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MARTIN FRIEDMAN

407-310-2077 mfriedman@deanmead.com

January 28, 2019 VIA E-FILING

Adam Teitzman, Commission Clerk Office of Commission Clerk Florida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, FL 32399

RE: Docket No. 20150269-WS; Application for limited proceeding water rate increase in

Marion, Pasco, and Seminole Counties, by Utilities, Inc. of Florida.

Our Matter No. 070272

Dear Mr. Teitzman:

Pursuant to PSC Order No. PSC-2016-0505-PAA-WS, attached are the **revised** results of the sampling that was required to be done every six months after the interconnection with Pasco County. **The results previously filed omitted the results of pH samples**. As one can see, the values of all secondary drinking water parameters at all six locations were below the maximum contaminant levels, with the exception of minor exceedances of iron.

Should you or Staff have any questions regarding this filing, please do not hesitate to give me a call.

Very truly yours,

/s/ Martin S. Friedman
MARTIN S. FRIEDMAN
For the Firm

MSF/

cc: John Hoy (via email)

Patrick Flynn (via email)

PUBLIC WATER SYSTEM INFORMATION	(to be completed by sampler – Please type or print legibly)
System Name:	PWS I.D.#:
System Type (check one): Community	Nontransient Noncommunity Transient Noncommunity
Address:	
City:	ZIP Code:
Phone #: F	Fax #: E-Mail Address:
SAMPLE INFORMATION (to be completed by	sampler)
Sample Number: T1817732001	Sample Date: 10/16/2018 Sample Time: 08:50 AM PM (circle one)
	ish Elm Location Code (if known):
	sults for trihalomethanes and haloacetic acids): mg/L Field pH:
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 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:
Ave Residence Time	
Near First Customer	*See 62-550.500(6) for requirements and restrictions. And 62-550.512(3) for nitrate or nitrite exceedances. **See 62-550.550(4) for requirements and attach a results page for each site.
	SAMPLER CERTIFICATION
Ī.	, do HEREBY CERTIFY
(Print Name)	(Print Title)
that the above public water system as	nd sample collection information is complete and correct.
Signature:	
Certified Operator #:	Phone #: Sampler's Fax #:
Sampler's E-Mail:	
Jampici & L-Iviali.	

LABORATORY CERTIFICATION INFORMATION (to be completed by lab – Please type	e or print legibly)
Lab Name: Advanced Environmental Laboratories, Inc Florida DOH Certification	E84589 Certification Expiration Date: 06/30/2019
	ATTACH CURRENT DOH ANALYTE *
Address: 9610 Princess Palm Ave Tampa, FL 33619 Payments: P.O. Box	Phone #: _(813)630-9616
Were any analyses subcontracted? $\begin{tabular}{ l l l l l l l l l l l l l l l l l l l$	ertification numbers: E84589 E82001
	ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED *
ANALYSIS INFORMATION (to be completed by lab) Date Sample(s) Receive	red: 10/16/2018
PWS ID (From Page 1): 6511423 Sample Number (From Page 1): <u>1</u>	1817732001 Lab Assigned Report # or Job <u>T1817732</u>
Group(s) Analyzed & Results attached for compliance with Chapter 62-550, F.A.C.	(Check all that apply):
Inorganics Synthetic Organics Volatile Organics Disinfection	on Byproducts Radionuclides Secondaries
All Except Asbestos All 30 All 21 Trihal	omethanes Single Sample All 14
X Partial All Except Dioxin Partial Haloa	cetic Acids
☐ Nitrate ☐ Partial ☐ Chlor	
☐ Nitrite ☐ Dioxin Only ☐ Brom	ate
Asbestos Only	
LAB CERTIFI	CATION
I, Joseph J. Vondrick , Project M	anager, do HEREBY CERTIFY
(Print Name)	(Print Title)
that all attached analytical data are correct and unless noted meet all requirements of	f the National Environmental Laboratory Accreditation Conference
Signature: Date	e: <u>10/31/2018</u>
* Failure to provide a valid and current Florida DOH lab certification number and a current An report, possible enforcement against the public water system for failure to sample, and may	alyte Sheet for the attached analysis results will result in rejection of the
** Please provide radiological sample dates & locations for each quarter.	result in notification of the DOH Bureau of Laboratory Services.
** Please provide radiological sample dates & locations for each quarter.	result in notification of the DOH Bureau of Laboratory Services.
** Please provide radiological sample dates & locations for each quarter. CONFIRMATION & NOTIFICATION IS REQUIRED WITHIN 24	result in notification of the DOH Bureau of Laboratory Services.
** Please provide radiological sample dates & locations for each quarter. CONFIRMATION & NOTIFICATION IS REQUIRED WITHIN 24	result in notification of the DOH Bureau of Laboratory Services. HRS FOR NITRATE OR NITRITE MCL EXCEEDANCES
** Please provide radiological sample dates & locations for each quarter. CONFIRMATION & NOTIFICATION IS REQUIRED WITHIN 24 NON-DETECTS ARE TO BE REPORTED AS THE MDL WITH A "U" QUALIFIER. (I COMPLIANCE DETERMINATION (to be completed by DEP or DOH – attach notes as necessary)	result in notification of the DOH Bureau of Laboratory Services. HRS FOR NITRATE OR NITRITE MCL EXCEEDANCES Non-detects reported as "BDL" or with a "<" are not acceptable.)
** Please provide radiological sample dates & locations for each quarter. CONFIRMATION & NOTIFICATION IS REQUIRED WITHIN 24 NON-DETECTS ARE TO BE REPORTED AS THE MDL WITH A "U" QUALIFIER. (I COMPLIANCE DETERMINATION (to be completed by DEP or DOH – attach notes as necessary and the complete of the	result in notification of the DOH Bureau of Laboratory Services. HRS FOR NITRATE OR NITRITE MCL EXCEEDANCES Non-detects reported as "BDL" or with a "<" are not acceptable.)

