CHARGE AMOUNT
2 Inch Base Water		\$2,084.41
Vater Usage	1,472,000	\$3,606.40
WRI/AWS Surcharge	1,472,000	\$441.60
2 Inch Base Wastewater		\$7,768.89
Vastewater Usage	1,472,000	\$9,538.56
Public Service Tax		\$613.24

AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	PAST DUE BALANCE	CURRENT CHARGES
\$29,023.51	\$-27,237.28	\$-899.37	\$886.86	\$24,053.10

TOTAL AMOUNT DUE \$24,939.96

MONTHLY WATER USAGE



Payments that are received after 4:30 p.m., or paid at Amscot after 4 p.m., will be processed the next business day.



Polk County Utilities P.O. Box 2019 Bartow, FL 33831-2019

AL PROVIL

☐ Check here and fill out change of address on reverse.

ACCOUNT NUMBER 283457-111204 **BALANCE FORWARD** \$886.86 **CURRENT CHARGES** \$24,053.10 TOTAL AMOUNT DUE \$24,939.96 **CURRENT CHARGES DUE** 08/14/17

W Place Enter Payment Amount \$

REMIT PAYMENT TO:

POLK COUNTY UTILITIES PO Box 2019 BARTOW, FL 33831



ACCOUNT NUMBER 283457-111204

SERVICE ADDRESS 42749 HWY 27 PH II

CYCLE-ROUTE 04-16

TOTAL CURRENT CHARGES \$28,338.34

PAST DUE CHARGES \$0.00

TOTAL AMOUNT DUE \$28,338.34

BILL DATE 07/25/16

08/15/16

CURRENT CHARGES DUE



Florida's Crossroads of Opportunity

Utilities Customer Service
Mail Bills / Account Information

1011 Jim Keene Boulevard, SR 540 • Winter Haven, FL 33880 863-298-4100 / 800-301-6039 Fax 863-298-4111

Lobby Hours: 8:00 A.M. - 4:30 P.M. www.polk-county.net

SERVICE PERIOD	DAYS	METER NUMBER	PREVIOUS READ	CURRENT READ	USAGE (X1,000 gallons)
06/13/16-07/15/16	32	46502965	6188	8489	2301

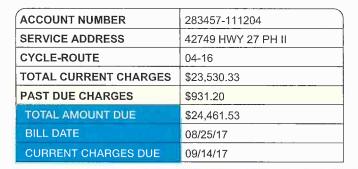
SERVICE	CONSUMPTION (GALLONS)	CHARGE AMOUNT	
2 Inch Base Water		\$2,084.41	
Vater Usage	1,992,000	\$4,880.40	
2 Inch Base Wastewater		\$7,768.89	
Vastewater Usage	1,992,000	\$12,908.16	
ublic Service Tax	M 30	\$696.48	
.4			

AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	PAST DUE BALANCE	CURRENT CHARGES
\$28,742.04	\$-28,742.04	\$0.00	\$0.00	\$28,338.34

TOTAL AMOUNT DUE \$28,338.34

MONTHLY WATER 1500 USAGE





DAYS

29

SERVICE PERIOD

07/10/17-08/08/17



Florida's Crossroads of Opportunit Utilities Customer Service BY

Mail Bills / Account Information 1011 Jim Keene Boulevard, SR 540 • Winter Haven, FL 33880

863-298-4100 / 800-301-6039 Fax 863-298-4111 Lobby Hours: 8:00 A.M. - 4:30 P.M.

METER NUMBER

46502965



39645



Call before you dig.	www.poik-cou	nty.net
D	CURRENT READ	USAGE (X1,000 gallons)
	41370	1725

SERVICE	CONSUMPTION (GALLONS)	CHARGE AMOUNT
2 Inch Base Water		\$2,084.41
/ater Usage	1,417,000	\$3,471.65
WRI/AWS Surcharge	1,417,000	\$42 5.10
2 Inch Base Wastewater		\$7,768.89
/astewater Usage	1,417,000	\$9,1 82.16
ublic Service Tax		\$59 8.12
The later than the second		
DOMESTIC PORTER OF THE PROPERTY OF THE PROPERT		

AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	PAST DUE BALANCE	CURRENT CHARGES
\$24,939.96	\$-24,053.10	\$44.34	\$931.20	\$23,530.33

TOTAL AMOUNT DUE \$24,461.53

Effective 8/2/17, Polk County returned to Year Round Water Conservation Irrigation Schedule. The schedule is as follows: Odd numbered Homes/Businesses - Wednesday and/or Saturday Even numbered Homes/Businesses - Thursday and/or Sunday

Common Areas - Tuesday and/or Friday

More information can be located at polk-county.net or watermatters.org

MONTHLY WATER **USAGE**



Payments that are received after 4:30 p.m., or paid at Amscot after 4 p.m., will be processed the next business day.



Polk County Utilities P.O. Box 2019 Bartow, FL 33831-2019

Bank Draft

ACCOUNT NUMBER	283457-111204	
BALANCE FORWARD	\$931.20	
CURRENT CHARGES	\$23,530.33	
TOTAL AMOUNT DUE	\$24,461.53	
CURRENT CHARGES DUE	09/14/17	

Check here and fill out change of address on reverse.

Please Enter Payment Amount \$ | Bank Draft-Do Not Pay

REMIT PAYMENT TO:

POLK COUNTY UTILITIES PO Box 2019 BARTOW, FL 33831 - 2019

ACCOUNT NUMBER	283457-111204
SERVICE ADDRESS	42749 HWY 27 PH II
CYCLE-ROUTE	04-16
TOTAL CURRENT CHARGES	\$23,824.24
PAST DUE CHARGES	\$0.00
TOTAL AMOUNT DUE	\$23.824.24
BILL DATE	08/25/16
CURRENT CHARGES DUE	09/1 <mark>4/16</mark>



Utilities Customer Service Mail Bills / Account Information

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Fax 863-298-4111

Lobby Hours: 8:00 A.M. - 4:30 P.M. www.polk-county.net

					•
SERVICE PERIOD	DAYS	METER NUMBER	PREVIOUS READ	CURRENT READ	USAGE (X1,000 gallons)
07/15/16-08/11/16	27	46502965	8489	10249	1760

SERVICE	CONSUMPTION (GALLONS)	CHARGE AMOUNT
2 Inch Base Water		\$2,084.41
Vater Usage	1,500,000	\$3,675.00
2 Inch Base Wastewater		\$7,768.89
Vastewater Usage	1,500,000	\$9,720.00
ublic Service Tax		\$575.94
	- And	

AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	PAST DUE BALANCE	CURRENT CHARGES
\$28,338.34	\$-28,338.34	\$0.00	\$0.00	\$23,824.24

TOTAL AMOUNT DUE \$23.824.24

Cost Distribution

Mockingbird #1_ Regal Point #6 Regal Ridge #2 Golf #7 Osprey Point #3_ Social Activities#8 Eagles View #4 Miscellaneous #9 Partridge Pines#5 #1023,804-24 Deer Creek

1500 MONTHLY WATER USAGE



Al 1 (2)	
ACCOUNT NUMBER	283457-111204
SERVICE ADDRESS	42749 HWY 27 PH II
CYCLE-ROUTE	04-16
TOTAL CURRENT CHARGES	\$25,484.92
PAST DUE CHARGES	\$1,191.21
TOTAL AMOUNT DUE	\$26,676.13
BILL DATE	09/23/16
CURRENT CHARGES DUE	10/13/16



Florida's Crossroads of Opportu **Utilities Customer Service**

Mail Bills / Account Information

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Fax 863-298-4111

Lobby Hours: 8:00 A.M. - 4:30 P.M. www.polk-county.net

SERVICE PERIOD	DAYS	METER NUMBER	PREVIOUS READ	CURRENT READ	USAGE (X1,000 gallons)
08/11/1 6-09/09/16	29	46502965	10249	12244	1995

SERVICE	CONSUMPTION (GALLONS)	CHARGE AMOUNT
2 Inch Base Water		\$2,084.41
Vater Usage	1,681,000	\$4,118.45
2 Inch Base Wastewater		\$7,768.89
Vastewater Usage	1,681,000	\$10,892.88
Public Service Tax		\$620.29
Water and the state of the stat		

AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	PAST DUE BALANCE	CURRENT CHARGES	TOTAL AMO
\$23,824.24	Cost Distribution	\$1,191.21	\$1,191.21	\$25,484.92	\$26,676.1

TNUC .13

Mockingbird #1____ Regal Point

Regal Ridge #2_ Golf

Osprey Point #3_ Social Activities#8

Miscellaneous #9 Eagles View #4__

Partridge Pines#5_ Deer Creek MONTHLY WATER 1500 USAGE



\$ <u>5 </u>	
ACCOUNT NUMBER	283457-111204
SERVICE ADDRESS	42749 HWY 27 PH II
CYCLE-ROUTE	04-16
TOTAL CURRENT CHARGES	\$29,908.18
PAST DUE CHARGES	\$0.00
TOTAL AMOUNT DUE	\$29,908.18
BILL DATE	10/25/16
CURRENT CHARGES DUE	11/14/16





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Fax 863-298-4111 Lobby Hours: 8:00 A.M. - 4:30 P.M. www.polk-county.net



SERVICE PERIOD	DAYS	METER NUMBER	PREVIOUS READ	CURRENT READ	USAGE (X1,000 gallons)
09/09/16-10/10/16	31	46502965	12244	14693	2449

SERVICE	CONSUMPTION (GALLONS)	CHARGE AWOUN
12 Inch Base Water		\$2,084.41
Water Usage	2,088,000	\$5,115.60
PWRI/AWS Surcharge	2,088,000	\$626.40
12 Inch Base Wastewater	Secretary of the second	\$7,768.89
Wastewater Usage	2,088,000	\$13,530.24
Public Service Tax		\$782.64
and the state of t		

AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	PAST DUE BALANCE	CURRENT CHARGES
\$26,676.13	\$-26,676.13	\$0.00	\$0.00	\$29,908.18

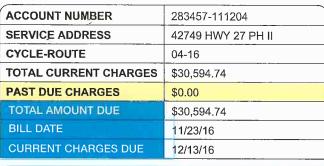
TOTAL AMOUNT DUE \$29,908.18

Cost Distribution

Mockingbird #1_ ____ Regal Point #6 Golf #7 Regal Ridge #2 Social Activities#8 Osprey Point #3_ Eagles View #4_ Miscellaneous #9 Partridge Pines#5

#1029,908.18 Deer Creek

MONTHLY WATER 1500 USAGE





Florida's Crossroads of Opportuni WOV 2 5 2016
Utilities Customer Service

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863-298-4100 / 800-301-6039 Fax 863-298-4111



SERVICE PERIOD	DAVS	METER MUMBER	PREVIOUS READ	GURRENT READ	UEAGE (K1,000 gallons
10/10/16-11/09/16	30	46502965	14693	17315	2622

SERVICE	CONSUMPTION (GALLONS)	CHARGE AMOUNT
12 Inch Base Water		\$2,084.41
Water Usage	2,158,000	\$5,306.38
PWRI/AWS Surcharge	2,158,000	\$647.40
12 Inch Base Wastewater		\$7,768.89
Wastewater Usage	2,158,000	\$13,983.84
Public Service Tax	The York The State of the State	\$803.82
The state of the s	A TO THE PARTY OF	
A A B C C C C C C C C C C C C C C C C C	The state of the s	
		PER DIRECTOR DE LA VILLE DE LA

AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	PAST DUE BALANCE	CURRENT CHARGES
\$29,908.18	\$-29,908.18	\$0.00	\$0.00	\$30,594.74

TOTAL AMOUNT DUE \$30,594.74

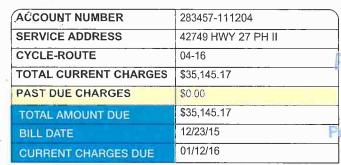
Cost Distribution

Mockingbird #1 Regal Point #6 Regal Ridge #2 Golf #7 Social Activities#8 Eagles View #4 Miscellaneous #9 Partridge Pines#5 Deer Creek #10

