

# GATOR WATERWORKS, INC.

FILED 8/16/2019  
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FPSC - COMMISSION CLERK

August 16, 2019

Office of Commission Clerk  
Public Service Commission  
2540 Shumard Oak Blvd.  
Tallahassee, FL 32399

***Re: Docket No. 20190114-WU – Application for staff assisted rate case in Alachua County by Gator Waterworks, Inc. – FDEP Sanitary Survey Inspection***

Dear Commission Clerk,

Please include the attached Sanitary Survey Inspection dated August 15, 2019 from FDEP in the above referenced docket.

If you have any additional questions or concerns, please do not hesitate to contact me at (727) 848-8292, ext. 245.

Sincerely,



Troy Rendell  
Vice President  
Investor Owned Utilities  
*// for Gator Waterworks, Inc.*



# FLORIDA DEPARTMENT OF Environmental Protection

Northeast District  
8800 Baymeadows Way West, Suite 100  
Jacksonville, Florida 32256

**Ron DeSantis**  
Governor

**Jeanette Nuñez**  
Lt. Governor

**Noah Valenstein**  
Secretary

August 15, 2019

Gary Deremer, President  
Gator Waterworks, Inc.  
4349 Cross Bayou Blvd  
New Port Richey, Florida 32652  
[gderemer@uswatercorp.net](mailto:gderemer@uswatercorp.net)

**Re: Gator Waterworks Water System  
PWS ID No. 2010612  
Alachua County – Drinking Water**

Dear Mr. Deremer:

Department personnel conducted a sanitary survey inspection of the above-referenced facility on July 24, 2019. Based on the information provided during and following the inspection, the system was determined to be in compliance with the Department's Drinking Water rules and regulations. A copy of the inspection report is attached for your records. Non-compliance identified in the inspection report has been corrected.

The Department appreciates your efforts to maintain this system in compliance with state and federal rules. Should you have any questions or comments, please contact Benjamin Piltz at (904) 256-1639, or via e-mail at [Benjamin.Piltz@FloridaDEP.gov](mailto:Benjamin.Piltz@FloridaDEP.gov).

Sincerely,

A handwritten signature in black ink, appearing to read "Vincent Clark".

Vincent Clark  
Environmental Manager  
Compliance Assurance Program

Enclosures: Inspection Report

c: FDEP: Vincent Clark, Joni Petry, Benjamin Piltz  
Diane Kibitlewski, FGUA - [dkibitlewski@uswatercorp.net](mailto:dkibitlewski@uswatercorp.net)

# Florida Department of Environmental Protection

## Northeast District Public Water System Sanitary Survey Inspection Report

<b>Water system: Gator Waterworks Water System</b>		<b>System PWS #: 2010612</b>	<b>Survey date: 7/24/19</b>
Facility type class: <b>Community - (5D)</b>		Source type: Ground	4-Log approved: N/A
Facility address: 3160 Southeast 19th Avenue, Gainesville, Florida 32604			
Facility phone(s): N/A		Facility email/fax: N/A	
Facility contact: Diane Kibitlewski		Facility contact phone(s): 727-848-8292 ext 244	
Facility contact email/fax: dkibitlewski@uswatercorp.net			
Owner name: Gary Deremer, President		Company name: Gator Waterworks Inc.	
Owner/Corp address: 4349 Cross Bayou Blvd		City: New Port Richey	State: FL Zip: 32652
Owner/Corp phone(s): 727-848-8292		Owner e-contact(s): gderemer@uswatercorp.net	
Operator name: Steven Palmer		Certification: A-16422	
Operator phone(s): 727-848-8292 ext 203		Operator email/fax: spalmer@uswatercorp.net	
On-site Rep: S. Palmer		<b>Immediate Action Required?: No</b>	Inspection recap given? No

### SERVICE AREA CHARACTERISTICS

Subdivision \_\_\_\_\_

Food Service:  Yes  No  N/A

### GENERAL INFORMATION

Number of Service Connections 352

Population Served 800 Basis Recent Est

Plant Design Capacity 236,400 gpd

Basis Permit 0325725-002-WC, cleared 6/3/19

Average Day (from MORs) 104,254 gpd

Max. Day (from MORs) 221,799 gpd

Total Storage Capacity 2,500 gallons

Comments Total Storage is 1/2 of new hydropneumatic tank volume.