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Report Number / Job ID: <u>T1817732001</u>

PWS ID (From Page 1): _____

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification #
1002	Aluminum	0.2	mg/L	0.041	1	EPA 200.7	0.025	10/24/2018	23:00	E84589
1017	Chloride	250	mg/L	22		EPA 300.0	2.0	10/25/2018	20:54	E84589
1022	Copper	1	mg/L	0.00041	I	EPA 200.8	0.00035	10/25/2018	14:49	E82574
1025	Fluoride	2.0	mg/L	0.20	U	EPA 300.0	0.20	10/25/2018	20:54	E84589
1028	Iron	0.3	mg/L	0.055	1	EPA 200.7	0.021	10/24/2018	23:00	E84589
1032	Manganese	0.05	mg/L	0.0025	L	EPA 200.8	0.00055	10/25/2018	14:49	E82574
1050	Silver	0.1	mg/L	0.000068	U	EPA 200.8	0.000068	10/25/2018	14:49	E82574
1055	Sulfate	250	mg/L	78		EPA 300.0	2.0	10/25/2018	20:54	E84589
1095	Zinc	5	mg/L	0.0089	1	EPA 200.7	0.0074	10/24/2018	23:00	E84589
1905	Color	15	PCU	8.8		SM 2120 B	2.7	10/17/2018	07:04	E84589
1920	Odor	3	TON @ 40°C	1.0	U	SM 2150 B	1.0	10/16/2018	16:15	E84589
1925	pH	6.5 - 8.5	SU	7.3	Q	SM 4500H+B		10/17/2018	07:04	E84589
1930	Total Dissolved Solids	500	mg/L	290		SM 2540 C	10	10/18/2018	09:26	E84589
2905	Foaming Agents	0.5	mg/L	0.040	U	SM 5540 C	0.040	10/17/2018	08:25	E82001

Reporting Format 62-550.730 Effective January 1995, Revised February 2010

PUBLIC WATER SYSTEM INFORMATION (to be comp	npleted by sampler – Please type or print legibly)
System Name:	PWS I.D.#:
System Type (check one): Community Non	ntransient Noncommunity
Address:	
City:	ZIP Code:
Phone #: Fax #:	E-Mail Address:
SAMPLE INFORMATION (to be completed by sampler)	
Sample Number: T1817732002	Sample Date: 10/16/2018
Sample Location (be specific): 2 - 11704 Rose Tree	Location Code (if known)
	nalomethanes and haloacetic acids): mg/L Field pH:
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 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:
Ave Residence Time	
	te 62-550.500(6) for requirements and restrictions. **See 62-550.550(4) for requirements and attach a results page for each site.
	SAMPLER CERTIFICATION
I,	, do HEREBY CERTIFY
(Print Name)	(Print Title)
that the above public water system and samp	ple collection information is complete and correct.
Signature:	Date:
Certified Operator #:	Phone #: Sampler's Fax #:
Sampler's E-Mail:	

LABORATORY CERTIFICATION INFORMATION (to	be completed by lab - Please type o	r print legibly)	
Lab Name: Advanced Environmental Laboratories, Inc.	Florida DOH Certification #:	E84589	Certification Expiration Date: 06/30/2019
		ATTACH CURRENT	DOH ANALYTE *
Address: 9610 Princess Palm Ave Tampa, FL 33619	Payments: P.O. Box	Phone #: _(813)63	30-9616
Were any analyses subcontracted? X Yes No	If yes, please provide DOH certif		E82574 E82001 SHEET FOR EACH SUBCONTRACTED *
ANALYSIS INFORMATION (to be completed by lab)	Date Sample(s) Received	10/16/2018	
PWS ID (From Page 1):6511423	Sample Number (From Page 1): T18	17732002 L	ab Assigned Report # or Job T1817732
Group(s) Analyzed & Results attached for compliance	with Chapter 62-550, F.A.C. (Ch	eck all that apply):	
Inorganics All Except Asbestos All Except Dioxin Nitrate Nitrite Asbestos Only Synthetic Organics All 30 All Except Dioxin Partial Dioxin Only	Volatile Organics All 21 Partial Disinfection Trihalom Haloacet Chlorite Bromate	ethanes	Radionuclides Secondaries ☐ Single Sample ☐ Qtrly Composite** ☐ Partial
	LAB CERTIFICA	TION	
I, Joseph J. Vondrick	, Project Man	ager	, do HEREBY CERTIFY
(Print Name)		(Print Title)	
that all attached analytical data are correct and unless	s noted meet all requirements of th	e National Environm	nental Laboratory Accreditation Conference
Signature: July Vondnik	Date:	10/31/2018	
 Failure to provide a valid and current Florida DOH lab ce report, possible enforcement against the public water sys ** Please provide radiological sample dates & locations for 	stem for failure to sample, and may res	e Sheet for the attache ult in notification of the	ed analysis results will result in rejection of the DOH Bureau of Laboratory Services.
CONFIRMATION & NOTIFIC	ATION IS REQUIRED WITHIN 24 HR	S FOR NITRATE OR I	NITRITE MCL EXCEEDANCES
NON-DETECTS ARE TO BE REPORTED AS THE MD	DL WITH A "U" QUALIFIER. (Nor	-detects reported as	"BDL" or with a "<" are not acceptable.)
COMPLIANCE DETERMINATION (to be completed by I	DEP or DOH attach notes as necessary)		
Sample Collection & Analysis Satisfactory: Yes		eport Requested:	Yes No (circle or highlight group(s) above)
Person Notified:	Date Notified:	DEP/DOH	Reviewing Official:

SECONDA	RY CON	TAMINANTS
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62-550.320

Report Number / Job ID: T1817732002

PWS ID (From Page 1):

Contam	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification #
1002	Aluminum	0.2	mg/L	0.032	1	EPA 200.7	0.025	10/24/2018	23:05	E84589
1017	Chloride	250	mg/L	22		EPA 300.0	2.0	10/25/2018	21:10	E84589
1022	Copper	1	mg/L	0.00065	1	EPA 200.8	0.00035	10/25/2018	14:53	E82574
1025	Fluoride	2.0	mg/L	0.20	U	EPA 300.0	0.20	10/25/2018	21:10	E84589
1028	Iron	0.3	mg/L	0.094	1	EPA 200.7	0.021	10/24/2018	23:05	E84589
1032	Manganese	0.05	mg/L	0.0037	1	EPA 200.8	0.00055	10/25/2018	14:53	E82574
1050	Silver	0.1	mg/L	0.000068	U	EPA 200.8	0.000068	10/25/2018	14:53	E82574
1055	Sulfate	250	mg/L	75		EPA 300.0	2.0	10/25/2018	21:10	E84589
1095	Zinc	5	mg/L	0.0085	1	EPA 200.7	0.0074	10/24/2018	23:05	E84589
1905	Color	15	PCU	7.3		SM 2120 B	2.7	10/17/2018	07:04	E84589
1920	Odor	3	TON @ 40°C	1.0	U	SM 2150 B	1.0	10/16/2018	16:15	E84589
1925	рН	6.5 - 8.5	SU	7.5	Q	SM 4500H+B		10/17/2018	07:04	E84589
1930	Total Dissolved Solids	500	mg/L	430		SM 2540 C	10	10/18/2018	09:26	E84589
2905	Foaming Agents	0.5	mg/L	0.040	U	SM 5540 C	0.040	10/18/2018	08:18	E82001

Reporting Format 62-550.730 Effective January 1995, Revised February 2010

PUBLIC WATER SYSTEM INFORMATION (to	be completed by sampler – Please type or print legibly)
System Name:	PWS I.D.#:
System Type (check one): Community	Nontransient Noncommunity Transient Noncommunity
Address:	
City:	ZIP Code:
Phone #: Fa	ex #: E-Mail Address:
SAMPLE INFORMATION (to be completed by s	campler)
Sample Number: T1817732003	Sample Date: 10/16/2018
	Rd Location Code (if known):
	ults for trihalomethanes and haloacetic acids): mg/L Field pH:
Sample Type (Check Only One)	Reason(s) for Sample (Check all that apply)
	Routine Compliance with 62-550 Replacement (of Invalidated Sample)
Distribution	Confirmation of MCL Exceedance * Special (not for compliance with 62-550)
Entry Point (to Distribution)	Composite of Multiple Sites ** Clearance (permitting)
Plant Tap (not for compliance with 62-550)	
Raw (at well or intake)	Other:
Max Residence Time	Sampling Procedure Used or Other Comments:
Ave Residence Time	+10 - 00 FF0 FF0/A\ for requirements and
Near First Customer	*See 62-550.500(6) for requirements and restrictions. And 62-550.512(3) for nitrate or nitrite exceedances. **See 62-550.550(4) for requirements and attach a results page for each site.
	SAMPLER CERTIFICATION
1,-	, do HEREBY CERTIFY
(Print Name)	(Print Title)
that the above public water system an	d sample collection information is complete and correct.
	Date:
	Phone #: Sampler's Fax #:
Sampler's E-Mail:	

LABORATORY CERTIFICATION INFORMATION (to be completed by lab – Please type or print legibly)	
Lab Name: Advanced Environmental Laboratories, Inc Florida DOH Certification #: E84589 Certification Expiration Date: 06/38	0/2019
ATTACH CURRENT DOH ANALYTE *	
Address: 9610 Princess Palm Ave Tampa, FL 33619 Payments: P.O. Box Phone #: (813)630-9616	
Were any analyses subcontracted? Yes No If yes, please provide DOH certification numbers: E84589 E82001 ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTE	ED *
ANALYSIS INFORMATION (to be completed by lab) Date Sample(s) Received: 10/16/2018	
PWS ID (From Page 1): 6511423 Sample Number (From Page 1): 11817732003 Lab Assigned Report # or Job 118	17732
Group(s) Analyzed & Results attached for compliance with Chapter 62-550, F.A.C. (Check all that apply):	
Inorganics Synthetic Organics Volatile Organics Disinfection Byproducts Radionuclides Secondary All Except Asbestos All 30 All 21 Trihalomethanes Single Sample All 14 X Partial All Except Dioxin Partial Haloacetic Acids Qtrly Composite** X Partial Nitrate Partial Chlorite Nitrite Dioxin Only Bromate	4
LAB CERTIFICATION	
I, Joseph J. Vondrick , Project Manager , do HEREBY CERTIF	Υ
(Print Title) (Print Title)	
that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Confe	erence
Signature: Date: 10/31/2018	
* Failure to provide a valid and current Florida DOH lab certification number and a current Analyte Sheet for the attached analysis results will result in rejection of report, 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.	of the
CONFIRMATION & NOTIFICATION IS REQUIRED WITHIN 24 HRS FOR NITRATE OR NITRITE 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	le.)
COMPLIANCE DETERMINATION (to be completed by DEP or DOH – attach notes as necessary)	
Sample Collection & Analysis Satisfactory: Yes No Replacement Sample or Report Requested: Yes No (circle or highlight group(s) and sample Collection Report Requested:	above)
Person Notified: DEP/DOH Reviewing Official:	