MONTHLY WATER 1500 USAGE



NOV OCT SEP AUG JUL JUN MAY APR MAR FEB JAN DEC







Utilities Customer Service Mail Bills / Account Information

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Fax 863-298-4111

Lobby Hours: 8:00 A.M. - 4:30 P.M. www.polk-county.net

SERVICE PERIOD	DAYS	METER NUMBER	PREVIOUS READ	CURRENT READ	USAGE (X1,000 gallons
11/06/15-12/08/15	32	7177578H	10823	10823	0
11/06/15-12/08/15	32	7177578L	83039	86140	3101

SERVICE	CONSUMPTION (GALLONS)	CHARGE AMOUNT
12 Inch Base Water		\$2,084.41
Water Usage	2,603,000	\$7,469.08
12 Inch Base Wastewater		\$7,768.89
Wastewater Usage	2,603,000	\$16,867.44
Public Service Tax		\$955.35

AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	PAST DUE BALANCE	CURRENT CHARGES
\$29,081.52	\$-29,081.52	\$0.00	\$0.00	\$35,145.17

TOTAL AMOUNT DUE \$35,145.17

The popular 2016 Polk County Utilities Water Conservation Calendar is available. Please call (863) 298 1300 or visit our office. Mockingbird #1____ Regal Point #6 Regal Ridge #2 Golf #7 Social Activities#8 Osprey Point #3

1500 MONTHLY WATER USAGE

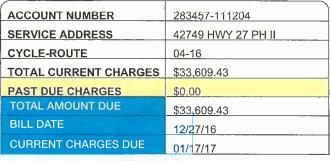
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DEC NOV OCT SEP AUG JUL JUN MAY APR MAR FEB JAN

Eagles View #4_ Miscellaneous #9

Partridge Pines#5 Deer Creek #1035, 145.17





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Fax 863-298-4111 Lobby Hours: 8:00 A.M. - 4:30 P.M. www.polk-county.net



SERVICE PERIOD	DAYS	METER NUMBER	PREVIOUS READ	CURRENT READ	USAGE (X1,000 gallons)
11/09/16-12/08/16	29	46502965	17315	20266	2951
		ENI	TEDED		
			LITED		

	Same V I lame V Carre Sur	
SERVICE	CONSUMPTION (GALLONS)	CHARGE AMOUNT
12 Inch Base Water	700	\$2,084.41
Water Usage	2,406,000	\$6,511.66
PWRI/AWS Surcharge	2,406,000	\$721.80
12 Inch Base Wastewater		\$7,768.89
Wastewater Usage	2,406,000	\$15,590.88
Public Service Tax	。	\$931.79
	Report of the second of the se	
	The state of the s	

AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	PAST DUE BALANCE	CURRENT CHARGES	TOTAL AMOU
\$30,594.74	\$-30,594.74	\$0.00	\$0.00	\$33,609.43	\$33,609.43

Cost Distribution

Mockingbird #1 Regal Point Regal Ridge #2597240 Golf Osprey Point #35038 Social Activities#8 Eagles View #4<u>4/37</u>3²Miscellaneous #9 Partridge Pines#53922 Deer Creek

1500 MONTHLY WATER USAGE



Payments that are received after 4:30 p.m., or paid at Amscot after 4 p.m., will be processed the next business day.



Polk County Utilities P.O. Box 2019 Bartow, FL 33831-2019

Check here and fill out change of address on reverse.

ACCOUNT NUMBER	283457-111204
BALANCE FORWARD	\$0.00
CURRENT CHARGES	\$33,609.43
TOTAL AMOUNT DUE	\$33,609.43
CURRENT CHARGES DUE	01/17/17

Please Enter Payment Amount \$

REMIT PAYMENT TO:

POLK COUNTY UTILITIES PO Box 2019 BARTOW, FL 33831 - 2019





283457-111204		
42749 HWY 27 PH II		
04-16		
\$34,069.00		
\$0.00		
\$34,069.00		
01/25/16		
02/15/16		





Florida's Crossroads of Opportunity
Utilities Customer Service

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12/08/15-01/08/16 31 7177578H 10823 10823 0	SERVICE PERIOD	DAYS	METER NUMBER	PREVIOUS READ	CURRENT READ	USAGE (X1,000 gallons)
12/08/15-01/08/16	12/08/15-01/08/16	31	7177578H	10823	10823	0
	12/08/15-01/08/16	31	7177578L	86140	89211	3071