### LOCATION

Latitude 29° 38' 3.7765" North

Longitude 82° 17' 2.999" West

GPS: No Date: 3/09

Directions Take I-95 to I-10 to SR 301. Head South towards Waldo, and head right on SR 24 towards Gainesville. Turn left on SR 20, right on SE 27th St, and left on SE 19th. Plant is on the left near 3260 SE 19th Ave.

### OPERATION & MAINTENANCE

Certified Operator:  Yes  No  Not required

Plant visits conducted by: S. Palmer

O&M Log:  Yes  No O&M Manual:  Yes  No

Visitation Frequency

Hrs/day: Required	<u>N/A</u>	Actual	<u>N/A</u>
Hrs/wk: Required	<u>0.3</u>	Actual	<u>~45 min</u>
Days/wk: Required	<u>3</u>	Actual	<u>3</u>

Non-consecutive Days?  Yes  No  N/A

MORs submitted regularly?  Yes  No  N/A

Data missing from MORs?  No  Yes  N/A

MORs submitted on time and correctly.

### RAW WATER SOURCE

GROUND; Number of Wells 2

SURFACE/UDI; Source \_\_\_\_\_

PURCHASED from PWS ID # \_\_\_\_\_

Emergency Water Source \_\_\_\_\_

Emergency Water Capacity \_\_\_\_\_

### AUXILIARY POWER SOURCE

Yes  None  Not Required

Source CAT Diesel Generator

Capacity of Standby (kW) 50

Switchover:  Automatic  Manual

Standby Plan:  Yes  No

Hrs Operated Under Load 1 hr/wk.

What equipment does it operate?

Well pumps North Well & South Well

High Service Pumps \_\_\_\_\_

Treatment Equipment Hypochlorination sys

Satisfy 1/2 max-day demand?  Yes  No  Unk

Comments Generator is run under load on Mondays.

### TREATMENT PROCESSES IN USE

Hypochlorination

Is additional treatment needed?  Yes  No

If so, for control of what deficiencies?  
N/A

### DISTRIBUTION SYSTEM

Flow Measuring Device Flow Meter

Meter Size & Type Water Specialties x 2

Meter tested w/i 5 yrs?  Yes  No  Unk  N/A

Backflow Prevention:  Yes  No

Cross-connections None observed

Cross-connection Control Program:  Yes  No  N/A

Coliform Sampling Plan:  Yes  No

Stage 2 DBPs Sampling Plan:  Yes  No  N/A

Lead & Copper Sampling Plan:  Yes  No  N/A

Comments Plans on file with the Department.

**GROUND WATER SOURCE**

Well Number (PWS Identification)	1	2	
Well Name (System Identification)	South Well	North Well	
Year Drilled	1958	1959	
Depth Drilled	205'	210'	
Latitude	29° 38' 3.5290" N	29° 38' 4.2850" N	
Longitude	82° 17' 3.0570" W	82° 17' 3.2260" W	
GPS (Y or N) / Date (if applicable)	Y- DGPS 3/09	Y- DGPS 3/09	
Florida Well ID	AAC 2237	AAC 2236	
Static Water Level	Unknown	Unknown	
Normal Yield (if different than rated capacity)	Unknown	Unknown	
Strainer	Unknown	Unknown	
Length (outside casing)	105'	110'	
Diameter (outside casing)	4"	6"	
Material (outside casing)	Steel	Steel	
Well Contamination History	Ok	Ok	
Is inundation of well possible?	Not likely	Not likely	
6' X 6' X 4" Concrete Pad	Ok	Ok	
SET BACKS	Septic Tank	>200'	>200'
	Reuse Water	>500', GRU	>500', GRU
	WW Plumbing	>200'	>200'
	Other Sanitary Hazard	>5000', S.C.	>5,000, S.C.
PUMP	Type	Submersible	Submersible
	Manufacturer Name	Unknown	Unknown
	Model Number	Unknown	Unknown
	Rated Capacity (gpm)	~150	~250
	Motor Horsepower	15	20
Well casing 12" above grade?	Y	Y	
Well Casing Sanitary Seal	Ok	Ok	
Raw Water Sampling Tap	Smooth/downturned	Smooth/downturned	
Above Ground Check Valve	After raw/before trmt	After raw/before trmt	
Fence/Housing	Secured fence	Secured fence	
Well Vent Protection	Ok	See Comments	