SECONDARY	CONTAMINANTS
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62-550.320

Report Number / Job ID: T1817732003

PWS ID (From Page 1):

O .		PWS ID (From Page 1):							
Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification
Aluminum	0.2	mg/L	0.052	1	EPA 200.7	0.025	10/24/2018	23:32	E84589
Chloride	250	mg/L	21		EPA 300.0	2.0	10/25/2018	21:26	E84589
	1	mg/L	0.00079	1	EPA 200.8	0.00035	10/25/2018	14:57	E82574
	2.0		0.20	U	EPA 300.0	0.20	10/25/2018	21:26	E84589
	0.3		0.10		EPA 200.7	0.021	10/24/2018	23:32	E84589
	0.05		0.0043		EPA 200.8	0.00055	10/25/2018	14:57	E82574
	0.1		0.000068	U	EPA 200.8	0.000068	10/25/2018	14:57	E82574
	250		71		EPA 300.0	2.0	10/25/2018	21:26	E84589
	5		0.0074	U	EPA 200.7	0.0074	10/24/2018	23:32	E84589
	15	PCU	8.8		SM 2120 B	2.7	10/17/2018	07:04	E84589
Odor	3	TON @ 40°C	1.0	U	SM 2150 B	1.0	10/16/2018	16:15	E84589
pH	6.5 - 8.5	SU	7.0	Q	SM 4500H+B		10/17/2018	07:04	E84589
	500	mg/L	320		SM 2540 C	10	10/18/2018	09:26	E84589
			0.040	U	SM 5540 C	0.040	10/18/2018	08:18	E82001
	Contam Name Aluminum Chloride Copper Fluoride Iron Manganese Silver Sulfate Zinc Color	Contam Name MCL Aluminum 0.2 Chloride 250 Copper 1 Fluoride 2.0 Iron 0.3 Manganese 0.05 Silver 0.1 Sulfate 250 Zinc 5 Color 15 Odor 3 pH 6.5 - 8.5 Total Dissolved Solids 500	Contam Name MCL Units Aluminum 0.2 mg/L Chloride 250 mg/L Copper 1 mg/L Fluoride 2.0 mg/L Iron 0.3 mg/L Manganese 0.05 mg/L Silver 0.1 mg/L Sulfate 250 mg/L Zinc 5 mg/L Color 15 PCU Odor 3 TON @ 40°C pH 6.5 - 8.5 SU Total Dissolved Solids 500 mg/L	Contam Name MCL Units Analysis Result Aluminum 0.2 mg/L 0.052 Chloride 250 mg/L 21 Copper 1 mg/L 0.00079 Fluoride 2.0 mg/L 0.20 Iron 0.3 mg/L 0.10 Manganese 0.05 mg/L 0.0043 Silver 0.1 mg/L 0.000068 Sulfate 250 mg/L 71 Zinc 5 mg/L 0.0074 Color 15 PCU 8.8 Odor 3 TON @ 40°C 1.0 pH 6.5 - 8.5 SU 7.0 Total Dissolved Solids 500 mg/L 320	Contam Name MCL Units Analysis Result Qualifier* Aluminum 0.2 mg/L 0.052 I Chloride 250 mg/L 21 21 Copper 1 mg/L 0.00079 I Fluoride 2.0 mg/L 0.20 U Iron 0.3 mg/L 0.10 Manganese 0.05 mg/L 0.0043 Silver 0.1 mg/L 0.000068 U Sulfate 250 mg/L 71 U Zinc 5 mg/L 0.0074 U Color 15 PCU 8.8 Odor 3 TON @ 40°C 1.0 U pH 6.5 - 8.5 SU 7.0 Q Total Dissolved Solids 500 mg/L 320	Contam Name MCL Units Analysis Result Qualifier* Method Analytical Method Aluminum 0.2 mg/L 0.052 I EPA 200.7 Chloride 250 mg/L 21 EPA 300.0 Copper 1 mg/L 0.00079 I EPA 200.8 Fluoride 2.0 mg/L 0.20 U EPA 300.0 Iron 0.3 mg/L 0.10 EPA 200.7 Manganese 0.05 mg/L 0.0043 EPA 200.8 Silver 0.1 mg/L 0.00068 U EPA 200.8 Sulfate 250 mg/L 71 EPA 300.0 Zinc 5 mg/L 0.0074 U EPA 200.7 Color 15 PCU 8.8 SM 2120 B Odor 3 TON @ 40°C 1.0 U SM 250 B pH 6.5 - 8.5 SU 7.0 Q SM 4500H+B Total Dissolved Solids 500 mg/L <td>Contam Name MCL Units Analysis Result Qualifier* Analytical Method Lab MDL Aluminum 0.2 mg/L 0.052 I EPA 200.7 0.025 Chloride 250 mg/L 21 EPA 300.0 2.0 Copper 1 mg/L 0.00079 I EPA 200.8 0.00035 Fluoride 2.0 mg/L 0.20 U EPA 300.0 0.20 Iron 0.3 mg/L 0.10 EPA 200.7 0.021 Manganese 0.05 mg/L 0.0043 EPA 200.8 0.00055 Silver 0.1 mg/L 0.00068 U EPA 200.8 0.00068 Sulfate 250 mg/L 71 EPA 300.0 2.0 Zinc 5 mg/L 0.0074 U EPA 200.7 0.0074 Color 15 PCU 8.8 SM 2120 B 2.7 Odor 3 TON @ 40°C 1.0 U SM 2540 C</td> <td>Contam Name MCL Units Analysis Result Qualifier* Method Analysis Method Analysis Date Aluminum 0.2 mg/L 0.052 I EPA 200.7 0.025 10/24/2018 Chloride 250 mg/L 21 EPA 300.0 2.0 10/25/2018 Copper 1 mg/L 0.00079 I EPA 200.8 0.00035 10/25/2018 Fluoride 2.0 mg/L 0.20 U EPA 300.0 0.20 10/25/2018 Iron 0.3 mg/L 0.10 EPA 200.7 0.021 10/24/2018 Manganese 0.05 mg/L 0.0043 EPA 200.8 0.00055 10/25/2018 Silver 0.1 mg/L 0.00068 U EPA 200.8 0.00068 10/25/2018 Sulfate 250 mg/L 71 EPA 300.0 2.0 10/25/2018 Zinc 5 mg/L 0.0074 U EPA 200.7 0.0074 10/24/2018 Color</td> <td>Contam Name MCL Units Analysis Result Qualifier* Method Analytical Method MDL Date Analysis Time Aluminum 0.2 mg/L 0.052 I EPA 200.7 0.025 10/24/2018 23:32 Chloride 250 mg/L 21 EPA 300.0 2.0 10/25/2018 21:26 Copper 1 mg/L 0.00079 I EPA 200.8 0.00035 10/25/2018 21:26 Iron 0.3 mg/L 0.20 U EPA 300.0 0.20 10/25/2018 21:26 Iron 0.3 mg/L 0.010 EPA 200.7 0.021 10/25/2018 21:26 Iron 0.3 mg/L 0.0043 EPA 200.7 0.021 10/25/2018 14:57 Silver 0.1 mg/L 0.00068 U EPA 200.8 0.00068 10/25/2018 14:57 Sulfate 250 mg/L 71 EPA 300.0 2.0 10/25/2018 21:26 Zinc 5 <</td>	Contam Name MCL Units Analysis Result Qualifier* Analytical Method Lab MDL Aluminum 0.2 mg/L 0.052 I EPA 200.7 0.025 Chloride 250 mg/L 21 EPA 300.0 2.0 Copper 1 mg/L 0.00079 I EPA 200.8 0.00035 Fluoride 2.0 mg/L 0.20 U EPA 300.0 0.20 Iron 0.3 mg/L 0.10 EPA 200.7 0.021 Manganese 0.05 mg/L 0.0043 EPA 200.8 0.00055 Silver 0.1 mg/L 0.00068 U EPA 200.8 0.00068 Sulfate 250 mg/L 71 EPA 300.0 2.0 Zinc 5 mg/L 0.0074 U EPA 200.7 0.0074 Color 15 PCU 8.8 SM 2120 B 2.7 Odor 3 TON @ 40°C 1.0 U SM 2540 C	Contam Name MCL Units Analysis Result Qualifier* Method Analysis Method Analysis Date Aluminum 0.2 mg/L 0.052 I EPA 200.7 0.025 10/24/2018 Chloride 250 mg/L 21 EPA 300.0 2.0 10/25/2018 Copper 1 mg/L 0.00079 I EPA 200.8 0.00035 10/25/2018 Fluoride 2.0 mg/L 0.20 U EPA 300.0 0.20 10/25/2018 Iron 0.3 mg/L 0.10 EPA 200.7 0.021 10/24/2018 Manganese 0.05 mg/L 0.0043 EPA 200.8 0.00055 10/25/2018 Silver 0.1 mg/L 0.00068 U EPA 200.8 0.00068 10/25/2018 Sulfate 250 mg/L 71 EPA 300.0 2.0 10/25/2018 Zinc 5 mg/L 0.0074 U EPA 200.7 0.0074 10/24/2018 Color	Contam Name MCL Units Analysis Result Qualifier* Method Analytical Method MDL Date Analysis Time Aluminum 0.2 mg/L 0.052 I EPA 200.7 0.025 10/24/2018 23:32 Chloride 250 mg/L 21 EPA 300.0 2.0 10/25/2018 21:26 Copper 1 mg/L 0.00079 I EPA 200.8 0.00035 10/25/2018 21:26 Iron 0.3 mg/L 0.20 U EPA 300.0 0.20 10/25/2018 21:26 Iron 0.3 mg/L 0.010 EPA 200.7 0.021 10/25/2018 21:26 Iron 0.3 mg/L 0.0043 EPA 200.7 0.021 10/25/2018 14:57 Silver 0.1 mg/L 0.00068 U EPA 200.8 0.00068 10/25/2018 14:57 Sulfate 250 mg/L 71 EPA 300.0 2.0 10/25/2018 21:26 Zinc 5 <