SERVICE	CONSUMPTION (GALLONS)	CHARGE AMOUNT
12 Inch Base Water		\$2,084.41
Water Usage	2,512,000	\$7,026.82
12 Inch Base Wastewater		\$7,768.89
Wastewater Usage	2,512,000	\$16,277.76
Public Service Tax		\$911.12
1 dbile delvice Tax		

AMOUNT FROM PREVIOUS BILL	PAYMENTS	OTHER DEBITS/CREDITS	PAST DUE BALANCE	CURRENT CHARGES
\$35,145.17	\$-35,145.17	\$0.00	\$0.00	\$34,069.00

TOTAL AMOUNT DUE \$34,069.00

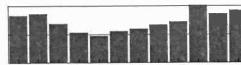
Cost Distribution

Mockingbird #1_____ Regal Point #6____ Regal Ridge #2____ Golf #7____ Osprey Point #3____ Social Activities#8____ Eagles View #4____ Miscellaneous #9_____

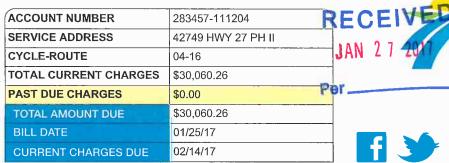
Partridge Pines#5_____ Deer Creek

#103406900

MONTHLY WATER 1500 USAGE



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Florida's Crossroads of Opportunity

Utilities Customer Service
Mail Bills / Account Information

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Fax 863-298-4111

Lobby Hours: 8:00 A.M. - 4:30 P.M. www.polk-county.net

SERVICE PERIOD	DAYS	METER NUMBER	PREVIOUS READ	CURRENT READ	USAGE (X1,000 gallons)
12/08/16-01/06/17	29	46502965	20266	PROVED	2655

SERVICE	CONSUMPTION (GALLONS)	CHARGE AMOUNT				
12 Inch Base Water		\$2,084.41				
Water Usage	2,104,000	\$5,154.80				
PWRI/AWS Surcharge	2,104,000	\$631.20				
12 Inch Base Wastewater		\$7,768.89				
Wastewater Usage	2,104,000	\$13,633.92				
Public Service Tax		\$787.04				
	The state of the s					
	form of the supplemental and t					
THE RESIDENCE OF THE PARTY OF T	THE RESERVE OF THE PERSON OF T	CHARLES AND THE CONTRACTOR OF				

AMOUNT FROM PREVIOUS BILL	PAYMENTS			CURRENT CHARGES	
\$33,609.43	\$-33,609.43	\$0.00	\$0.00	\$30,060.26	

TOTAL AMOUNT DUE \$30,060.26

Cost Distribution

ckingbird #1____ Regal Point #6_7,509.05

gal Ridge #2___ Golf #7___

prey Point #34506 Social Activities#8___

ples View #43700 Miscellaneous #9____

artric rines#53608 Deer Creek #10 10,836.73

MONTHLY WATER 1500 USAGE

JAN DEC NOV OCT SEP AUG JUL JUN MAY APR MAR EFB

Payments that are received after 4:30 p.m., or paid at Amscot after 4 p.m., will be processed the next business day.



Polk County Utilities P.O. Box 2019 Bartow, FL 33831-2019

PAID 2/3/17

☐ Check here and fill out change of address on reverse.

CK \$770055

ACCOUNT NUMBER	283457-111204		
BALANCE FORWARD	\$0.00		
CURRENT CHARGES	\$30,060.26		
TOTAL AMOUNT DUE	\$30,060.26		
CURRENT CHARGES DUE	02/14/17		

Please Enter Payment Amount \$

30,060,26

REMIT PAYMENT TO:

POLK COUNTY UTILITIES PO Box 2019 BARTOW, FL 33831 - 2019



DOCKET NO. 160248-WS ATTACHMENT B

DEER CREEK RV GOLF & COUNTRY CLUB (DCC) DEVELOPMENT OF INITIAL RATES FOR METERED SERVICE

14.44095039

POLK COUNTY WATER RATES			DEER CREE	DEER CREEK INDIVIDUAL METER WATER RATES			
			WA				
			Based on 907 Billing Units				
Water - 12" Meter	Wa	iter - 12" Meter	Water-All Meters				
Base Rate	\$	2,084.41	Base Rate	\$	2.64		
0-2150 kgals	\$	2.45	0-3 kgals	\$	3.48	per 1,000 gal	
2151-4300 kgals	\$	4.86	over 3 kgals	\$	6.52	per 1,000 gal	
PWRI/AWS	\$	0.30					
			Incorporated into al	ove r	ates		
Polk CountyTax		10%	Incorporated into al	ove r	ates		
PSC Reg. Assmt. Fee		4.5%	Incorporated into al	ove r	ates		
			Initial gallonage charge increased by 10% for UA				
Rates eff. 10/1/17			Water-All Meters				
Base Rate	\$	2,136.52	Base Rate		2.71		
0-2150 kgals	\$	2,130.52	0-3 kgals		3.55	per 1,000 gal	
2151-4300 kgals	\$	4.98	over 3 kgals			per 1,000 gal	
PWRI/AWS	\$	0.30	Incorporated into al			per 1,000 gal	
Polk CountyTax	Ψ	10%	Incorporated into al			per 1,000 gar	
r one county rux		10/0	meorporated into ac	50101	utes		
Rates eff. 10/1/18			Water-All Meters				
Base Rate	\$	2,189.93	Base Rate	\$	2.78		
0-2150 kgals	\$	2.57	0-3 kgals	\$	3.63	per 1,000 gal	
2151-4300 kgals	\$	5.11	over 3 kgals	\$	6.84	per 1,000 gal	
PWRI/AWS	\$	0.30	Incorporated into al	ove r	ates	per 1,000 gal	
Polk CountyTax		10%	Incorporated into above rates				
Rates eff. 10/1/19			Water-All Meters				
Base Rate	\$	2,244.68	Base Rate	\$	2.84		
0-2150 kgals	\$	2.64	0-3 kgals	\$		per 1,000 gal	
2151-4300 kgals	\$	5.23	over 3 kgals	\$	7.00	per 1,000 gal	
2131-4300 Rgais	Ψ	3.23	Over 5 kgais	Ψ	7.00	PCI 1,000 gai	

POLK COUNTY WASTEWATER RATES

WW - 12" Meter
Base Rate \$ 7,768.89
All gals \$ 6.48

DEER CREEK INDIVIDUAL METER WASTEWATER RATES

Based on 907 Billing Units

Water-All Meters

Base Rate \$ 8.95 All gals \$ 6.77 per 1,000 gal

Incorporated into above rates

PSC Reg. Assmt. Fee 4.5%

EXPLANATION OF RATE DEVELOPMENT

DCC is billed for all water by Polk County based on its published Commercial rate for a 12" meter.

Wastewater is billed based on the same gallons based on the County's published commercial rate for a 12" meter.

Added to the water rate is a \$0.30 per 1,000 gallons surcharge for water resource & alternative water supply.

In addition, there is a 10% tax on water charges. The surcharge and tax do not apply to the wastewater charges.

The County has passed a resolution authorizing a 2.5% annual index increase in the water rates, exclusive of the surcharge.

These increase will be effective on October 1 of the years 2017-2019.

There are 907 billing units in Deer Creek. Each individually metered customer is billed the prorated Polk County base charge plus the Polk County gallonage charge based on metered gallons. The rate block of 0-3 kgals reflects the prorated Polk County block [2,150 kgls/907 = 3 kgals. Although there are 4 rate blocks in the Polk County rate, Deer Creek never uses water in excess of the second block.

The summation of DCC's individual meter readings does not total the gallonage billed by the County because those meter readings do not include an allowance for Unaccounted for Water. As the PSC allows 10% Unaccounted for Water as a reasonable amount, the <u>initial</u> gallonage charge for water has been increased by 10% to recognize this.

In addition, the developed rates include a multiplier to recover the 4.5% Regulatory Assessment Fee for which the utility will be responsible.