**COMMENTS** Deactivated old water plant located on SE 45th Terrace. Well disconnected. Well vent on the North  
Well was not downturned at the time of the inspection. RTCd by 8/1/19. Well AAC 2238 was capped/abandoned.

**CHLORINATION (Disinfection)**

Type: Hypo-Chlorination  
 Make Stenner Capacity 17 gpd (each)  
 Chlorine Feed Rate Set @ 3 & 6.25  
 Avg. Amount of Cl<sub>2</sub> gas used N/A  
 Chlorine Residuals: Plant 1.35 Remote 1.16  
 Remote tap location Ext tap on house on SE 19 Ave  
 DPD Test Kit:  On-site  With operator  
 None  Not Used Daily  
 Injection Points After check valve at each well  
 Booster Pump Info N/A  
 Comments \_\_\_\_\_

Chlorine Gas Use Requirements	Chlorine Gas Use		Comments N/A
	YES	NO	
Dual System	<input type="checkbox"/>	<input type="checkbox"/>	
Auto-switchover	<input type="checkbox"/>	<input type="checkbox"/>	
Alarms:			
Loss of Cl <sub>2</sub> capability	<input type="checkbox"/>	<input type="checkbox"/>	
Loss of Cl <sub>2</sub> residual	<input type="checkbox"/>	<input type="checkbox"/>	
Cl <sub>2</sub> leak detection	<input type="checkbox"/>	<input type="checkbox"/>	
Scale	<input type="checkbox"/>	<input type="checkbox"/>	
Chained Cylinders	<input type="checkbox"/>	<input type="checkbox"/>	
Reserve Supply	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate Air-pak	<input type="checkbox"/>	<input type="checkbox"/>	
Sign of Leaks	<input type="checkbox"/>	<input type="checkbox"/>	
Fresh Ammonia	<input type="checkbox"/>	<input type="checkbox"/>	
Ventilation	<input type="checkbox"/>	<input type="checkbox"/>	
Room Lighting	<input type="checkbox"/>	<input type="checkbox"/>	
Warning Signs	<input type="checkbox"/>	<input type="checkbox"/>	
Repair Kits	<input type="checkbox"/>	<input type="checkbox"/>	
Fitted Wrench	<input type="checkbox"/>	<input type="checkbox"/>	
Housing/Protection	<input type="checkbox"/>	<input type="checkbox"/>	

**STORAGE FACILITIES**

(B) Bladder (CW) Clearwell (C) Contact (E) Elevated  
 (G) Ground (H) Hydropneumatic (S.C.) See Comments

Tank Type/Number	H		
Capacity (gal)	5,000		
Material	Steel		
By-pass Piping	Yes		
Gravity Drain	Yes		
PRV/ARV	Both		
Protected Openings	N/A		
Pressure Gauge	Yes		
Sight Glass or Level Indicator	S.G.		
Fittings for Sight Glass	Yes		
Access Padlocked	Yes		
Last Inspection Date (for tanks with access manholes)	New, 6/2019		
On/Off Pressure	39/49		
Height to Bottom of Elevated Tank	N/A		
Height to Max. Water Level	N/A		

Comments On pressure estimated. Pressure was 45 psi during the inspection.  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**HIGH SERVICE PUMPS**