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PUBLIC WATER SYSTEM INFORM	IATION (to be completed by sar	npler – Please type or print	legibly)	
System Name:			PWS I.D.#:	
System Type (check one): Com	munity Nontransient N	oncommunity Tran	nsient Noncommunity	
Address:				
City:			ZIP Code	£
			E-Mail Address:	
SAMPLE INFORMATION (to be con				
Sample Number: T1817732004	Sample D	ate: 10/16/2018	Sample Time:	08:35 AM PM (circle one)
NWC 5				on Code (if known):
Disinfectant Residual (Required when r				
Sample Type (Check Only One)			r Sample (Check all that a	
Distribution	Routin	e Compliance with 62-550	Replacement	(of Invalidated Sample)
Entry Point (to Distribution)	Confir	mation of MCL Exceedan	ce * Special (not for	compliance with 62-550)
Plant Tap (not for compliance with 62	2-550) Comp	osite of Multiple Sites **	Clearance (pe	ermitting)
Raw (at well or intake)	100-200			
Max Residence Time	Sampling	Procedure Used or Othe	er Comments:	*
Ave Residence Time				
Near First Customer		(6) for requirements and re 3) for nitrate or nitrite exce		ee 62-550.550(4) for requirements and ttach a results page for each site.
	S	AMPLER CERTIFIC	ATION	
Ī.		F)		, do HEREBY CERTIFY
(Print	Name)		(Print Title)	
that the above public water sy	stem and sample collecti	on information is con	nplete and correct.	
Signature:		Б.		
Certified Operator #:	Phone #:		Sampler's Fax	#.
Sampler's E-Mail:				

LABORATORY CERTIFICATION INFORMATION (to be completed by lab – Please type or print legibly)	
Lab Name: Advanced Environmental Laboratories, Inc. Florida DOH Certification #: E84589 Certification Expiration D	ate: 06/30/2019
ATTACH CURRENT DOH ANALYTE *	
Address: 9610 Princess Palm Ave Tampa, FL 33619 Payments: P.O. Box Phone #: (813)630-9616	
Were any analyses subcontracted? Yes No If yes, please provide DOH certification numbers: E82574 E82001 ATTACH DOH ANALYTE SHEET FOR EACH SUBC	ONTRACTED *
ANALYSIS INFORMATION (to be completed by lab) Date Sample(s) Received: 10/16/2018	
PWS ID (From Page 1): 6511423 Sample Number (From Page 1): 11817732004 Lab Assigned Report # or .	Job <u>T1817732</u>
Group(s) Analyzed & Results attached for compliance with Chapter 62-550, F.A.C. (Check all that apply):	64
Inorganics Synthetic Organics Volatile Organics Disinfection Byproducts Radionuclides All Except Asbestos All 30 All 21 Trihalomethanes Single Sample X Partial All Except Dioxin Partial Haloacetic Acids Qtrly Composite** Nitrate Partial Chlorite Nitrite Dioxin Only Bromate	Secondaries All 14 Rartial
LAB CERTIFICATION	
I, Joseph J. Vondrick , Project Manager , do HERE	BY CERTIFY
(Print Name) (Print Title)	
that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accredit	ation Conference
Signature: Date: Date:	
* Failure to provide a valid and current Florida DOH lab certification number and a current Analyte Sheet for the attached analysis results will result report, possible enforcement against the public water system for failure to sample, and may result in notification of the DOH Bureau of Laboratory ** Please provide radiological sample dates & locations for each quarter.	in rejection of the Services.
CONFIRMATION & NOTIFICATION IS REQUIRED WITHIN 24 HRS FOR NITRATE OR NITRITE MCL EXCEEDANCE	ES
NON-DETECTS ARE TO BE REPORTED AS THE MDL WITH A "U" QUALIFIER. (Non-detects reported as "BDL" or with a "<" are no	ot acceptable.)
COMPLIANCE DETERMINATION (to be completed by DEP or DOH attach notes as necessary)	
Sample Collection & Analysis Satisfactory: Yes No Replacement Sample or Report Requested: Yes No Circle or high	hlight group(s) above)
Person Notified: Date Notified: DEP/DOH Reviewing Official:	

SECONDARY CONTAMINANTS

62-550.320

Report Number / Job ID: T1817732004

PWS ID (From Page 1):

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification #
1002	Aluminum	0.2	mg/L	0.042	1	EPA 200.7	0.025	10/24/2018	23:36	E84589
1017	Chloride	250	mg/L	22		EPA 300.0	2.0	10/25/2018	21:42	E84589
1022	Copper	1	mg/L	0.00080		EPA 200.8	0.00035	10/25/2018	15:13	E82574
1025	Fluoride	2.0	mg/L	0.20	U	EPA 300.0	0.20	10/25/2018	21:42	E84589
1028	Iron	0.3	mg/L	0.18		EPA 200.7	0.021	10/24/2018	23:36	E84589
1032	Manganese	0.05	mg/L	0.0042		EPA 200.8	0.00055	10/25/2018	15:13	E82574
1050	Silver	0.1	mg/L	0.000068	U	EPA 200.8	0.000068	10/25/2018	15:13	E82574
1055	Sulfate	250	mg/L	88		EPA 300.0	2.0	10/25/2018	21:42	E84589
1095	Zinc	5	mg/L	0.0082	1	EPA 200.7	0.0074	10/24/2018	23:36	E84589
1905	Color	15	PCU	8.8		SM 2120 B	2.7	10/17/2018	07:04	E84589
1920	Odor	3	TON @ 40°C	1.0	U	SM 2150 B	1.0	10/16/2018	16:15	E84589
1925	pH	6.5 - 8.5	SU	7.2	Q	SM 4500H+B		10/17/2018	07:04	E84589
1930	Total Dissolved Solids	500	mg/L	290		SM 2540 C	10	10/18/2018	09:26	E84589
2905	Foaming Agents	0.5	mg/L	0.040	U	SM 5540 C	0.040	10/18/2018	08:18	E82001

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PUBLIC WATER SYSTEM INFORMATION (to be	completed by sampler -	- Please type or print leg	gibly)
System Name:			PWS I.D.#.
System Type (check one): Community	Nontransient Noncom	nmunity Transi	ient Noncommunity
Address:			
City:			ZIP Code:
Phone #: Fax #:	4	E-N	Mail Address:
SAMPLE INFORMATION (to be completed by sample	er)		
Sample Number: T1817732005	Sample Date:	10/16/2018	Sample Time: 09:25 AM PM (circle one)
Sample Location (be specific): 5 - 11219 Merganser	F 2 2		Location Code (if known) :
Disinfectant Residual (Required when reporting results for	trihalomethanes and halo	acetic acids): 0.7	_mg/L Field pH:
Sample Type (Check Only One)		Reason(s) for S	Sample (Check all that apply)
Distribution	Routine Con	npliance 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 o	of Multiple Sites **	Clearance (permitting)
Raw (at well or intake)	Other:		
Max Residence Time	Sampling Proce	edure Used or Other C	Comments:
Ave Residence Time			
	그림에 있는 아이를 하는 것이 없는 것이 없는 것이 없는 것이 없다.	requirements and rest nitrate or nitrite exceed	the state of the s
	SAMP	LER CERTIFICAT	TION
ľ,			, do HEREBY CERTIFY
(Print Name)		(Pr	rint Title)
that the above public water system and sa	mple collection in	formation is comp	elete and correct.
Signature:		Date:	
Certified Operator #:	Phone #:		Sampler's Fax #:
Sampler's E-Mail:			