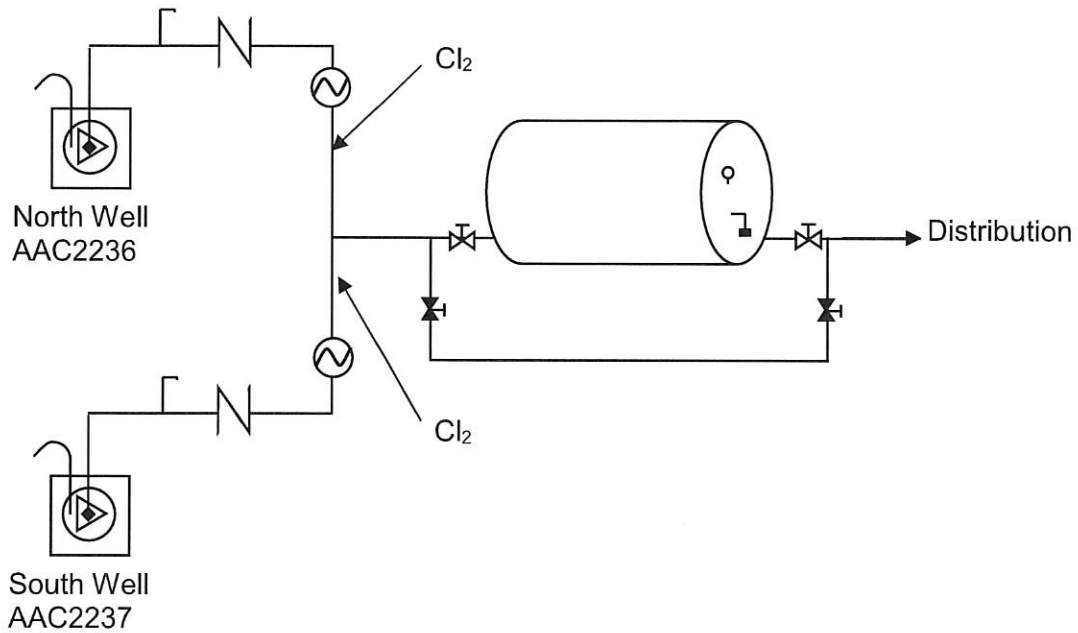
Pump Number	N/A		
Type			
Make			
Model			
Capacity (gpm)			
Motor HP			
Date Installed			
Maintenance			

Comments \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**AERATION (Gases, Fe, & Mn Removal)**

Type N/A Capacity \_\_\_\_\_  
 Aerator Condition \_\_\_\_\_  
 Bloodworm Presence \_\_\_\_\_  
 Visible Algae Growth \_\_\_\_\_  
 Protective Screen Condition \_\_\_\_\_  
 Comments \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**SCHEMATIC (not to scale):**



SCHEMATIC KEY			
Well with Submersible pump		Check Valve	
Hydropneumatic Tank		Valves (open/closed)	Well vent
Hydropneumatic tank w/ HBVB POE tap, Pressure gauge, and sight glass		Raw tap	

Monitoring Schedule					
Chemical	Next Due	Comments	Chemical	Next Due	Comments
Bacteriologicals	August	2 R/ 1 D monthly	VOCs	2021	
Disinfectant Levels	Monthly	with bactis	SOCs	2021	
Nitrate & Nitrite	2020	N/N due annually	Rads	2021	
Inorganics	2021		DBPs	2020	Annual HAA5- L2 TTHM- L1 / July
Asbestos	2021	or waiver	Pb-Cu	2021	Jun-Sep
Secondaries	2021		WQPs	N/A	

\*Sample locations vary. If you have any questions, please contact your inspector.

MONITORING VIOLATIONS	MCL VIOLATIONS
2018 Asbestos Wvr rcvd late, PN done in	No recent MCL violations
2018 CCR	

**DEFICIENCIES:**

#	Deficiency	Rule Reference	Corrective Action	Severity	Corrected
1	Well casing vent was not downward facing.	62-555.320(8)(c)	Provide a well vent that is at least 12 inches above well pad in a down turned position above the top of the casing and covered by a 24 mesh, corrosion resistant screen.	MIN	RTC 8/1/19

Any deficiency marked with an asterisk (\*) is a repeat violation.

Inspector: Ben Piltz  
 Benjamin Piltz, Engineer Specialist II (904) 256-1639  
 Benjamin.Piltz@FloridaDEP.gov

Approved by: Shane Tierney  
 Shane Tierney, Environmental Specialist III