LABORATORY CERTIFICATION INFORMATION (to be completed by lab – Please	type or print legibly)
Lab Name: Advanced Environmental Laboratories, Inc Florida DOH Certification	on #: E84589 Certification Expiration Date: 06/30/2019
	ATTACH CURRENT DOH ANALYTE *
Address: 9610 Princess Palm Ave Tampa, FL 33619 Payments: P.O. B	Phone #: _(813)630-9616
Were any analyses subcontracted? X Yes No If yes, please provide DOH	Certification numbers: E82574 E82001
	ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED *
ANALYSIS INFORMATION (to be completed by lab) Date Sample(s) Re-	ceived: 10/16/2018
PWS ID (From Page 1): 6511423 Sample Number (From Page 1)	Example 2
Group(s) Analyzed & Results attached for compliance with Chapter 62-550, F.A.C	. (Check all that apply):
All Except Asbestos All 30 All 21 Tri	Radionuclides Secondaries halomethanes Single Sample All 14
	loacetic Acids
	omate
Asbestos Only	
LAB CERT	IFICATION
I, Joseph J. Vondrick , Project	Manager, do HEREBY CERTIFY
(Print Name)	(Print Title)
that all attached analytical data are correct and unless noted meet all requirement	s of the National Environmental Laboratory Accreditation Conference
Signature: July Vondnik	ate:10/31/2018
* Failure to provide a valid and current Florida DOH lab certification number and a current report, possible enforcement against the public water system for failure to sample, and r** Please provide radiological sample dates & locations for each quarter.	Analyte Sheet for the attached analysis results will result in rejection of the nay result in notification of the DOH Bureau of Laboratory Services.
CONFIRMATION & NOTIFICATION IS REQUIRED WITHIN	24 HRS FOR NITRATE OR NITRITE 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 nec	essary)
Sample Collection & Analysis Satisfactory: Yes No Replacement Sample	e or Report Requested: Yes No (circle or highlight group(s) above)
Person Notified: Date Notified:	DEP/DOH Reviewing Official:

SECONDARY CONTAMINANTS

62-550.320

Report Number / Job ID:	T1817732005
PWS ID (From Page 1):	

Contam	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification #
1002	Aluminum	0.2	mg/L	0.035	1	EPA 200.7	0.025	10/24/2018	23:41	E84589
1017	Chloride	250	mg/L	22		EPA 300.0	2.0	10/25/2018	21:58	E84589
1022	Copper	1	mg/L	0.0025		EPA 200.8	0.00035	10/25/2018	15:17	E82574
1025	Fluoride	2.0	mg/L	0.20	U	EPA 300.0	0.20	10/25/2018	21:58	E84589
1028	Iron	0.3	mg/L	0.35		EPA 200.7	0.021	10/24/2018	23:41	E84589
1032	Manganese	0.05	mg/L	0.0063		EPA 200.8	0.00055	10/25/2018	15:17	E82574
1050	Silver	0.1	mg/L	0.000068	U	EPA 200.8	0.000068	10/25/2018	15:17	E82574
1055	Sulfate	250	mg/L	84		EPA 300.0	2.0	10/25/2018	21:58	E84589
1095	Zinc	5	mg/L	0.0090	1	EPA 200.7	0.0074	10/24/2018	23:41	E84589
1905	Color	15	PCU	8.8		SM 2120 B	2.7	10/17/2018	07:04	E84589
1920	Odor	3	TON @ 40°C	1.0	U	SM 2150 B	1.0	10/16/2018	16:15	E84589
1925	pH	6.5 - 8.5	SU	7.5	Q	SM 4500H+B		10/17/2018	07:04	E84589
1930	Total Dissolved Solids	500	mg/L	400		SM 2540 C	10	10/22/2018	15:05	E84589
2905	Foaming Agents	0.5	mg/L	0.040	U	SM 5540 C	0.040	10/18/2018	08:18	E82001

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PUBLIC WATER SYSTEM INFORMATION (o be completed by sampler -	- Please type or print le	egibly)
System Name:			PWS I.D.#:
System Type (check one): Community	Nontransient Noncon	nmunity Tran	sient Noncommunity
Address:			68
City:			ZIP Code:
Phone #: Fa	ax #:	E	-Mail Address:
SAMPLE INFORMATION (to be completed by	sampler)		
Sample Number: T1817732006	Sample Date:	10/16/2018	Sample Time: 09:10 AM PM (circle one)
			Location Code (if known):
Disinfectant Residual (Required when reporting residual)			
Sample Type (Check Only One)			Sample (Check all that apply)
Distribution	Routine Cor	mpliance with 62-550	Replacement (of Invalidated Sample)
Entry Point (to Distribution)		n of MCL Exceedance	
	5	of Multiple Sites **	_
Plant Tap (not for compliance with 62-550)			
Raw (at well or intake)			- Commonto
Max Residence Time	Sampling Proc	edure Used or Other	r Comments.
Ave Residence Time		7.47	estrictions. **See 62-550.550(4) for requirements and
Near First Customer	*See 62-550.500(6) for And 62-550.512(3) for	requirements and re nitrate or nitrite exce	
	SAME	PLER CERTIFICA	ATION
1.	,		, do HEREBY CERTIFY
(Print Name)		(Print Title)
that the above public water system an	d sample collection ir	nformation is com	plete and correct.
Signature:		5 <u>-2</u> 5 - 5	
			Sampler's Fax #:
Sampler's E-Mail:			

LABORATORY CERTIFICATION INFORMATION (to be completed by lab – Please type or print legibly)
Lab Name: Advanced Environmental Laboratories, Inc Florida DOH Certification #: E84589 Certification Expiration Date: 06/30/2019
ATTACH CURRENT DOH ANALYTE *
Address: 9610 Princess Palm Ave Tampa, FL 33619 Payments: P.O. Box Phone #: (813)630-9616
Were any analyses subcontracted? X Yes No If yes, please provide DOH certification numbers: E82574 E82001
ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED *
ANALYSIS INFORMATION (to be completed by lab) Date Sample(s) Received: 10/16/2018
PWS ID (From Page 1): 6511423 Sample Number (From Page 1): T1817732006 Lab Assigned Report # or Job T1817732
Group(s) Analyzed & Results 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
X Partial ☐ All Except Dioxin ☐ Partial ☐ Haloacetic Acids ☐ Qtrly Composite** X Partial
Nitrate □ Partial □ Chlorite
☐ Nitrite ☐ Dioxin Only ☐ Bromate
Asbestos Only
LAB CERTIFICATION
I, Joseph J. Vondrick , Project Manager , do HEREBY CERTIFY
(Print Name) (Print Title)
that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference
Signature: Date: 10/31/2018
* Failure to provide a valid and current Florida DOH lab certification number and a current Analyte Sheet for the attached analysis results will result in rejection of the report, 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 & NOTIFICATION IS REQUIRED WITHIN 24 HRS FOR NITRATE OR NITRITE 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: Yes No Replacement Sample or Report Requested: Yes No (circle or highlight group(s) above)
Person Notified: Date Notified: DEP/DOH Reviewing Official:

SECONDARY CONTAMINANTS

62-550.320

Report Number / Job ID:	T1817732006
PWS ID (From Page 1):	

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification #
1002	Aluminum	0.2	mg/L	0.037	1	EPA 200.7	0.025	10/24/2018	23:46	E84589
1017	Chloride	250	mg/L	21		EPA 300.0	2.0	10/25/2018	22:13	E84589
1022	Copper	1	mg/L	0.00095		EPA 200.8	0.00035	10/25/2018	15:20	E82574
1025	Fluoride	2.0	mg/L	0.20	U	EPA 300.0	0.20	10/25/2018	22:13	E84589
1028	Iron	0.3	mg/L	0.36		EPA 200.7	0.021	10/24/2018	23:46	E84589
1032	Manganese	0.05	mg/L	0.0069		EPA 200.8	0.00055	10/25/2018	15:20	E82574
1050	Silver	0.1	mg/L	0.000068	U	EPA 200.8	0.000068	10/25/2018	15:20	E82574
1055	Sulfate	250	mg/L	73		EPA 300.0	2.0	10/25/2018	22:13	E84589
1095	Zinc	5	mg/L	0.0089	1	EPA 200.7	0.0074	10/24/2018	23:46	E84589
1905	Color	15	PCU	8.8		SM 2120 B	2.7	10/17/2018	07:04	E84589
1920	Odor	3	TON @ 40°C	1.0	U	SM 2150 B	1.0	10/16/2018	16:15	E84589
1925	pH	6.5 - 8.5	SU	7.5	Q	SM 4500H+B		10/17/2018	07:04	E84589
1930	Total Dissolved Solids	500	mg/L	310		SM 2540 C	10	10/18/2018	09:26	E84589
2905	Foaming Agents	0.5	mg/L	0.040	U	SM 5540 C	0.040	10/18/2018	08:18	E82001

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Contact: Steve Frampled By: Jeff P Turn Around Time: STANDAR SEL Profile #: SAMPLE ID	labery Decker	FDEP Fac	25 cility No: 4	05114 ss:	123	1		ANALYSIS REQUIRED										一,
Steve Frampled By: Tess Profile #: SAMPLE ID	D Rush	Special Inc	structions:		127 - 934 - 9137 6511423 FDEP Facility Address:							tals	rals	olor				
		DAD		ples P		Special Instructions: All Samples Pulled From FH					MBAS.	200.7 Metal	200.8 Metal	sdor leo				
	SAMPLE DESCRIPTION		Grab Comp	DATE	PLING	MATRIX	NO. COUNT	Preservation Field- Filtered?										1
	9 English Elmc	_		श्रीमाव	950	DW		area in		1		+	1	1				ć
	4 Rose Tree CL-2	_	¥	+	325	+			+		\vdash	+	H			_	_	0
	Golf Rd CL-2 Trywood-CL-1		×	+	835	$\vdash\vdash$			\vdash		+	+	\vdash	H		-	-	- 5
	Merganser Ci- C		¥		925	\vdash		100		\vdash	+		H	\mathbb{H}			-	0
	1 Kiskadee CL-2		*	1	910	1			1	1	\downarrow	V	1	V			1	
																		#
	alter SW = surface water GW = gro No Temp taken from sample and 11/17/16	_		m blank [Where re	equired, pH	checked		Temp. wh	en receive	ed (obser	ved) 6.	(3	*C Tem	np. when r	received (c	T = (Sodium corrected) M: 3A S	6,0